KEEPING THE CONNECTIONS IN 2004

With its focus on sexuality, health, and human rights, this issue of Health and Human Rights grew out of the need to deepen our understanding of the links between these categories as well as to respond to the specific challenges of promoting and protecting sexual and reproductive rights.

This year marks 10 years since the Cairo Conference delineated the many components understood to be key elements of “sexual and reproductive health,” and yet we find ourselves still working to clarify these issues and even arguing for their very existence. Positive attention to sexuality, including the freedom to control one’s health and body, are critical to physical, mental, and social well-being and are at the heart of rights-based approaches to health. Increasingly, however, naysayers in both political and academic circles are decrying a lack of clarity about what these concepts mean or how they can actually be implemented. Most worrisome is a call “to get back to business”—as though the past decade of work and attention to sexual rights itself have, rather than advancing the field, stalled progress or even caused harm.

As is always the case, sexuality, and particularly concerns around the various dimensions and implications of accepting diverse forms and practices of sexuality, are at the core of these regressive policies and academic discussions. On the policy side, one need only consider the U.S. administration’s insistence that HIV/AIDS prevention messages focus less on the use of condoms and more on abstinence,
chastity, and marriage; and on this basis barring access to needed reproductive and sexual health information and commodities not only for people in the U.S. but also outside. In the population field, those always uncomfortable with the broader reproductive health agenda are increasingly calling for an end to reproductive and sexual health as they were defined in the Cairo consensus, and a return to the more familiar terrain of family planning. Whether these objections stem from anxiety that these concepts go beyond their disciplinary constructs, or the belief that work in this area is not a valid focus for the public health community, these examples nonetheless signal a worrisome trend.

In hindsight, it is clear that those of us who support the Cairo agenda did not take the time to sufficiently gather and present the evidence of its value in terms that would compel traditional structures and institutions. What seemed so self-evident led to an assumption that the energy put into the hard-won consensus could now be directed elsewhere; but it is abundantly apparent that we need to take every opportunity to draw attention to the advances that have occurred over the past decade in the conceptual thinking and practical application of these concepts. This is true not only for the potential these insights offer for responding to the increasing political and ideological challenges, but also because of the ways those of us engaged with these concerns are grappling with the increasing complexity of taking this work forward.

The answer was thus obvious when Alice Miller and Carole Vance, both at the forefront of advancing the thinking in this area, proposed revisiting the ways in which sexuality and rights have evolved in the last 10 years. I am pleased that we could work together to edit this special issue of Health and Human Rights, and I am grateful to them for their insight and contribution.

We present a range of articles highlighting efforts at the global level as well as within countries that demonstrate not only the positive impacts that this attention can make to health and rights more broadly but also the negative impacts that can result from insufficient or inappropriate
attention to the diversity of sexuality in policy and programming efforts. Taken as a whole, these pieces shed light, from all four corners of the globe, on the conceptual, programmatic, and operational intersections between sexuality, health, and human rights. While not the final word, it is my hope that this special issue can help clarify not only the fundamental importance of these connections but also the tremendous good that the work of the past 10 years has achieved for sexual and reproductive health and rights—and why it is that we can never go back.

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