

## CHAPTER 6

### Annotated Bibliography

**Freedman, L.P. (1995). Censorship and manipulation of reproductive health information. In Article 19 (Eds.), *The Right to Know: Human rights and access to reproductive health information*. London, Author.**

Experts from around the world, working in the fields of public health, human rights, and family planning contributed to this book. They used case studies to demonstrate the need for women to receive accurate and appropriate information about reproductive health and choice and the ways in which governments restrict, censor and manipulate information about reproductive health. The book aims to provide an understanding of the relationship between the right to information and the ability to make informed choices about one's reproductive health.

Dr. Freedman provides the opening framework for understanding the country reports presented throughout the book. She brings together the fields of human rights and reproductive health, linking an individual's right to health information to broader social, economic and cultural forces. She uses this to provide a framework to analyze reproductive health in the context of women's lives and the conditions under which they struggle for basic freedom and dignity. Three discussions are presented in her chapter which:

1. Consider the political dimensions of women's reproduction in order to understand how and why states attempt to manipulate family planning information.
2. Explore the traditional modes of thinking about human rights and the need to recognize states positive obligations (social, economical and cultural).
3. Recognize how family planning information is sometimes used in the name of women's health to advance other social and political agendas.

Freedman claims that such a wide-ranging analysis serves several important purposes. It lays the groundwork for holding states accountable for failure to prevent private sector abuses within their jurisdiction and gives women the right and responsibility to make decisions about their own bodies and lives.

**Gittelsohn, J., Pelto, P.J., Bentley, M.E., Bhattacharyya, K. & Russ, J. (1998). *Women's health network protocol: Ethnographic methods to investigate women's health*. Baltimore: John Hopkins University and Ford Foundation.**

The book provides guidelines and a proposed protocol for undertaking community-based ethnographic research on women's health. The book provides a means of finding appropriate communication strategies, selecting forms of local terminology, improving surveys, identifying constraints in addressing the condition of women's health and preparing an ethnographic report. The protocol focuses on health problems of women and presents various approaches useful in researching them. The protocol emphasizes training of data collectors, the need for primary unstructured data, available computer software packages, data analysis procedures and how these can be used in developing programs and their implementation.

This book was extremely practical and detailed in how to undertake research on women's health issues. It provided examples of a wide-range of methods with step by step explanations of how to use them. This book the most concrete and helpful in preparing my data collection methods particularly in developing my observation and in-depth interview guidelines.

**Mann, J. & Gruskin, S. (1995). Women's health and human rights: Genesis of the health and human rights movement. *Health and Human Rights*,1, 309-314.**

The edition of this journal was prepared in advance of the United Nations Fourth World Conference on Women. The articles highlight how the women's health field has found human rights to be central to women's health and well being. The journal's articles offer a powerful inter-dependence between the struggle for women's human rights and efforts to improve and protect women's health. The articles provide concrete examples of how international law can be used to promote a comprehensive response to women's health.

Dr. Freedman's article *Reflections on Emerging Frameworks of Health and Human Rights* was also an important resource for my thesis. It provided a framework for understanding the social and political structures that produce ill health and how they need to be redefined to incorporate the new vision of reproductive health as a "complete physical, mental and social well-being." She carefully shows throughout her analysis how physical health cannot be detached from political and social concerns and how health is socially produced. She also notes the problems of human rights frameworks that focus on dichotomies and how this often is a tactic used against women and impacts on their reproductive health. Finally she presents the challenges to rethink the connections between health and human rights by re-framing our understandings of each.

**National Research Council. (1997). *Reproductive health in developing countries: Expanding dimensions, building solutions*. Washington DC: National Academy Press.**

This book framed for me the many aspects of reproductive health and the emerging issues in the context of developing countries. The book was written by a committee of professionals working on reproductive health and population issues throughout the world. They focused on the concepts of reproductive health embraced in the International Conference on Population and Development (ICPD) held in Cairo in 1994 and the acute problems faced by developing countries in attaining the goals outlined. The book explores each of the following aspects of reproductive health:

1. Healthy sexuality
2. Infection-free sex and reproduction
3. Intended births
4. Healthy pregnancy and childbearing
5. Program design and implementation
6. Costs, financing and setting priorities.

The book focuses on practical interventions that could be undertaken in the coming five to ten years and areas where further research is necessary in order to improve the quality of life, especially for those least well served in developing countries.

**Population Reports. (1996). *People on the move: New Reproductive Health Focus*. Baltimore: John Hopkins School of Hygiene and Public Health.**

This journal was the most valuable collection of articles specifically discussing the impact of migration on reproductive health. It provided a framework for presenting and analyzing the impact of migration on reproductive health in the Myanmar context. The articles noted key factors in migration, which determine the vulnerability of those relocating. The report also notes critical reproductive health issues typically found among migrant populations. Other articles presented research needs necessary for planning services that are inclusive of migrants and recommends international efforts to provide such interventions. Finally, the report provided a large bibliography of references useful in understanding the wide-range of issues related to the reproductive health needs of migrant populations both internal and cross-border.

**Porter, D. (1995). *Wheeling and dealing: HIV and development on the Shan State borders of Myanmar*. New York: United Nations Development Programme.**

This is a report based on research undertaken along the Thai and Yunnan borders with Myanmar. The study provides an excellent case example of the impact of social and economic changes leading to migration and the relation it has to the potential spread of HIV/AIDS. The report emphasizes the range of political and economic conditions directly contributing to the transmission of HIV/AIDS. These include national and neighboring country economic policies, emerging patterns of trade and transport, changing political alliances and migration (internal and cross-border). The

report shows how the changing patterns of trade, transport and investment and the unprecedented movement of people across national borders directly impacts on the vulnerability to HIV/AIDS and other health illnesses.

The report is divided into three main parts. The first provides a background to the findings of the research, which is reported in part two. The findings describe the changes occurring in the organization and character of transport in the region and the migration and movement of people as a result. The third part discusses the current socio-economic changes and transmission of the HIV virus. The conclusion of the report identifies how ongoing efforts to address and lessen the effects of the HIV virus might be strengthened and where further research may be useful.

**Sen, G., Germain, A., & Chen, L. (Eds.). (1994). *Population policies reconsidered: Health, empowerment, and rights*. Boston: Harvard School of Public Health.**

The book is a compilation of authors addressing contemporary population policies and their impact on human well-being. The book first reviews current population policies and the fundamental challenges to them related to ethics, human rights and human development; women's empowerment; and reproductive and sexual health. The book and its authors call for a new approach to population issues that are based on ethics and creating sustainable human development. This book provided a means of critically thinking about mainstream reproductive health frameworks. It asked questions and raised practical and ethical issues regarding traditional population and reproductive health theories and policies.

The book is divided into four sections. The first re-examines the population policies of the past and need for setting new agendas that takes into consideration women's rights, development, environment, well-being and basic freedoms. The second section explores the links between human rights and reproductive rights and the need to incorporate them in population policies. The third section focuses on gender and empowerment and how this impacts directly on reproductive health outcomes. The final section explores reproductive and sexual health. This last section looks at improving the quality of reproductive and sexual health services, means of improving their out reach to women and young people, and the financing of such services.

**Smith, M. (1996). *Fatal silence: Freedom of expression and the right to health in Burma*. London: Article 19.**

The report highlights the realities of Myanmar's national health system and how censorship and the denial of basic freedoms (information, expression and association) has widely affected it. The first part of the report looks at the crucial links between health and human rights in Myanmar. The second part looks at three areas of concern: humanitarian emergency, AIDS and narcotics, and women's health. Each topic raises fundamental issues over the rights of all people to freedom of expression, associate and to the freedom of research and information.

This report was extremely helpful in analyzing the limited and often unreliable health statistics from Myanmar. With so little data available, health problems can be



easily used to overestimate as well as underestimate the realities. This report helped to look at the range of ways the data is used and misused and provided an analysis for understanding the urgent health issues that are known.

**World Health Organization. (1997). *An assessment of the contraceptive method mix in Myanmar*. Geneva: Author.**

The assessment presented in this report focused on the quality of care and addressed policy, program development and research needs related to contraception and reproductive health issues more generally. This report also noted that lack of accurate information among both providers and community members about contraceptive methods and the practice of birth spacing in general throughout Myanmar. The assessment also addressed other related reproductive health issues. It noted abortion as a major problem in Myanmar, given it is illegal and yet widely induced making it one of the leading causes of maternal mortality. The report also documents serious gaps in the knowledge of both clients and providers regarding the causes of reproductive tract infections (RTIs), the symptoms of infections and available means for prevention and treatment.

The report is divided into eight sections. The first four describe the assessment process, reproductive health status and birth spacing policy in Myanmar. The latter sections discuss the findings of the assessment related to user's perspectives on birth spacing, service delivery and associated reproductive health issues. The final section of

the report presents the conclusions of the assessment and the proposed recommendations for action.