

**Advancing Reproductive Rights in Conservative Gender Regimes: A Comparative
Analysis of Policy Change in Argentina and Mexico ***

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Introduction

This paper focuses on policy change in reproductive policies in the conservative gender regimes of Argentina and Mexico. Despite differences in the origin and development of their welfare regimes¹, these countries share common patterns of gender regime characterized by a strong commitment to the male breadwinner family form and scarce reproductive rights for women, which I call conservative gender regime. Regarding reproductive rights Latin American countries are still laggards. Overall in Argentina and Mexico, abortion was legal only under very exceptional circumstances, including rape and life treating situations. Argentina initially regulated abortion in its penal code of 1922, based on eugenic considerations. Other countries of Latin America such as Chile, Uruguay, Brazil and Mexico followed Argentina's path establishing restrictive abortion regulations. Mexico did that in 1931, establishing a restrictive abortion laws in the different states. In addition, access to contraception is also very limited due to inequality in the distribution of social rights that is, women's access to health service delivery.

Over the last decade, however, encouraged by international ideas on reproductive rights and health (i.e. Cairo Conference 1994) political mobilization around reproductive rights has emerged in national and sub-national politics denouncing the high rates of maternal mortality, especially among poor women. These actions at different scales aimed to transform – albeit with partial success - reproductive policies and thereby contributed to challenge the conservative nature of those national gender regimes.

While in Argentina the economic and social crisis of 2001 opened up opportunities to revisit reproductive health policies, progress has been incremental. By contrast, Mexico recently became the first Latin American country to legalize abortion, however at the sub-national scale; in the Federal District of Mexico City, where a center-left political party was able to effectively challenge the Conservative government at the

¹ Argentina was a regional pioneer in the development of the welfare state. Social security benefits were adopted as early as 1920s and social spending as a percentage of the GDP was 14.5 for the period 1973-2000. In contrast, Mexico's welfare state has developed later, after the 1940s, with a social spending as a percentage of the GDP of 5.6 for the period 1973-2000. Considering Mexico as a welfare state is however controversial and there are different opinions in the literature (see Segura-Ubiergo 2007). However, it can be argued that both countries have predominantly developed a conservative gender regime, by reinforcing the male breadwinner family form and keeping low levels of women's formal employment. This trend however started to destabilize with the structural adjustment policies in the 1980s and more strongly in the 1990s.

national scale. In both cases new international ideas on reproductive rights were filtered into domestic politics to alter the pre-existent gender regimes.

The goal here is to show how international ideas became entrenched into the pre-existent gender regimes and shaped by the policy legacies related to demographic policies and women's reproductive capacity. Additionally, the territorial democratization of the two federal districts – Buenos Aires (1996) and Mexico City (1997), and its subsequent electoral advancement of progressive political forces contributed to reframe reproductive policies and thereby advance women's reproductive rights.

This paper also advances an additional hypothesis for future research: the structure of opportunities provided by the institutional framework of federalism and the party system affects the way in which international ideas on reproductive rights and health are materialized. It is my argument that in translating international ideas on social policy reform, the sub-national scale became significant, showing the relevance of the hierarchical dimension of political organization for women's interests. Moreover, the analysis of the case studies suggests that differences in the federal-state/provincial arrangements regulating abortion and partisan politics, including that of women's representation, influenced the outcomes of gender policies.

The argument is organized as follows. First the theoretical framework to understand policy change within institutional contexts is introduced followed by an analysis of the historical legacies related to the conservative gender regimes. Second, an analysis of the major events that happened in both countries on reproductive rights and abortion is developed. Finally, conclusions are drawn with the goal of advancing hypotheses for further research.

Explaining Policy Change: A Historical Institutional Approach

This paper uses the concept of conservative gender regime to characterize the different set of gender policies predominant in Argentina and Mexico. A gender regime is defined as a set of norms, rules and policies that shape gender relations (O'Connor et. al. 1999); in this sense, it captures the link between social and biological reproduction, and involves three elements: women's welfare and paid labor, body and sexual rights, and women's

agency (Shaver 1994; 2002). The regulation of fertility and body integrity via state's intervention in biological reproduction has a critical impact on the balance between paid and unpaid work of women. In Latin America, the conservative gender regime is sustained through a strong male breadwinner family form and moderate levels of women's paid labor. In conservative gender regimes – often found in developing countries –, the relationship between social and biological reproduction is crucial due to insufficient gender equality policies in both dimensions of reproduction.

The conservative characteristics of these gender regimes have proven to be resistant to change. The literature specialized in abortion politics in South America emphasizes that such persistence is explained by predominant catholic values and persistent income inequality (Htun 2003; Blofield 2006). Also, the literature on welfare regimes underscores path dependent change and suggests that the (new) social policies will be shaped by the nature of the existing social policy regime. For instance, Esping-Andersen stresses the 'frozen landscape' of welfare regimes, suggesting that "...established policies become institutionalized, and cultivate vested interests in their perpetuation; major interest groups define their interests in terms of how the welfare state works" (Esping-Andersen, 1996: 24).

Other developments within the historical institutionalism literature consider that welfare regimes do not exist above politics, but remain immersed in it and power struggles have an impact on their evolution (Streeck and Thelen 2005). Focusing on institutions, Thelen and Steinmo (1992) have argued that specific institutional arrangements structure the political game and can shape policy outcomes. Peter Hall (1992) asserted that institutions might impede policy change. In a similar way, Immergut (1992) explained how institutions could explain both stability and change. In particular, formal institutions (i. e. executive-legislative relationships) establish the rules of the game for political actors affecting persistence and change. Moreover, institutional change can also affect policy outcomes by shaping the course of future political battles (Thelen and Steinmo 1992; Streeck and Thelen 2005). In sum, since political battles occur within institutions, they can provide opportunities and constraints in light of major economic or political events.

Some scholars have suggested that there is a fourth institutionalism that focuses on the role of ideas in shaping the path of policies adopted (Smith 2008). For ideational institutionalism, ideas also play an important role in explaining continuity. Certainly, the concept of gender regime is also relevant to understand the long-term influence of policy ideas, such as concerns with declining birth rates. However as new ideas emerge they can also induce policy change. To account for policy change is critical to understand why some ideas become prominent at a particular time and “even determinative in shaping political behaviour and defining political rationality” (Lieberman 2002, 700). Thus, the purpose of an ideational/institutional framework is to understand how societies adopt new ideas over old ones, and it can complement previous historical institutional approaches, which do not incorporate ideas to understand policy change

Significant political and economic shocks and demographic changes can modify the path of policies adopted. In particular, in analyzing gender equality policies, demographic factors have historically played a significant role in shaping social policies and affecting women’s interests. Moreover, demographic and development indicators can push social policies in the direction of gender equality (Henninger et. al. 2008). For example, studies of German family policy transformations show how the decline of birthrates was a critical demographic factor that triggered reform in a conservative gender regime. However, paying attention to the role of ideas and discourse framing, “fiscal and economic as well as demographic factors are not challenges per se, but become so in a process of collective interpretation and are framed quite differently in diverse national contexts” (Henninger, et. al. 2008, 306).

Globalization and the increasing involvement of international actors and organizations have also increased the attention to the impact of international convergent ideas on varied national settings. Here despite the relevance of domestic actors as important vehicles of change, “in exploring the prospects for path-shifting policy innovations, we need to take into account the transnational flow of policy ideas”. (Mahon, 2005: 3) Going beyond the exclusive focus on the national scale, common to much in comparative work, this paper understands the multilevel influence of ideas and politics - international and sub-national – and how national states have been influenced and challenged from above and below, transforming the way in which policy issues are

framed and adopted (Mahon 2006). Thus, institutional settings where political battles occur are territorially spread, highlighting the importance of sub-national scales in comprising institutional opportunities for policy change. Institutional changes can certainly affect policy outcomes, and here the institutional innovations implemented as a result of democratization at the local scale could become significant drivers of policy change.

There is a recent body of literature that asserts that democratization can take place at sub-national scales. Gibson notes two distinct patterns of democratization within the nation-state: substantive democratization and territorial democratization. Substantive democratization is, "...the granting of rights not previously available in the country—either a new concept of rights or the extension of existing rights to new categories of people regardless of where they live" (2008, 6). Suffrage is an example of this. In contrast, territorial democratization is, "...the expansion of clusters of rights across a country's political jurisdictions. It involves the granting of rights already available to inhabitants of one part of a country to inhabitants of other parts of the country" (Gibson 2008, 6). Certainly territorial democratization such as the processes experienced in the major metropolitan cities of Argentina and Mexico implied important institutional transformations related to citizens' representation, and thus encouraged change. However, as new interscalar arrangements between the national and the city scale generate opportunities for actors to advance policy change, the existent formal arrangements that regulate federal/local responsibilities on gender policies might also work as an institutional constraint. Indeed, Argentina and Mexico have different federal/local arrangements that regulate abortion and it is my argument that these differences have affected the outcomes of the policies adopted.

The emphasis on interests - that is the way in which different policy and political actors pursue their own preferences, electoral objectives and political agendas are also relevant to understand the configuration of interests around reproduction and abortion (Esping-Andersen 1999; Pierson 1994). Indeed, the literature suggests that the left has a direct effect on the welfare state, via social spending, and legislative and administrative measures (Huber and Stephens 2001; Huber et. al. 2005). A shift in the balance of power can be the result of the rise to power of a political party sensitive to women's interests,

and often center-left political options can open windows of opportunity for women's rights. Here the literature on abortion politics in Western Europe has provided several examples of the positive association between leftist progressive political parties and the advancement of reproductive rights, especially through the legislative arena (Stetson and Mazur 1995; Blofield 2006).

In federalized systems however, political parties also operate in a territorial hierarchical scale. Moreover, it has been noted that institutional settings that define the territorial distribution of power involves the differentiation of national and sub-national autonomous government structures. These scales represent different arenas of political competition (Olmeda and Suárez-Cao 2007, 6-7). As multi-level government structures such as federalism have an impact on party politics, it remains important to understand the success and failure of parties to advance their positions affecting policy change.

The territorialization of political parties in federations, and in particular in countries that underwent important institutional transformations as a consequence of democratization and structural economic reforms like Argentina and Mexico can explain the configuration of interests along a territorial hierarchical scale (Escolar et. al. 2002; Leiras 2007). In sum, the interplay among convergent international ideas, the institutional opportunities and constraints provided by the hierarchical organization of the political regime, and the ideological alignments and electoral success of political parties can contribute to explain policy persistence and change.

The Conservative Gender Regimes of Argentina and Mexico: Historical Legacies

Despite the persistence of the conservative features of the Latin American gender regimes, they began to destabilize in the last decades due to structural adjustment policies and their effects on families and women. Indeed, the rapid entry of women into the labour force was the result of economic pressures, particularly on poor and low-middle income families and women. The changes in families, and the increasing number of women in the labour force, indicate a critical shift in the relationship between social and biological reproduction. Women have been forced into the labour market, and consequently the need for childcare and domestic services has increased (Jelin 1996; Lamas 2006).

The presence of the Catholic Church in conservative welfare regimes that strongly oppose abortion and - more recently - contraception has been noted among specialized scholars (Htun 2003; Blofield 2006). However, as the Catholic Church strongly opposed abortion, they had tended to be more permissive on family planning programs, in particular when in the international agenda of the 1960s strong associations between poverty and uncontrolled population growth were raised (Chanes 2004). Since pope Jean Paul II however the Catholic Church guides the fetus-rights coalition and its contribution to the pro-life discourse is an important part of the current conservative backlash on reproductive rights. In addition, the Catholic Church is internationally organized and acts as a powerful lobby group with strong connections to governments and private conservative pro-family groups like Human Life International, an international organization with a vibrant presence in Latin America (*Vida Humana Internacional*). Indeed, the official discourse of the Catholic Church became transnationalized and fundamentalist in character (Haussman 2005; Blofield 2006).

While this is important, this paper highlights other historical elements of gender regimes that contribute to shape reproductive rights (or their lack thereof). It focuses on the importance of national goals and development ideas as factors that shape gender regimes. In conservative gender regimes women's reproductive capacity was often associated to broader national goals such as population growth and development. In the cases of Argentina and Mexico this vision has shaped greatly the construction of their welfare states, being more pronounced in the Argentina's case. Argentina's welfare state started to be developed as early as 1920 and protection for working mothers became law in 1934. The scarce native population and the early decline of the fertility rate gave support to pro-natalist policies throughout the twentieth century (Nari 2004).

Despite Mexico showed high rates of population growth until the 1970s, pro-natalist policies were also predominant vis-à-vis a strong association between population growth and development. In 1970 this vision radically changed and Malthusian ideas associated the reduction of fertility with higher levels of development. In contrast to Argentina's unstable political regime and institutions, the Mexican PRI (Partido Revolucionario Institucional) hegemonic system implemented family planning policies and even included in its own Constitution (1974) the right to decide on the size of

families. International trends were significant in this new paradigm. For example the US National Security Council alerted on the need to achieve demographic stability in those countries where high rates of population growth could become a threat to national and international security. Only three Latin American countries were mentioned, including Mexico, Brazil and Colombia in that order of importance (Chanes 2004). Although these family-planning programs opened windows of opportunities for Mexican women to advance reproductive rights, the demographic paradigm – and not women’s empowerment - provided the context for the adoption of those programs. While there is strict separation between Church and state in Mexico since the revolution, a contradiction related to the influence of the Catholic Church in society and politics exists.

Unlike Argentina, and despite the opposition of the Catholic Church, US-based groups have been working to promote reproductive rights (later including abortion access) in Mexico since at least the 1950s. The IPPF (International Planned Parenthood Federation) was the first to become involved in Mexico, mainly through UN development funding. The Mexican affiliate of the IPPF is Mexfam, founded in 1965, describing itself as a “pioneer of contraception in Mexico” (Hausman 2005, 124).

In contrast, Argentina had not been targeted by UN agencies and other organizations. Thus, the presence of international organizations that promotes reproductive rights has been scarce. Yet, a reproductive rights movement has organized since democratization, groups such as the *Foro por los Derechos Reproductivos de la Mujer*, CLADEM Argentina and others gained significance with the emergence of international developments on reproductive rights by mid 1990s. These groups have worked domestically, and extended links with international donors and agencies, albeit they have faced more problems to access to external funding and political support than their regional counterparts (Interviews 18, 20).

Indeed, by the 1990s the international paradigm of population policies changed drastically. The Cairo Conference on Population and Development in 1994 shifted the international debate from demographic concerns to reproductive rights and health. The use of critical indicators in development also changed, from an emphasis on fertility and population growth to an emphasis on maternal mortality and women’s sexual health. Women’s agency and empowerment became predominant in the international discourse

avored by the presence of women's organizations in UN based conferences, including Cairo 1994 (McIntosh and Finkle 1995). These international events had an important impact on the conservative gender regimes of Latin America, where notorious maternal mortality rates are predominant. Moreover, during the 1990s some countries implemented family-planning programs in the context of the poverty reduction strategies with funding provided by multilateral financial institutions (Rousseau 2007). Argentina and Mexico, countries with high maternal mortality rates, were politically impacted by those international developments. Although Argentina ranks at the top with respect to human development among Latin American countries, it ranks poorly in reproductive health compared to others with similar levels of development, such as Chile and Uruguay. In terms of reproductive health Argentina resembles Mexico, which shows worse social indicators and a less developed welfare regime within the region (See Table 1). This situation has contributed to support a legitimate case for the development of reproductive rights in Argentina (CEDES 2004).

As it is argued in this paper, the adoption/translation of these new ideas must be understood vis-à-vis their respective policy legacies on reproductive policies but also on the configuration of institutions and interests around abortion and contraception. In dealing with policy change, an emphasis is put into the role of political institutions, and constitutional and legislative frameworks. In the cases of Argentina and Mexico, institutional reforms associated to democratization have opened opportunities for women's rights.

Argentina's military junta collapsed in 1982 as a result of the *Malvinas/Falklands' war* and the combination of a deep economic crisis and human rights violations. These events opened a fast transition process that installed democracy through contested elections in 1983. Women's mobilization was canalized through the resurgence of the traditional dominant political parties, the PJ (Partido Justicialista-*Peronism*) and the UCR (Unión Cívica Radical), which were allowed to compete freely in national elections.

Different from the Argentina's case, Mexico's democratization occurred in an incremental way, as a result of the crisis of the developmental centralized national state. It was a process in which fiscal and administrative decentralization played a key role in

the democratization process. Federalism structured the transition process by providing multiple arenas for political contestation. As a result of the introduction of several national electoral reforms, the federal structure channeled the pluralization of party politics into multiple local political arenas where national parties were able to mobilize resources and challenged the PRI hegemonic dominance (Ochoa-Reza 2004). Certainly the democratization of sub-national scales became significant in the process of democratization².

In both countries, a sub-national opportunity structure emerged with the democratization of the cities of Buenos Aires and Mexico. The political autonomy of Buenos Aires city, granted in 1996, provided an effective opportunity structure to expand women's rights, empowered not only by the implementation of the women's legal quota that allowed an increase in the number of women MP's in the new Legislature, but also by the election of a progressive government which strongly opposed President Menem's social conservatism. Like in Argentina, a significant transformation was the territorial democratization of the Federal District (Mexico City) in 1997. Like in the case of Buenos Aires city, it allowed the habitants of the city to elect the governor and a new legislature, while previously the President had the power to appoint the Major of the city (Abal Medina 2003). The political autonomy of Mexico City in 1997 opened critical opportunities to advance women's rights, especially because the leftist PRD (Partido de la Revolución Democrática) took power in that year. Since Vicente Fox from the PAN (Partido Acción Nacional) was elected President in 2000, the PRD has been a strong political opponent to the national government controlled by the conservative PAN.

In the next Sections an analysis of the main political events that transformed reproductive policies in both countries is developed.

Argentina's reproductive struggles at different scales

Argentina is a country with a long pro-natalist tradition. Ideas about increasing the number of people in the country have predominated since the construction of the national state. Around 1880 the scarce native population and before the new opportunities

² Gibson (2004) notes the theoretical and empirical links of democratization and federalism in several countries of Latin America, such as Argentina, Brazil, and Mexico.

provided by the international economy, the need for population growth was entrenched into the national state (Novick 1993). “Gobernar es poblar” (to govern is to populate) was a political idea of the founding fathers that became central in the construction of the national state and the subsequent development of the welfare state. Immigration – mainly European – and pro-natalism implicitly sustained through the male breadwinner family form were critical to promote development. As a result, women’s reproductive capacity was exalted throughout the twentieth century (Nari 2004). Labor legislation to protect maternity was introduced in 1934. Motherhood and familism provided ideational support to the Bismarkian welfare state³. Despite the conservative nature of the old regime, with its attachment to traditional family values and gender roles, reproductive decisions were delegated to the family and no family-planning policies were introduced.

After a long period of institutional and democratic instability, the national state’s involvement in this issue was more evident in strong authoritarian views on population policies, a tendency particularly pronounced during the military dictatorship of the 1970s. In 1974 President Isabel Perón issued decree 659/74, which prohibited any activity related to reproductive control, such as the commercialization of contraception in pharmacies, and launched national campaigns ‘to publicize the risks’ associated with the use of medical contraception. In 1977, the military dictatorship issued decree 3.938 “*Objetivos y Políticas Nacionales de Población*”, which included the elimination of all activities involving the promotion of fertility control. Following the recommendations of the National Council of Demographic Policies (*Consejo Nacional de Políticas Demográficas*), the military regime of President Videla issued another executive decree to prevent infant mortality and prohibit any practice related to medical contraception. Activities related to family planning were cancelled “for reasons of national security” based on a geopolitical diagnosis of hypothetical military conflicts with neighboring countries and the need to increase the Argentine population. (Torrado 2004)

In this period, Argentina declined to take part in international surveys of fertility and the use of contraception. Moreover in 1974, at the Bucharest Conference of Population, Argentine representatives denounced international interventions in domestic

³ Huber (1996) and others have theorized Argentina – along with their neighbors Chile and Uruguay – as predominantly Bismarkian.

affairs, principally from the interests of the United States. Thus, Argentina followed a politics of isolation vis-à-vis international standards and procedures. These decisions had a strong impact on the poor, increasing the socioeconomic gap in the fertility rate and the access to health services.

Abortion in Argentina has always been a controversial issue, but the debate was traditionally limited to constitutionalists. Paradoxically, Argentina was one of the first countries in the world and the first in the region to introduce 'eugenic abortion' in its civil and penal codes. Abortion is permitted in cases of medical necessity and rape, including the presumed rape of mentally handicapped women. The two main reasons behind the regulation of abortion were eugenics and compassion when the woman was sexually assaulted (Htun 2003).

In Argentina, since 1922, when abortion was included in the Penal Code, art.86 has remained controversial and abortion continues to be a matter of constitutional debate. Despite Argentina being a pioneer in regulating abortion, the ambiguity of the writing opened different opinions on how to understand the extent of the cases in which abortion could be legally acceptable, in particular in the case of rape victims⁴.

Democratization in 1983 created a new political opportunity structure for women's organizing and participation. Although previous authoritarian legislation was removed, abortion and contraception did not emerge as conflictive cases until the Cairo Conference on Population and Development (1994), which redefined this debate in the international scale. Indeed, the 1990s was a period of increasing construction of global norms and the transnationalization of the reproductive rights debate in Argentina. During Menem's Presidency, the Argentine Government actively participated in the Cairo and Beijing conferences, but along with the Vatican and other 'fundamentalist' countries, which opposed reproductive rights, introduced important reservations to the final version of the Documents. As the main strategy, the Argentine Government argued to understand and respect the principles included in CEDAW, a Convention that had been ratified by the Argentine Congress in 1985 before the Cairo conference and during the Presidency of Raúl Alfonsín from the UCR (Unión Cívica Radical), a social-liberal party.

⁴ For a detailed explanation of this issue see (Htun 2003)

In those reservations Menem's government argued that Argentina only supported the original text of CEDAW, which did not explicitly use the term 'reproductive rights'. In Art.16, CEDAW establishes: "...The same rights [for men and women] to decide freely and responsibly on the number and spacing of their children and to have access to the information, education and means to enable them to exercise these rights". The Argentine government considered that this Article did not alter the basic principles sustained by the Argentine state in terms of keeping the traditional form of family 'as the basic social unit' of society, which included the exclusion of abortion as a service and method of fertility regulation. The Argentine government understood the concept of 'reproductive rights' as it was expressed in both Cairo and Beijing were 'euphemisms' used to introduce and legitimate abortion and 'abortive' methods of contraception. Indeed, the Vatican developed this position and the international Catholic network actively engaged in the international debates. In Cairo 1994 and Beijing 1995 Argentina introduced important reservations related to the concepts of reproductive rights and family.

Despite the official 'international' discourse, at the domestic level policies to address family planning from the federal level were almost nonexistent. Because of health services were decentralized in Argentina, Menem Government assumed that it was the responsibility of the provincial governments to implement family planning programs. Thus, regional disparities in health resource allocation disproportionately affected poor regions, where the highest concentration of women in need of family planning services is located⁵.

As a result of these international developments two important domestic backlashes occurred. First, President Menem promoted – in the event of the Constitutional Reform of 1994 – the inclusion of an anti-abortionist clause, granting the right to life from the moment of conception. Second, the president issued an executive decree declaring March 25 the 'Day of the Unborn Child', citing international conventions of human rights (Htun 2003). These actions produced an important mobilization of the Argentine women's movement supported by the first woman activists

⁵ The lack of responsibility of the federal state was a matter of debate during the submission of the Argentine reports on women's status to the CEDAW committee in New York. For an analysis of these documents see (Loprete forthcoming 2010).

to lead the National Women Council - CNM from 1992 to 1994, Virginia Franganillo that ended with Franganillo's resignation as a president of the CNM (Interview 7).

The newly appointed President of the CNM Esther Schiavone supported anti-abortion positions along with those of President Menem. During her time in office, Argentina went to the Beijing Conference along with the pro-life group of countries allied to the Holy See, introducing new reservations in the area of family and reproductive rights. As a response, female MPs submitted a bill to the Deputy Chamber in 1995 to implement family-planning services in the country. Although the bill passed through the Deputy Chamber, it was never debated in the Senate, and expired in 1997. By 1996 however, a radicalization of the reproductive rights debate between the pro-life (Government, Catholic Church, and other conservative groups) and the pro-choice groups represented by part of the women's movement and leftist ideological positions was evident. Moreover, at the international level, it was evident that the strategies of the women's movement were different than the official position of the Argentine Government (Loprete forthcoming 2010).

While the national state resisted pressure from above due to the new international ideas on reproduction, the territorial democratization of Buenos Aires city opened a new opportunity by new constitutional provisions and an arena of debate and participation. At least at the discursive level, the city of Buenos Aires had the privileged scenario to install a different gender equality agenda that also explicitly addressed reproductive rights as basic human rights. The new Constitution of Buenos Aires city included in its Chapter 9, Art 37 "The recognition of the sexual reproductive rights, free of coercion and violence, as basic human rights, especially to decide responsible on the procreation and the number of children and the space between them. [The Constitution] guarantees equal rights and responsibilities of women and men as progenitors, and it promotes the integral protection of the family" (Buenos Aires Constitution, 1996)⁶

Albeit the change in the National Government in 1999 contributed to reshape the discourse, providing more opportunities for pro-choice groups (Htun 2003; Blofield

⁶ In addition, after 1995 several provincial legislatures passed laws to address responsible parenthood and family planning, the provinces of Patagonia (the southern region) were pioneers on that matter. However, I argue that the debate and policies are more relevant in Buenos Aires city because of the political, economic and cultural centrality of the Metropolitan urban sphere and its influence in affecting national debates.

2006); the first policy shift took place in the newly democratized city of Buenos Aires, where the most significant debates and struggles occurred. After a long debate conducted in 2000, the legislature passed two bills that implemented family-planning services in the public hospitals following international standards. However, abortion was not included, as the city does not have autonomous powers to define a different penal code than the federal one.

The 2001 financial crisis was accompanied by increased impoverishment—in particular female poverty. As a result of this crisis, poverty rose and a huge political crisis resulted in the installation of a new government before the election of Kirchner in 2003. Provisional President Eduardo Duhalde appointed an international health expert, Dr. Ginés Gonzalez Garcia, who developed an active campaign to implement family planning, maternal health care, and the distribution of generic drugs to poverty-stricken families. He stressed the need to reduce child and maternal mortality and to take action regarding access to contraception services as policy priorities.

The appointment of Gonzalez García as a Health Minister was crucial in the advancement of this issue in the political agenda. During the Senate session in which the law was debated, the presence of the Ministry of Health and the first lady Hilda Duhalde was crucial in order to convince many Senators of the need to pass the law (Interview 24). As a result, in October of 2002, the Congress finally voted to create the “*Programa Nacional de Salud Sexual y Procreación Responsable*” in the Ministry of Health. This program is part of a World Bank funded program of U\$S 750 million. The Provincial-Maternal-Child Health Sector Adjustment Loan attempted to deal with the consequences of the severe economic crisis of 2001, and it was part of the poverty reduction strategy promoted by multilateral financial institutions. The national law aims to address regional disparities in family planning services. Located in the Ministry of Health and Environment, the program’s goals are to provide contraception services through the public hospitals and health centers and guarantee contraception coverage through the social health insurance system (*Obras sociales*). It includes free access to contraception and counseling, human resource training in order to effectively implement the program, and guarantees the performance of legal abortions (mother’s health risks and insane or mentally ill women who were raped) in public hospitals.

The law did not legalize abortion, which is still a penalized activity in Argentina. The opposing views during the debate banned the inclusion of claims to de-criminalize abortion. Instead, the program includes the distribution of contraceptives to the entire population without discrimination, provides assistance and support to help implement different local programs in all provinces, offers training to health teams and facilitates social diffusion of sexual health and responsible procreation⁷.

The conservative backlash to the new reproductive law however did not take long. Despite this shift in public opinion as a consequence of the debate on reproductive rights, the conservatives continued to be highly organized and decided to go to court to stop any change in reproductive policies. Several specific aspects of the new law (2003) opened the door to a conservative backlash, in most cases led by social activists' representative of pro-family and catholic groups, and the Catholic Church itself. One of the highly publicized cases dealt with the issue of emergency contraception. In all cases pro-life organizations, which are also transnationalized, organized against the new reproductive policies and any other attempt to advance the issue. As a result, sexual health and reproduction became a public discussion in 2002 and 2003. In 2002 a Catholic organization "Women pro-life" (*Mujeres por la vida*) mobilized judicial resources to ban the law. In addition, several women's organizations were also organized to oppose the conservative backlash in particular, the "Catholics for Free Choice" (*Católicas por el Derecho a Decidir*), located in Córdoba province played an important role in denouncing Vatican's positions against women's rights (Interview 23).

An increasing number of doctors with professional experience in the public health sectors have recently entered politics, some of them becoming health experts in the bureaucracy like the Health Minister and others as representatives in the National Congress. Even in the view of some women politicians they are greatly contributing to frame the debate on abortion (Interviews 24, 26 and 27). In this regard, some links between women's activists and health experts were crucial to advance the issue. For

⁷ Two important aspects of the new law are the separation of sexual health from reproductive functions, moving one more step from the Buenos Aires city law, which only mentioned responsible parenthood, and the implementation of a comprehensive approach to women's reproductive health reflecting on the new international standards. It also includes the involvement of specialized NGOs in monitoring the program addressing a gender perspective.

example, the *Foro por los Derechos reproductivos de la Mujer* (*Forum for Women's Reproductive Rights*), headed by Dr. Mabel Bianco and supported by health experts in the field of reproduction is perhaps the most relevant women's NGO that advocates on reproductive rights in Argentina. Mabel Bianco was a public official during the Government of Raul Alfonsín (1983-1989).

While the women's movement has been important in shaping the discourse, the alliance with the newly appointed Minister of Health was critical to advance the issue in the public debate at the national scale. After the financial crisis of 2001, the links between the women's movement and the new Minister of Health Ginés Gonzalez Garcia were crucial in shifting reproductive policies. As I explained before, with the new public support of President Duhalde, and in the context of an emergency situation generated by the financial crisis, his appointment was a major determinant to convince official legislators, especially the Peronist Senators, who were sensitive to pressure from the Catholic Bishops and the conservative groups and thus very reluctant to liberalize reproductive policies. Based on his technical expertise and encouraged by the international discourse on reproductive rights and health, Gonzalez García was essential in penetrating the bureaucratic structure of the state with this renewed discourse.

The Minister of Health developed a vigorous campaign to diffuse reproductive rights and he even expanded it during the Kirchner's government. These events increased the level of political tension between the national government and the Catholic Church, which was very high during 2006, gaining an important amount of media coverage⁸.

The intensity of political tension between the Government and the Catholic Church grew increasingly. Moreover, in early 2006, a committee of experts from the Ministry of Justice drafted a bill to reform the penal code that included a change in the controversial article 86 on abortion. The new article included in the draft said: "...women will not be punished when abortion is practiced with her consent and within the three first months of pregnancy, if the circumstances are excusable" (La Nación, March 24, 2007). The media diffusion of this draft generated a strong opposition of conservative groups

⁸ Three conflicts that were also derived from the early discussion on the procreation program have been debated extensively in the media and in the Courts: Teenagers and parent's rights; contraceptive surgery (*tubal ligation*) that ended in a law to regulate the practice in the public sector in 2006, and therapeutic abortion or the (only accepted) legal form of abortion in the country.

and quickly the Minister of the Interior and President Kirchner's voice speaker Anibal Fernández declared that the national government did not 'unilaterally' promote the decriminalization of abortion, moving back from its new position. The year 2007 marked the peak in the polarization of the reproductive rights debate, and the most serious chance to introduce significant changes in the penal code in the way of de-criminalizing abortion.

The judicialization of reproductive rights and the increasing media attention and public controversy – especially on therapeutic abortion - motivated several women MPs to introduce bills into the national Congress in order to define administrative procedures to enforce its practice in public hospitals. They are still being debated in the legislative arena.

Mexico's reproductive policies: From International Influence to Sub-national Change

Until 1974 Mexico had also developed a pro-natalist policy vis-à-vis the possibilities of the international economy and the expansion of the welfare state. The startling decrease in mortality resulting from the broad expansion and coverage of health services, as well the importing of low cost, efficacious medicines discovered in the developed countries along with pro-birth policies that attempted to satisfy the demand for labor for a growing industry and to populate the national territory, encouraged demographic growth in Mexico throughout the twentieth century, above all from 1954 to 1974, when growth rates in excess of three per cent per annum in Mexico were among the highest in history. This trend was rapidly reversed however (See Table 2). Along with large population growth, the US involvement in defining international population policies based on issues of national security had a significant impact in Mexican policies, when the government decided to implement a policy of population growth control (Chanes 2004). Unlike Argentina, the long-term PRI hegemonic state implemented an anti-natalist policy in line with the new international trends on population control. Later in the 1980s, when political liberalization started, a series of reforms conducted to liberalize reproductive policies were introduced at the sub-national scale.

Abortion is illegal in Mexico altogether, except under severely restricted specifications. Unlike Argentina, in the federal system of Mexico, each state has its own penal code, and provisions for legal abortion differ from state to state. Abortion of pregnancy as a result of rape is the only acceptable reason for legal abortion in all 31 Mexican states, as well as in the Federal District of Mexico city. Other states have additional provisions for legal abortion, such as when the woman's life is at risk, or in the case of fetal malformations. (Sánchez Fuentes et al. 2008, 348)

As in Argentina, abortion laws in Mexico remained untouched since 1931. Reforms to liberalize abortion policy did not start until the 1980s, when a series of new laws were introduced in a few states. This was the case of Yucatan, a poor southern state, where the social welfare code stipulates that a mother of three children who can exhibit serious economic reasons could have an abortion. Similarly, the state of Coahuila allowed abortion in the case of potential several physical or mental genetic or congenital defects of the fetus (Haussman 2004, 117). These developments at the sub-national scale were favored by regime liberalization that started as a consequence of the debt crisis of 1982.

During the 1990s, the PRI government continued with its family-planning policy, especially favored by the Cairo 1994 events. Only after the PRD took control of the Mexico City government, the first legislative changes were introduced in 2003. The legislation established that penalties for women forced to have an abortion and authorized the Ministry of Health to provide free, high-quality abortion services within five days of receiving a request for an abortion. Unlike Argentina, the federal system allows the City to have an autonomous regulation of the medical profession, and thus conscientious objections were regulated, allowing individual doctors to claim this status, but preventing entire public-health institutions from doing so. This meant that all public institutions in Mexico City were obliged to have doctors on staff at all times who were not conscientious objectors.

These reforms reached their peak in 2007 in the event of the de-criminalization of abortion in the Federal District of Mexico city, establishing that abortion can be performed during the first 12 weeks of pregnancy, including: cases of fetal malformation, in the event that the pregnant woman's life is at risk, and in the case of non-consensual artificial insemination (Sánchez Fuentes et. al. 2008). The change in the Mexico City law

had an expansive effect because similar laws were replicated in other progressive states, which began to advance legislation and procedural guidelines for legal abortion in the case of rape (Sánchez Fuentes et. al. 2008). .

It is important to note that the PRD has been the main political contender of the PAN in the 2006 presidential election. The PAN's candidate, Felipe Calderón won for only 200,000 votes. The PRD's presidential candidate, Manuel López Obrador accused the government of fraud and wanted to challenge the elections in Court. Since then, the city of Mexico headed by the PRD became the strongest district of Mexico that opposed the conservative national government.

Argentina and Mexico reveal different policy legacies related to demographic policies that had predominated throughout the twentieth century and the political interpretation of demographic indicators such as population growth and fertility. Since the 1970s, the influence of international ideas about fertility regulation as a mean of population growth control was entrenched into Mexican national state policies pertaining to reproduction. While debates on abortion were not salient during the period of the authoritarian Mexican state, population policies encouraged the use of contraception and implemented campaigns to provide family planning services in the private and the public sector; in particular, the General Population Law (Ley General de Población) of 1974 regulated immigration and fertility in order to maintain an appropriate balance between population and development. The law stipulates, “[t]o implement family planning programs through educational and public health services, respecting human rights and preserving the dignity of families, with the goal of regulating rationally and stabilize population growth, as well as to achieve the best use of human and natural resources” (Article 3, II, 1974). In addition, the law “promotes the full integration of women into the economic, educational, social and cultural process” (Article 3, V, 1974). The link between development and population control was the key driver in the implementation of family planning services, creating an opportunity for women to advance women's rights despite the opposing influence of the Catholic Church on the matter.

These anti-natalist policies were promoted internationally by the new national security agenda of the USA and the predominant Malthusianism of the World Bank policy recommendations. During the Presidency of Luis Echeverría Alvarez (1970-1976)

and in line with those international standards, Mexico adopted anti-natalist policies. Along with the new Population Law of 1974, the Government implemented national campaigns to promote the benefits of small families for social well being, using the slogan “*La familia pequeña vive mejor*” (small families live better). Moreover, reproductive rights were also included in the National Constitution with the reform of 1974. With this reform, article 4 reads that each person has the right “to decide in a free, responsible and informed manner about the number and spacing of his/her children” (Macdonald and Mills 2009)

In Argentina, anti-natalist policies never existed. Slower population growth and an optimum equation between population and territory did not create opportunities to discuss the lack of family-planning services. In addition, the differential access to health services that relegates the poor to the public sector did not provide a fertile terrain to politically discuss reproductive rights. This situation changed with the 2001 financial crisis and the need to implement anti-poverty policies in an emergency context.

As a result of the debt crisis of 1982, the developmental centralized state of Mexico started to be transformed (Teichman 2001). As in the case of Argentina, democratization had important effects on women’s rights, because it clearly opened political and institutional opportunities for women’s organizing and for the advancement of women’s rights. The split of the PRI into two antagonistic political tendencies (left and right) between 1985 and 1986, and the emergence of the center-leftist PRD, officially formed in 1989, expanded opportunities for progressive forces especially at the sub-national scale. At the national scale, the PAN remained the main political contender of the PRI, until they won the national election in 2000. For the first time in Mexican contemporary history, contested elections became reality, allowing a significant shift in economic and social policies. As a consequence of the decentralization and democratization process, in the 2000 elections, the 80 year dominance of the PRI was overturned, taking power a center-right political party (PAN) that appointed Vicente Fox as President.

Political liberalization (1982-2000) and democratization through contested elections in 2000 have also shaped reproductive policies in varied ways. Between the 1980s and 2000 several key international and domestic events favored the liberalization

of abortion, having an influence in the sub-national scale. On one hand, it was the advancement of center-left political parties in several municipal offices at the sub-national scale due to the division of PRI and the emergence of PRD. This concluded in more progressive political representation in state legislatures. Moreover, preexistent NGOs such as GIRE (Grupo de Información de Reproducción Elegida), which has spread a reproductive rights discourse since the 1950s found resonance in progressive political forces, in particular with the electoral advancement of the PRD; a political party more sensitive to women's interests. On the other hand, the Cairo 1994 and Beijing 1995 policy recommendations on reproductive rights have a strong impact – like in Argentina – among the women's groups. The national government of President Zedillo was receptive to these international trends and in 1999 it was reaffirmed “the commitment of Mexico to ensure that unsafe abortion would be addressed as an important public health problem” (Hausman 2004, 125).

Despite the liberalization of reproductive rights during the 1980s and 1990s favored by international developments and the preexistence of specialized NGOs very active in Mexican society, the year 2000 and the appointment of President Vicente Fox from PAN (affiliated to the International Christian Democracy) constituted the first backlash when the health ministers were more inclined to follow UN agencies policy recommendations (Hausman 2005). Even before he was elected for the Presidency, Vicente Fox promoted pro-life groups. For example, one month before he was elected, the conservative state of Guanajuato (his home state) passed a bill that made abortion illegal for rape victims and included penalties of one to three years prison sentences for both the woman and the doctor (Lamas 2001). Indeed, at the sub-national scale, Guanajuato has been a leading case in the conservative backlash to reproductive rights in Mexico. More recently, in 2009 the state legislature of Guanajuato included in its Constitution the recognition of life from the moment of conception, implying not only that abortion is illegal but also banning post-coital contraception such as emergency contraception.

Similar to Menem's Presidency (1991-1999), Fox appointed pro-life women in key administrative positions, promoted pro-life groups and adopted a pro-life antiabortionist discourse, also supported by his attachment to the Catholic Church. The

presidency of Felipe Calderón (2006-present) – also from the PAN – deepened the relationship with pro-life groups and strongly opposed abortion, strongly criticizing of the liberalizing politics of Mexico City (Macdonald and Mills 2009).

According to the 2007 Mexico City law, abortion is now permitted on demand up to 12 weeks of gestation, through several changes to the city's penal code and health law. As a result of the new legislation, services have to be provided free of charge in public hospitals for Mexico City residents and available for a moderate fee for women from other states or countries. In de-criminalizing abortion, the law regulates the 'termination of pregnancy' during the first 12 weeks. The term pregnancy is "officially defined as beginning when the embryo is implanted in the endometrium" (Sánchez Fuentes, et. al. 2008, 349). This is important because it implicitly legitimises emergency contraception such as the 'morning-after pill'. In addition, the Mexico City law is aligned with international standards by establishing that sexual and reproductive health are a priority in health services, with the goal of preventing unwanted pregnancies and sexually transmitted diseases (STDs).

. In order to implement the new law, the Mexico City Government implemented a program to train doctors, nurses and social workers. Between April 2007, when the law was passed, and April 2009, 23,000 abortions have been performed legally in Mexico City. (González Méndez 2009). The new law was possible because of two related political events. The first political event was the democratization of the city since 1997, which gave rights to the citizens of the district. The second event was the election of the PRD, the center-left political party supportive of reproductive rights discourse and a strong ally of the reproductive rights movement (Lamas 2001). In addition, health services were decentralized in Mexico in the 1990s, giving responsibility to the local government of health service delivery.

International developments and the new opportunity structures provided by the democratization of Mexico City were critical to advance reproductive rights. However, "the District could not have continued with the implementation of the law without a relevant provision of the Mexican constitution, and the recognition of the constitutionality of its actions by the National Supreme Court" (Macdonald and Mills 2009). In 2008 the Supreme Court ruled that the Mexico City law did not violate the

national Constitution because since 1974 it places the constitutional right of deciding about having children and the space between them. However, the National Supreme Court did not rule on defining when the life starts, an aspect of the debate that pro-life groups are very committed to discuss. For pro-life groups and the Vatican, life starts from the moment of conception and its Constitutional level was promoted in several sub-national states. Indeed, a conservative backlash came not only from the national scale, especially when the national government appealed to the Supreme Court in order to restrain the new law. Moreover, since 2007, 13 states - Baja California, Colima, Durango, Morelos, Nayarit, Sonora, Puebla, Quintana Roo, Guanajuato, Chihuahua, Jalisco, Campeche, and San Luis Potosí - have amended their constitution including the protection of the fetus from the moment of conception, overlooking previous women's rights recognition, such as the pre-existent right of a legal abortion in cases of rape and life threatening circumstances (Macdonald and Mills 2009).

A second conservative backlash came from doctors in public hospitals, who refuse to obey the new laws. However, "after so many doctors refused to perform abortions, the Government hired four new doctors to help handle the load at the 14 city hospitals where the city initially offered abortions. Now 35 doctors offer the procedure in city medical facilities" (The New York Times 2008).

Recent political developments of Mexican reproductive policies disclose mixed results, which are reflected at the territorial level. On one hand, advancements have been made in the Federal District of Mexico City bolstered by the political opposition of the PRD to the national conservative government. However, these changes activated the pro-life groups to act in other sub-national districts implementing much more restrictive laws that previously existed according to Mexican policy legacies; that is, establishing Constitutional antiabortionist clauses, to satisfy fundamentalist principles attached to the current ideology of the Vatican and other religious groups.

Convergent International Ideas, Institutions, and Politics in Reproductive Policy Change: Conclusions and Hypotheses for Future Research

The reception/translation of the new reproductive rights framework developed since Cairo 1994 has influenced reproductive policies in Argentina and Mexico by challenging

their national conservative gender regimes. The adoption of these ideas has been shaped by different policy legacies related to demographic and reproductive policies in both countries and the international openness of their political regimes to international influence, especially since the 1970s.

Since the 1970s Mexico has been a receptor of international ideas on population growth control. The centralized Mexican state was capable to implement family planning policies responding to national and international security interests. Mexico has also been characterized by the presence of international NGOs, such as the IPPF and other UN based agencies involved in promoting family planning and reproductive rights (Haussman 2005). Although these policies opened up windows of opportunities to advance women's rights, these policies were implemented based on demographic concerns and not with the goal of empowering women.

In contrast, Argentina's population growth was historically low. In terms of the international security agenda, Argentina's demographics did not represent a 'problem' for international donors. Quite the contrary, in the 1970s the Argentinean military junta defined national security interests based on the need to secure borders from other military dictatorships existent in the Southern Cone. However, the redefinition of population policies since Cairo 1994 influenced national debates on reproductive rights and health. While in the 1990s Menem's government resisted pressures from international ideas and some important women's organizations that advanced reproductive rights, the shift in indicators was also critical to install a reproductive rights discourse. Maternal mortality and not fertility rates became relevant to denounce the lack of reproductive rights and to point out the state's responsibility on health service delivery. In Argentina, the financial crisis of 2001 resulted in increased levels of poverty and inequality and created an unprecedented emergency situation that provided the context for the reception of these new ideas.

Changes in the international scale were fundamental to understand the way those ideas were able to penetrate in different national and sub-national settings. Nonetheless, differences in institutional federal arrangements and partisan politics help to explain the gender outcomes of the policy process in Argentina and Mexico.

A first relevant element is the changing institutional context provided by democratization, which is highly important in Argentina, and a hypothesis for further research that is, while actors would frame new ideas in specific institutional settings, weak institutional contexts provide avenues for policy innovation and the introduction of new ideas. Unlike highly stable institutional environments, unstable institutional scenarios are more sensitive to external shocks, and may be more receptive to fast policy transfer (Peck 2002). This is not to imply that international policy diffusion is an uncritical adoption of new ideas. Instead, domestic historical legacies shape policy discourses, resulting in path-shifting changes where drastic change is rare, at least in well-established social policies and large constituencies have emerged (Béland 2005, 13). This aspect is particularly relevant in Argentina, a country with a longstanding political and institutional instability.

Beyond democratization and institutional instability, this paper highlights another relevant dimension that affect the reception/translation of international ideas. The federal/provincial-state arrangements that regulate abortion and reproductive rights differ in Argentina and Mexico. Unlike Argentina, in the federal system of Mexico, each state has its own penal code, and provisions for legal abortion differ from state to state. The government of Mexico City headed by the PRD has been a strong ally of women's interests, especially on reproductive rights. However, the advancement of reproductive rights in Mexico City did yield a 'territorial backlash' while at the national scale the PAN government remains a strong opponent to abortion rights. In addition, the long-term presence of international donors and NGOs favored the formation of alliances between the reproductive rights movement and the center-left political party. The PRD has based its main political power in Mexico in the Federal District, and it has implemented a set of social policies to differentiate itself from the social conservatism of the national PAN (Macdonald and Mahon 2009).

The political autonomy of Buenos Aires city, granted in 1996, provided an effective opportunity structure to expand women's rights, empowered not only by the implementation of the quota that allowed an increase in the number of women MP's in the new Legislature, but also by the election of a progressive government which strongly

opposed President Menem's social conservatism. Due to the economic and political prominence of Buenos Aires city, and the geographical location of the national government there, these debates were easily nationalized, challenging the Argentinean gender regime. Buenos Aires city is a virtual laboratory of policy innovation, the flow of ideas and the struggles of opposing forces, and it was historically a site of feminism (Lavrin 1994).

There are limits there, however, to the advance of reproductive rights—particularly abortion rights. Abortion is regulated through the federal penal code, and debate about it has been difficult to extend to the national scale. Besides the fact that the legislature of Buenos Aires is fragmented (Different ideological tendencies have governed since 1996, and they face problems to build majorities in the Legislature), the city does not have authority to regulate abortion in its own district, limiting the debate and the law to family-planning services that excluded abortion as a method of fertility control. However, in 2007 the radicalization of the reproductive politics at the federal scale provided an opportunity to reform the penal code; although without success. A hypothesis – for further exploration - is that overrepresentation of other more conservative districts in the National Congress turns a substantial change at the federal scale more difficult, a situation that shapes Mexican politics as well.

A final aspect of the situation is partisan politics and women's representation in parliament. Both countries have added electoral reforms to include women, establishing a minimum of 30% women in the party lists. Argentina was a regional pioneer in including the legislative quota, having antecedents dating back to 1952, when Perón's wife, Eva, fostered the 33% of women in the Peronist party lists. The introduction of the legal quota in 1991 (all parties must include at least 30% of women in winnable positions) brought a significant number of women into parliament, transforming the legislative arena into an effective venue from which to advance women's rights, and helping create links between women MP's and activists outside formal politics (i.e. women's groups and associations). Their cause was actually helped by the economic crisis of 2001, as it increased poverty and exposed women's status related to both health and poverty.

In Argentina the party system is very fragmented and sub-nationalized in scope (Escolar et. al. 2002) (Leiras 2007). Therefore, with the growing importance of territorial considerations, it is increasingly difficult to place Argentine parties in the left-right continuum. This pattern has been exacerbated with the financial crisis of 2001. The high level of fragmentation and sub-nationalization of political parties along with ideological dispersion have paradoxically opened opportunities for women MPs to build agreements beyond their party blocs. However, the high degree of rotation of MPs in Congress and political fragmentation create an uncertain scenario to build long-term policy changes. It can be argued that chances to transform reproductive policies at the federal scale - like in 2003 and 2007 – were the result of an exogenous shock situation. The 2001 financial crisis and its consequence of impoverishment created opportunities to frame women's demands under an 'acceptable' framework. Moreover, in the context of the so-called poverty reduction strategies, the reproductive health of women, particularly poor women, became a legitimate case to advance reproductive rights, giving birth to the 2003 family-planning law.

In addition, ad-hoc alliances between women activists, MPs and members of the executive office committed to the issue, like the Minister of Health were necessary to frame and advance this issue in both legislative and executive arenas, especially at the federal scale. The ad-hoc character of legislative/executive alliances is reinforced by the fact that political parties have not traditionally committed to issues such as divorce (1987) or reproductive rights, leaving their members individual freedom to assume responsibility for their votes. Thus, political parties do not tend to vote as a bloc in sensitive gender issues, which are actually affected by moral and religious personal beliefs.

Unlike Argentina, Mexican political parties are more nationalized and they remain more structured internally. Compliance with the quota in Mexico was more limited than in Argentina. In the case of Mexico, the three main political parties have combined national gender quota laws with primary elections to nominate their candidates. Although the number of women in the Congress rose, the Federal Electoral Institute interpreted the gender quota law in a way that weakened its effect on women and limited the degree of openness in the primaries that were held (Baldez 2003).

This paper argues that unlike Argentina, political parties in Mexico remained strong at the national scale, having also varied influenced at the sub-national scale. Although partisan politics inhibited the inclusion of women, they are still aligned to their programmatic agendas, and ultimately this is what it has a significant effect on gender policy outcomes. For example, the women from PRD have been more committed to advance reproductive rights, while women from the conservative PAN are strong opponents of reproductive choices (Lamas 2006). Ultimately, women's ideologies and their partisan identifications determine gender policy outcomes.

This paper has developed a comparative analysis of reproductive policy change in two conservative gender regimes: Argentina and Mexico. It highlights the relevance of the long-term influence of policy legacies on population and reproduction. However, significant changes have been introduced in both regimes, affected by new convergent ideas on reproductive rights and the domestic configuration of institutions – in particular federal/local arrangements – and partisan politics and women's representation. In this line of analysis further research is needed at both national and sub-national scales.

Table 1: Fertility and maternal mortality rates

Latin America (Selected countries – High human development Index)

		Total Fertility Rate	Total Fertility Rate	Maternal mortality ratio (per 100,000 live births) Reported	Maternal mortality ratio (per 100,000 live births) Adjusted
HD rank	Country	1970-75	2000-05	1990-2004	2000
36	Argentina	3.1	2.4	44	82
38	Chile	3.6	2.0	17	31
43	Uruguay	3.0	2.3	26	27
48	Costa Rica	4.3	2.3	33	43
53	Mexico	6.6	2.4	65	83

Source: Human Development Index (UNDF 2008)

Table 2: Population and Population Growth in Argentina and Mexico (1975-2015)

Country	Population total (Millions)			Population, annual growth rate (Millions) %	
	1975	2005	2015	1975/2005	2005/2015
Argentina	26.0	38.7	42.7	1.3	1.0
Mexico	60.7	104.3	115.8	1.8	1.0

Source: Human Development Index (UNDF 2008)

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