# Call for Abstracts Studies in Family Planning Special Issue

Post ICPD 30 towards the 2030 Agenda and beyond: future-proofing sexual and reproductive health, rights and justice.

April 2024

### Background:

The 1994 International Conference on Population and Development (ICPD) Programme of Action (PoA) is widely considered a watershed moment in the establishment of a global consensus on sexual and reproductive health and rights (SRHR). The ICPD PoA explicitly established sexual and reproductive health and rights and gender equality as preconditions for sustainable development as part of the larger Cairo Consensus. The ICPD PoA, as a global development and human rights agenda, discouraged target-based population policies and affirmed an integrated multi-sectoral approach to development centred on human rights, non-discrimination, and inclusive development. Subsequently, the Millennium Development Goals and the 2030 Agenda for Sustainable Development integrated many goals and objectives of the ICPD PoA. Yet things have changed, and we live in a time of changing demographic trends, climate change, and concerted political opposition to gender equality and SRHR.

Regular intergovernmental dialogues every five years have reaffirmed our global commitment to universal access to sexual and reproductive health and the active promotion and protection of sexual and reproductive health and rights. These forums have reiterated and re-emphasised the paradigm shift in the design, implementation and assessment of national and global population and health policies, programmes and services. The five-year reviews have reported progress around the world and have shown real and substantial gains in health, empowerment, and gender equity, which should be celebrated. Yet much of the ICPD agenda remains unfinished, particularly for women and girls. Sexual and reproductive health issues constitute around a third of the total global burden of disease for women aged between 15 and 44, and violence against women and girls remains high worldwide. Progress has been uneven, with persistent inequalities between and within countries, particularly among marginalized and historically disadvantaged groups. The outright abuses of human rights related to sex, sexuality and reproduction, especially among women and girls, have evolved and endured.

In recent years, there has been critical reflection on the implicit assumptions underpinning ICPD and the 2030 Agenda and how they have been operationalised. To date, most policy and programmatic efforts are tailored towards heterosexual, cis-gendered women of reproductive age; consequently, adolescents and older women, persons with diverse sexual orientations and gender identity and/or expression, and people with disabilities are among the groups that are often left out. Vertical funding and interventions remain the norm over the more holistic approach. Certain areas of ICPD have garnered more attention than others; for instance, the intense interest in maternal health and contraceptive care has far exceeded the level of attention given to infertility, despite evidence repeatedly demonstrating the medical and social consequences of infertility. More worrying, gender equity and SRHR have become new fault lines for geopolitics that have spurred outright resistance and ideological attacks against gender equality, sexuality and reproduction; these shifts have not only diverted attention away from universal access to SRHR but have actively worked to undermine and roll back important gains that have been made.

#### The Call for a Special Issue:

In commemoration of the 30th anniversary of the ICPD PoA and with a view to the 2030 Agenda, *Studies in Family Planning* is announcing a call for papers for a Special Issue that

will be devoted to reflecting on why ICPD remains relevant today, particularly on (1) the progress that has been made towards achieving the ICPD PoA and Agenda 2030; 2) the challenges that remain and why the ICPD remains an unfinished agenda, and (3) how we can future proof the ICDP agenda for the post-2030 period and beyond.

We welcome submissions from a range of contexts and on a variety of topics, which can be broadly classified into the following two themes:

### 1. Critical reflections of the past 30 years, which may include:

- Reflections on the progress and gaps in achieving ICPD PoA, including critical assessments of the ICPD@30 process and priorities.
- The place of quantitative goals in the era of rights-based family planning and calls for reflections on areas that continue to be controversial (e.g. adolescent sexuality and safe abortion) or neglected (e.g. infertility).
- Reflections on what is constraining the progression of the ICPD agenda, such as the focus on quantitative targets and the instrumentalization of SRHR; the implicit colonial legacies (e.g. focus on LMICs), and the general lack of political priority given to SRHR.
- Broader conceptual analyses that speak to how research and the global evidence base in SRHR have evolved over the last 30 years, from demographic methods to feministcentred approaches.
- Success stories in different contexts and geographies, highlighting the enabling factors that supported change.
- The examination of the role of global, regional, and national partnerships and political commitments (e.g. FP2020, FP2030, Ouagadougou Partnership, PMNCH etc) and how these arrangements have been implemented.

## 2. Looking forward to the next 30 years, which may include:

- The examination of new challenges, ranging from resistance and ideological attacks against gender equality and sexuality, lack of political will, and funding reductions for sexual and reproductive health.
- Reflections on new models and approaches of SRHR (e.g. person-centred, rights-based approaches, reproductive justice), how can these be operationalized in programs and measurements to align with a decolonised global health agenda.
- Analyses of future research and data approaches in family planning and SRHR, (e.g. big data, AI, and machine learning methods) and their relevance and applications to family planning and SRHR research and policy.
- Recognizing emerging trends, such as low and declining fertility, intersectionality, personalised medicine, and SRHR in the context of poly-crises, particularly climate change, and barriers to progress that the field continues to experience.
- Reflections on what the field's future goals and aspirations should look like, the values should the field should aspire to uphold, and how these values should inform policy and practice. What kind of partnerships and resources are needed going forward to support these values and acheive these goals.

#### **Submission Details and Timeline:**

We welcome contributions of four types: commentaries, theoretical considerations, data reports, and original research articles. We ask for submissions to be **extended abstracts of at least 2 pages but no more than 5 pages** in the main body, excluding references, figures, and tables. Extended abstracts should specify whether the authors envision submitting a commentary, theoretical perspective, report, or original research article. Extended abstracts will be reviewed based on their relevance to one or both of the key themes highlighted above.

Please send abstracts by May 24, 2024, to Rachel Friedman, Senior Managing Editor, at: rfriedman@popcouncil.org. Authors will be notified by June 7, 2024, whether a full paper

will be invited for submission. The deadline for full papers to be submitted to *Studies* for review is **September 13, 2024**. All submissions will be reviewed through the *Studies*' double-blind peer review process.

# Proposed Timeline

Distribute Call for Papers	April 10, 2024
Extended abstract deadline	May 24, 2024
Invitation for full papers	June 7, 2024
Submission deadline for full papers	September 13, 2024
Deadline for first review of full papers	November 15, 2024
Deadline for all revisions, final papers due	January 31, 2025
Production and publication for March 2025 issue	February 28, 2025