STRATEGIC PLAN
2020–2024

CLACAI
CONSORCIO LATINOAMERICANO
CONTRA EL ABORTO INSEGUNRO
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The Latin American Consortium against Unsafe Abortion (CLACAI) is a regional network that promotes access to information, and safe strategies and technologies to reduce unsafe abortion in Latin America. It works in the framework of full respect for human rights, especially sexual and reproductive rights, from a gender and equality perspective. It is composed of activists, researchers, health service providers, lawyers, and other professionals.

The Conference of the International Consortium for Medical Abortion (ICMA), held in Johannesburg in 2004, was the beginning of CLACAI. On that occasion, a group of participants from Latin America decided to promote actions to join several efforts towards safe abortion in the region. Subsequently, the decision was made to form the Latin American Consortium against Unsafe Abortion (CLACAI), and the first Coordinating Committee was appointed. In 2006, 46 representatives from 13 countries took part in CLACAI’s first general meeting in Lima. As of 2019, CLACAI has 445 members from 21 countries, who participate as individuals or representing an institution. A total of 165 organizations are part of the Consortium (regional, national/local organizations). (See graphic).

At the beginning, the backbone of CLACAI was the prevention of unsafe abortion and access to advances in medical science and reproductive technologies—such as medical abortion—that decrease the risks associated to the procedures. Over the years, CLACAI has expanded its lines of action to maintain its ability to respond and innovate in a changing regional context, both on a political and legislative level, as well as regarding the stakeholders that participate in the debate and in service provision, the social support, and the ownership of women and other people with the ability to become pregnant of the information and technologies for safe abortion.

The 2015–2019 Strategic Plan has come to an end and, with it, another cycle of this network. Based on a participatory process to analyse the context, achievements, and areas of opportunity and improvement, CLACAI introduces the 2020–2024 Strategic Plan. This Plan ratifies its institutional mission and vision, and its long-term commitment, the strategic areas of change to which the Consortiums hopes to contribute, the lines of action, the institutional objectives, and the indicators.

SUSANA CHÁVEZ
Executive Secretary of CLACAI
ORGANIZATIONS REGISTERED IN CLACAI

INTRODUCTION

TOTAL: 165

CENTRAL AMERICA
- Costa Rica: 3
- El Salvador: 1
- Guatemala: 10
- Haiti: 2
- Honduras: 3
- Nicaragua: 5
- Puerto Rico: 5
- Dominican Republic: 1
- Total: 30

Andean Region
- Colombia: 10
- Bolivia: 9
- Ecuador: 18
- Peru: 25
- Venezuela: 6
- Total: 68

South Region
- Argentina: 14
- Chile: 7
- Paraguay: 7
- Uruguay: 1
- Total: 29

Brazil: 9
Regionals: 14

5 2020–2024 Strategic Plan
SUMMARY OF THE STRATEGIC PLAN
2020–2024
SUMMARY OF THE STRATEGIC PLAN 2020-2024

VISION:
Universal access to legal, safe, and quality abortion in every country in Latin America and the Caribbean.

Strategic areas of change

1. Progress in the complete decriminalization and ground-based decriminalization in Latin American and the Caribbean

   1.1. Systematization of political and social processes to decriminalize abortion.

   1.2. Strengthening of the legal actions of CLACAI.

   1.3. Support to the national processes that are moving forward towards the complete decriminalization and changes in terms/ground-based decriminalization.

   1.4. Technical support of CLACAI to its members in advocacy processes in international organizations.

   1.5. Advocacy in the agendas of human rights and sexual and reproductive rights, especially in the Montevideo Consensus, to ensure their fulfilment.

2. Expansion of a current of opinion that favours the access to abortion in Latin American and the Caribbean.

   2.1. Engagement of new stakeholders in dialogues on legal and abortion and its relation with other agendas.

   2.2. Inclusion of access to abortion as part of the humanitarian agenda.

   2.3. Scientific evidence at the service of the community.

   2.4. Dissemination of strategies and arguments to counter religious fundamentalisms.

   2.5. Strengthening donor interest in the agenda of sexual and reproductive rights and, in particular, the universal access to abortion in the Montevideo region, to ensure their fulfilment.

3. Improved availability and use of appropriate and quality medical and surgical technology, for safe abortion in all trimesters in every country in Latin America and the Caribbean.

   3.1. Advocacy for the record of gynaecological use of misoprostol and mifepristone, and their inclusion in lists of essential medications.

   3.2. Support to the improvement of the supply chain of materials related to abortion.

   3.3. Advocacy for the expansion of the database of health providers that can guarantee access to abortion.

   3.4. Update of the surgical treatment protocols for abortion.

Institutional objectives

Strengthens the diversity, representation and participation of CLACAI members.

Maintains the visibility and the position of CLACAI in the region and globally.
REGIONAL CONTEXT
In the 2010–2014 period, there were 6.5 million induced abortions annually in Latin America and the Caribbean.

In 2014, at least 10% of the total maternal deaths (or 900 deaths) in Latin America and the Caribbean were due to unsafe abortions.

More than 97% of women in a reproductive age in Latin America and the Caribbean live in countries with restrictive abortion laws. Abortion is completely prohibited, without exceptions, in six countries. Another nine countries permit it almost exclusively to save the life of the woman, and a few offer limited exceptions in cases of rape and serious foetal abnormalities.

Women who live in conditions of poverty and in rural areas have a higher probability of experiencing unsafe abortions and serious complications derived from them.

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The use of misoprostol to induce abortions is increasingly common in the entire region.3

There is more quality information regarding the use of medication for self-managed abortion. This is due to the telephone help lines and support services offered by various networks and feminists collectives; the services to reduce risks and harm provided by health professionals; and the various virtual platforms that offer counselling and access to pills.

Abortion has been positioned in the public agenda through the media, in political fora, and in academic and research areas.

The risk to health is being used successfully due to the tools developed by various stakeholders in countries such as Colombia, Argentina, and Chile.4

CLACAI is a member of global advocacy organizations, such as the International Campaign for Women’s Rights to Safe Abortion. In addition, CLACAI has adhered to the ‘Declaration of the Principles on Abortion, Prenatal Testing, and Disability’.


Limited access to mifepristone5 due to obstacles in registration.

Growth and strengthening of anti-rights groups. These groups promote a move to the right in politics, the influence of religion in the State, and distorting the discourse of feminist movements and sexual and reproductive rights.6

Renewal of the Global Gag Rule in 2017. This rule prohibits international organizations that receive any type of international funding from the US (including, but not limited to, USAID funds) from implementing abortion services, offering counselling on abortion, or recognizing abortion as an option regarding pregnancy and as part of sexual and reproductive health care.8

Low quality postabortion care services in the region. The most common deficiencies include delays in treatment, use of inappropriate interventions, inadequate access, and prejudice attitudes from the clinical and hospital staff.7

Departure of donors from Latin America and the Caribbean - now considered, for the most part, middle income - and budget cuts to programmes on contraceptives and comprehensive sexuality education in different countries in the region.

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THE JOURNEY THUS FAR: KEY ACHIEVEMENTS 2014–2019
Regional conferences have become the institutional hallmark of CLACAI, as a space that promotes debate and discussion regarding legal and safe abortion, and that includes the participation of different regional stakeholders.
The REPOCLACAI repository has become a space to centralize the archive, and preserve and provide access to knowledge. In the last four years, the repository has had more than 650,000 visits.

In addition, CLACAI has generated key information to support advocacy processes in the region, such as the research ‘Investigación sobre aborto en América Latina y El Caribe: una agenda renovada para informar políticas públicas e incidencia’ (Study on abortion in Latin America and the Caribbean: a renewed agenda to inform public policies and advocacy, 2015), ‘Mifepristona y misoprostol en seis países de América Latina: procesos de registro y disponibilidad’ (Mifepristone and misoprostol in six countries of Latin America: registration and availability processes, 2017), ‘Entre la indolencia y el sesgo: el derecho de las mujeres a beneficiarse de los avances científicos en materia reproductiva’ (Between indifference and bias: the right of women to benefit from scientific progress regarding reproduction, 2017), and ‘Muerte o cárcel: Persecución y sanción por aborto’ (Death or prison: persecution and punishment for abortion, 2018).

“CLACAI provides trustworthy information on abortion and related topics”

Participant in CLACAI.
During the last 5 years, CLACAI has supported 32 local initiatives in the region, which focused on promoting access to legal and safe abortion. Below, a few examples:

- **COSTA RICA**: Project on ‘ACCESSING unpunished abortion in Costa Rica’ (2017).
- **COLOMBIA**: Project on ‘Improvement actions in the access to services in Voluntary Termination of Pregnancy (VTP) with an emphasis on public provision’.
- **ARGENTINA**: Initiative ‘From regulations to practice: a toolbox to implement the right to legal abortion in Argentina’ (2016).
- **ECUADOR**: Training workshops for health professionals in four provinces: Tungurahua, Pichincha, Guayas, and El Oro (2017).
- **BOLIVIA**: Choosing Without Risk Campaign (2016).
- **BRAZIL**: Women of the epidemic: a campaign to promote reproductive rights regarding the epidemic of the Zika virus in Brazil (2016).
- **PERU**: Project ‘Implementing an Improvement Plan for the timely access to therapeutic abortion in the Sullana Hospital in the Piura Region’ (2015).

CLACAI is constantly supporting regional and local processes, it is a current, recognized, and legitimate voice.

Participant in CLACAI.
CONFRONTING THE OPPOSITION

CLACAI has produced key materials to nurture the discussion on abortion and rights. These materials include:

1. **La Mala Fe (The Bad Faith) Platform**
   - In the framework of the project to confront the opposition groups, the news portal La Mala Fe was created on 15 June 2018.
   - By 31 January 2019, La Mala Fe had 6,182 visits (sessions).

2. **Muerte o Cárcel (Death or prison)**
   - Animated video: Muerte o cárcel.

3. **Journalistic research**
   - The documentary *Gender under attack* narrates four stories that illustrate how the actions of the opposition and the anti-rights forces have not been isolated events; they correspond to a coordinated effort in the region. At least 565 people have watched the documentary, through offline screenings. There have also been 35,385 views on Facebook and Youtube.
DETAILED STRATEGIC PLAN
DETAILED STRATEGIC PLAN

MISSION

The Latin American Consortium against Unsafe Abortion (CLACAI) is a regional network that promotes access to information, and appropriate strategies and technologies to reduce unsafe abortion and improve access to legal abortion in Latin America. It works in the framework of full respect for human rights, especially sexual and reproductive rights, from a gender and equality perspective, as a significant contribution to the democratic agenda. It is composed of people, organizations, and networks that are dedicated to activism, research, health service provision, legal services, and other related fields.

VISION

The Latin American Consortium against Unsafe Abortion (CLACAI) aims to be a leading regional space of multisectoral articulation and coordination with other movements in terms of safe abortion and ensuring access to legal abortion.
The decision-making and management of CLACAI is guided by the following structure:

- **Advisory Committee**: political entity
- **Working Groups**: legal, communications, and others, in accordance with the needs
- **Coordinating Committee**: entity that ensures the application of the policy guidelines of CLACAI
- **Executive Secretariat**: in charge of implementing the programmatic actions of CLACAI—coordinated by PROMSEX Peru
LONG-TERM VISION

Universal access to legal, safe, and quality abortion in every country in Latin America and the Caribbean.

The scope of the long-term vision of CLACAI requires contributing to three interconnected strategic areas of change, which have the potential to transform the access to abortion in the region.

1. **Progress** in the complete decriminalization and the decriminalization based on risks in Latin American and the Caribbean.

2. **Expansion** of a current of opinion that favours the access to abortion in Latin American and the Caribbean.

3. **Improved availability** and the use of appropriate and quality medical and surgical technology, for safe abortion in all trimesters in every country in Latin America and the Caribbean.

CLACAI understands that there are different possible paths to contribute to the universal access to legal, safe, and quality abortion in the region. For this reason, each strategic area prioritizes lines of action that take advantage of internal capacities, lessons learned in the last few years, and the opportunities of the context.

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\*CLACAI understands that the positive outcomes in the indicators of results are not only a product of the Consortium’s actions. Various stakeholders have a role in generating positive change.
### STRATEGIC AREA OF CHANGE 1

<table>
<thead>
<tr>
<th>Lines of action</th>
<th>Possible acts to support the lines of action (Note: the acts support one or more lines of actions)</th>
<th>Indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1. Systematization of political and social processes to decriminalize abortion.</td>
<td>Recovery of the historic memory the political and social processes to decriminalize and legalize abortion.</td>
<td>Indicators of results:</td>
</tr>
<tr>
<td>1.2. Strengthening of the legal actions of CLACAI.</td>
<td>Development of a regional timeline on political and social processes for decriminalization.</td>
<td>Number of positive legislative changes in Latin America and the Caribbean, that expand access to term/ground-based abortion, or that completely decriminalize abortion.</td>
</tr>
<tr>
<td>1.3. Support to the national processes that are moving forward towards the complete decriminalization and change in terms/ground-based decriminalization.</td>
<td>Actions to disseminate the systematization, through the repository and other platforms.</td>
<td>Indicator of the process:</td>
</tr>
<tr>
<td>1.4. Technical support of CLACAI to its members in advocacy processes in international organizations.</td>
<td>Review of the terms of reference of the CLACAI Legal Group, to establish an agreed language.</td>
<td>Number of supported actions by CLACAI (supported local initiatives; emerging demands; technical assistance by the legal group) to support processes to expand risks/terms or that aim for the complete decriminalization.</td>
</tr>
<tr>
<td>1.5. Advocacy in the agendas of human rights and sexual and reproductive rights, especially in the Montevideo Consensus, to ensure their fulfilment.</td>
<td>Compile information on legal arguments to confront the actions/arguments of anti-rights groups.</td>
<td>Number of publications/reports that document innovative strategies for the decriminalization of abortion, supported or led by CLACAI.</td>
</tr>
<tr>
<td></td>
<td>Develop control plans in light of setbacks with support of the Legal Group.</td>
<td>Number of meetings/working sessions to discuss innovative strategies for the complete or partial decriminalization of abortion or new risks, supported or led by CLACAI.</td>
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<tr>
<td></td>
<td>Organize thematic legal workshops.</td>
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<td></td>
<td>Meeting on geographical analysis of global agendas of human rights.</td>
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<tr>
<td></td>
<td>Prepare information on thematic/language topics, that should be made visible in order to impact the agenda to decriminalize/expand risks and terms.</td>
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<tr>
<td></td>
<td>Identify CLACAI member organizations that may require technical support and assistance to position thematic/language topics that are key in international and regional spheres.</td>
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<tr>
<td></td>
<td>Partnerships and spaces of situational and geopolitical analysis for the participation in spaces of discussion/monitoring of the Montevideo Consensus.</td>
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</tbody>
</table>
## Expansion of a current of opinion that favours the access to abortion in Latin American and the Caribbean

<table>
<thead>
<tr>
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<th>Indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>2.1. Engagement</strong> of new stakeholders in dialogues on legal and safe abortion and its relation with other agendas.</td>
<td>Generate dialogue spaces and strategic alliances with stakeholders in other movements, including indigenous, farmers/country persons, afrodescendants, migrants, persons with disabilities, LGBTI+, ecological, unions, among others (for example, through webinars, conferences, joint statements, others).</td>
<td>Indicators of results: Percentage of individuals that support changes in abortion legislation in countries in the region.</td>
</tr>
<tr>
<td><strong>2.2. Inclusion</strong> of access to abortion as part of the humanitarian agenda.</td>
<td>Expand membership of CLACAI, including stakeholders of other movements and currently underrepresented countries.</td>
<td>Indicator of the process: New collaboration agreements/letters of intent of coordination/join statements with organizations/networks/collectives of other movements, and with other professional associations/uni ons.</td>
</tr>
<tr>
<td><strong>2.3. Scientific evidence</strong> at the service of the community.</td>
<td>Formalization and sensitization spaces of providers in: stigma, conscientious objection versus conscious providers, professional secrecy.</td>
<td>Number of communication products developed by CLACAI with new narratives regarding abortion, disseminated through the repository and other platforms.</td>
</tr>
<tr>
<td><strong>2.4. Dissemination</strong> of strategies and arguments to counter religious fundamentalisms.</td>
<td>Strengthen partnerships with professional collectives (for example, FLASCOG-FLO and others).</td>
<td>Number of persons reached by messages disseminated by CLACAI (based on platform, gender, geographic location, age).</td>
</tr>
<tr>
<td><strong>2.5. Strengthening</strong> donor interest in the agenda of sexual and reproductive rights and in particular, the universal access to abortion in the region.</td>
<td>Maximize the specialized contribution of CLACAI member organizations, to prepare messages/strategies to counter religious fundamentalism.</td>
<td>Number of favourable opinions regarding abortion among decision makers and opinion leaders, reached by local initiatives.</td>
</tr>
<tr>
<td></td>
<td>Continue the production and/or dissemination of communication products, with positive messages on the gender focus, the right to health, sexual and reproductive rights, the secularism of States, and the access to legal and safe abortion.</td>
<td>Number of donors that participate in discussion spaces convened by CLACAI.</td>
</tr>
<tr>
<td></td>
<td>Maintain support to local initiatives that aim to change attitudes towards abortion.</td>
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<tr>
<td></td>
<td>Generate dialogue spaces with donors regarding the needs of the region.</td>
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</tbody>
</table>

**Indicators of results:**
- Percentage of individuals that support changes in abortion legislation in countries in the region.

**Indicator of the process:**
- New collaboration agreements/letters of intent of coordination/join statements with organizations/networks/collectives of other movements, and with other professional associations/uni ons.

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*Comparison of base line (most recent survey - until the end of 2019 - from a credible source, in the different countries in the region) and the end line (most recent survey - until December 2024 - from a credible source, in the different countries in the region).*
### Strategic Area of Change 3

**Improved availability and use of appropriate and quality medical and surgical technology, for safe abortion in all trimesters in every country in Latin America and the Caribbean.**

<table>
<thead>
<tr>
<th>Lines of action</th>
<th>Possible acts to support the lines of action (Note: the acts support one or more lines of actions)</th>
<th>Indicators</th>
</tr>
</thead>
</table>
| **3.1. Advocacy** for the gynaecological record of misoprostol and mifepristone, and their inclusion in lists of essential medications. | Mapping of availability of medications in countries in the region (different to the 6 already mapped out).  
Support to local initiatives that focus on improving the availability of medication (including through improvement of the supply chain).  
Strategic alliances with union federations related to providing abortion services.  
Dialogues between institutions that provide abortion services and support networks, and between obstetricians/gynaecologists and other specializations.  
Technical and legal assistance to the countries in the region that require development and/or updating of surgical treatment protocols. | Indicators of results:  
Number of countries that include mifepristone and misoprostol in the list of essential medications.  
Number of countries with a valid registration for mifepristone. |
| **3.2. Support** to the improvement of the supply chain of materials related to abortion. |  | Indicators of the process:  
Available mapping on how misoprostol/mifepristone are obtained in the different countries in the region. |
| **3.3. Advocacy** for the expansion of the database of health providers that can guarantee access to abortion. |  | Number of actions  
(for example, workshops, meetings, statements) focused on enabling various types of providers (nursing staff, midwives, others) to provide abortion services, in accordance with the WHO guidelines. |
| **3.4. Update** of the surgical treatment protocols for abortion. |  | Number of actions with union associations focused on reducing the obstacles in care and simplifying abortion services. |

Number of recommendations developed and disseminated to facilitate access and reduce obstacles in the access to medical and surgical technology for abortion (for example, publications, articles, others).
INSTITUTIONAL OBJECTIVES

CLACAI’s commitment to achieving its strategic areas of change, lines of action, and institutional vision, requires prioritizing the following institutional objectives for the 2020–2024 period:

<table>
<thead>
<tr>
<th>Institutional objective 1: Strengthen the diversity, representation, and participation of CLACAI members.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Main activities</strong></td>
</tr>
<tr>
<td>1.1. Include members of different movements, as well as stakeholders and underrepresented sectors.</td>
</tr>
<tr>
<td>1.2. Develop a plan to attract young leaders to the membership of CLACAI.</td>
</tr>
<tr>
<td>1.3. Identify innovative actions to support the work of networks and organizations in Central America and Brazil.</td>
</tr>
<tr>
<td>1.4. Strengthen the decision-making entities (Advisory Committee, Coordinating Committee) and management entities (Secretariat; through new staff, as long as the resources allow it).</td>
</tr>
<tr>
<td>1.5. Integrate new members to the CLACAI groups (legal, communications, providers) and generate plans of action with clear responsibilities.</td>
</tr>
<tr>
<td>1.6. Strengthen the internal communication tools (for example, newsletters).</td>
</tr>
<tr>
<td>1.7. Regional and thematic conferences, and training spaces for members.</td>
</tr>
<tr>
<td>1.8. Mantain the support mechanism to local initiatives, and ensuring that they directly connect to the strategic areas of change prioritized in this Plan.</td>
</tr>
<tr>
<td>1.9. Mantain the support mechanism to emerging demands.</td>
</tr>
</tbody>
</table>
### INSTITUTIONAL OBJECTIVES

#### Institutional objective 2: Maintain the visibility and position of CLACAI at the regional and global level

<table>
<thead>
<tr>
<th>Main activities</th>
<th>Indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1. <strong>Participate</strong> in regional and international spaces and networks.</td>
<td><strong>Number of communication actions</strong> promoted by CLACAI, in coordination with national or regional organizations, on landmark dates.</td>
</tr>
<tr>
<td>2.2. <strong>Generate</strong> interest of new donors, articulating proposals with other member organizations of CLACAI.</td>
<td><strong>Number of visits</strong> to the website.</td>
</tr>
<tr>
<td>2.3. <strong>Strengthen</strong> the use of social media to share key messages that support the scope of the strategic areas of change identified in this Plan.</td>
<td><strong>Number of visits</strong> to the repository.</td>
</tr>
<tr>
<td>2.4. <strong>Maintain</strong> the CLACAI repository.</td>
<td><strong>Number of people reached</strong> through CLACAI’s social networks.</td>
</tr>
<tr>
<td></td>
<td><strong>Number of CLACAI participants</strong> in regional and international spaces and networks (for example, participation in conferences, in Committees).</td>
</tr>
<tr>
<td></td>
<td><strong>Percentage</strong> of increase in funding obtained to support the actions of CLACAI.</td>
</tr>
</tbody>
</table>