INTRODUCTION

This work reflects the slow intimacy of solidarity over time, linking to some of the ideas of Berlant (1998) and Mountz et al. (2015). We uncover some of what we know and have known with examples from anti-apartheid activism and the women’s health movement in South Africa. Solidarity is an expression of knowing trust. Knowing that you are often on each other’s side and leaning towards justice, demanding a relationship of knowing in instances of vulnerability. Being held in solidarity is a gesture of engaging in a shared humanity that at times gives the comfort of familiarity. In spaces where there are shared feminist and political goals and objectives, we assume safety and belonging only to find this is not to be true. Acting in solidarity demands consideration and risk. In moving towards solidarity, one turns one’s body and face towards the other. Solidarity at times demands resistance and speaking truths to power. An engagement of solidarity is conscious and intentional. We reflect engaging with each other over four decades, lessons on listening deeply, hearing seasons of life’s celebrations, joys, questions, and struggles. In this process, questions surface, asking for more on consideration. Our reflection is of collective experiences of slow intimacy, of soft and hard boundaries, remembering and longing as we hold each other in solidarity. We use our individual voices to show specific angles to these collective experiences.

Keywords: sexual and reproductive health and rights, solidarity, women’s health, abortion

ABSTRACT

This work reflects the slow intimacy of solidarity over time. We uncover some of what we know and have known with examples from our anti-apartheid activism and the women’s health movement in South Africa. Solidarity is an expression of knowing trust. Knowing that you are often on each other’s side and leaning towards justice, demanding a relationship of knowing in instances of vulnerability. Being held in solidarity is a gesture of engaging in a shared humanity that at times gives the comfort of familiarity. In spaces where there are shared feminist and political goals and objectives, we assume safety and belonging only to find this is not to be true. Acting in solidarity demands consideration and risk. In moving towards solidarity, one turns one’s body and face towards the other. Solidarity at times demands resistance and speaking truths to power. An engagement of solidarity is conscious and intentional. We reflect engaging with each other over four decades, lessons on listening deeply, hearing seasons of life’s celebrations, joys, questions, and struggles. In this process, questions surface, asking for more on consideration. Our reflection is of collective experiences of slow intimacy, of soft and hard boundaries, remembering and longing as we hold each other in solidarity. We use our individual voices to show specific angles to these collective experiences.
T-SHIRTS CONNECTED US BEFORE WE KNEW EACH OTHER

During the 1980s, Stevens, was the media officer for the Anglican Student Federation (ASF) a student organisation that was part of the United Democratic Front (UDF) in South Africa. In one of the actions, the ‘Standing for the Truth campaign’, Stevens drew a design that was screen printed onto 30 T-Shirts. The T-shirt bore the slogan ‘Women standing for the Truth’, it depicted a woman raising her clenched fist. These T-Shirts were given to comrades at our meeting that was held during the recently reimposed 1990 specific KwaZulu-Natal (KZN) State of Emergency in Imbali, one of the townships of Pietermaritzburg. It was a black T-shirt with yellow writing linked to the Freedom Charter ideology of the banned African National Congress (ANC), and we recall the design as unusual and unique given the limited expression for women in patriarchal struggle organisations. It was provocative. Archbishop Desmond Tutu had come to the conference and was livid and reprimanded conference participants for supporting political parties. This was after Rev Victor Vivian Sipho Africander had been assassinated, believed to be because he openly sided with the ANC in a war with the state and Inkatha. Over the past four years, an estimated 4,000 people had been killed in KZN during this devastating conflict. The following week, Stevens wore the T-shirt, whilst holding Rev Africander’s six-year-old, grandniece, Thandekile Khumalo, on her lap. Thandekile’s hair was burnt on the right side above her ear where a bullet had passed and hit her ‘grandfather’ killing him. These were times of enormous risk and vulnerability. Tens of thousands had been detained without trial, given the draconian police powers it was impossible to know the exact number of detainees. The press and meetings were banned, churches were a site of struggle, solidarity and organising.

Some four years later Stevens and Xaba, met in person for the first time in January 1994 when Xaba and colleagues interviewed Stevens for the position of resource centre coordinator at the offices of the Women’s Health Project (WHP) at the medical school in York Road in Parktown. Stevens was successful and joined at their offices at the National Health Laboratory Services in De Korte Street in Braamfontein arriving in Johannesburg from Cape Town at the end of March 1994. WHP was a project of the Centre for Health Policy (CHP) within then Department of Community Health and later became an independent entity in 1996. During the interview, Stevens was asked by the team, why she wanted the job, she recalls:

‘Being 28, I remember saying that I had a lot to learn and would be grateful for the opportunity to be mentored by team members. Khosi smiled at me. ‘The smile was received as a gesture of kindness and extending an invitation to engage and trust.

Xaba had returned to South Africa on 8 June 1990 as a member of the African National Congress’ Women Section Task Team with the mission to re-establish branches of the ANC and organise the first ANC Women’s Section Conference in April 1991. The ANCWS head offices were on the same Sauer Street as the ANC’s office in the Lisbon building in the Johannesburg CBD. Xaba resigned from the ANCWS at the end of June in 1991 to return to the University of Zululand also known as Ongoye, to complete a degree she had had to abandon when she was expelled in 1984. She returned to Johannesburg in December 1991 and joined Barbara Klugman and Emelda Boikanyo at WHP which in that year was one of the projects of the CHP.

A few months after Stevens had joined WHP, Xaba arrived at work dressed in one of the T-shirts Stevens had made. This was remarkable coincidence given the limited print run and circulation of these items. During those times there was a practice of sharing and trading struggle T-Shirts by comrades. T-Shirts were shared and sometimes traded amongst comrades. The T-Shirts embodied precious memories and meaning and were passed on with trust. Our circles had intersected with t-shirts travelling from Imbali to Parktown. Xaba had participated actively within the students’ movement at the University of Zululand and the UDF.

The T-shirt signified a pushback in the patriarchal organisations we were organising in and now we had landed up together at the Women’s Health Project. The T-shirt symbolised solidarity and familiarity. It was still bold in speaking to women’s power in the context of patriarchy amongst civil society at the birth of our democracy. We realised then that we had met through the T-shirts before we met in person. We realised that our political solidarity had been the foundation of what would become a slow intimacy, building over time.

THE WOMEN’S HEALTH CONFERENCE OF 1994

Founded in 1991 as an NGO based at the University of Witwatersrand, WHP was planning the Women’s Health Policy Conference (Budlender, 1995) scheduled for 1 to 4 December 1994. On joining the WHP, Stevens was tasked with being responsible for the Resource Centre, she was also given the responsibility of facilitating the policy process. Xaba was responsible for the policy sub-group called Women’s Health and the Nursing Curricula working with Nontsha Neinza and Gail Andrews. While Boikanyo and Xaba also engaged grassroots organisations in the preparatory work towards the conference Boikanyo was part of the Abortion policy sub-group. Preparing for the 1994 Women’s Health Conference became a uniting activity for Stevens, Xaba and Boikanyo who were the

three members of staff within WHP with training and experience in nursing. They spoke a shared language, a familial knowledge and forged an early intimacy as a resistance to the pervasive patriarchal and hierarchical culture of medicine.

The watershed Women's Health conference was limited to around 400 participants the large majority of whom were women. A national consultative process involving over 4,000 women was held in the months leading up to the meeting engaging women in the different policy arenas and garnering feedback. Held at the Protea Gardens Hotel in Berea Johannesburg, the conference charted new ground in this specific area of South African feminist activism, with 13 policies on women’s health including: Ageing; Cancers; Contraception; Lesbian health issues; Maternal and neonatal care; Mental health; Occupational health; Sexually transmitted diseases; AIDS and infertility; Teenage pregnancy and sexuality education; Women, development and the environment; Women's health and the nursing curricula; and, Women’s health issues and the medical school curricula.

ACTIVISM TOWARDS THE CHOICE ON TERMINATION OF PREGNANCY ACT (CTOP) OF 1996

In 1995 Stevens and Xaba flew down to Cape Town to attend meetings in Parliament. As previously mentioned, WHP had successfully facilitated the Women’s Health Policy conference in December 1994 with the development of 13 different policies relating to women’s health (Budlender, 1995). One of these dealt with the issue of abortion and provided the foundation for the Abortion and Sterilization Committee discussions. Xaba had come to specifically introduce Stevens to the ANC Standing Committee on Health in Parliament. Stevens had previously met Mavivi Manzini (ANC MP) at a group meeting around abortion issues, taking place in Yeoville, Johannesburg at her home that Xaba had invited her to, but this was an intentional political introduction. Xaba had worked with Mavivi Manzini in Lusaka, Zambia on the Voice of Women (VOW) at the ANC Women’s Section offices in Libala. Makhosazana Njobe was also working in the same office on different projects. Upon reflection it was to build trust and to be in solidarity with new members of parliament working to liberalise and transform apartheid law. Stevens fondly recounts her experience of intimate solidarity where those newly in leadership were very open and welcoming, when they did not have to be. She recalls:

I watched how they interacted with each other, how the committees worked, how they asked questions, resolved contestations and the dynamics between comrades. Khosi physically introduced me to Dr Nkomo and relevant parliamentarians like Makhosazana Njobe who was warm, gentle and yet attentive and critically engaged. I was there to assist and advise as technical support for the Choice on Termination of Pregnancy Act processes. Here doors opened and I was invited to assist in briefings, develop agendas and be in meetings.

Stevens (2000) writes about this in her master’s thesis as and describes this as being the space of soft boundaries, where meaningful exchanges and traction on transformative work took place in liberalising our abortion law. I sat with parliamentarians, drank tea and discussed research and how this should translate into policy. We strategised, I worked on reports, did more research and the law was liberalised.

Xaba on the other hand was delighted to be working with her comrades on such a politically sensitive topic. Having worked with Makhosazana Njobe in the ANC WS section in Lusaka, this continuity made logical sense. Xaba recalls:

Doing this work with former comrades who were now parliamentarians was very exciting to me. During each of our encounters we recalled our conversations in the Lusaka and Lisbon building offices, when we dreamed and planned for a democratic country. A women-centred abortion policy and law was one of the dreams that were grounded on the constitution we had participated in drafting. In the late 1980s the Women’s Section had held a conference that was focussed on adding women-centred content to the then draft constitution that the ANC was proposing for the future democratic South Africa.

The story of just how long, multi-layered and detailed the processes of the ANC’s work towards a draft of the constitution for a future South Africa was and in particular how the Women’s Section of the ANC contributed to it, needs mapping and telling.

THE PERSONAL BLENDED INTO OUR ACTIVIST LIVES

Our work lives also extended into the personal as we learned from each other and shared our families. Stevens remembers learning from Xaba when it came to parenting:
Besides work, I remember babysitting for Nala, Khosi’s daughter. I learnt to strap her car seat in my car. Khosi also shaped my ideas and knowledge about parenting. I would listen to her talk about the realities of being a single parent, needing to get to creche before 5 pm otherwise being charged extra. This meant we needed to make meetings run efficiently and on time. I listened to her talk about feeding her child, about managing her child’s hair whether managing it or the comments people made. This listening made me learn and think.

Stevens got married in 1997, Xaba remembers how she and her toddler daughter planned for the wedding. Xaba recollects:

I explained to Nala what a wedding is because I was not married to her father. She became very excited when I said she could choose a new outfit so she could look great the wedding. Little did I know that she would want to add a necklace to her wedding outfit. It was colourful and child appropriate, so I let her have one. I didn’t tell her then that I had stopped wearing necklaces because of her; how difficult was to continue breastfeeding her as she enjoyed playing and pulling my necklace, her eyes fixed on mine as she sucked.

We listened to each other talk about our mothers. We listened to each other talk about our fathers, how they worked and treated our mothers and families. And then we met each other’s mothers. Stevens reminisces:

Khosi’s mother came to visit, and I remember meeting her and having tea in the tearoom. She had come up from Ashdown to visit. My mother came to visit too when I was finishing off my master’s thesis. I was anxious but I remember them meeting and them being very warm with each other. I meet Khosi’s sisters too over time.

Xaba recalls:

Meeting Marion’s mother added a layer to my growing friendship with her. In my mind’s eye I can still see her in our office. Marion and I were no longer just colleagues, we were friends. I remember some WHP colleagues asking me how I had managed to get an invitation to Marion’s wedding when they had not been invited. The baby sitting, the wedding and our mothers became special connecting points between us. I remember being worried, albeit privately, about whether Marion had chosen a man who would indeed be an appropriate husband, non-sexist, non-racist, supporting and affirming of Marion.

These have been moments and signposts over time of building familiarity and trust.

SOLIDARITY AND ACTIVISM ON THE IMPLEMENTATION OF THE CTOP ACT, POST WHP

In early 2000, Stevens and Xaba left the Women’s Health Project. Stevens joined a US International Non-Governmental Organisation (INGO) where she was tasked with similar work on abortion in the United Nations. It was the end of the Clinton era and American NGO cultures were vastly different to South Africa. Stevens experienced enormous prejudice that she was not used to. Stevens worked remotely from Johannesburg at first then relocated to Washington DC and commuted between the offices in Washington DC and the United Nations in New York for the year she worked in the United States. Reflecting upon her time, Stevens describes that she was criticised for opening her blinds halfway in her office and not either open or closed and told she was giving the impression of being an immigrant. She was told off for having a toilet roll in her office having not procured a box of tissues. She was also instructed to decrease the per diems of her international team as she was told they use them for their children’s school fees. These micro aggressions were strange having worked in a context of solidarity.

In 2001, Stevens returned to South Africa where she began working at the Centre for Health Policy where she took on a project on HIV in the workplace. This coincided with her getting pregnant and having her first child. While working in HIV in the workplace, Stevens observed the splitting of progressive movements where HIV and Sexual and Reproductive Health and Rights (SRHR) separated. HIV positive women who needed abortions were neglected and essentially sent to services providing the ‘prevention of mother to child transmission’. Litigation concerning HIV and SRHR persisted against the state for provisions in the Choice on Termination of Pregnancy Act and to enable the provision of ARVs (antiretrovirals) by the state (Albertyn, 2019).

In October 2000 Xaba became the founding Country Director of Ipas, an international NGO headquartered in Chapel Hill, in the USA. She had to set up the office from scratch, finding office space, recruiting staff and setting up policies. The programme and mission of this office was to train midwives to do Manual Vacuum Aspirations (MVA), the technique for abortion provision in the implementation of the Choice on Termination of
Pregnancy Act. Health workers had not been trained in these techniques historically and still today this training remains a challenge. Xaba recalls:

While attending a meeting of the Gender Advisory Panel (GAP) of the Human Reproduction Programme (HRP) of the World Health Organisation (WHO), in Geneva in January of 2000 I was approached by a Kenya based medical doctor who sat on the board of Ipas with the question: ‘Would you be interested in working at Ipas, we are planning to open an office there now that your country has a progressive law on abortion?’ My answer was a simple, ‘of course’. Again, this was a seamless continuity to the feminist activist work in which I had participated.

While it was apparent that the legislation was a success and a global model of progressive law, it had not been matched with implementation. In the first flush of implementation, maternal mortality rates decreased and services for surgical abortion became more accessible. In the early 2000s Ipas took over implementing training on abortion and the implementation of our new liberalised law. Xaba led the development of the first Clinical Guidelines for Abortion (National Department of Health, 2001) as the country director of Ipas for the National Department of Health. Working with Prof Roland Edgar (Eddie) Mhlanga who was then the Chief Director within the Maternal and Child Health and Women’s Health (MCWH) Directorate of the National Department of Health made the work manageable. Prof Mhlanga was an advocate for women’s health rights, and he was not conflicted by what the implementation of the Termination of Pregnancy Act meant for the health services. He pioneered its implementation among his colleagues within the health services because he understood the significance of women’s sexual and reproductive rights. As a senior manager it was however challenging to oversee the administrative work that was needed to accompany implementation. Xaba recalls:

Prof Eddie and I ended up at numerous meetings together within South Africa and internationally where I watched him speak with passion for the rights of women to choose to have an abortion and thus take control over their bodies. He was a skilled clinician and a challenged administrator with little support in the National Department of Health, so he was very happy to delegate the project management to Ipas whilst ensuring that the clinical work was grounded in evidence that informed practice.

Xaba had resigned from the Country Director position at Ipas at the end of 2003 after she was accepted into the MA in Creative Writing (MACW) at Wits University. She wanted to give her return to formal studying a good chance. Having realised in 1997 that she needed to rethink her life’s mission, the resignation was her way of committing to the two year-long part-time MACW which she started in 2004. Xaba reminisces:

I was excited, I wanted to succeed. I took the risk. During those two years of the MACW, I worked as a consultant for no longer than three days a week, so I could dedicate the rest of my time to the demands of the creative writing programme.

Over a decade later, the international NGO, Ipas, that Xaba had set up in South Africa was leaving South Africa. In 2014, they had a final big splash meeting at the Birchwood Conference Centre in Johannesburg. It was at this Gala event in a concrete faceless maze that Xaba and Stevens met up again. The Minister of Social Development Bathabile Dlamini arrived with much pomp and ceremony and gave the keynote address (Davis, 2014). She was being supported by Zane Dangor and his team whom Stevens had briefed on the concept of Reproductive Justice. Dlamini gave a remarkable speech giving meaning to the choice to parent in safe and enabling conditions or the choice to not parent and have an abortion. It was the first time a South African government had articulated the shift from population control to reproductive justice thus centring women’s rights to control their bodies. Stevens remembers:

After she finished and was leaving, she suddenly saw Khosi and was startled and walked up to her. She gave her a warm hug and then grabbed the microphone again and started explaining how Comrade Khosi was a legendary leader to be respected and appreciated for her role in UMkhonto WeSizwe (MK) the military wing of the ANC. The Minister asked people to take pictures, I have a few of them together. Khosi has a way of looking that I think I can read. She had a look that was of ‘you have got to be joking, but I will entertain you.’ In today’s entangled positions and vantages with proximity to power being social currency, Khosi stood resolute and neutral. I watched, seeing resistance yet dignified engagement.

Xaba and Dlamini first met in 1990 when Xaba was deployed in the ANC office in Pietermaritzburg for three months, under the leadership of Harry Gwala who was the Chairperson. Dlamini was a young activist then and over the years Xaba watched her development and growth within the ANC. Minister Bathabile Dlamini was charged with corruption in relation to the provision of child support grants, a direct contradiction in taking away women’s ability to parent thus undermining reproductive justice. This chance encounter at the Gala event in 2014
was the first face to face meeting between Xaba and Dlamini since the initial contact at the ANC office in Pietermaritzburg. Xaba recalls:

I was very disturbed in 2006 when I first heard that Bathabile was one of the 30 people who were found guilty of fraud and theft during what would be known as The Travelgate Scandal. And then she and others pleaded guilty. I knew then that something was rotten in Mzansi’s democracy.

The implementation of abortion services receded during the first decade of the 2000s when the US Gag rule took hold following its first imposition since the advent of democracy in South Africa. The National Department of Health buckled and moved away from implementation, and consistent with neoliberal processes of shrinking government capacity, INGOs took centre stage in taking up these functions with often little concern for local conditions, contextual challenges or to explore sustainability. Over the years Stevens (2021) has written and spoken out about these issues, calling the government to account and demanding accountability. Stevens (2019a) has written:

We’re also beholden to donors, mostly US donors representing public and private foundations, who gag and prescribe what health services can be provided in a research project or clinic – and these services are often at odds with South Africa’s legal and policy frameworks. For instance, the Gates Foundation will fund ‘family planning’, but will have nothing to do with abortion. As such, health services don’t talk to each other.

And in relation to feminist movement building in South Africa she continues:

Following the election of Donald Trump as the US president and the further tightening of the global gag rule, other donors filled the void and supported a large number of international NGOs to do abortion work. Yet there was little investment in South African NGOs led by women to build movements for sexual and reproductive justice.

CONNECTING THROUGH THE WRITTEN WORD: BOOK LAUNCHES, WRITERS AND READERS

In 2014 Xaba came to Cape Town to attend a meeting about Women’s Day. Her collection titled Running and other Stories had just been published. The title story ‘Running’ is about the ubiquity of violence against women and how triggers for women are simultaneously ubiquitous. It resonates with so much of South African struggle history, how women have had to endure and still endure systemic patriarchal violences and how these come after struggles concerning race or class. The enduring seriousness of the epidemic of gender-based violence is contrasted with the ANCWL calling on women to wear doeks and cover their heads as a mechanism of organising. We had misheard doeks for ducks; it did not make sense. In our exasperation we laughed. Stevens recalls:

Being Women’s Day weekend the ANC Women’s League of which Bathabile Dlamini was chair had named the day, Doek day, and requested women to cover their heads in scarfs/doeks. Being ridiculous, I gathered some toy ducks around our house, and we jokingly talked about getting our ducks in a row.

Stevens invited Xaba hold a book launch at her home in Muizenberg and we had a wonderful reading on a warm Spring afternoon in the back yard. Stevens remembers:

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2 https://www.huffingtonpost.co.uk/entry/bathabile-dlamini-travelgate-smallanyana-skeletons-and-no_5c7e9e85e4b078a06f773d. (Accessed May 2023.)

3 The US Gag rule refers to the policy that was developed at the UN Women’s Conference in Mexico in 1985. This ruling coincided with a sharp conservative turn in the US government, whose delegates at the Conference announced that all funding for abortion services and counselling around the world by US NGOs was to be cut. The ‘Mexico City Policy’, as it came to be known, had profoundly negative impacts on family planning programmes and organisations around the world. The global gag rule prohibits foreign nongovernmental organisations (NGOs) who receive U.S. global health assistance from providing legal abortion services or referrals, while also barring advocacy for abortion law reform—even if it is done with the NGO’s own, non-US. funds. President Ronald Reagan first enacted the global gag rule and every president since Reagan has decided whether to enact or revoke the policy, making NGO funding vulnerable to political changes happening in the United States. The rule forces organisations to choose whether to provide comprehensive sexual and reproductive health care and education without U.S. funding or comply with the policy in order to continue accepting U.S. funds.

4 https://lowvelder.co.za/215781/wear-doek-fridays-celebrate-women/. (Accessed May 2023.) ‘Doek’ is an Afrikaans word for a woman’s scarf worn over the head to cover one’s hair and knotted at the back of the neck.
Our garden on a warm afternoon was filled and nurtured by friends and poetry where words and her voice were a balm facilitating circles of connection through intimate phrases and stanzas read by Khosi.

Some years later in July 2019 Our Words, Our Worlds: Writing on Black South African Women Poets, 2000-2018 compiled and edited by Xaba (2019) was released and one of the launches took place at the Sexual and Reproductive Justice Coalition (SRJC) hub, also organised by Stevens.

The SRJC would host monthly meet ups for members as an intentional space to learn, listen to each other and organise. Members are diverse including sex workers, students, health workers who may not easily get to book launches held in the evenings. There is often not opportunity to listen, meet authors, freely ask questions in glitzy influencer publisher spaces. The hub was packed and the poetry flowed as those present – including Cape Town based contributors to the anthology, Malika Ndlovu, Toni Stuart and Maganthrie Pillay - were nourished as words washed in and held the space.

ABORTION AND OUR FAMILIES

Stevens remembers an instance:

Some years later I had a call from Khosi asking for me to help with a family member who was living in Cape Town away from their family. They were a student and had had an abortion at Marie Stopes a few days before. She was ill and I was asked to go and visit. She was living in an apartment in the suburbs, and I went around later that day on my way home with [my kids] in the car collecting them from school. This meant I had to explain to my children to be kind and to not ask too many probing questions, they knew what an abortion was. Her apartment door was open, she was weak sitting on the edge of her bed in pain and with a temperature. We locked up her apartment, got her in the car and back home into bed. [My children] picked lavender from the garden and put it in her room and made her cups of tea. I got her a hot water bottle and pain relief. After checking if she had an infection and monitoring her bleeding she recovered.

Xaba remembers this story so well, observing:

When I received a call asking me to intervene, I knew exactly who to call for help. I knew that Marion would go out of her way to give the appropriate professional attention with the personal touch of care I knew her to be capable of. I knew I could rest in my Johannesburg home with complete confidence and trust.

Most of us know women who have abortions, Xaba and Stevens have cared for women who have had abortions and we had worked to liberalise our law to provide better access to care. Stevens’s children had witnessed that even apparently good private access to care is not of a good quality and that women can endure pain and illness alone.

Xaba’s family member experienced poor quality of abortion care even though Xaba had worked so hard to change this. Similarly, Stevens had to handle consequences of poor abortion care when she had worked tirelessly for improved quality services. The intimacy of the collegiality among service providers, researchers and activists within abortion services is heightened by the worldwide controversies on this topic. This case of Xaba’s family member became yet another intensifier of the intimacy within this solidarity in a friendship.

HOLDING SOLIDARITY

To be held is an ongoing process. It is about doing and about holding that implies reaching and engaging and requires each to show up, be patient, be present, give to each other. Stevens and Xaba have been positioned differently and come from different vantage points. While both women, nurses, educated, and coming from families that endured gender-based violence, there are also clear differences. Our expressions of solidarity and activism over time have forged fundamental and foundational pillars. This intimacy has taken time to nurture. Trust takes time. We recall what we might have forgotten with care, humour and patience.

The intention of solidarity is about holding a space, it is about being held and engaging with each other. We do the work, knowing contestations and divisions. We know that there may be differences and respect that, asking for clarity and accepting these opinions.

Note on language. Most of the people we have assisted have defined as women, yet we acknowledge the continuum of genders including trans men who may seek abortions.
This leaves both Stevens and Xaba to reflect personally and together on why and to consider the pain of the current context of injustices. The pain is personal. We have both laboured and worked for improved women’s health services. The pain pulsates as the deterioration within the public health services has continued. We have both continued to labour in ways that dull this pain.

Over time Stevens has worked as part of a collective to found and lead the Sexual and Reproductive Justice Coalition continuing with this work. Xaba has turned her attention to writing where she has focused on surfacing the voices of Black women in relation to a range of issues using the genres of poetry and short stories. She continues to use methodologies designed to be inclusive and empowering for women who wish to tell their stories through writing. The booklet Start a Writing Group and Make it Work is a 2008 example wherein Xaba shares lessons from writing groups in which she had participated over years. The 2016 edited books, Like the Untouchable Wind: An Anthology of Poems and Proudly Malawian: Life Stories from Lesbians and Gender Nonconforming Individuals are products of writing workshops that Xaba designed and used writing exercises that empower women to write and edit their writing after the workshops. Xaba’s most recent poetry collection The Art of Waiting for Tales: Found Poetry from Grace – a novel (2021) is based on Barbara Boswell’s novel, thus building a feminist bond of creativity. Xaba’s literary activism is women-focussed.

Stevens is in a reflective space writing up the social construction of sexual and reproductive health and rights post-apartheid for her PhD. By both being in writing modes now this has enabled deep reflection and focus our commitment to writing this article slowly is an action to document a shared history of solidarity and activism. Connections and circles continue, as Boswell has invited her to be part of a writing group that meets weekly as she finished her PhD. Stevens is now a member of the Gender Advisory Panel at the WHO two decades later following on Xaba’s term and part of a group working globally towards improving women’s health and holding the WHO to account for their research and programming in this area of work.

CONCLUSION

Reflecting together, we conclude that this is an age of hard boundaries with corruption, greater inequalities, vulnerability and little accountability. There is not much movement building in relation to women’s health and most work in these spaces continues to be led and theorised through an American lens leading to the dilution and disorganisation of local movement building and solidarity. These days feel busy, fast and extend to a digital world where substantial communication and work takes place online, there is calling out and cancelling at great speed. Grounded engagements with seeing each other’s faces, talking, listening, smiles, laughs or frowns with greater intimacy is rare, and this feels like a loss. We are older now and removed from the younger generation as new work modalities and ways of being are employed. There is a yearning and disappointment in both of us - we wanted things to be different and we feel unsure and vulnerable at times. We have each other to call in, to remember, to question, to clarify and to offer solidarity. This feels like slow intimacy.

REFERENCES


