

THE DUTCH GOVERNMENT POLICY ON SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS (SRHR) AND ENGAGEMENT WITH FAITH-BASED ORGANISATIONS (FBOS)

Interview with Lambert Grijns, Director, Social Development Department and Special Ambassador for Sexual and Reproductive Health and Rights & HIV/AIDS, the Ministry of Foreign Affairs of the Netherlands

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Lambert Grijns earned his Master of Arts in Spatial Planning and Demography at the University

of Amsterdam and holds a Bachelor of Arts in Human Geography (Development Studies) from Free University of Amsterdam. After graduation, he spent four years at Delft University of Technology and UNESCO-IHE in Delft conducting research on Transboundary River Basin Management.

Since joining the Ministry of Foreign Affairs in 1992, he has served abroad at Netherlands Embassies in Hanoi-Vietnam, in Kigali-Rwanda where he was Deputy Chief of Mission, and in San José-Costa Rica in the same position. Between 2008 and 2011 he served as Dutch Ambassador to Nicaragua.

While in the Hague he has held various positions, including Desk Officer for South-East Asia and the Head of the Financial Management Department. After returning from Nicaragua in 2011, he served as an Inspector, responsible for organizational analysis of Netherlands embassies until taking up his current position in 2012.

What are the key dimensions of the Dutch SRHR policy and whom does the Netherlands involve to realise its policy objectives?

Our SRHR policy focuses on access to information, commodities and services as well as promotion of rights. The Netherlands has a very strong tradition of supporting human rights and sexual and reproductive health and rights, including sexual minorities. These are four dimensions of our policy and in order to achieve our goals, we need to involve many different actors; individuals, multilateral organisations, governments, NGOs, private sector and faith-based organisations and religious communities. While working together to advance sexual and reproductive health and rights, it is very important to recognise there is no right or wrong in this debate. This means I have to acknowledge differing opinions, coming from diverse socio-cultural and religious backgrounds and accept that someone living in another country or in

another ethnic or socio-cultural group might have divergent views.

For me, as a diplomat, there are three basic steps to working effectively with others. First of all, we need to learn how to listen to each other, and secondly we have to find a common language. The third thing is the attitude. I would never say to others what they should think or do. However, what I can do is to share the experiences of my country and the policies of my government, including our challenges but also the successes we can celebrate.

What has been your experience with establishing a common language to discuss SRHR?

It depends very much which platform or who we are talking to. When we are in New York or Geneva, we use UN language to negotiate on the resolutions. We hold negotiations on the terminology that has been

part of existing resolutions, and therefore we cannot suddenly change our language. That being said, some of that UN language is considered provocative by other countries.

For me, at country level, more important is how people interpret the language. Let me give you an example. In the Netherlands we speak openly about sexuality and the words; sexuality, sex and sexual behaviour are not provocative and neither is sexuality education. However, other countries prefer using different words; such as life skills education or family health education.

For me, it is not so important how you call it. The most crucial is a consensus on what we mean by it and what is included in these terms. Further to this, whether we can agree about certain principles such as that young men and women, boys and girls, have sufficient access to information. Whether this information enhances their knowledge about their own body and enables them to make informed decisions. This also means whether teachers, parents, religious and social leaders provide conducive environment and not hide information from young people, because of moral, religious or ethical reasons.

You have mentioned the language as an important factor. What other strategies do you recommend for encouraging discussions around culturally or religiously sensitive issues?

Areas of emphasis and perspectives are also very important. We can speak about rights: human rights, sexual rights but we can also discuss health. It is easier for some religious leaders to agree to HIV/AIDS prevention measures, if emphasis is on health and the need to fight the deadly disease, despite the fact that normally some of these measures would not fully resonate with more conservative viewpoints.

Abstinence is not sufficient to stop the spread of HIV and condom use is sometimes controversial in churches. However, when you look at it from a health perspective, it becomes much easier to discuss in comparison to a rights perspective. Who could be against better health for women and girls who remain the most vulnerable?

How do you approach the topic of contraception and abortion in your discussions with religious communities?

A major source of concern is maternal mortality and that is to a large extent due to unsafe abortion. I am

a strong supporter of access to safe abortion. But if, from a religious point of view, it might not be possible for some to accept abortion under all circumstances, at least both pro-life and pro-choice sides can agree on the need to reduce the number of unwanted pregnancies, and hence reduce the number of abortions overall, and unsafe abortions in particular, through education, access to family planning commodities and healthcare services.

I can share the experience of my country where we have, on one hand, a pragmatic and relatively liberal law on abortion, and, on the other hand, one of the lowest abortion rates in the world. The pragmatic abortion law, despite what some might think, does not translate into higher abortion rates but on the contrary. How come? We invested a lot into prevention, through education and getting young people involved in discussions. For example as parents we feel responsible for helping our children think and speak about sexuality without presenting it as something ugly or shameful but as an integral part of our life that requires awareness and knowledge.

The Netherlands is also a country with one of the lowest teenage pregnancy rates. For anyone who gets pregnant at the age of fourteen, fifteen or sixteen, it must be very difficult. Professional and educational prospects of teenage mothers become very limited at that time. In addition, they are economically dependent on the father of the new-born, if present, or the parents. For the society it is a loss of workforce. Overall, the costs of teenage pregnancy are very high; even though it is not difficult to prevent it.

We can discuss these health and socio-economic aspects with religious people who oppose contraception due to their beliefs. In doing so, we should be mindful of our language and attitude. It is not about judging others and telling anyone what they need to do. But we can share and explain our experience and try to understand why for some people religion is such an important factor that they cannot make the same choices as we would make.

Dutch SRHR policy talks openly about the need to promote rights of marginalised groups (LGBTs, drug users, sex workers). However, for many (faith-based) communities this is a sensitive topic, what is your advice in this regard?

The way to start dialogue and find a common ground is by using the word (*non-*)discrimination. I think, from a religious perspective, no one would accept the other person being discriminated against. I believe FBOs

have a very important role to play in promoting this strong religious principle of non-discrimination.

Last year, our Minister of Foreign Trade and Development Cooperation, Lilianne Ploumen, travelled to New York for the General Assembly, where she spoke for the fourth time in two years with high representatives of the Vatican. She wants to have dialogue with the Vatican, not to convince the Vatican, or the other way around, but look for a common ground. In their discussions about the anti-homosexuality bill in Uganda, Cardinal Parolin, Vatican's Secretary of State has said he could not support our views on LGBT rights but at least he denounced what was happening in Uganda because of his position on non-discrimination. He also asked his Bishop in Uganda to express this position, though this does not mean the Catholic Church is promoting LGBT rights. One of the highest authorities in the Catholic Church, the right hand of the Pope, denounced anti-homosexuality law from a discriminatory perspective. For me, this is a good example how, without touching on whether or not you agree with LGBT rights, you can still have a fruitful discussion on fundamental principles such as that everyone is equal.

The other emphasis should be on health. Men who have sex with men, transgender people, injecting drug users and sex workers, are amongst the people most at risk of HIV infection. I could also say, from a religious perspective; why would I accept that the most vulnerable are marginalised? I do not think that, for instance, all sex workers are victims and many of them decide to remain in this profession voluntarily. However, most of them initially enter into sex work because they are poor, have no other choice or are forced. We should not look at these issues from a controversial or a negative angle but stress that everyone has the right to be healthy or access health services. We can be at least pragmatic and agree on those things.

Where does the need of the Dutch government to better understand the relationship between faith and sexuality come from and how do you respond to this need?

The Netherlands is one of the most secular countries in the world and we should be very much aware of that. However, this also means realising that we cannot put our cultural background at the forefront because we are just one of many countries in the world. The moment you pass the Dutch border things change, and we need to be aware of it and understand other people's perspectives.

We initiated a series of lectures and workshops, organised by my own Ministry and department, on the relationship between sexuality and religion. There, we invite a lot of different speakers to help us understand the relationship between sexuality and religion, from a Muslim, Christian, and other perspectives. For example what are the different opinions and dimensions of the abortion debate, what is gender, how can we better prepare our debate on gender equality from a religious perspective?

As I highlighted earlier, it is important to acknowledge there are many different actors that play diverse roles in the world, and we should benefit from each other. Faith-based organisations have a very strong connection with their constituencies, much stronger than we, the government, would ever have. The reason why we have been engaging with faith-based organisations in our work as a donor is that we know the language FBOs use, the connections they have with their constituencies can make them very effective.

How does the Netherlands partner with faith-based organisations to advance Dutch SRHR objectives? What are the existing programs geared towards faith-based community?

In the Netherlands we have our own history of FBOs. We are a predominantly Protestant country in the north and Catholic in the south. Therefore we used to have Protestant and Catholic newspapers, radio, and TV, and still have NGOs with strong roots in the Protestant and Catholic communities. Two out of the four biggest NGOs in the Netherlands are FBOs; Cordaid (Catholic) and ICCO (Protestant). They are major development partners of the Ministry, simply because they are well-established and professional organisations. In January this year we selected a range of organisations for what we call 'strategic partnerships'. It is a huge programme of 1 billion EUR to support lobby and advocacy capacity of southern NGOs. Some of the proposals received were on linking our policy areas (security, water, food security, SRHR) with religion and came from FBOs.

The relationship between faith-based organisations and donor agencies is often labeled 'uneasy' due to differences in language and emphasis. What is your view on this?

There are more liberal and more conservative FBOs and amongst FBOs themselves there is a diversity of opinions. However, as the Dutch government, we should be aware that SRHR issues require a lot of

discussions, getting used to new concepts. Just like our parents had to get used to certain notions, and their parents as well. It always takes time and therefore we should be patient.

At the same time, from a religious perspective, you can be even more vocal and angry than a civil servant would be. How can you accept the spread of HIV and what is happening in countries where governments enable access to ARVs but do not allow the distribution of condoms to young people? How can you accept it from a religious perspective that we first let people get ill, and only after, help them prolong their lives through ARVs? How can you accept that people get serious diseases, not only HIV/AIDS but also many other STIs, and that young girls get pregnant because they are not entitled to use condoms or other contraceptives? Is it moral to accept it if you are a Christian or Muslim? That makes me angry myself as a Christian.

The discussions around SRHR are hardly ever only technical. It is a lot about values and ethics, would you agree?

Thinking about the ethics part of this discussion, I actually expect religious communities to take the lead on this. This is my question to FBOs and religious communities; why aren't you even stronger in your campaigns than we, the government, are? The same goes for abortion. I lived in Nicaragua, a country where abortion is prohibited, even to save the life or health of a woman. How can you accept, as a Catholic Bishop, that women and mothers are dying or get serious complications because lifesaving abortion is not allowed? I could never simply understand it from a religious perspective. Why is the life of the mother worth less than the life of the foetus? I could never understand.

Speaking about a more political role of faith-based organisations, where do you see the biggest need for faith-based involvement?

It is extremely important to be part of policymaking, which is why those FBOs supportive of SRHR and the entire ICPD agenda need to be active in New York and Geneva. Just like NGOs, they normally cannot take part in the negotiations on the resolutions but at least they can be there and support government representatives.

The UN Commission on Population and Development (CPD) is one of those annual gatherings where you see a lot of the more conservative FBOs, especially the

US-funded. My general impression is that the more conservative FBOs are very well organised.

While governments and FBOs can learn from each other, in my view governments should strictly separate state and religion.

What could help FBOs build sustainability of their SRHR efforts and assure scale-up of activities?

FBOs could promote leaders and role models that many people can relate to and who are not afraid to speak up.

Let me give you an example. Last year we had great discussions in New York, during a side event on religion. There was an Irish mother who had a very simple question; *I am an Irish and Catholic but at the same time I want to have the freedom to choose how many children I want to have. How can I combine, being a devoted Catholic, and having the right to bodily integrity?* She put it in such a way that I was touched.

Many people are torn because they don't want to abandon their religion just because they want to use modern contraceptives. They want to be religious but also have access to means that make their lives better, and this should go together.

The Faith to Action Network's interview series aims to provide a multiplicity of perspectives on family health and wellbeing¹, presented in a non-partisan manner that invites open and thorough exploration. It intends to promote knowledge exchange and conceptual debate on diverse faith approaches to family health and wellbeing, recognizing diversity of opinions and promoting productive engagement across the differences. The opinions expressed in the interviews might not necessarily reflect the views of the Faith to Action Network, its Members or its Secretariat.

Credits

This interview was conducted by Dominika Jajkowicz

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1. Our operational definition of family health and wellbeing includes: birth spacing, fertility awareness, safe motherhood, prevention of mother to child transmission, maternal and child health, age appropriate sexuality education, gender equity and prevention of female genital cutting, early marriage and all forms of gender based violence.