

SRHM | SEXUAL AND
REPRODUCTIVE
HEALTH
MATTERS

MORE THAN A JOURNAL



**SRHM South Asia Research
Focus Report: 1993 – 2020**

Produced by Sanna Rehman (University of Aberdeen MSc Student interning for SRHM) in February 2020, Aberdeen UK

Contents

1. Introduction	2
2. Method	2
3. Coverage of Key Topics	2
4. Breakdown of country specific coverage for each key topic	3
4.1 Abortion	3
4.2 Disability	3
4.3 Family Planning & Contraception	3
4.4 Human Rights	3
4.5 HIV/AIDS	3
4.6 Infertility	3
4.7 Maternal Health	3
4.8 Refugees, migrants and internally displaced populations	4
4.9 Reproductive cancers	4
4.10 Sexual health education	4
4.11 Sex selection	4
4.12 Sexuality and sexual rights	4
4.13 Violence and sexual violence	4
4.14 Adolescents and Young People	5
4.15 Health systems, policy and access	5
4.16 Sex work	5
5. References	6

1. Introduction

This report summarises the research papers published by Sexual and Reproductive Health Matters and are focused within any of the following five countries: Sri Lanka, Pakistan, India, Nepal, Bangladesh, Maldives and Bhutan. 58% of all published research has focused on India, followed by Bangladesh and on Nepal (see Figure 1).

2. Method

SRHM’s journal issues from 1993 to present day are publicly available to access via the organisation’s website. This directory of publications was used to manually review every published editorial, article and commentary within each issue to identify any of the following key words: Sri Lanka, Pakistan, India, Nepal, Bangladesh, Maldives and Bhutan. Publications with content focusing sexual and/or reproductive health and/or rights throughout the previous seven countries were included in a database from which data was extracted to provide graphs and counts of articles. General summaries and a breakdown of country specific coverage for each topic are included below.

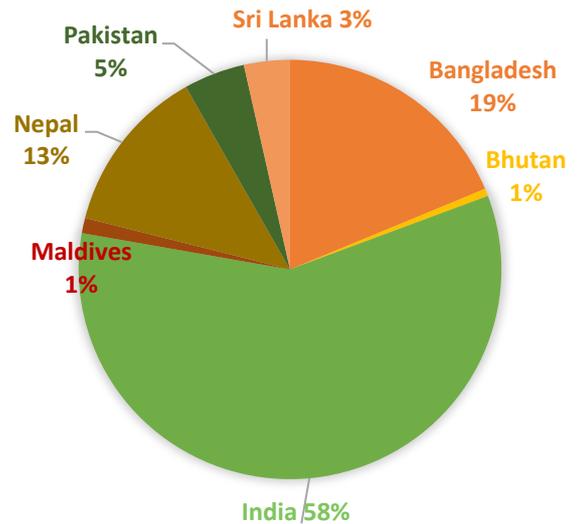


Figure 1: % Share of South Asian Research by Region

3. Coverage of Key Topics

Most research publications have focused on Abortion (21%), Health Systems, Policy and access (16%) and Maternal Health (15%). No publications in the South Asian focus areas were released for the key topics of “ageing”, “female genital mutilation” and “Human papillomavirus” which have been covered extensively throughout SRHM publications from other regions (see Figure 2). Research surrounding sexuality and sexual health in relation to ageing is typically released from Western regions. Female genital mutilation (FGM) continues to be most commonly practiced in countries outwith the focus of this report, throughout North-eastern and Western Africa.¹ This could explain the lack of published research from the South Asian countries considered in this report.

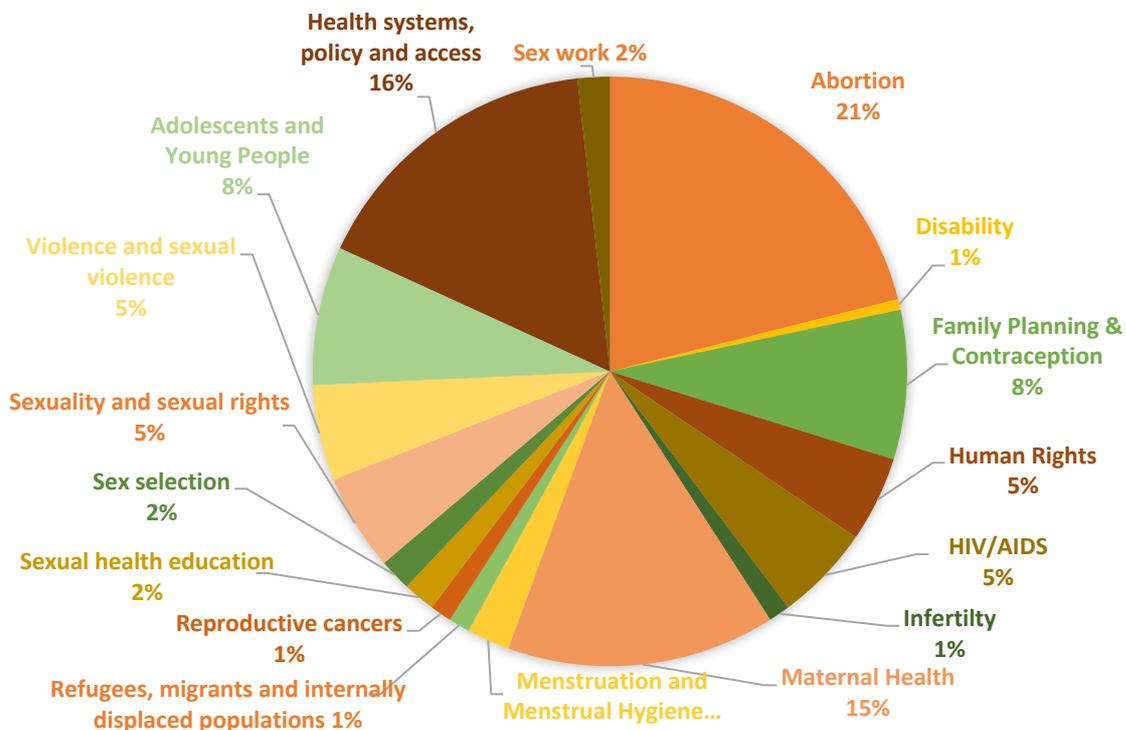


Figure 2: % Representation of all topics throughout South Asian region 1993 - 2020

4. Breakdown of country specific coverage for each key topic

4.1 Abortion

Out of all published papers within the South Asian region, abortion has received the most coverage and India has made up the majority of these. Abortion oriented research papers look at the political context of abortion (e.g. policies, safety, increasing access and provision) and behaviours/communications from service providers or abortion service receivers.

Article Count

India: 27
Nepal: 4
Bangladesh: 2
Pakistan: 1
Sri Lanka: 2

Article Count

India: 1

4.2 Disability

One article produced in India considers the denial of sexual rights of women with the specific disability of visual impairment.²

4.3 Family Planning & Contraception

Research focusing on Bangladesh, Pakistan and Nepal were relatively equal in their output within family planning and contraception, while India took a strong lead. Research in Bangladesh and Pakistan focused on attitudes and behaviours surrounding the use of contraception as well as historical perspectives of family planning specific to the region. Family Planning and Contraception research within India covered topics including the denial of contraceptive access to vulnerable tribal groups, specific case studies and analyses of family planning clinics, behaviours and attitudes concerning contraceptive use. Some studies looked specifically at the service implementation of specific contraceptive methods within a clinical setting e.g. intra-uterine device insertion in maternity wards in Tamil Nadu³.

Article Count

India: 7
Bangladesh: 4
Pakistan: 2
Nepal: 1

Article Count

India: 4
Bangladesh: 2
Nepal: 2

4.4 Human Rights

Papers focusing on Indian human rights did so with a view of women's reproductive rights, decriminalisation of homosexuality, historical perspectives of female infanticide. Nepalese research looked at stigma and trafficking of women as well as female imprisonment for abortion. Bangladesh analysed women's reproductive rights generally and in relation to religious extremism.

4.5 HIV/AIDS

HIV was researched in relation to sex work, pregnancy, preventative measures (male circumcision), intervention techniques, roles and responsibilities throughout medical professions, vulnerability of women and STDs. India and Nepal output the most papers, closely followed by Bangladesh.

Article Count

India: 4
Bangladesh: 2
Nepal: 2
Maldives: 1

Article Count

India: 1
Bangladesh: 1

4.6 Infertility

Despite infertility gaining widespread recognition as having become a global public health issue, very little research has been published by SRHM with a South Asian focus. Two papers were released in 1999 (India) and 2000 (Bangladesh), focusing on treatment-seeking behaviours and consequences and infertility experiences among urban slum populations respectively.

4.7 Maternal Health

In 2011⁴ and 2012⁵, two large studies took a global perspective and analysed 20+ South Asian countries which included India, Bangladesh, Nepal and Pakistan. The subject of these papers concerned inequalities in maternal health and improving access to maternity services. Bangladesh focused papers considered the improvement of maternal health, rural maternal health services and maternal health amongst refugees. India's coverage of maternal health (MH) is extensive and

Article Count

India: 12
Bangladesh: 6
Nepal: 5
Pakistan: 2

demonstrates a full range from abuse and disrespect in MH to medical management of MH (e.g. anaemic mothers) and service provision. Nepalese MH research focuses on threats to good maternal health such as illnesses, social determinants of health and emergency care.

Article Count

Bangladesh: 1
Nepal: 1

4.8 Refugees, migrants and internally displaced populations

Research covering internally displaced populations and refugee camps have been produced in Nepal (2017)⁶ and Bangladesh (2019)⁷. Nepal's focus was on the Humanitarian response to reproductive and sexual health needs in a disaster: the Nepal Earthquake 2015 case study while Bangladesh's more recent study looked at the historical, social and political context of mortality in the Rohingya refugee camps in Bangladesh.

4.9 Reproductive cancers

Two studies focusing on cervical cancer prevention in Bangladesh and on a breast cancer on India were published by SRHM, both in 2008.

Article Count

India: 1
Bangladesh: 1

Article Count

India: 2
Nepal: 1

4.10 Sexual health education

Sexual health education was looked at to understanding the comfort levels of communication in sex education for teachers and students, community health programmes. These papers were focused on Nepal and India.

4.11 Sex selection

Sex selection research has focused purely on India with the output of 3 studies concerning sex determination and abortion.

Article Count

India: 2
Nepal: 1

Article Count

India: 7
Maldives: 1
Sri Lanka: 1

4.12 Sexuality and sexual rights

Coverage of Sexuality and sexual rights has been a lot more varied with research focusing mostly on India followed by one research output each for Maldives and Sri Lanka. Indian focus has considered sexuality and sexual rights in collaboration with disability and injury, the millennium development goals and gender equity, women's rights, sexual violence and abortion. All research published by SRHM that considers sexuality and sexual rights does so with a focus of women. Future submissions representing smaller and similarly marginalised groups such the LGBTQ+ community could yield similar findings and themes concerning violence, lack of education in sexuality and sexual rights as well as political perspectives of policies and rights but would highlight issues for other groups in addition to women.

4.13 Violence and sexual violence

Violence has been covered mostly by India but received research focus from Sri Lanka, a combination of Nepal, India and Bangladesh, and Bangladesh. Research focusing on violence and sexual violence in India has looked at sexual harassment experiences throughout hospital settings, Communal violence in Gujarat, clinical outreach training sessions for sexual violence survivors and how sexual violence, power and rape is perceived due to Indian media.

Article Count

India: 5
Bangladesh: 2
Nepal: 1
Sri Lanka: 1

Article Count

India: 9
Bangladesh: 2
Nepal: 1
Pakistan: 2
Sri Lanka: 1

4.14 Adolescents and Young People

A 2014 study⁸ looking to assess misalignment between law, policy and the sexual and reproductive health needs in the Asia-Pacific region covered both Nepal and Pakistan in its analysis. Bangladesh focused papers have analysed adolescents' sexuality and sexual health programmes, sexual harassment of adolescent females, reproductive behaviour challenges in married adolescent women. India's range of topics covered varies from delaying abortion to gender attitudes in adolescents.

4.15 Health systems, policy and access

Health Systems, Policy and Access as a key topic has the second highest number of publications, after abortion, with 28 papers making up this area. It been studied from clinical perspectives involving anaesthesia services for emergency obstetric care throughout India, Pakistan, Bangladesh, Bhutan, Nepal and Sri Lanka – to the practicalities of receiving health care services.

Article Count

India: 14
Bangladesh: 7
Nepal: 3
Pakistan: 2
Sri Lanka: 1
Bhutan: 1

Article Count

Bangladesh: 1
India: 1
Sri Lanka: 1

4.16 Sex work

Sex work research has focused on Bangladesh, India and Sri Lanka. Sex work was looked at in tandem with HIV prevention in Bangladesh while in Sri Lanka and India, it was considered in relation to justice and rights perspectives.

5. References

¹Kandala N, Ezejimofyor M C, Uthman O A, Komba P. Secular trends in the prevalence of female genital mutilation/cutting among girls: a systematic analysis. *BMJ Global Health*, 2018; 3, 1-7. Available from: doi:10.1136/bmjgh-2017-000549 [Accessed 14th February 2020]

²Nidhi Goyal (2017) Denial of sexual rights: insights from lives of women with visual impairment in India, *Reproductive Health Matters*, 25:50, 138-146, DOI: 10.1080/09688080.2017.1338492

³ Cecilia Van Hollen (1998) Moving targets: Routine IUD insertion in maternity wards in Tamil Nadu, India, *Reproductive Health Matters*, 6:11, 98-106, DOI: 10.1016/S0968-8080(98)90086-6

⁴Supon Limwattananon, Viroj Tangcharoensathien & Supakit Sirilak (2011) Trends and inequities in where women delivered their babies in 25 low-income countries: evidence from Demographic and Health Surveys, *Reproductive Health Matters*, 19:37, 75-85, DOI: 10.1016/S0968-8080(11)37564-7

⁵Kate Jehan, Kristi Sidney, Helen Smith & Ayesha de Costa (2012) Improving access to maternity services: an overview of cash transfer and voucher schemes in South Asia, *Reproductive Health Matters*, 20:39, 142-154, DOI: 10.1016/S0968-8080(12)39609-2

⁶ Pushpa Chaudhary, Giulia Vallese, Meera Thapa, Valerie Broch Alvarez, Latika Maskey Pradhan, Kiran Bajracharya, Kazutaka Sekine, Shilu Adhikari, Reuben Samuel & Sophie Goyet (2017) Humanitarian response to reproductive and sexual health needs in a disaster: the Nepal Earthquake 2015 case study, *Reproductive Health Matters*, 25:51, 25-39, DOI: 10.1080/09688080.2017.1405664

⁷ Parveen K Parmar, Rowen O Jin, Meredith Walsh & Jennifer Scott (2019) Mortality in Rohingya refugee camps in Bangladesh: historical, social, and political context, *Sexual and Reproductive Health Matters*, 27:2, 39-49, DOI: 10.1080/26410397.2019.1610275

⁸ John Godwin, Gabrielle Szabo, Justine Sass & Josephine Sauvarin (2014) Righting the mismatch between law, policy and the sexual and reproductive health needs of young people in the Asia-Pacific Region, *Reproductive Health Matters*, 22:44, 137-147, DOI: 10.1016/S0968-8080(14)44808-0