NR33 / Decolonising Sexual and Reproductive Health in the Global South

Topic : Research

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GENERAL OBJECTIVES, RESEARCH QUESTIONS AND SCIENTIFIC RELEVANCE

This panel aims to critically interrogate Sexual and Reproductive Health (SRH) as a site of public policy praxis in India and the wider Global South. The primary objective is to move the discourse beyond technocratic, biomedical models of service delivery toward a framework grounded in reproductive justice and decolonial thought. We seek to start a dialogue that examines how historical power dynamics, colonial legacies, and contemporary geopolitics of development aid and global health governance shape law, policy, and on-the-ground implementation of SRH.

By centering the experiences and agency of marginalized communities, frontline practitioners, and social movements, the panel will showcase alternative approaches to SRH that prioritize bodily autonomy, equity, and justice. A key objective is to bridge the gap between critical academic theory and the lived realities of policy practice, building capacity for a more reflective, context-sensitive, and justice-oriented SRH praxis. The panel ultimately seeks to generate actionable insights for policymakers, administrators, and practitioners working to transform SRH systems in ways that respect diversity, honor local knowledge, and challenge structural inequalities.

The panel invites contributions that grapple with a range of theoretical, empirical, and methodological questions:

1) How do colonial-era logics of population control, eugenics, and social engineering continue to manifest in contemporary SRH laws, policies, and state-led programs in India and other postcolonial contexts?
2) What forms of "policy praxis" are being forged by grassroots movements, community health workers, traditional birth attendants, and civil society actors to challenge top-down SRH frameworks and advance reproductive justice?
3) How do legal frameworks in India, such as the Medical Termination of Pregnancy (MTP) Act, the Surrogacy (Regulation) Act, or the Transgender Persons (Protection of Rights) Act, interact with social norms, bureaucratic practices, and administrative discretion to either enable or constrain reproductive autonomy?
4) How do intersecting identities (caste, class, religion, sexuality, gender identity, disability, indigeneity) shape access to and experiences of SRH services and rights?
5) What new theoretical vocabularies, conceptual frameworks, and research methodologies are required to adequately capture the complexities of SRH as a site of political struggle, care work, and decolonial resistance in the Global South?

This panel contributes to a critical and emergent turn in public policy, global health, and socio-legal studies. It responds directly to the conference theme by examining how to build 'coherence and capacity' for SRH policy that is historically informed, justice-oriented, and responsive to local contexts. The panel challenges universalist assumptions often embedded in global health policy, arguing that insights generated from the specific context of India offer significant theoretical contributions to global debates on decolonisation, development, and health governance.

By bringing together diverse disciplinary perspectives, from law and public policy to sociology, anthropology, gender studies, and public health, the panel aims to produce a more integrated and nuanced understanding of policy praxis. The insights generated will be relevant for academics seeking to decolonize their research, practitioners designing more equitable health interventions, and policymakers grappling with the ethical, political, and administrative dimensions of SRH governance.

CALL FOR PAPERS

This panel invites scholars, practitioners, legal experts, and activists to submit papers that critically examine the policy and praxis of Sexual and Reproductive Health (SRH) in India and the Global South through a decolonial and reproductive justice lens. We seek contributions that move beyond conventional analyses of

policy effectiveness to explore the deeper politics, histories, power relations, and knowledge systems that shape SRH.

We welcome papers from a range of disciplinary backgrounds and are particularly interested in:

1. Papers that develop new conceptual frameworks for understanding SRH as a decolonial project, critique existing paradigms in public health and development, or theorize the relationship between reproductive justice and other justice movements.

2. We invite both qualitative and quantitative studies, including ethnographic research on community-led health initiatives, participatory action research, discourse analyses of policy documents, case studies of policy implementation and resistance, statistical analyses of health disparities that adopt a critical lens, or analyses of social movements advocating for reproductive justice.

3. Contributions that reflect on challenges and innovations in researching sensitive and politically charged topics related to SRH, particularly those employing participatory, feminist, or decolonizing methodologies.

4. We strongly encourage submissions from practitioners offering reflective case studies, field notes, or analyses of specific interventions that highlight lessons learned, challenges faced, and pathways toward more just SRH praxis.

Topics include, but are not limited to: the politics of abortion and contraception access; caste, class, and religious dynamics in SRH service delivery; LGBTQIA+ health and rights; maternal health and midwifery; sex work and health; adolescent sexual health; the impact of digital technologies on reproductive autonomy; forced sterilization and population control; assisted reproductive technologies and commercialization; the intersection of climate change and reproductive justice; and the role of traditional and indigenous knowledge systems in reproductive health.

The panel aims to create a vibrant space for rigorous, critical, and transformative conversations that build coherence and capacity for addressing future SRH challenges through a justice-oriented lens.