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Reproductive Justice: Global South Connections

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Jina Fast, Ph.D.

ABSTRACT

Reproductive justice is a political movement—where political is broadly conceived to include the social, economic, sexual, reproductive, emotional, etc.—that integrates movements for reproductive rights with those of justice. Moving beyond the limitations of white feminist reproductive rights movements focusing on the right to not have children, reproductive justice seeks guaranteed rights to reproduce, to maintain custody over children and parent them in safe and nourishing communities, where medical care, housing, employment and freedom from racism are accessible. In this essay, I argue we must consider how reproductive health and well-being are central to effective peacebuilding. Analyses linking reproductive security to national security more generally remain limited or altogether absent, but they allow us to promote counterhegemonic analyses from the Global South that challenge top-down frameworks of safety, security, and well-being from the Global North.

TAGS:

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Jina Fast holds a Ph.D. in philosophy and women's and gender studies from Temple University. She is currently the Assistant Dean of Behavioral and Social Sciences at Harford Community College and previously held the position of SHIFT professor of Applied Ethics and the Common Good at Hampshire College. As a feminist epistemologist, queer theorist, and critical philosopher of race, her work centers theories produced by and through the experiences and work of marginalized folks across disciplines. Dr. Fast's work has been published in the Journal of Critical Race Inquiry, Atlantis: Critical Studies in Gender, Culture, & Social Justice, and Hypatia among others. Her first book, titled Decolonizing Existentialism and Phenomenology: The Liberation of Philosophies of Freedom and Identity, was published by Rowman and Littlefield International in 2023. She is currently at work on her second entitled Creolizing Aesthetics, which will be published in 2028.

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REPRODUCTIVE JUSTICE: GLOBAL SOUTH CONNECTIONS

Reproductive justice is a political movement—where political is broadly conceived to include the social, economic, sexual, reproductive, emotional, etc.—that integrates “reproductive rights with social justice to achieve reproductive justice” (Ross & Solinger, 2017, 9). While the term reproductive justice was coined by Black and non-Black North American-based women of color feminists in 1994 in response to the limitations of a reproductive rights framework for social justice activism, its genealogy, or the social

basis of its emergence, is more complex than is expressed in common retellings (Ross & Solinger, 2017). On the level of theory, a reproductive justice framework problematizes the homogenous conception of "woman" that dominates within (white) feminist movements globally, but especially in North American and European contexts (Gurr, 2014). Practically, reproductive justice movements reveal the limits of legal movements grounded seeking rights to abortion and contraceptives under the protections of privacy and the rhetoric of choice. Connecting the theory and activist practices of reproductive justice as a praxis is the critical recognition and resistance to the civilizational underpinnings of reproductive rights feminisms that operationalize conceptions of universal desires, needs, and characteristics of women that do not exist in reality. Rather than encompassing an intersectional and differential power analysis of women based upon empirical analyses of the lived realities of women across stratifications of race and class (as well as disability, Indigeneity, sexual orientation, gender identity, religion, etc.), reproductive rights movements, reproductive justice advocates argue, reify woman as white, upper or middle-class, heterosexually oriented, cisgender, and non-disabled. Notably absent from the focus of white feminists was a guaranteed right to reproduce, to maintain custody over children and parent them in safe and nourishing communities, where medical care, housing, employment and freedom from racism were accessible (Newnham & Buchanan, 2025). Additionally, rights movements in their focus on legality render invisible subversive acts and movement capacities in the Global South where abortion and access to contraceptives may be illegal or heavily restricted. Beyond the individual and community needs that are centered in reproductive justice movement theory and practice, I argue we must consider how reproductive health and well-being are central to effective peacebuilding. Yet analyses linking reproductive security to national security more generally remain limited or altogether absent (Davies & Harman, 2020).

Reciting the history of reproductive justice as grounded in the experiences of Black and non-Black women of color in North American and European contexts is undoubtedly important but can simultaneously function to reinforce hegemonic understandings of the center and peripheries of knowledge production, and suggest that the history of reproductive justice is a straightforward, linear history, wherein the powerful have been and continue to be confronted by the powerless under the demands of justice. Importantly, as Western, non-Indigenous, neo-liberal (and neo-conservative) frameworks locate responsibility for health and wellness in individual choices, the language of "rights" and "justice" can tend toward the promotion of a legalistic, objective standard that protects the individual. One consequence is that when dominant conceptualizations of objectivity are coupled with an individualist ethos of health and wellness, the social environment is potentially neglected (Gurr, 2014). Another is that these common recitations can erase the existence of complex affinities and differentiations with the reproductive justice movement in the Global South, which functions as a form of epistemic injustice. My goal in this paper, thus, is to promote counterhegemonic analyses from the Global South that expand the dialogue on reproductive justice placing Global South activists and academics in conversation with

one another on their own terms and within the justice framework popularized in the Global North.

For example, as scholars like Lynn Morgan have shown, in South America there is a preference for language and theory that prioritizes rights, rather than justice, that is positively grounded in local, regional, or national histories of reproductive rights movements (2015). In the Argentine, post-dictatorship context Morgan studies a feminist human rights framework allows reproductive rights activists and scholars to attend to the intersections of how race, class, gender, and reproductive politics while speaking to their political leaders in a language and ethical schema to which they ascribe. Unlike Black women in the United States, Argentine feminists claim that they have not had to invent new terminology to appeal to their leaders because Argentina values the concept of human rights. Morgan comes to understand this socio-historical valuation of a human rights framework over a justice framework when she faces backlash from her scholarly community of feminist anthropologists in Argentina during an invited public lecture she gave in 2011. In this talk she made a fairly benign argument: that if human rights language is being co-opted by religious conservatives in Argentina to restrict reproductive rights (like access to abortion care) then perhaps adopting a reproductive justice framework would serve the interests and goals of Argentine feminist scholars and activists. Her audience of Argentine feminist scholars and activists, she notes, did not agree (Morgan, 2015).

These positive identifications within the histories of emergent theory and practice are undoubtedly important to understand, for they reveal how movements themselves attend and respond to confluences of histories and events that are specific and contextual. Furthermore, in tracing these contexts we reveal that South American feminists even in their preference for a rights framework, over a justice one, have long been critical of the universal category of woman and attendant to the complexities of class and histories of coloniality. That said, critical race theorists, like David Goldberg (2002), and social contract theorists, like Charles Mills (1997), have shown that race is integral to emergence and continuation of the modern nation-state as it is used to produce national affiliations predicated on excluding or forcibly including specific people on the basis of socially and politically produced racialized identities. One would, thus, be remiss to bracket race, racialization, and antiblack racism as influential in the move of Argentine, and other South American, reproductive rights activists and scholars, to differentiate themselves from the histories and goals of reproductive justice feminist scholars and activists. For while Morgan is correct to trace the specific social, political, and historical forces that allow human rights language to have potent effect in Argentina and other South American contexts, the effects of antiblack racism on failures of transnational identification across racialized identities are undertheorized.

Additionally, Morgan's reading bifurcates rights and justice based upon the use of the terms instead of thinking about how both the practices of North American Black and non-Black women of color, reproductive justice feminists and South American Argentine

reproductive rights feminists converge as justice-seeking practices. By tracing the history of Argentine reproductive rights feminists one sees localized, specific, and attendant treatment of the applicability of components of feminist praxis that may seem rudimentary within other contexts (for example, the power of the statement "women's rights are human rights") but that are important to a post-dictatorship state where the legacy of human rights activism was central to the rebuilding of the contemporary Argentine nation-state. However, the Reproductive Justice movement isn't anti-human rights, but instead requires a robust conception and ethical practice of access to the satisfaction of human need and the upholding of options amid which human beings may be active in their pursuits of creating meaning and living well. In a 2006 speech entitled "Creating Change: Human Rights," Loretta Ross, one of the founders of the Reproductive Justice movement and a professor of sexuality, gender, and women's studies, states:

> Reproductive rights, sexual rights and reproductive justice are all connected under a broader umbrella of human rights. No one can fully enjoy one right without all the others; women cannot take advantage of their civil rights (the right to equal treatment under the law) if they do not have access to education (one of the social human rights). Along those same lines, a movement for reproductive rights or sexual rights will not be as successful if it doesn't acknowledge or embrace the broader range of human rights.

For Ross, human rights are not antithetical to reproductive justice, rather reproductive justice is a requirement for the realization of a broad-spectrum framework for upholding the humanity and dignity of all people. Furthermore, North American Black feminist approaches to relational ethics inform us that the issue is not one of mere language preference. Instead, using justice (and justice frameworks) allows for a deeper analysis of the histories of nation-states in the Global North built upon racialization, white settler colonialism, and chattel enslavement. Thus, Morgan is correct to note that the circumstances of Black North American reproductive justice activists and scholars are different, than South American, and specifically Argentine feminists. However, the notion that a single word could insight disidentification (and outright rejection of Morgan's argument in an address) requires further investigation into the motivations and effects of antiblackness.

Ross's respect for and inspiration from Global South feminists is well-documented and she references the influence human rights struggles have had on both the creation of the reproductive justice framework and on her work (Briggs, 2002; Dias, et. al. 2026). In an interview with Anna Hindman from the American Medical Student Association Ross describes the establishment of the Reproductive Justice framework stating:

> We created the framework in June of 1994, and then in September 1994, the International Conference of Population and Development was held in Cairo, Egypt. When I went there, I discovered that the same rights we were claiming

> easily under the constitution, people were using the human rights framework for and that seemed to be much more capacious, sturdier, legal and regimed than what we have. I mean women in the global south were very clear that fighting for bodily autonomy is a human rights struggle but we weren't at all clear here in the U.S. because we weren't using human rights language. I came home from Egypt determined to bring human rights home so I attached it to our emerging Reproductive Justice Framework which connected us to the global struggle for human rights which has been nothing but wonderful to be connected that way (2024).

Ross calls us to attend to the hegemonic effects of centering knowledge frameworks and the genealogies of the Global North. Doing so allows one to look beyond these so-called centers of knowledge production (read: humanity) for similar histories and developments that function as generative in the process of building and sustaining connections. For example, in August 1993 a group of Brazilian Black women preparing for the same conference in Cairo (International Conference on Population & Development) that would launch the Reproductive Justice movement in the United States convened for the National Seminar on Politics and Reproductive Rights of Black Women. Out of the seminar resulted the "Declaration of Itapecerica da Serra of Black Brazilian Women" where Brazilian Black women stated:

> We, Black women, consider that the State has the task of guaranteeing the necessary conditions so that Brazilians, women, and in particular Black Brazilian women, can exercise their sexuality and their reproductive rights, controlling their own fertility, to have or not to have the children they want, guaranteeing access to good quality health services, care for pregnancy, childbirth and abortion […] in that the guarantee of reproductive rights presupposes the guarantee of broad citizenship rights […] which include employment, housing, education and safety, ethical and interdisciplinary education and training for healthcare providers, and democracy.

The tenets of reproductive justice grounded in broad based human rights of autonomy, safety, and economic, educational, and health resources are shared across national borders, as is the recognition that without attending to material circumstances within which decisions about having children, not having children, and parenting one's children occur for women. Significant here, is the extent to which the canonizing of the Reproductive Justice movement, and the theory that grounds it, remains mythologized as belonging to the center of knowledge production. The concept of reproductive justice is just one that had its origin and inspiration in Global South and transnational feminist networks, which is important in and of itself to understand, but additionally shows the centrality of Global South knowledges travelling to the North (Briggs, 2022; Dias, et. al. 2026). In what follows, there are three specific areas for collaboration and conceptualization of reproductive futures praxis that I suggest, though connections and solidarity are not, obviously, limited to what I name. The purpose in drawing these

connections are twofold: (1) Practically, they point to spaces where South-South dialogues about gender, sex, racialization, Indigeneity, and reproductive politics already exist or could flourish with greater attention, and (2) Theoretically, they emphasize the irregular, plural, and at times contradictory social and political influences contributing to the emergence of specific expressions of truths about justice (or beauty, or political rights, etc.). Specifically, in need of a philosophical, genealogical approach is the tracing of the histories of antiblack racism on and within Global South reproductive rights movements, including their experiences of solidarity, or not, with Black women in North America and globally.

The first area involves the recognition of the creation of networks of medical care providers who are committed to practices of subversive epidemiology. Coined by scholars Siri Suh and Julia McReynolds-Pérez, subversive epidemiology builds on the conception of feminist epidemiology and describes the ways in which medical practitioners in public health spaces obscure the incidence of abortion to impede prosecution by the criminal justice system (2023). As medical records--completed throughout local health systems--feed into population statistics related to abortion, they have the potential to function as subversive when they do more to obscure than to elucidate. Building networks of medical practitioners skilled in subversive epidemiology rooted in localized philosophies and ethics of care, is as critical, if not more so, than simply organizing for a choice-based legal model for access to abortion as a right. Suh and McReynolds-Pérez understand subversive epidemiology to be part of reproductive justice activism in the Global South in that it establishes localized ties in the community as the ultimate path for justice. One can contrast subversive autonomy which requires a specific kind of care in relation to the needs of the patient to rights-based and evidence-based medicalized approaches that are grounded in Global North/West conceptions of freedom and autonomy. Fundamental to most civilizational feminisms today is the idea that women are empowered when they (1) choose for themselves that which they desire, and (2) are recognized as autonomous choosers by themselves and others (Rosenfeld, 2025). What women and gender marginalized people choose is less important than that they can choose, on this framing, which fails to account for the social, political, and economic conditions in which options arise as possible and plausible.

By contrast, as reproductive justice requires centering the lives and experiences of women, it accounts for differences across socioeconomics, religion, nation-state of residency and so forth. For example, in nation-states that are defined as upper-middle-income (like Mexico and Peru) the experiences of reproductive oppression for racially and economically marginalized women tend to coalesce around hypermedicalized care via disproportionate rates of Caesarean section and manual revision of the uterine canal. In lower-income nation-states (like Mali and Senegal) women are more likely to receive poor quality care, that is if they receive reproductive health care at all. Thus, a reproductive justice model for the Global South, based in the lives of women in the Global South must account for a range of experiences that

overlap in important regards but also can look quite different. Across the Global South a rights framework alone, whose analysis begins and ends with legal statutes and written guarantees, is meaningless to the most marginalized individuals. Yet, the existence of subversive epidemiology as theory and practice instructs about the necessity of a basic human right to safe abortion and postabortion care. In the past 50 years the need to conceal abortion arises in South, West, and East Africa and across Latin America because almost all unsafe abortions (97%) have occurred in the Global South (Ghanatra et. al., 2017; Shrivastava, 2023). And despite the fact that unsafe abortions are a major cause of maternal mortality (accounting for about 70,000 deaths annually) and hospitalization (7 million annually), international conferences and organizations have not sought to close the gap on abortion care, focusing instead, as a compromise to conservative and Catholic organizations, on the right to postabortion care as a human right. In response to limitations on access to safe abortion organizations like SAIGE (Safe Abortion Advocacy Initiative Global South Engagement) amplify and build connections across the Global South activists and medical providers to decriminalize safe abortion.

Yet, while abortion restrictions may affect women differently across the Global South (and in the Global North as well) the experiences of women of color in the Global North and Global South converge in significant ways. In both the Global North and Global South, women of color feminists have long incorporated elements of what may be called a reproductive justice critique in their analyses of global population policies and programs. In the 1970s, as global population conferences were framing high fertility rates in the Global South as impediments to national economic development, feminist organizations in the Global South were articulating concerns about top-down, and coercive family planning programs promoted and financed by wealthy Global North donors, global financial institutions, and religious charities. And more recently, donors like USAID and the Gates Foundation have reanimated neo-Malthusian logics of population control through their goal of providing 120 million women in seventy of the poorest countries in the world with contraception (Hendrixson & Hartmann, 2019). More than half of these countries are in Africa, where Family Planning 2020 (and now 2030) stakeholders have been testing and distributing updated versions of historically controversial, long-acting reversible contraceptives such as Depo Provera and Norplant (now repackaged as Sayana Press and Jadelle, respectively) (Bendix et al. 2020). Despite FP 2020's attempts to frame modern contraceptive use as a reproductive right exercised by empowered, self-actualizing women consumers, that is correlated with lower rates of poverty (Bhatia et al., 2020), there is concern that pressure to meet FP 2020 targets has reproduced coercive service provision practices (Senderowicz, 2019). Thus, connections between historical population control efforts, which were explicit and brutally enforced often without consent, can be drawn with contemporary practices that are more subtle and framed by the language of choice optimization and empowerment, as well as the goals of economic development and poverty reduction.

8 Reproductive Justice: Global South Connections

The second theme I draw attention to here is the use of Global South philosophical concepts that ground reproductive justice theory and action in Global South/majority world praxes and contexts. What follows is not an exhaustive or even extensive list of possibilities, but rather provides two examples to further indicate how communities can utilize South-South theories and partnerships rather than South-North or South-North-South relationships to build liberatory models for reproduction and address reproductive injustices locally and transnationally.

The first example of a Global South philosophical paradigm is the Southern African concept of Ubuntu. While there is no English equivalent, ubuntu is often translated as 'humanness' or 'human dignity' and encompasses both ontological and normative dimensions. The ontological dimension is often expressed through concise statements, such as 'a person is a person through other persons' and 'I am because we are', thus expressing our interdependence and need for one another. According to this ontology, human dependency is not apparent only during illness and infirmity but exists as an 'ineliminable residue' of humanity, reflecting existential facts of human existence, such as embodiment, which renders people susceptible to harm. And, in Kwame Wiredu words, '[h]uman beings...at all times, in one way or another, directly or indirectly, need the help of their kind' (2010).

The normative upshot of ubuntu is a prescription regarding conduct and character, where one ought to be open to care for and affirm the existence of others in one's community and ought to feel secure that one will be held in this way in return. Ubuntu is described by African ethicists as a seeking to realize the values of solidarity and relationality via a practice of recognizing the other as someone to whom I hold a duty to because I am related to them in my community. Ubuntu as reproductive justice ethic would require not simply the right to have children, to not have children, and to parent the children one has under the protection of the individual's right to privacy. Rather, ubuntu requires solidarity with parents, with people who access abortion care, and with people seeking to have children, and a rendering of reproductive health care and well-being as related to, in fact indicative of, the health of the village. Finally, ubuntu requires sufficiency articulated as the standard of health protection people are owed to ensure sufficient capacity to commune. It calls for providing people a threshold level of all or a cluster of central human capabilities integral to health. When a collective supports its least well-off members, it expresses group solidarity and conveys that they do not face health and well-being hardship alone.

The second concept is that of acompañante care in Latin America. Acompañante is best translated to "companion" in English, but within the feminist context in which it is practiced two aspects must be emphasized. First, acompañante care arises to address a need in relation to access to and support during the abortion process. And second, the companion or acompañer is not present as an accompanying object, but rather exists as supportive, relational, and full of care for the person whom they accompany. Across Latin America feminist activist collectives and individuals run hotlines

connecting abortion seeker to acompañantes who are volunteers with extensive training in abortion protocols, knowledge about how to navigate a specific country's abortion laws, and information and support throughout their abortion process (Bercu, et. al., 2022; Larrea, et. al., 2026). Arising first in Mexico and Argentina, today they work in a variety of legal contexts, from total abortion bans in the Dominican Republic, El Salvador, Honduras, and Nicaragua, to the decriminalization of abortion up to 24 weeks in Colombia (Larrea, et al., 2026). Contrasting states of uncare with possible futures of abortion care, Deirdre Niamh Duffy, Cordelia Freeman, and Sandra Rodríguez Castañeda argue abortion uncare is rooted in coexistent state projects, national and transnational, histories of coercive family planning initiatives, negative maternal health indicators, and the medicalization of abortion. For example, the use of coercive family-planning initiatives to minimize abortion has particular relevance in Peru, the focus of Duffy, Freeman, and Rodríguez Castañeda's study, where a combination of Catholic church and state led, but internationally co-signed, initiatives sought to reduce unsafe abortions promoting an ideal of good motherhood with fertility control, the continuation of unwanted pregnancy, and material support for children (Rousseau, 2007; Necochea López, 2008). The target populations of these programs, and the discussions that motivated said programs, were predominantly already marginalized communities—rural, poor, and Andean—and there is extensive evidence of the escalation from reversible family planning to coerced and nonconsensual mass sterilization by state backed agencies (Boesten, 2014). This escalation is reflected most overtly by the state-run sterilization campaign under the Fujimori administration in the mid-1990s that particularly targeted Indigenous communities (Coe, 2004). The combined result of these state projects is the reduction of investment in abortion care, the stigmatization of those who seek abortion as failed reproductive citizens, and the formation of a political ideology that favors reproductive control above reproductive autonomy (Duffy, Freeman & Rodríguez Castañeda, 2023).

In response to abortion uncare, Latin American feminists, including those in Peru, practically and discursively seek to remake infrastructures of care beyond the state via the practice of accompaniment. Against the ascendancy of medical models that reflect hegemonic projects of obliviating traditional forms of care and knowledge in the majority world, acompañante infrastructures of abortion care function as a set of relations between actors, technologies, and strategies that arise via an interest in the embodied and emotional well-being of people (Duffy, Freeman & Rodríguez Castañeda, 2023). These infrastructures of care not only create material paths, access to knowledge and resources, but additionally provide emotional support throughout the entirety of the experience via being with the subject. For example, in ethnographic work in Argentina, Chile, and Ecuador, Bercú et. al. found that acompañte care represented "supported self-care through which individuals are centered as the protagonists of their own abortion, while being accompanied by feminist peers" (2021, 2). Put differently, an infrastructure of abortion care and uncare may rely on the same technologies, medical doctors, and/or community practitioners (like doulas), but there exists a qualitative shift within the experience of the person accessing abortion care where they experience a

being with or being held within a community or village. Thus, like ubuntu the ethical imperative of acompañante is not based upon a retreat into what one is owed protection from (conceptualized in political philosophy as liberty or negative freedom--i.e. protection from intervention of privacy) but rather considers what we owe one another as human beings part of communities, in relation to one another in villages, as human beings who can provide sufficient or insufficient bases for flourishing. Both ubuntu and acompañante provide relational conceptions of the being human being and of the ethical requirements of care for others in one's community. And while not reducible to one another, they provide the means through which to ground affiliation, understanding, and embodied solidarity as mutual aid that passes through the body as one places the body in the act of solidarity and mutual aid (Cabnal, 2017).

The final theme I will only briefly note for time's sake. Within a reproductive justice analysis centering Global South connections it is necessary to draw attention to broader structural inequities between the Global North and Global South, as well as global systems of antiblackness, framing considerations of global and local health. Notably, in philosophy the predominant bioethics literature rarely draws insight from philosophies of the Global South. In a survey of the bioethics literature on global health from the past 50 years, Gibson et al. found that 88% of articles were written by authors in high-income countries. Most troubling is the virtual non-existence of voices from the Global South. Thus, drawing attention to philosophies and ethical practices of the Global South does not merely yield important insights for our time, which it of course does, but also draw attention to the lopsided nature of the field of bioethics.

That said, one may object that the goal of Global South theorizing, and practice, is not to be included in Global North centers of knowledge production, including the field of bioethics. For one, the subversiveness of insurgent collectivist and individual practices may be compromised as they are illuminated in journals by scholars internal and/or external to movements (e.g. subversive epidemiological practices in abortion care). While a legitimate concern, I will close with two points. First, to interpret this concern as justifying silence or silencing of knowledge is to participate in the continuation of histories of epistemic injustice and to assert that the future of relations between Global South and Global North actors will remain exactly as they are today. Second, the claim that Global South theory and practice should not be featured in Global North publishing spaces assumes at least the following: (1) that the only place for sharing research is in the Global North, and (2) that research methods are engaged in some kind of colonial practice, when they can be decolonial and community engaged. That said, it is not sufficient to simply tell stories from/of the Global South to decolonize knowledge production. Rather, the epistemologies and ethical frameworks emerging from the Global South must be respected as sites and spaces of knowledge production and ways of being with others in a shared social world.

References

Bercu C, Moseson H, McReynolds-Pérez J, Wilkinson Salamea E, Grosso B, Trpin M, Zurbriggen R, Cisternas C, Meza M, Díaz V, Kimport K. (2021). In-person later abortion accompaniment: a feminist collective-facilitated self-care practice in Latin America. Sex Reprod Health Matters. 29(3):2009103. doi: 10.1080/26410397.2021.2009103

Bhatia, R., Sasser, J. S., Ojeda, D., Hendrixson, A., Nadimpally, S., & Foley, E. E. (2020). A feminist exploration of 'populationism': engaging contemporary forms of population control. Gender, Place & Culture, 27(3), 333–350. https://doi.org/10.1080/0966369X.2018.1553859

Boesten, J. (2014). Sexual violence during war and peace: Gender, power, and post-conflict justice in peru. New York: Palgrave Macmillan.

Briggs, L. (2022), Reproductive justice: Born transnational. Gender Work Organ, 29: 1-7. https://doi.org/10.1111/gwao.12765

Coe A.B. (2004). From anti-natalist to ultra-conservative: restricting reproductive choice in Peru. Reprod Health Matters. Nov;12(24):56-69. doi: 10.1016/s0968-8080(04)24139-8. PMID: 15626197.

Connelly, M. (2008). Fatal misconception: The struggle to control world population. Cambridge, MA: The Belknap Press of Harvard University Press.

Davies, S. E., & Harman, S. (2020). Securing reproductive health: a matter of international peace and security. International Studies Quarterly, 64(2), 277-284.

Yopo Díaz, M., Chaparro Buitrago J., Dávila Contreras M.X., Rodríguez Castañeda, S.W. Justicia reproductiva: Teoría y práctica en América Latina. Latin American Research Review. Published online 2026:1-17. doi:10.1017/lar.2026.10125

Duffy, D. N., Freeman, C., & Rodríguez Castañeda, S. (2023). Beyond the State: Abortion Care Activism in Peru. Signs: Journal of Women in Culture & Society, 48(3), 609–634. https://doi.org/10.1086/723296

Fafunwa, A. B. (2022). African education in perspective. In Education in Africa (pp. 9–27). Routledge.

Farid, S., Bremner, J., & Anderson, E. (2022). No one left behind: has the pursuit of FP2020's 120 million additional users goal left some women behind?. Gates open research, 5, 114.

Ganatra, B., Gerdts, C., Rossier, C., Johnson, B. R., Jr, Tunçalp, Ö., Assifi, A., Sedgh, G., Singh, S., Bankole, A., Popinchalk, A., Bearak, J., Kang, Z., & Alkema, L. (2017). Global, regional, and subregional classification of abortions by safety, 2010-14: estimates from a Bayesian hierarchical model. Lancet (London, England), 390(10110), 2372–2381. https://doi.org/10.1016/S0140-6736(17)31794-4.

Goldberg, D. T. (2002). The Racial State. Wiley-Blackwell Publishing.

Gurr, B. (2014). Reproductive Justice: The politics of health care for native american women. Rutgers University Press.

Gyekye, K. (1997). Tradition and modernity: Philosophical reflections on the African experience. Oxford University Press.

Hindman, A. (2024). Voices from the Frontlines: Loretta Ross Unveils the Roots and Calls in the Future of Reproductive Justice. AMSA Reproductive Health Project. https://www.amsa.org/voices-from-the-frontlines-loretta-ross-unveils-the-roots-and-calls-in-the-future-of-reproductive-justice/

Larrea, S., Braunstein, S., Scott, L., Bercu, C., Zurbriggen, R., Milena, M., Garduño, S., Huerta, V. C., & Wollum, A. (2026). “Being an acompañante gave me feminism, life, joy, emotions”: the lived experience of abortion activists from four collectives in Latin America, SSM - Qualitative Research in Health, 9, (100770).

Mendez, M. J. (2023). Acuerpar: The Decolonial Feminist Call for Embodied Solidarity, Signs: Journal of Women in Culture and Society, Volume 49, Number 1, 37-61.

Mills, C. W. (1997). The Racial Contract. Cornell University Press.

Morgan, L. M. (2015). Reproductive Rights or Reproductive Justice? Lessons from Argentina. Health and Human Rights, 17(1), 136–147. https://doi.org/10.2307/healhumarigh.17.1.136

Necochea López, R. (2008). "Priests and Pills: Catholic Family Planning in Peru, 1967–1976." Latin American Research Review 43(2):34–56.

Newnham, E., Buchanan, K., van Nistelrooij, I., van der Waal, R., & Mitchell, V. (2025). Care ethics and midwifery: towards a reproductive justice. In Recommitting to Reproductive Justice: Care Ethical Perspectives (pp. 3–24). Peeters Publishers.

Roberts, D. (1998). Killing the black body: Race, reproduction, and the meaning of liberty. Vintage.

Rosenfeld, S. (2025). The Age of Choice: A History of Freedom in Modern Life. Rutgers University Press.

Ross, L. J. (2006). Creating Change: Human Rights. Reproduced online: https://lorettajross.com/dred-feminist-blog/2006-creating-change-human-rights-speech-2006-lross

Ross, L. J., & Solinger, R. (2017). Reproductive justice: An introduction. California University Press.

Rousseau, S. (2007). "The Politics of Reproductive Health in Peru: Gender and Social Policy in the Global South." Social Politics 14(1):93–125.

Senderowicz L. (2019). "I was obligated to accept": A qualitative exploration of contraceptive coercion. Social science & medicine (1982), 239, 112531. https://doi.org/10.1016/j.socscimed.2019.112531

Shrivastava, G. (2023, March). SAIGE: Advancing Reproductive Justice and Safe Abortion Access in the Global South. Arrows For Change, 29(1).

Suh, S., & McReynolds-Pérez, J. (2023). Subversive Epidemiology in Abortion Care: Reproductive Governance from the Global to the Local in Argentina and Senegal. Signs: Journal of Women in Culture and Society, volume 48, number 2, 395-421.

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