## Report on the Secondment of the Project Officer on Human Dignity and Reproductive Health at the World Council of Churches (WCC)

Alexa Dava • April 10, 2024

#### **Secondment Overview**

Since October, I have been doing extensive research with the goal of publishing a framework on reproductive health issues in July. I am drafting an outline for this framework and beginning to receive input on it from colleagues and WCC member churches. In February and March, I travelled to Geneva and New York. These trips solidified this program in the WCC and sharpened my understanding of reproductive health within the global health agenda. In the next few months I will focus on publishing the theological framework and continue establishing this program as it relates to the broader work of the WCC.

### **Summary of November-March**

- Commission on Health and Healing: In October and November, the WCC convened its first meetings of the new Commission on Health and Healing. This Commission is an instrument for the WCC member churches' deeper engagement on health issues. In these meetings, the commission voted on specific priorities and formed working groups based on such priorities. In February, these working groups met separately online to learn about existing WCC work on their respective areas. For my part, I contributed to the meeting agendas and worked with the new moderator to facilitate meeting outcomes. In March, the Commission met in-person in Geneva, along with two other new Commissions, to become up-to-date on the WCC's latest programming and to draft work plans for the upcoming term.<sup>1</sup> While there are overlaps with reproductive health across all the working group topics, I will work directly with the working group on HIV and Reproductive Health. During the in-person Commission meetings, the WCC Programme Executive for HIV/AIDS and I met extensively with our working group to define priorities and plans.
- **Staff Planning Days:** In February, I attended the semi-annual staff planning days in Geneva. The most relevant outcome of this week for my role was the naming of the Director of the Commission on Health and Healing and the official convening of the WCC's new Health and Healing program staff. Just before Staff Planning Days, the WCC partnered with the Canadian Council of Churches and the Evangelical Lutheran Church of America to add two more staff secondments to Health and Healing (one will work 50% on mental health and 50% on disability advocacy, and the other is staffed part time to work on issues of faith and science). This week provided the opportunity to meet as a new team in-person.
- Commission on the Status of Women (CSW68) at the United Nations: In March, I travelled to New York as part of the WCC delegation to the Commission on the Status of Women, the UN's annual event for gender justice. There, I learned how UN Systems engage such issues, attending both UN plenaries and a range of NGO parallel events on sexual and reproductive health. I connected with folks working on issues related to gender justice and

<sup>&</sup>lt;sup>1</sup> https://www.oikoumene.org/news/three-wcc-commissions-close-historic-meeting-expressing-hope-in-future-work

religion, specifically within the Ecumenical Women's Network, and I joined the WCC delegation in meetings with the governments of Norway and Cuba. I also co-hosted the WCC's parallel event focusing on the Thursdays in Black Campaign, or their campaign to end gender-based violence.

• Human Dignity and Reproductive Health Framework: Since December, the primary focus of my work has been to publish a framework which will serve as a theological resource for addressing critical topics related to reproductive health. The resource will be produced in the form of an approximately 40-age pdf published on the WCC's website and will be available for member churches of the WCC and other partners. The hope is to provide a resource, informed by the member churches themselves, to equip churches to engage reproductive health issues in their own contexts. I spent the beginning of the year researching reproductive health topics as they fit within the global health agenda and drafting an outline for the publication. This April, I will be circulating the outline among colleagues and commission members for input, with the goal of finishing the publication in July.

### • Other forthcoming projects:

- In May, I will cofacilitate a webinar for World Menstrual Health Day with the Program Executive for the Ecumenical Water Network and the Program Executive for gender justice.
- In July and August, the HIV and Reproductive Health Working Group plans to host listening sessions with women and youth from member churches to hear their insights on addressing HIV and Reproductive Health Issues. The group will then draft briefing statements, informed by this input and data from WHO to circulate and discuss with member churches.

# **Potential Challenges**

- Working Group: Except for myself and the other WCC staff member, the new HIV and Reproductive Health Working Group consists of all men, each of whom are more experienced in HIV/AIDS advocacy than in reproductive health issues. I see the WCC's extensive global network as one of its greatest strengths. As a working group, we will be challenged to locate experts on reproductive health from within and beyond the network and invite them on as advisors.
- Collaboration and staff cohesion: The majority of WCC staff are based in Geneva. Most are available to answer simple questions through Whatsapp, but it is hard to schedule meetings to discuss work more deeply. There is a strong sense that all program staff are at capacity and have little time to devote to others' work. Since I joined the WCC, the staff has repeatedly been encouraged to work collaboratively, but there is currently no shared infrastructure for such collaboration to occur whether staff are in-person or remote. Simply put, the challenge is not to become an island in this role. I have realized I need to be proactive, redundant, and intentional in order to be heard in Geneva. Given that the Health and Healing team is so new, and half of us are remote, I see this "beginning" as an opportunity for improving staff synergy, at least within the team, but this will take time and intentionality.