



Weekly News Review – 1 September 2017

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

Complete News Review References:

Women

Achieving reproductive and family planning self-determination for women often requires overcoming “[a variety of obstacles](#)”, across societies everywhere in the world and with every income level, and concerning a range of issues, because, “[reproduction is a matter of politics, economics, law, culture and everything else that shapes daily life](#).” Negotiating access to birth control is [the most important skill the achieve gender equality](#), according to an interview in *Forbes* with NARAL President Ilyse Hogue. A call to fight for reproductive justice from Jess O'Connell, Chief Executive Officer of the Democratic National Committee: “[When women have to choose between their family and their job, our entire economy suffers](#). So we can and we must do better as a nation. And the best way to fight back is to make sure that women also have a say in crafting the policies that affect their lives.”

In Nigeria, [social norms](#) can get in the way: “Due to religious and cultural sensitivities, Nigerians live in denial of just how common teenage sex is.” South Africa is facing a crisis because of the [conscientious objection](#) clause, which allows “health providers to recuse themselves from providing services on the basis of conscientious objection, [so] we have medical graduates who are unable to do a cervical examinations, insert an intrauterine contraceptive device and refuse to do any abortion care. If a woman comes into emergency with a septic or incomplete abortion, there is limited capacity within the health care system to be able to provide care.” To [combat the stigma](#), one South African organization, Fem, launched a social media campaign “to reveal the real face of safe abortion and how it can save women’s lives...approximately 50% of women who choose to undergo an abortion, choose facilities that are not up to standard and are potentially dangerous.” And actually having a baby can be “one of the most dangerous positions to be in. [Pregnancy could pose a threat to a woman’s mind and body](#).”

Economic restrictions on access to family planning in the US can be related to actual [costs](#) and [insurance coverage](#).

Once obtained, contraception’s side effects can “[affect women’s daily lives](#)”, including participation at work and in religious activities, according to The Evidence Project. A study from the University of Washington looks at [Twitter comments about miscarriage](#), in the hope of helping “health care professionals learn what information is circulating, make sure patients know the true causes of miscarriage to lessen guilt and shame, and better support patients in a time of grief and stress.’ The University of Michigan’s Dr. Katherine J. Gold from the Department of Family Medicine looks at the need for [personal and clinical support after a baby’s death](#): “Stillbirth and early infant death are devastating and often sudden events for families. Who

delivers the news — and how they do it — can have lasting effects on a mother’s mental health.”

The conservative National Review worried about [“coerced abortion”](#).

Happy stories about birth on the road: A woman in [Kenya](#) gave birth on a cross-country bus on her way back to college, assisted by female passengers; and in the UK, while in her car on the way to the hospital, a woman delivered her own baby in its [full amniotic sac](#), 11 weeks early. (Her partner has the presence of mind to take a photo.)

Menstruation

Human Rights Watch released a guide to end discrimination and abuse of women because of their monthly cycles, saying [menstrual hygiene is a human rights issue](#): “Pads and other supplies may be unavailable or unaffordable, they may lack access to safe toilet facilities with clean water where they can clean themselves in privacy, and they face discriminatory cultural norms or practices that make it difficult to maintain good menstrual hygiene. Together, these challenges may result in women and girls being denied basic human rights.” In Uganda, as one innovative program of [“EcoSmart pads”](#) is emerging, in the refugee camps in the north of the country, [women are battling with menstrual hygiene](#). As the debate about “menstrual leave” continues in India, one writer takes a contrarian view, claiming people need “to rethink our understanding of menstruation in social and economic terms; basically, see it as work,” calling it [“reproductive labour”](#) and thereby justifying the time off.

Africa health systems

[African health ministers](#) meeting in Victoria Falls, Zimbabwe, this week committed “to attain universal health coverage”, calling it “the foundation for healthier communities, stronger economies and our collective security.” WHO Director-General Dr. Tedros Adhanom Ghebreyesus, called on them to take action to [improve health care services in their own nations](#), with basic building blocks, as a WHO report blamed Africa's health care inequality on lack of political will. A casualty of that inequality is what an essay in The Conversation calls the shameful practice of [African politicians seeking medical care abroad](#). “Since the beginning of 2017, President Muhammadu Buhari of Nigeria has spent more time in the UK for [medical treatment](#) than he has in his own country. By seeking treatment abroad, Buhari broke one of his own electoral promises – to [end medical tourism](#).”

Systems and Technology

In general, and for maternal health in particular, “many low- and middle-income countries rely on a [robust community health workforce](#), but few are self-sustaining and many rely heavily on external donors. CHWs fill critical gaps while delivering quality, affordable services closer to underserved patients,” according to Global Health Now. A WHO report outlines the [African health worker challenge](#): “As at 2015, the African Region had an average of 1.30 health workers per 1000 population, far below the 4.5 per 1000 required for SDGs. The global health workforce shortage...[is] most severe health [in the African region], estimated to reach 6.1 million by 2030.” The report offers solutions, chiefly reallocation of resources and increased training. In northern Nigeria, the UNFPA reports an [“alarming shortage of health personnel”](#) in conflict-affected areas, though in Borno [more UN training is taking place](#).

A hopeful story from the Maternal Health Task Force shows how community health workers are helping to [improve maternal health in Rwanda](#).

The Economist notes that, “In poor countries it is [easier than ever to see a medic](#)...but it is still hard to find one who will make you better.”

Britain’s rate of women dying in pregnancy is three times lower than the US, attributed in a report by *ProPublica* to that country’s strict adherence to [procedural standardization](#).

Newly-minted USAID Administrator Mark Green reacted with anger to the Devex exclusive on [gross inefficiency of the agency’s largest health project](#), resolving to reform how the agency procures and spends its money. Another, “under the radar” US agency, the [Health Resources and Services Administration](#), which “has played a critical role in helping to bring infant mortality rates down” and disburses \$300 million in family planning funding, is under budget scrutiny.

In [Uganda](#), the ICT minister encouraged a healthcare hackathon focused on maternal and neonatal care: “Let us all embrace ICT for faster and efficient health interventions.” [TEDGlobal in Tanzania](#) this week spotlighted three African healthcare technological developments: Algorithms to detect diseases, 'eye-phones' and mobile hearing, and drone blood delivery. Two friends and supporters of Planned Parenthood reacted to the [increasing restrictions on abortion access](#) in the US (this week attacks in [Arkansas](#) and [DC](#), fighting back in in [Texas](#), [South Carolina](#), and [Maryland](#).) by creating an app called “[Cara](#)” which, “asks women for their zip code and how many weeks pregnant they are, and then it locates the closest clinic available for an abortion.”

The Maternal Health Task Force released two more useful resources: [Giving Birth Without Clean Water](#) and [The Best Available Tools to Measure Women’s Childbirth Experiences](#).

Men

Men should be expected to be supporters, advocates and allies in all of those issues that women confront, as with a rural man from [Ethiopia](#) profiled by UNFPA who, “when community health workers visited... to talk about family planning, he was eager to listen. And when the contraceptive methods were explained, he knew immediately what he wanted to do” and had a vasectomy, “a choice that would help his wife regain her health by protecting her from unplanned pregnancies.” [Lamido Sanusi](#), the Emir of the northern Nigerian state of Kano and the second highest Islamic authority in the country, is using his influence to reduce child marriage, promote the use of contraceptives and encourage child spacing. His daughters jokingly call him a “progressive fraud”, perhaps because of his four wives, but he is proposing what he says “is a ‘third-eye’... to offer reforms that can pass, because, if you say you are outlawing child marriage completely, they [the religious establishment] will respond that you can’t prohibit what has not been prohibited in Islamic law. But you can say it needs to be regulated.” (For a brief interview excerpt about family planning he made at the 2017 Mo Ibrahim Foundation Governance Weekend, click [here](#)). And men could soon more fully participate in family planning as doctors are saying they are “[on the cusp of launching the first male contraceptive](#),” against resistance from the pharmaceutical industry.

But a worrying survey came out about how much men actually know about women: when asked to identify the vagina, [only half of them were able to do so](#). “The survey results were released to coincide with the start of Gynaecological Cancer Awareness Month in the U.K., which falls in

September, but the poll's authors say their findings are a concern in that, for many men, women's bodies are 'still a taboo subject, shrouded in mystery.'"

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