



Weekly News Review – 23 June 2017

A round-up of the week's most important, Africa-focused Family Planning and Reproductive Health reporting

Midwives in Toronto, global RH HR needs

“Maternal mortality is the highest health inequity in the world, and midwives are the best-skilled birth attendants who can save the lives of mothers and children during childbirth,” according to [Jakaya Kikwete, former president of Tanzania, and Toyin Saraki of the Wellbeing Foundation](#) in opening remarks at the triennial [International Conference of Midwives Congress in Toronto](#), attended by more than [4,200 midwives from 113 countries](#). The conference looked at the need for more training and better conditions for midwifery, which “[is a calling, not just a profession](#).”

Midwives are among those mentioned in a study of [the need for human resources for sexual, reproductive, maternal and newborn health in 41 sub-Saharan countries](#), which concludes that “based on the current and projected potential met need in the future, the countries were grouped into three categories: (1) ‘making or maintaining progress’: 14 countries including Ghana, Senegal and South Africa, (2) ‘at risk’: 6 countries including Gabon, Rwanda and Zambia, and (3) ‘low performing’: 21 countries including Burkina Faso, Eritrea and Sierra Leone.”

Abortion statistics, debates, stigma and misinformation

An important release from the WHO’s Human Reproduction Programme: [The Global Abortion Policies Database](#), which “is designed to strengthen global efforts to eliminate unsafe abortion,” with updated, factual information.

The WHO initiative is important because, as a [New England Journal of Medicine essay on “alternative science”](#) states: Human reproduction has become the victim of alternative science, rife with alternative definitions of well-understood medical conditions and characterized by rejection of the scientific method as the standard for generating and evaluating evidence.”

The debate on abortion laws continues across Africa; in [Zimbabwe](#), where it’s clear that [women suffer](#) from the arcane laws; in [Uganda](#), interpretations of the country’s laws vary from district to district, leading to confusion among women and poor medical choices; and in [Ghana](#) one region is experiencing a rise in unsafe abortion among teenagers. The US debate continues as well, as the [new Trumpcare bill](#) threatens women’s access to healthcare, even [restricting abortion coverage even in private insurance](#). On the international front, the US [rejected a UN resolution on violence against women due to an abortion clause](#).

One of the oft-cited arguments against abortion is the prevalence of regret and depression amongst those who have had one, which is debunked in [an analysis in Psychological Medicine](#): “In a nationally representative, longitudinal dataset, there was no evidence that young women who had abortions were at increased risk of subsequent depressive symptoms compared with those who give birth after an unwanted first pregnancy.”

Contraceptive access, teen pregnancy

[South Africa](#) announced a policy to allow students as young as 12 to access contraceptives at school, while calls for more availability were also in the press in [Uganda](#). [Kenya was an early proponent of contraception](#), and managed to reduce its fertility rate from just over 8 births per woman in 1960 to just over 4 per woman in 2015. In Tanzania, while the government calls family planning the “[sure pathway to poverty reduction](#)”, President John Magufuli declared that [schoolgirls who have given birth will not be allowed back in the classroom](#).

Teen pregnancy alarms are also sounding in [Rwanda](#), [Namibia](#), [Kenya](#) and [Ghana](#).

World Refugee Day

A record 65 million people are refugees. As FP2020 reports: “[One-fourth of all refugees, displaced persons, and disaster victims are women and girls of reproductive age](#). They need more than food, water, and shelter; they need the ability to determine whether or not they get pregnant.” The Maternal Health Task Force re-released its useful [list of resources about sexual, reproductive and maternal health care in humanitarian settings](#).

University of Michigan shout-outs!

Two shout-outs to University of Michigan colleagues: Our colleague, Global Health Coordinator and health sciences informationist [Gurpreet Rana](#) was given the T. Mark Hodges award by the Medical Library Association for her “outstanding individual achievement in promoting, enabling and delivering improvements in the quality of health information internationally.” (You can see her dedicated research guide for family planning and reproductive health on the CIRHT website: <http://guides.lib.umich.edu/cirht>.)

And [Okeoma Mmeje, M.D.](#) released a study which shows that “[STD treatment for two](#)” – allowing prescriptions for the patient as well as their partner who may not have been seen by a doctor – may be the most successful way treating and preventing STIs.

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