



PERSONAL TO POWERFUL

Holding the line for gender justice in the face of growing anti-rights movements.

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OXFAM

Abstract

Thirty years on from the commitments enshrined in the Beijing Declaration and Platform for Action (BPfA) this briefing reveals a picture of broken promises and unfulfilled ambition by States. This failure is not just due to a lack of political will, but also an economic system that is unequal by design. A range of right-wing, religious, and conservative actors around the world are capitalising on persistent crises, to reorient state power towards a reassertion of racist and sexist profit-driven systems that favours the wealthy, privileges men, and harms and disadvantages women and LGBTQIA+ people in the name of ‘traditional’ family values. This diminishes governments’ capacity to protect, respect, promote, and fulfil bodily autonomy and sexual and reproductive health, rights and justice. As world leaders prepare to review their commitments to the BPfA, the consolidation and mainstreaming of these anti-rights movements risk eroding the hard-won gains of feminist, LGBTQIA+ activists and movements, ultimately breaking the social contract between the state and people.

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List of Acronyms

ACLJ - American Centre for Law and Justice

AI – Artificial Intelligence

BPfA – Beijing Platform for Action

CEDAW – Convention on the Elimination of All Forms of Discrimination Against Women

COVID - Coronavirus Disease

CSE – Comprehensive Sexuality Education

DEI – Diversity, Equity, and Inclusion

EU – European Union

FGM – Female Genital Mutilation

GBV – Gender Based Violence

GCD – Geneva Consensus Declaration

GDP – Gross Domestic Product

GGR – Global Gag Rule

HIV - Human Immunodeficiency Virus

ICPD – International Conference on Population and Development

IDP – Internally Displaced Persons

ILO - International Labour Organization

INGO – International Non-Governmental Organization

IOF - International Organization for the Family

IPV – Intimate-Partner Violence

IWH – Institute for Women’s Health

LAC – Latin America and the Caribbean

LDCs – Least Developed Countries

LGBT - Lesbian, Gay, Bisexual, Transgender

LGBTQIA+ – Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, Asexual

MMR – Maternal Mortality Ratio

MSI Reproductive Choices – Marie Stopes International Reproductive Choices

NGO – Non-Governmental Organization

ODA – Official Development Assistance

RGA – Rapid Gender Analysis

RN - National Rally

SAAF - Safe Abortion Action Fund

SDG – Sustainable Development Goals

SOGIESC - Sexual Orientation, Gender Identity, Expression, and Sex Characteristics

SRH – Sexual and Reproductive Health

SRHR – Sexual and Reproductive Health and Rights

SRHRJ – Sexual and Reproductive Health, Rights, and Justice

UK – United Kingdom

UN – United Nations

UNFPA – United Nations Population Fund

UNWRA– United Nations Relief and Works Agency for Palestine Refugees in the Near East

VAW – Violence Against Women

WASH – Water, Sanitation, and Hygiene

WHO – World Health Organization

WROs – Women’s Rights Organizations

Executive Summary

Representing the cumulative efforts of feminist movements and women's rights coalitions globally, the Beijing Declaration and Platform for Action (BPfA), recognised that 'women's rights are human rights' and called for financial resources to strengthen the capacity of national, sub-regional, regional and international institutions to achieve gender equality.¹ All countries acknowledged the need for 'urgent action in the spirit of determination, hope, cooperation and solidarity' that must include 'the right of all women to control all aspects of their health, in particular their own fertility'.²

However, thirty years on from the commitments enshrined in the Beijing Declaration and Platform for Action (BPfA) this briefing reveals a picture of broken promises and unfulfilled ambition by states. This failure is not just due to a lack of political will, but also an economic system that is unequal by design.³ A range of state and religious actors in the Global North are capitalising on the collapsing social contract to reorient state power towards a reassertion of the racist and sexist profit-driven system that favours the wealthy, privileges men, and harms and disadvantages women and LGBTQIA+ people in the name of 'traditional' family values.⁴ The promotion of heteronormative⁵ family systems, frequently done under the guise of protecting 'women',⁶ simply risks entrenching patriarchal gender roles, exacerbating the already unequal gendered distribution of care work disproportionately undertaken by women that remains unpaid, underpaid, and undervalued.⁷

As world leaders prepare to review their commitments to the BPfA, they must reject the mainstreaming of anti-rights movements and their co-optation of human rights language as this risks eroding the hard-won gains of feminist, LGBTQIA+ activists and movements, ultimately breaking the social contract between the state and people.

If we are to achieve a more gender just and equal world, we must acknowledge and work to overcome the shortcomings of the system that produces these inequalities. Aid spending is in decline⁸ and economic inequality is widening dramatically with billionaire wealth rising three times faster in 2024 than 2023; this is part of a wider systemic extraction of 'wealth from the Global South to the super-rich one percent in the Global North'.⁹ These trends are resulting in rapidly rising debts¹⁰ for which the near-universal response is further economic austerity measures,¹¹ with dire consequences for SRHRJ and bodily autonomy. More than half of countries (51%) that have either cut their social protection budget or have very little social protection budget (below 15% of total government expenditure), have little or no social assistance to mothers with

newborns.¹² Diminishing aid and growing inequality are also undermining our collective capacity to hold states to account for upholding SRHRJ and bodily autonomy amidst vast increases in the resources available to anti-rights actors. According to Global Philanthropy Project, just three anti-LGBTI organizations received more funding in 2021-2022 than all 8,000+ LGBTI globally in the same time period.¹³

Actions that governments have and continue to take in areas including maternal mortality, gender-based violence, comprehensive sexuality education (CSE), abortion and contraception information and care, or LGBTQIA+ rights demonstrate that acting in favour of SRHRJ and bodily autonomy is possible.¹⁴ Gains are not, however, happening fast enough. We still live in a world where one in three women (1.3 billion) lives in countries that do not prohibit the dismissal of pregnant women workers.¹⁵ Care work is distributed unevenly amongst women in ways that reflect prevailing race and class inequalities. The gendered labour of wealthier women is frequently displaced on to poorer, racialized women in a range of contexts, with these forms of unpaid work representing a massive wealth transfer from the poorest to the richest.¹⁶

However, this is no time to despair. Instead, we can take inspiration from the collective action that brought feminists together in Beijing. States must pave the way for a new social contract that centres accountability to women, trans, and non-binary people – one that uphold everyone's fundamental rights to make decisions about their own bodies, centres care and the redistribution of resources and power through transformative gender just policies. Only then is the realisation of SRHRJ, bodily autonomy and gender justice possible.

This briefing recommends that states should:

Uphold and promote bodily autonomy and SRHRJ as fundamental human rights.

Women, girls, and people of diverse SOGIESC must have full autonomy over their lives and bodies for improved health and education outcomes, as well as their freedom to participate in all aspects of economic life. States must ensure, all people, including in emergency settings, have universal access to comprehensive sexual and reproductive health services, including safe abortion and post abortion care. States must also repeal laws that criminalizes or discriminate consensual sex between adults, challenge discriminatory and harmful social and gender norms, and

uphold universal human rights that promote and protect people of diverse SOGIESC.

Strengthen the feminist social contract and end austerity

Austerity is a political choice that is neither necessary nor inevitable. States must reject and end austerity as it weakens economic, political and social settlements by dismantling the social contract on which we depend. This can only be achieved by taxing the rich, cancelling unsustainable debt of low and middle-income countries to free up financial resources, and invest in social protection and universal public services, alongside other gender transformative policies.¹⁷

Recognise care as a right and as a public good

The global economy has long relied on the undervalued and unpaid labour of women, particularly those from the Global South, reinforcing racialized and gendered inequalities. States must recognize care as a public good, a human right, and a cornerstone of SRHRJ. This is only possible if states shift to a caring economy that ensures dignified work for all, and an increased investment in universal and gender transformative public infrastructure and services, social protection and publicly funded healthcare systems for all.

Strengthen and resource feminist and queer organisations and movements

Feminist and queer organisations and movements have demonstrated time and again that they are best placed to challenge states that break the social contract by not respecting, protecting, and promoting bodily autonomy and SRHRJ. Funding, including through official development assistance (ODA) should be prioritised to ensure that feminist and queer organisations and movements can continue to hold governments accountable. States must promote the equal and meaningful participation and leadership of women, trans and non-binary people in decision making spaces and protect and expand public and civic space for all, including ensuring individuals and groups dedicated to the protection and promotion of SRHRJ can carry out their work in an enabling environment.

Now is the time to unite in solidarity with feminist and queer movements holding the line and resisting anti-rights actions that seek to limit SRHRJ, bodily autonomy and gender justice.

Introduction

The Fourth World Conference on Women, held in Beijing in 1995, was the largest-ever gathering dedicated to women's rights and gender¹⁸ equality. Building on the language and consensus achieved at the International Conference on Population and Development (ICPD) the year before in Cairo, the resulting global policy framework – the Beijing Declaration and Platform for Action (BPfA) – enshrined commitments to gender equality as a global norm and is considered the most progressive blueprint ever for advancing women's rights.¹⁹ Thirty years on, this briefing reveals a picture of broken promises and unfulfilled ambition. Not a single indicator under Sustainable Development Goals (SDG) 5, on gender equality, has been fully achieved,²⁰ and too many of the BPfA commitments remain unfulfilled ambitions.

This failure is not just due to a lack of political will or resources (though both play a part); it is also the result of an economic system that is inherently sexist and racist and has in recent decades been characterised by a legacy of inequality and injustice. At the same time, we are seeing escalating and coordinated attacks by right-wing, religious fundamentalists and conservative actors the world over on the right to bodily autonomy that is integral to upholding sexual and reproductive health, rights and justice (SRHRJ). As Trump becomes US President for the second time, these trends are likely to accelerate. The ripple-effects of the overturning of 'Roe v. Wade' in 2022, which effectively removed the constitutional right to abortion in the US, are being felt across the world. The reactivation of the 'Global Gag Rule', which restricts US foreign aid spending related to abortion and sexual and reproductive healthcare, is expected to once again intensify anti-abortion and anti-rights tendencies, whilst 'denying the existence of trans individuals,'²¹ and increasing discrimination and violence against women, girls, and LGBTQIA+ people, both within and beyond the US.²²

Unique risks are emerging regarding how states address issues of bodily autonomy, choice, and access. A range of state and religious actors in the Global North are capitalising on the collapsing social contract to reorient state power towards a reassertion of the racist and sexist profit-driven system that favours the wealthy, privileges men, and disadvantages women and LGBTQIA+ people in the name of 'traditional' family values. The promotion of heteronormative²³ family systems, frequently done under the guise of protecting 'women', simply risks entrenching patriarchal gender roles, exacerbating the already unequal gendered distribution of care work disproportionately undertaken by women that remains unpaid, underpaid, and undervalued.

At the same time, in the name of 'development', anti-abortion messaging

is deployed by many states and religious actors in the Global South to variously challenge comprehensive sexuality education, access to abortion and progress on gender equality measures including LGBTQIA+ rights and tackling gender-based violence.²⁴ This is diminishing governments' capacity to protect, respect, promote and fulfil bodily autonomy and promote SRHRJ, which are central to efforts to tackle gender inequality.

As world leaders prepare to review their commitments to the BPfA, the consolidation and mainstreaming of these anti-rights movements risk eroding the hard-won gains of feminist, LGBTQIA+ activists and movements, ultimately breaking the social contract between the state and people.

This briefing contends that the structures within which demands for gender equality are made are unequal by design, amplifying the voices and arguments of anti-rights actors while silencing others. If we are to achieve a more gender just and equal world, we must acknowledge and work to overcome the shortcomings of the system that produces these inequalities. At the same time, we need to recognise the progress made by intersectional feminist movements, women's rights organisations (WROs) and grassroots activists in the defence and promotion of SRHRJ since Beijing – and draw strength and inspiration from these efforts to renew our capacity for collective action.

Social contract

The 'social contract' describes how we 'organise society'²⁵ and raises questions about the function of power.²⁶ Who is included in, and excluded from, the contract? Who decides what rights, duties or responsibilities are covered by the contract? Feminist, anti-racist and decolonial imaginings of the term 'social contract' must be inclusive, recognising how shared colonial pasts shape our unequal present and (re)distributing resources in ways that prioritise equality and social justice.

Chapter 1: No equality in sight, 30 years on from Beijing commitments

Signed by 189 countries in 1995, the Beijing Declaration and Platform for Action (BPfA) set out a comprehensive roadmap for achieving gender equality. Representing the cumulative efforts of feminist movements and women's rights coalitions globally, the BPfA recognised that 'women's rights are human rights' and called for financial resources to strengthen the capacity of national, subregional, regional and international institutions to achieve gender equality.²⁷ All countries acknowledged the need for 'urgent action in the spirit of determination, hope, cooperation and solidarity' that must include 'the right of all women to control all aspects of their health, in particular their own fertility'.²⁸

The BPfA also stated clearly that 'the human rights of women include their right to have control over and decide freely and responsibly on matters related to their sexuality, including sexual and reproductive health, free of coercion, discrimination and violence'.²⁹ It also articulated the need to tackle negative gender social norms at all levels to ensure the realisation of SRHR for women and people in all their diversities, across generations.³⁰

Sexual and Reproductive Health, Rights, and Justice

Sexual and reproductive health refers to physical, emotional, mental and social wellbeing in relation to all aspects of sexuality and reproduction.³¹ Oxfam recognises that bodily autonomy and sexual and reproductive health, rights and justice (SRHRJ) are fundamental human rights, and that bodily autonomy is the foundation for gender justice and essential to fighting inequality. Oxfam affirms the right of all persons to decide freely and informedly whether and when to be sexually active, without social coercion; choose their sexual partner(s); "decide whether, when, how many, and by what means to have children in safe and sustainable communities";³² decide whether, when, and whom to marry; pursue a consensual, satisfying, safer, and pleasurable sex life; freely define their own sexuality, including sexual orientation and gender identity and expression; be free from harmful practices such as (but not limited to) female genital mutilation (FGM), conversion therapies, and forced sterilization; enforced or coerced sexual or gender assignment, including genital mutilation, of intersex people, enforced birth giving; and access the SRH information, services, and commodities to enable them to exercise the above rights, free from discrimination, coercion, exploitation, and violence.

The call for reproductive justice is rooted in a recognition that the 'SRHR field

is overshadowed by a colonial legacy', in which colonised people were 'oppressed, subjugated and abused—particularly by violating their bodily autonomy' through measures including 'forced abortions, sterilizations, and unethical experiments'.³³ Reproductive justice is inextricably linked to social justice.

Progress and setbacks on key areas for gender justice

The BPfA focused global attention and resources in support of gender equity goals, compelling international, government, private and civil society stakeholders to respond to its demands.³⁴ Since its ratification, we can observe some significant advancements but also ongoing shortcomings. Overall, there have been gains in relation to laws and regulations supporting SRHR, with nearly 60% of UN member states reporting positive data on access to SRHR.³⁵ Actions like these that governments have taken and continue to take demonstrate that advocating for SRHRJ and bodily autonomy is achievable. However, these gains are not, however, happening fast enough.

SRHRJ risks amidst crisis: Spotlight on Gaza

More than 6,000 women and 11,000 children have been killed in Gaza by the Israeli military over the past year than the equivalent period of any other conflict over the past two decades.³⁶ The health system was intentionally and repeatedly attacked by Israel. The World Health Organization (WHO) reports 670 attacks on the healthcare system in Gaza, damaging and destroying health infrastructure and killing and injuring health personnel and patients. With the increased demand for health services due to traumatic injuries, coupled with the impact of the Israeli siege on the availability of fuel, portable water, electricity, medical supplies and commodities, the health system in Gaza is unable to meet the SRH needs of the population, with about half a million women currently lacking access to adequate SRH services.³⁷ Reports from women who were finally able to access health centres reveal devastating conditions of women having cesarean sections without anaesthetics³⁸ alongside premature births and life-threatening obstetric complications soaring during the war on Gaza.³⁹

Israel's recent ban of UNWRA, the largest and most capable provider of aid in Gaza will worsen access to sexual and reproductive health information and services for Palestinians.⁴⁰ UNWRA provides health services, including SRH services, to more than 1 million Palestinians in Gaza through 22 centres.⁴¹

A Rapid Gender Analysis (RGA)⁴² amongst internally displaced persons (IDPs) in Gaza undertaken in May 2024 by Oxfam found that forced displacement reduced access to basic needs and facilities such as water and sanitation, health, education and housing, heightening the risk of violations of SRHRJ and bodily autonomy.

- **Water, Sanitation and Hygiene (WASH):** Poor WASH facilities in IDP sites in Gaza, especially inadequate and unsanitary toilets and bathing facilities with poor privacy, heighten risks of gender-based violence (GBV). Around 690,000 menstruating women and girls lack access to clean facilities and sufficient water for hygiene during menstruation with shortages of menstrual products.
- **Sexual and reproductive health services:** 25% of IDPs are asking for sexual and reproductive health services, including family planning, access to contraceptives, and treatment for sexually transmitted infections STIs. There is also a critical need for prenatal and postnatal care. The collapse in healthcare and social services has resulted in immense difficulties, including high malnutrition rates, for pregnant and breastfeeding mothers.

Maternal mortality

Reducing maternal mortality was a key objective of the BPfA and is reflected in SDG 3.1, which explicitly aims to ‘reduce the global maternal mortality ratio to less than 70 per 100,000 live births’ by 2030.⁴³ Between 2000 and 2020, the global maternal mortality ratio (MMR) declined by 34% to 223 deaths per 100,000 live births.⁴⁴ Conflict heightens the risk of higher MMR rates, evident in countries such as Afghanistan, Chad, South Sudan, and the Democratic Republic of the Congo.⁴⁵ This higher MMR is closely linked to the fragility of these contexts⁴⁶ which deepens gender inequalities.

Fragility is not the only measure. The lack of progress on maternal mortality ‘reflects inequalities in access to quality health services and highlights the gap between rich and poor’.⁴⁷ Excess maternal deaths directly correlate to racial and socioeconomic inequalities and poor access to maternal healthcare services.⁴⁸ Rising MMR reflects a failure of governments and donors to invest in maternal care services, including trained health workers and service provision alongside access to contraception and safe abortion services.⁴⁹

Gender-based violence

In the year before the adoption of the BPfA, only around 12 countries had laws to prosecute domestic violence.⁵⁰ Since 1995, this number has grown significantly, with over 1,583 legislative measures across 193 countries, including 354 specifically addressing domestic violence.⁵¹ UN Women notes that countries that have passed laws to stop domestic violence have, on average, reduced incidence rates by nearly half.⁵² The BPfA has also played a key role in improving data collection; between 1995 and 2014, 102 countries implemented national surveys on violence against women (VAW).⁵³ Whilst awareness and associated data collection for VAW has improved, gender-based and intimate-partner violence (IPV) amongst LGBTQIA+ persons is less well-understood.⁵⁴

With widespread under-reporting a real concern, nonetheless available data suggests that LGBTQIA+ persons 'likely experience more intimate partner violence (IPV) than their cisgender, heterosexual counterparts', experiencing 'unique risk factors' linked to the marginalisation they experience belonging to gender non-conforming groups.⁵⁵



Source: UNFPA 2024 study of 153 countries.

Since the adoption of the BPfA, there has also been increased attention on gender-based violence in conflict, with UN Security Council Resolution 1325 on Women, Peace and Security recognising the disproportionate impact of armed conflict on women and girls, and International Humanitarian Law maintaining that women must be “especially protected” from sexual violence.⁵⁶ There have also been increased efforts to address gender-based violence in the workplace.⁵⁷ Whilst these laws, frameworks and rules are important, they are insufficient without sustained political pressure to ensure their implementation and effectiveness.⁵⁸ Statistics on gender-based violence paint a worrying picture: one in three women reports experiencing sexual violence, the majority committed by intimate partners.⁵⁹ There is a lack of both political will and adequate funding to address gender-based violence. According to UN Women, only 0.2% of the US\$204bn allocated to official development assistance in 2022 was spent on preventing gender-based violence.⁶⁰

There is also an explicit link between anti-rights agendas and the withdrawal of support for tackling gender-based violence. For example, in 2021, Türkiye’s President Erdoğan withdrew the country from the Council of Europe’s Convention on preventing and combating violence against women and domestic violence, known as the Istanbul Convention⁶¹

leading to condemnation and protests in Türkiye, Europe, and worldwide. This is in the context of broader trends across some parts of Europe to 'spread misinformation and demonise gender equality, women's and LGBTQIA+ rights.'⁶²

As with maternal mortality, humanitarian crises and the climate emergency amplify intersectional inequalities and exacerbate gender-based violence. This puts pregnant and lactating mothers at risk⁶³ and gender-based violence is also used as a tool to exclude women from decision-making, particularly amid growing competition over natural resources.⁶⁴ Adolescent girls continue to face heightened risks of child marriage⁶⁵ and female genital mutilation (FGM). According to UN Women, between 2019 and 2023, over 230 million girls and women underwent FGM—a 15% increase since 2016.⁶⁶

SRHRJ, bodily autonomy and migration

The BPfA recognised that migration exacerbates vulnerability, emphasising 'the full realization of the human rights of all women migrants, including women migrant workers, and their protection against violence and exploitation'.⁶⁷

As global crises intensify, the last few decades have seen large-scale movements of people fleeing conflict, economic, and climate-related emergencies, and persecution. Yet with the growing xenophobia, racism, and anti-migrant sentiments that underpin anti-rights movements, countries like Italy are committing to contradictory policy choices that reject offering birth rights to migrants and refugees/asylum seekers⁶⁸ while bemoaning falling birth rates and attempting to encourage Italian couples to have babies.⁶⁹

Harassment of migrant workers also persists despite legislation, and in some instances, SRHRJ is violated where other forms of intersectional inequality and precarity exist. One in three women (1.3 billion) lives in countries that do not prohibit the dismissal of pregnant women workers.⁷⁰ In Canada, reports of abuse in its temporary foreign worker program are well documented, with some women reporting they are not allowed to get pregnant during their employment.⁷¹ Similarly, in Singapore, risks to bodily autonomy are built into the terms of permits given to migrant domestic workers; any domestic worker who becomes pregnant must either seek an abortion or be deported.⁷²

SRHRJ and bodily autonomy are also put at risk for LGBTQIA+ asylum seekers. The Australian NGO Forcibly Displaced People's Network, emphasises that race, whether alone or combined with visa/migration status, can lead to unequal access to LGBTQIA+ health services.⁷³

Comprehensive sexuality education (CSE)

The BPfA recognised the need to ‘remove legal, regulatory and social barriers, where appropriate, to integrating sexual and reproductive health education within formal education programmes on women’s health issues.’⁷⁴ Some progress has been made in integrating CSE into school curricula in a scientifically accurate and age-appropriate way, but more work is needed. UNESCO’s *Global Education Monitoring Report* surveyed 50 countries, selected based on regional representation, income levels and religious diversity. Although legal and policy frameworks were not always in place, 64% of the countries surveyed had an education plan that referred to ‘sexuality education’. Additionally, sexuality education was mandatory in primary schools in 68% of these countries and in secondary schools in 76%.⁷⁵

Abortion and contraception information and care

The least progress lies in access to safe abortion, contraception information, and related care.⁷⁶ This area is also most threatened by the anti-rights movement, as explored in Chapter 3. While the headline figure may seem impressive—96% of 147 reporting countries offer some form of legal abortion⁷⁷—restrictions and caveats severely limit access to safe abortion care, with dire health consequences for millions of women. A study in *The Lancet* suggests a ‘massive unmet global need for access to safe abortion services.’⁷⁸ It found that almost half of the 56 million abortions done annually are unsafe, with 97% of unsafe abortions in developing countries; these are responsible for an estimated 8% of maternal deaths.⁷⁹

28% OF COUNTRIES SURVEYED REQUIRE HUSBAND’S CONSENT FOR MARRIED WOMEN TO ACCESS ABORTION.



Source: UNFPA 2024 study of 153 countries.

According to a United Nations Population Fund (UNFPA) 2024 study on legal commitments for SRHR, married women require their husband's consent to access abortion services in 28% of the 153 countries surveyed, and in a fifth of countries women and adolescents are required to obtain third-party authorisation to access contraceptive services.⁸⁰ Judicial consent is required for minors to access these services in 36% of the countries. Women can face criminal prosecution for having an illegal abortion in 63% of the countries.⁸¹ In 95 countries, abortion is criminalised on various grounds, and age-based restrictions and third-party consent procedures make young people particularly vulnerable in relation to denial of SRH services.⁸²

LGBTQIA+ rights

The headline data is positive, with progress on LGBTQIA+ rights accelerating during the 1990s. By 2020, same-sex sexual acts were legal in 133 out of 202 countries surveyed.⁸³ In January 2025, the International Criminal Court recognised LGBTQIA+ persecution for the first time in an arrest warrant, stating that in Afghanistan, the persecution of groups perceived as 'not conforming with their ideological expectations of gender identity or expression' constitutes a crime against humanity.⁸⁴

However, persecution and criminalisation persist in ways that create unique risks for LGBTQIA+ communities. In 2019, a report to the UN General Assembly highlighted the persistent 'violence and discrimination' LGBTQIA+ people face in relation to education, health, media and politics.⁸⁵ Threats to the rights and safety of LGBTQIA+ people are growing across the EU.⁸⁶ In Poland the right-wing Law and Justice Party, in government for eight years until December 2023,⁸⁷ supported local authorities to adopt 'family charters' and create 'LGBT-Free Zones' to 'protect children from moral corruption'.⁸⁸ These charters took inspiration from the party's 2019 election pledge to 'protect' Poland from 'LGBT ideology'.⁸⁹ In the most extreme cases, the right to exist as anything other than a heterosexual person is withdrawn, as has happened in Italy with the removal of non-birth same-sex parents from birth certificates.⁹⁰

Efforts to uphold LGBTQIA+ rights in some Global South countries are often critiqued as 'Western' or 'neo-colonial', the rejection of which then emboldens religious and conservative coalitions to claim they are fighting to preserve local or indigenous identities under the pretence that these efforts are 'decolonial' or 'anti-Western'.⁹¹ Yet in many places it is the persistence of colonial legislation that limits the rights of people of diverse sexual orientation, gender identity, expression, and sex characteristics (SOGIESC).⁹² The colonial-era Penal Code Section 377A, which criminalized acts 'against the order of nature,' remained in force in both India and Singapore until recently.⁹³ After years of LGBTQIA+

activism in both countries, this law was finally overturned—India’s Supreme Court overturned it in 2018 and Singapore repealed it in 2022.⁹⁴

How progressive grassroots organisations are pushing back

Progressive grassroots actions are leading the way – pushing back against the religious conservatism that is seeking to overturn hard-won SRHRJ gains in all these areas. It is important to celebrate these wins, as they provide opportunities to learn and build coalitions to continue to demand accountability for upholding SRHRJ and thus gender rights.

The Gambia outlawed FGM in 2015, with fines and prison sentences of up to three years for engaging in FGM, and potential life sentences if the FGM procedure leads to death.⁹⁵ In 2024, a coalition of pro-FGM lawmakers and Muslim clerics attempted to have the law overturned, but campaigners built national and international coalitions to defend the law, ultimately defeating attempts to overturn it.⁹⁶

Ghana’s National Health Insurance Program has provided full coverage for long-term contraception since 1 January 2022.⁹⁷ This demand was fought for by a coalition of national and international reproductive rights organisations under the auspices of supporting work towards SDG 3: Good Health and Well-being.⁹⁸

In the face of growing religious anti-rights mobilisations, Sierra Leone is on the cusp of overturning colonial law to decriminalise abortion.⁹⁹

The Center for Reproductive Rights, a global human rights organisation, has also highlighted the strength of feminist collective action in Latin America. Recent successes including abortion being decriminalised in Mexico, Argentina and Colombia, as well as the legal recognition of access to abortion as a human right through litigations against the states of Ecuador, Nicaragua and El Salvador.¹⁰⁰ Some states risk losing their advancements, however, due to the growing prevalence of anti-rights actors and action in politics, while movements lose momentum due to lack of resources.

A coalition of Polish LGBTQIA+ rights activists raised awareness of the anti-rights ‘LGBT-Free Zones’ by publishing an ‘Atlas of Hate’, and in 2023 won a case against the local authorities attempting to sue them for their awareness-raising and advocacy efforts.¹⁰¹

In Thailand in January 2025, coalitions of LGBTQIA+ activists have been successful in having the right to marriage equality for same-sex couples recognised.¹⁰²

Despite some progressive laws and policies that speak to the ambitions of the BPfA – largely driven by feminist grassroots mobilization—it is clear that states have failed to uphold their commitments to gender equality. In the next chapter, we see how patriarchal and capitalist systems and structures have fuelled inequalities, eroding the social contract and undermining governments’ commitments to gender justice – creating the perfect crisis conditions for anti-rights actors to gain momentum.

Chapter 2: Why is the social contract eroding? Fighting for gender justice in an increasingly unequal world

This chapter explores the connection between neoliberal macro-economic policies and access to SRHRJ services and information. It shows how trends in aid spending, economic inequality, austerity measures and debt are undermining our collective capacity to achieve global gender justice goals.

Official Development Assistance

Official Development Assistance (ODA) is an important mechanism for achieving SRHRJ, and the news here is not promising. Overall, ODA levels are 'stagnating',¹⁰³ with future cuts already announced by several major donors,¹⁰⁴ heightening risks to SRHRJ the world over. Additionally, aid is sometimes being used for the promotion of rich countries' domestic interests such as curbing migration,¹⁰⁵ instead of focusing on eradicating poverty and reducing inequality. There are also worrying trends of an increasing amount of development finance being channelled to fund private service provision. The building of for-profit hospitals, for instance, risks 'widening healthcare inequalities, exacerbating poverty and gender-based discrimination and violating human rights', with documented instances of patients being bankrupted or even imprisoned for unpaid bills.¹⁰⁶

The overall reductions and realignments in ODA also have implications on the quality and quantity of funding for gender equality. Total ODA to enhance the effectiveness, influence and sustainability of WROs in 2021-22 was USD 596 Million. Excluding ODA to support public sector institutions, mainly ministries of women and gender equality, this amount drops to USD 432 million in 2021-22.¹⁰⁷ According to Global Philanthropy Project, just three anti-LGBTI organizations received more funding in 2021-2022 than all 8,000+ LGBTI globally in the same time period.¹⁰⁸

The Global Gag Rule

Formally the Mexico City Policy but known widely as the Global Gag Rule (GGR), is a policy enacted under every US Republican President since Reagan in 1984 that bans US funding for foreign NGOs to provide abortion-related information or associated care.¹⁰⁹ In Trump's first term, the GGR was extended to a wider range of SRHR programmes and also affected funding for nutrition, malaria, water and sanitation, and infectious diseases.¹¹⁰ Partners of the Safe Abortion Action Fund (SAAF) working across the world in Latin America, Africa, the Middle East and Asia have all raised concerns about how a reinstated and expanded gag rule strengthens anti-rights and anti-abortion actors in their regions.¹¹¹

The reinstatement of the Global Gag Rule (GGR) forces healthcare providers to choose between essential funding and offering comprehensive care, including abortion services. As a result, millions—particularly women and girls in low-income countries—lose access to critical healthcare. The effects of this policy extend far beyond reproductive health, disrupting a wide range of services such as contraception, HIV prevention, gender-affirming care, and maternal healthcare. Many clinics worldwide may be forced to close due to funding shortages.¹¹²

In Trump's second term, funding to support gender justice is likely to shift even further away from supporting bodily autonomy and SRHRJ. The enactment of the Global Gag Rule (GGR) during his first term led to widespread funding cuts, including reductions to the UNFPA.¹¹³ Several governments and private philanthropists stepped in at that time to plug the expected \$600m funding gap created to the wider health portfolio by the enactment of the GGR. This saw the establishment of She Decides, a global advocacy movement to raise awareness of safe abortion and the need for bodily autonomy for all people of all genders.¹¹⁴ However, with ODA funding set to shrink further, it remains to be seen whether such an effort will materialise in response to the reinstatement of the GGR. There are some signs of hope, with the Nordic Council of Ministers reaffirming its commitment to the BPfA and other resolutions and to 'defending advancements already made on gender-equality and equal rights for LGBTIA+ people while pushing even further for continued progress'.¹¹⁵

Wealth inequality, debt and austerity

51% OF COUNTRIES

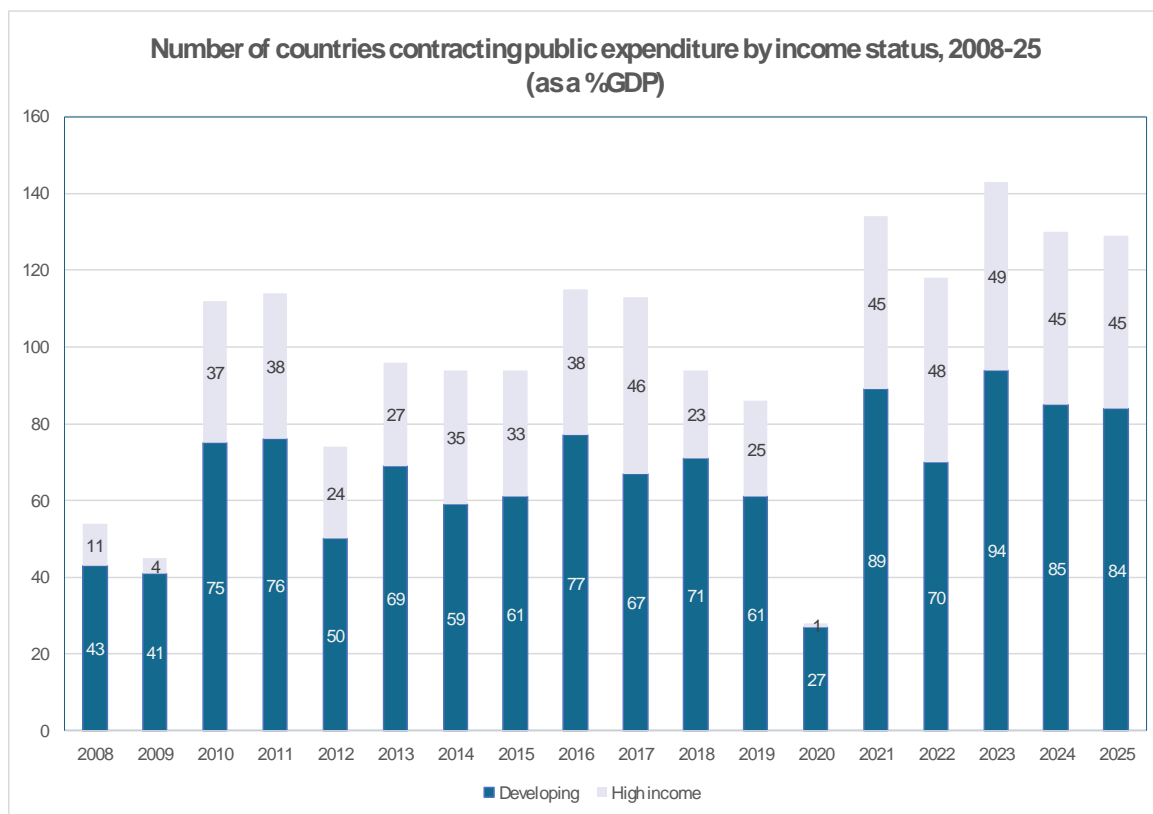
WITH SLASHED SOCIAL PROTECTION BUDGETS
OFFER LITTLE TO NO SUPPORT FOR MOTHERS
WITH NEWBORNS.



ODA is one very small part of a much wider, unequal macroeconomic picture.¹¹⁶ Global economic inequality is escalating, with billionaire wealth rising three times faster in 2024 than 2023; this is part of a wider systemic extraction of 'wealth from the Global South to the super-rich one percent in the Global North', estimated to be happening 'at a rate of US\$30m an hour.'¹¹⁷ This rampant inequality has implications for SRHRJ, because an important part of the anti-gender, funding in Europe originates from elites and rich individuals from Europe (including Russia) and the US. One study has found that there are at least 60 such elites in two categories: high-net-worth individuals and corporations, commonly known as the 'One Percent', and clerical-aristocratic networks, who are wealthy and influential people who organise their anti-gender activism around a set of specific religious views.¹¹⁸

Debt, and the choice of austerity as the principal policy response to this debt, are also key macroeconomic factors that drive gender inequality. Debt servicing diverts government funding away from essential public services, directly impacting areas critical to SRHRJ. In African countries, debt servicing is almost "22 times more than social spending and 236 times more than climate adaptation spending."¹¹⁹ The 2007–08 global financial crisis led to debt-related austerity measures across both Global North and Global South countries. Recent data suggests that the fiscal shock post-COVID-19 has been even more severe, triggering global contractions in public spending and deepening austerity.¹²⁰

Figure 1: Number of countries contracting expenditure by income status, 2008-25 (as a %GDP)¹²¹



Source: Ortiz and Cummins calculations based on the IMF’s World Economic Outlook (April 2022). All income classifications presented are based on World Bank fiscal year 2021

Caption: Trends in Austerity – The number of high-income and developing countries implementing austerity measures has increased significantly post-COVID-19, according to IMF data (2022). The Y-axis represents the number of countries, while the X-axis marks the timeline from 2008-2025.

The implications of sustained austerity are significant for SRHRJ. More than half of countries (51%) that have either cut their social protection budget or have very little social protection budget (below 15% of total government expenditure), have little or no social assistance to mothers with newborns.¹²²

An economic system propped up by care work

How can a system designed to be gender-unequal become more gender-just? The data is clear that the ‘economic cost’ of gender inequality is high; according to data compiled by UN Women: ‘Achieving equality could inject an additional US\$12 trillion into the global economy. Ending the digital gender divide could provide over US\$500bn. Closing gaps in skills could add US\$10 trillion more’.¹²³

Gender equality goals have been integrated into dominant economic models primarily through the concept of ‘smart economics’. Instead of

focusing on gender equality as a human right and therefore an end in itself, 'smart economics' centres the idea that cis-gender and heterosexual women and girls in their reproductive years are the 'conduits to achieving broader economic development objectives'.¹²⁴ This 'smart' approach instrumentalises the social, political and economic 'capital' of 'women and girls' to achieve broader objectives, including the SDGs or as a strategy to tackle global health, conflict and climate crises.¹²⁵

Yet without acknowledging how patriarchy and neoliberal capitalism create intersectional inequalities, simply integrating women into the economic system will not guarantee gender equality. Instead, the system continues to reproduce existing inequalities by design.¹²⁶ This systemic inequality is rooted in the 'gendering of work', and in particular the unequal distribution of care work, that remains both un/underpaid and undervalued.¹²⁷

The BPfA recognised that unpaid care work is integral to the economic system and needed 'rebalancing'. In pursuing austerity policies, states are weakening their capacity to provide basic social services, disproportionately affecting women who are expected to fill the resultant care work gaps.¹²⁸ Efforts to address unequal care responsibilities—such as workplace policies—often help women navigate the existing system. However, these policies are unevenly applied, monitored, and enforced, with little focus on undervalued or unpaid care work.¹²⁹

In October 2024, the ILO published research suggesting that across 125 countries, unpaid care responsibilities resulted in around 708 million women worldwide being excluded from the labour force.¹³⁰ Care work is also distributed unevenly amongst women in ways that reflect prevailing race and class inequalities. The gendered labour of wealthier women is frequently displaced on to poorer, racialized women in a range of contexts¹³¹, with these forms of unpaid work representing a massive wealth transfer from the poorest to the richest:

Racialized women living in poverty, especially those in the Global South, continue to subsidize the global economy. Each day, women contribute an estimated 12.5 billion hours of unpaid care work, adding at least US\$10.8 trillion in value to the global economy; the economic contribution of their care work is three times the financial value of the global tech industry.¹³²

The question of who is responsible for care is increasingly pertinent as social spending drops, while demographic shifts will lead to a surge in demand for care globally.¹³³ Public service provision is one of the most direct ways politics and financing impacts people's daily lives. When states fail to allocate adequate resources or recognise care as a public service and a human right, gendered inequalities deepen. Women, trans, and non-binary people—especially those from marginalised communities—bear the brunt of this exploitation.

ONE IN THREE WOMEN

LIVES IN COUNTRIES THAT DO NOT PROHIBIT THE
DISMISSAL OF PREGNANT WOMEN WORKERS.



Yet over the past three decades, the idea of the heterosexual 'nuclear family' as 'natural' persists, upholding gendered and racist economic systems.¹³⁴ As pressure to respond to economic crisis with austerity measures including cuts to social services intensifies, this will further entrench patriarchal gender roles where waged and valued labour is undertaken by men outside the home, while unpaid, domestic and undervalued labour continues to be taken up disproportionately by women, undermining attempts to achieve gender justice. 'Smart economics' does little to challenge a neoliberal status quo that continues to invest in private service provision, that increasingly relies on women to fill the care labour gap, that risks exacerbating gender inequality.

Unless we rethink how we value care and its relationship to both SRHRJ and bodily autonomy, the gender inequalities this system continually reproduces will remain intact. What is clear is that a new social contract between state and people is urgently needed – one that centres care and the redistribution of resources and power through transformative gender just policies. Only then is the realisation of SRHRJ, bodily autonomy and gender justice possible.

Chapter 3: Threats to SRHRJ and bodily autonomy from growing anti-rights movements

Exploiting crisis and instability to spread anti-rights narratives

Anti-rights actors are capitalising on the collapsing social contract and the resulting sense of crisis to orient policy attention and resource towards a reassertion of the racist and sexist profit-driven system that favours the wealthy, privileges men, and disadvantages women and LGBTQIA+ people under the guise of protecting 'traditional' family values.

These right-wing, ultra-conservative actors, whose beliefs are rooted in colonial and religious fundamentalist doctrines, increasingly portray CSE and LGBTQIA+ rights as somehow in opposition to aspirations of economic growth and sustainable development. Particularly in the wake of the 2007-08 financial crisis, anti-rights actors have built highly professional information platforms to disseminate the so-called 'common sense' idea that the most effective response to persistent crises is to reassert the cis-gender and heteronormative ideas of 'natural' or 'traditional' family.¹³⁵ Meanwhile anti-rights actors are simultaneously provoking 'hostility against marginalised groups, Muslims, migrants, queer and trans people' by framing these communities as 'threats' against these so-called 'traditional' ideals.¹³⁶

"There is a strengthening of the political, ideological, and transnational network of actors that reproduce [anti-rights] narratives. We can find a common thread in their narratives with transnational networks where economic, extractive, and neoliberal interests converge. The "SRHR arena" is a key node mobilizing their social base. There is a political project articulated around sexuality—regulating sexuality involves controlling bodies and subjectivities, determining what can be legitimized within a rights framework."

Ipas LAC¹³⁷

Under this pretence of 'defending women',¹³⁸ Donald Trump's January 2025 inauguration was immediately followed by Executive Orders

(re)asserting the primacy of the gender binary, ending Diversity, Equity and Inclusion (DEI) initiatives within federal government departments, and removing government websites that provided information on abortion access, birth control, and HIV screenings.¹³⁹ Alongside the GGR, this reflects what one academic has called 'a time-tested and well-developed tactic by Far Right, conservative elites, and religious fundamentalist groups to de-contextualise and appropriate feminist ideas for anti-feminist gains'.¹⁴⁰

Who are the anti-rights movements? Who funds them?¹⁴¹

Anti-rights movements comprise a range of actors that convene in national, regional and multilateral settings in ways that cut across North-South divides. Organisations such as the International Organization for the Family (IOF), the American Centre for Law and Justice (ACLJ), Ordo Iuris, Family Watch International and CitizenGo are all based in the Global North but have extensive partnerships and operations across the Global South. The primary funders are right-wing, religious organisations representing Evangelical, Orthodox, and Catholic strands of Christianity based in the US, Russia, and the EU. These groups are also building coalitions with regional organisations, such as the Organization of Islamic Cooperation. Together they fund think-tanks, media and multilateral engagement to promote anti-rights ideas in diverse mainstream spaces.

Even more alarming is the extent to which the anti-rights movement appeals to the mainstream by successfully couching its ideas in co-opted human rights language. For example, the showcase document often held up by the anti-abortion, and anti-rights lobby is the non-binding Geneva Consensus Declaration (GCD), a document in the style of an international treaty that claims commitments to 'Promoting Women's Health and Strengthening the Family', with 42 signatory countries.¹⁴² Countries are lobbied to sign the GCD by the Institute for Women's Health (IWH), an anti-gender, anti-abortion think-tank. Ipas, an INGO working for reproductive justice, argues that the IWH has an 'anti-SRHR, anti-LGBTQI+ worldview', and through gaining signatories for the GCD, ultimately aims to 'supplant the work of organisations, including the UN agencies, in the areas of health, education, among others'.¹⁴³



Source: UNFPA 2024 study of 153 countries.

The IWH also draws on the co-optation of language of ‘advocacy for women’ and ‘research to support health policy’ to lend a professional, progressive veneer to its messaging that aligns with mainstream discourses on women’s rights.¹⁴⁴ Anti-rights actors combine this progressive veneer with selective data used to draw conclusions in favour of the policy priorities of anti-rights movements and actors, notably in relation to positions against LGBTQIA+ rights, women’s rights and bodily autonomy.¹⁴⁵ What emerges is an anti-rights narrative that promotes the ‘protection’ of current and future generations by strengthening patriarchal, heteronormative, nuclear families, with women playing their part in ‘protecting the nation’ through their role in the home.¹⁴⁶

Anti-colonial frames are also being co-opted to suggest that the support of SRHRJ, bodily autonomy and even gender equality, work against the ‘cultural and religious’ norms of a homogenised ‘Global South’. For example, the US-based right-wing Population Research Institute claim that: “Backed by a handful of wealthy European and Western nations, philanthropists and corporations, a small cabal of well-funded activists operating through the United Nations system is pushing for a narrow set of progressive views that are anathema to the cultural and religious values held by most of the developing world.”¹⁴⁷

Digital Danger: How social media algorithms push anti-rights narratives and radicalise men and boys

Social media is enabling hyper-masculine influencers within the ‘manosphere’—a network of websites, blogs, and online forums that promote misogyny and oppose feminism¹⁴⁸—allowing them to spread anti-rights content, particularly among younger audiences. Research in the UK found that ‘boys aged 11-14 are exposed to harmful content within 30 minutes of being online and one-in-10 are seeing it in as little as 60 seconds’, with AI algorithms pushing such content even when it is not actively sought.¹⁴⁹ The challenge is that as more men and boys engage with misogynistic, anti-feminist, and anti-rights content, intentionally or not, platform algorithms, as the above study notes, serves more of that content to users with similar demographic profiles. Because clicks and engagement are the primary metric of social media success and profit, there are few incentives for technology companies to clamp down on this harmful content.

Digital technology: a double-edged sword

The BPfA recognised that media and communications had a role to play in promoting women’s rights and gender equality. Since its ratification, we have moved squarely into a digital age, with digital technologies enabling women, girls and LGBTQIA+ people throughout the world to connect, organise, learn and take meaningful action to change their circumstances and pursue greater equality, opportunity, safety and security. Digital technology has, to a significant extent, also afforded greater access to safe and reliable information about sexual health and reproductive care, though concerns about the accuracy and quality of information across social media persist.¹⁵⁰

However, this increased visibility has come with risks. Technology-facilitated violence is on the rise globally, with a chilling effect on free speech, activism and real-world violence. The Center for Countering Digital Hate and MSI Reproductive Choices note that ‘...social media and ad platforms are hindering efforts to promote accurate information about reproductive health around the world, taken from health providers on the ground ... platforms are facilitating the spread of misinformation about reproductive health for profit.’¹⁵¹

Anti-rights ideas are also being disseminated amongst younger people through politician engagement in social media. In France 28-year-old Jordan Bardella, who is the far-right’s candidate for Prime Minister, uses TikTok to share personal messages with his 1.7 million followers directly. He is credited with a crafted ‘authenticity’, and whilst it is a challenge to determine the impact of social media engagement, ‘one quarter of

French voters aged 18-24 backed the RN [National Rally] in the European election'.¹⁵² This type of 'authentic' social media interaction is integral to the accessibility of the anti-immigration, anti-rights and anti-abortion views that are part of the "common-sense" of the far-right.

The extent to which younger demographics are moving towards support for the far-right has received considerable attention.¹⁵³ There is a particular concern with the increasing attractiveness of the far-right to young men, for example many young men in Asia celebrating the return of a Trump presidency – widely seen as hostile to feminist values and policies – as a 'victory against anti-male sentiment'.¹⁵⁴ Recent data points to a rise 'in the predicted probability of voting for the far right' across the EU, with increases in support for the far-right visible amongst both men and women, but with the data nonetheless highlighting that 'young men have indeed developed a higher affinity for the far right that has not yet translated into vote choice'.¹⁵⁵ Other surveys are pointing to an uptick in the related idea that 'feminism' is at the root of society's ills, and that 'feminism does more harm than good'.¹⁵⁶ Still other research suggests a growing divide between the values of men that appear to be moving more conservative or rightwards, compared to those of women, who retain more progressive beliefs.¹⁵⁷ The most recent Eurobarometer survey on 'gender stereotypes' actually reveals a slightly contradictory picture. On the one hand, the headline data is quite positive, with three-quarters of respondents agreeing that 'men would also benefit from equality between women and men', whilst the survey also reveals that 45% agreed and 48% disagreed that feminism has "gone too far".¹⁵⁸ Though here again, the data does demonstrate a fairly consistent picture that it is men who are more likely to agree that 'feminism has gone too far' (52% vs 39%) and 'less likely to agree that they would also benefit from gender equality (73% vs 78%)'.¹⁵⁹

The Global Digital Compact¹⁶⁰ commits to addressing the gendered digital divide and tackle sexual and gender-based digital violence. This and similar initiatives are to be welcomed, but more must be done both on- and offline to pursue laws, regulations and policies that increase opportunity and safety while challenging anti-feminist, anti-rights, and patriarchal narratives.

Chapter 4: Conclusion – Rebuilding the social contract for a feminist future

As the world comes together to commemorate the 30th anniversary of the Beijing Declaration and Platform for Action, it is all too clear that the promises enshrined in the BPfA are yet to be fulfilled. However, this is no time to despair. Instead, we can take inspiration from the collective action that brought feminists together in Beijing – celebrating and learning from the wins and coming together to challenge the mainstreaming of anti-rights agendas that risk setting back progress on SRHRJ and the recognition of bodily autonomy. We need to pave the way for a feminist social contract that centres accountability to women, trans, non-binary people, and marginalised groups – one that recognises care as both a human right and a public good.

States, civil society and the private sector need to collaborate more to promote policies that uphold everyone's fundamental rights to make decisions about their own bodies, especially women, trans, and non-binary people. Every person deserves access to safe, effective, comprehensive healthcare, free at the point of use. Oxfam will continue calling for social investment that supports gender justice as foundational to social protection systems.

Our aim is to support the momentum of and unite in solidarity with feminist and queer movements that are leading the pushback against anti-rights movements and advocating for changes in policies and practices to promote gender justice and human rights for all. Everyone should have access to SRHRJ, complete control over their own body, and life choices. This includes being able to decide who to be with, what path to take in life, and planning for the future without fear.

A whole system shake up is needed to dismantle the oppressive norms that have historically dictated the lives and freedoms of entire groups of people and replace them with a feminist, anti-racist culture that values justice and equality. To achieve this multi-system reset, states must re-energise the pursuit of advancing gender justice and recommit to a feminist social contract.

Upholding and promoting bodily autonomy and SRHRJ as fundamental human rights

Women, girls, and people of diverse SOGIESC must have full autonomy over their lives and bodies for improved health and education outcomes, as well as their freedom to participate in all aspects of economic life.

States must ensure:

- All people, including in emergency settings, have universal access to comprehensive sexual and reproductive health (SRH) services, including voluntary family planning and contraceptive methods including emergency contraceptive, and safe abortion and post-abortion care. These services must be free from parental or spousal consent requirements, as well as from judgment, discrimination, coercion, exploitation, and violence.
- The decriminalization of abortion, the abolishment of all legal and administrative barriers to safe, and the expansion of high quality, comprehensive safe abortion and post abortion care services, in both emergency and non-emergency settings.
- Laws, policies and practices that criminalize or discriminate consensual sex between adults are repealed, and that these rights are explicitly incorporated into national-level legal protections for people of diverse SOGIESC.
- Universal human rights are respected, protected, and fulfilled, ensuring that references to 'traditional values', 'culture', or 'protection of the family' are not used to justify human rights violations and discrimination.
- Policies and programmes that challenge and eradicate discriminatory and harmful social and gender norms and stereotypes, as these taboos limit our social imaginaries in ways that perpetuate the feminisation of care labour.

Enshrining protection in law is crucial for the fulfilment of gender-just SRHRJ and bodily autonomy.

Strengthen the feminist social contract and end austerity

Austerity is a political choice that is neither necessary nor inevitable. It weakens economic, political and social settlements by dismantling the social contract on which we depend.

- Tax the super-rich and democratize international taxation. Governments should engage constructively in the ongoing negotiations for an ambitious UN framework convention on international tax cooperation, based on gender and human rights principles. Governments should enact domestic and international reforms to tax the income and wealth of the super-rich at high enough rates to bring down inequality and raise billions needed to fund more just societies.
- International financial institutions and governments should cancel unsustainable debts of low and middle-income countries, which will free up financial resources to invest in social protection and universal public services, alongside other gender transformative policies.¹⁶¹
- Governments should end austerity measures and instead put in place progressive revenue-raising measures to strengthen social contracts, which will have positive effects on gender equality and the rebalancing of care work.
- Rather than resorting to harmful budget cuts to generate funds, IFIs, and governments should endorse wealth taxation and other alternative, redistributive policy measures, to build a more just and equitable society.
- Universal access to comprehensive sexuality education (CSE) that is aligned with international standards and consistent with young people's evolving capacities, including content on gendered power dynamics that equips learners with negotiation skills within relationships, and expressing and respecting boundaries that enables safer, consensual, and pleasurable sex.

By rejecting austerity and pursuing more progressive wealth taxation, including on wealth, the resultant revenues could be instrumental as a tool for achieving SRHRJ and reducing inequality, allowing investments in universal social protection and robust public services, and ensuring that SRHRJ is not just an aspiration but a reality.

Recognise care as a right and as a public good

The global economy has long relied on the undervalued and unpaid labour of women, particularly those from the Global South, reinforcing racialized and gendered inequalities. States must recognize care as a public good, a human right, and a cornerstone of SRHRJ:

- Governments must shift to a feminist caring economy that increases investments in free, universal, gender transformative, and public infrastructure and services that are publicly funded, anchored on rights, and free from privatization.

- Public goods such as education and health should be governed in the public interest, through a gender-responsive approach, and be predominantly owned and delivered by the public sector. Governments need to work with civil society and the private sector within a single, integrated public system.
- SRHRJ services—including contraception, abortion care, maternal health, and gender-affirming care— must be fully integrated into comprehensive healthcare systems to ensure accessible, high-quality care for all, free from financial and systemic barriers.
- A decolonial, feminist approach to SRHRJ and bodily autonomy must dismantle patriarchal, colonial, and neoliberal structures while centring community-led knowledge, indigenous practices, and feminist movements in decision-making, whilst accounting for colonial continuities, including policies and interventions designed to address differential SRHRJ outcomes for racialised and gender non-conforming groups.
- Public health services must be culturally sensitive, gender-affirming, trauma-informed, inclusive, and truly accessible to all, particularly those historically excluded from healthcare systems.
- Ensure dignified work and social protection for women, non-binary people, and the most marginalised groups in formal, informal, paid and unpaid work.
- States should uphold ILO labour standards as essential to ensuring economic and social justice, particularly for those in the informal and care economies. Strengthening freedom of association and collective bargaining rights for care workers, promoting effective participation in social dialogue processes.
- All actors must consider gender-transformative regulation strategies that integrate SRHRJ into labour policies, trade agreements, and investment frameworks to build an economy rooted in dignity, equity, and workers' rights.

Strengthen and resource feminist and queer organisations and movements

Feminist and queer organisations and movements have demonstrated time and again that they are best placed to challenge states that break the social contract by not respecting, protecting, and promoting bodily autonomy and SRHRJ. Funding, including through ODA should be prioritised to ensure that feminist and queer organisations are able to hold governments accountable, and to collaborate and promote good practice in supporting and protecting SRHRJ and bodily autonomy. To this end, governments and other actors should:

- Immediately make multi-year, flexible funding available to

organisations working on bodily autonomy and SRHRJ.

- Include feminist and queer organisations in decision-making spaces and increase the equal and meaningful representation of women in the planning and delivery of services.
- Monitor, measure, and publicly report on the impact of all aid on gender equality with a focus on measuring transformative shifts.
- Protect and expand public and civic space by removing any laws or measures that arbitrarily restrict freedom of expression, association and peaceful assembly, and ensure that individuals and groups dedicated to the protection and promotion of SRHRJ can carry out their work in an enabling environment.
- Condemn and take immediate steps to stop violence against women, trans, and non-binary human rights defenders working on bodily autonomy and SRHRJ and commit to bringing those responsible to justice.
- Unite in solidarity with feminist and queer movements holding the line and resist anti-rights actions that seek to roll back SRHRJ, bodily autonomy and gender justice.

Notes

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- ³ D. Perrons. (2017). 'Gender and Inequality: Austerity and Alternatives'. *Intereconomics* 52, 28–33. Accessed 25 February 2025. <https://link.springer.com/article/10.1007/s10272-017-0639-x>
- ⁴ H. McEwen and L. Narayanaswamy. (2023). *The International Anti-Gender Movement Understanding the Rise of Anti-Gender Discourses in the Context of Development, Human Rights and Social Protection*. Geneva: UNRISD. Accessed 25 February 2025. <https://cdn.unrisd.org/assets/library/papers/pdf-files/2023/wp-2023-4-anti-gender-movement.pdf>
- ⁵ 'Heteronormative' simply refers to cultural and social practices that support the notion that heterosexuality is the only legitimate sexual orientation. These terms refer to the positioning of heterosexuality as the only way of being 'normal' and as a source of social reward. H. Wishart. (2023). *Inclusive Language Guide*. Oxford: Oxfam GB for Oxfam International. Accessed 25 February 2025. <https://policy-practice.oxfam.org/resources/inclusive-language-guide-621487/>
- ⁶ E. Miolene (30 January 2025). *Scoop: US government issues guidelines on 'defending women'*. *Devex News*. Accessed 25 February 2025. <https://www.devex.com/news/scoop-us-government-issues-guidelines-on-defending-women-109227>; As Holzberg notes: 'What makes the misogyny of this ideology so insidious is that it works through the discourse of saving rather than attacking women. The problem is not that women are inherently devious but that they have been confused and misled by feminists—away from their destiny as good wives and mothers and into non-reproductive lifestyles or even worse queer and trans communities that threaten the haven of the heteronormative family. This saviourism is confined to white women who are framed as in need of defence from the corrupting forces that dare to critique the naturalised sex/gender system of heteronormative whiteness.' In B. Holzberg. (2024) 'The Great Replacement Ideology as Anti-Gender Politics: Affect, White Terror, and Reproductive Racism in Germany and Beyond'. in A. Holvikivi, B. Holzberg and T. Ojeda (eds). *Transnational Anti-Gender Politics Feminist Solidarity in Times of Global Attacks*. London: Palgrave Macmillan, 183-202. In reality these approaches do the opposite, please see ILGA World. (23 January 2025).
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