Preface

Global Perspectives on Women’s Sexual and Reproductive Health Across the Lifecourse was conceived by Shonali M. Choudhury, Ph.D., a women’s health scholar and advocate. Shonali believed passionately in women’s rights, and she championed research and practice that centers the experiences of marginalized women. When she conceptualized this compiled volume of work, Shonali was a faculty member in the School of Nursing and Health Studies at the University of Miami. She had already completed a qualitative study of establishment-based female sex workers in Tijuana, Mexico, and was beginning new collaborations in Miami to better understand Latina women and HIV. She envisioned this book as a way of bringing together diverse, global perspectives on current issues in sexual and reproductive health. She felt strongly that the book should give voice to women whose perspectives and experiences are often discounted or ignored: young women, old women, those who seek abortion, and survivors of violence, among others. Shonali also wanted to highlight the work of new investigators, who are rising in the field of sexual and reproductive health and have new insights to share.

At the age of 31, Shonali was diagnosed with a brain tumor. Over the next three years, Shonali would work, struggle, and resist. With the unparalleled support of her parents, Parimal Choudhury and Barbara Southard Choudhury, she worked through surgeries, chemotherapy, and radiation—teaching, writing, planning projects, designing data collection, dictating manuscript edits. Shonali continued to pour herself into her work as she was fighting for her own survival because she saw women all over the globe, of all ages, engaging in their own fights for survival and she wanted to tell their stories and better their lives.

The three of us—Shonali, Jennifer, and Mellissa—first met as graduate students in Public Health at the University of California, Los Angeles. Our experiences in the Department of Community Health Sciences shaped our shared values and goals, and helped us to forge warm personal and professional ties. So when Shonali’s health was declining and it became clear that adding co-editors would ensure that the book would come to fruition, she turned to us. The book was still in its initial stages of planning, with several chapters solicited, and some edited, but no publisher. Motivated by friendship, intersecting professional interests, and the weight of
Shonali’s legacy, Jennifer and Mellissa have brought the book to its completion. We share Shonali’s passion and hope. We believe that the interventions and research presented here can help to shape the next generation of advocates, healthcare providers, and researchers striving to improve quality and equity in women’s sexual and reproductive health.

The Importance of the Lifecourse Perspective in Sexual and Reproductive Health

This book emphasizes a lifecourse perspective in understanding women’s sexual and reproductive health. This perspective takes into account critical periods in a woman’s development and recognizes that experiences are shaped by the wider social, economic, and cultural contexts in which they take place. It also emphasizes that present experiences are shaped by the past and will, in turn, affect future experiences. While this perspective stresses the importance of all ages and stages of life, it allows us to consider the long-term consequences of both biological and sociocultural experiences that take place early in women’s lives. For example, several chapters in this book highlight the pervasiveness of gender-based violence and demonstrate that victimization of girls and women often begins very early. Because gender norms and beliefs are so deeply rooted in many societies, many forms of violence against women can be perceived as normal or even sanctioned by society, thereby going unrecognized. This book brings attention to the multitude of harmful gender norms and vulnerabilities that affect women at different stages in their lives, including early marriage, unwanted or mistimed pregnancies, sexually transmitted infections, economic disempowerment, and physical and sexual abuse. It also recognizes the ways in which women in a variety of contexts resist, survive, and overcome.

As shown in this book, gender inequities affect girls and women at every stage of their lives, placing them at a disadvantage to boys and men, and often influencing their life trajectories. Although women may experience heightened vulnerability for exploitation or violence during key milestones in their lives, such as sexual debut, marriage, or pregnancy, we should not examine each milestone in isolation. Rather, we wish to acknowledge the importance of considering the intersection of biological, sociocultural, and behavioral factors that influence women’s health status and how these may accumulate over a woman’s lifetime, shaping health outcomes over the long term.

In taking a lifecourse perspective, we also reject the emphasis that is often placed on women (and women’s health research) solely in terms of reproductive capabilities. This limited perspective minimizes the experiences of older women, as well as women who choose not to have children. In addition to looking at women at all stages of life, in this book we examine a range of sexual and reproductive health experiences, not only marriage, contraception, and childbearing, but also sexual pleasure and sexual partnerships, health issues not directly related to reproduction.
Finally, in this book we hope to highlight the opportunities to improve women’s sexual and reproductive health and to achieve socioeconomic and racial/ethnic equity at various points in women’s life courses. We should aspire to the best possible health outcomes at every age and must examine how to best support women to achieve this. Improving sexual and reproductive health for all women will require a close examination of the opportunities and challenges for change across the life-course—for individual women and for the institutions with which women interact beginning even prior to their birth.

Women’s achievement of optimal sexual and reproductive health rests on the realization of a wide range of human rights. Women must have the freedom and autonomy to make decisions throughout their lives, whether choosing a marital partner, determining if and when to have children, or deciding to work outside the home. Women across the world are denied the ability to exercise these rights on a daily basis. We subscribe to the notion of sexual and reproductive rights as fundamental to women’s health, well-being, and participation in society. Ensuring women’s sexual and reproductive rights across the lifecourse must be at the forefront of our efforts to improve the health of women across the globe.

Organization of This Volume

The book is organized into five parts, each with its own substantive focus. The book begins with a part on childhood and emerging adulthood. The chapter by Anita Raj and colleagues lays a foundation for understanding the risks and challenges of child marriage for girls and women. Next, Marie Brault and colleagues examine the role of individual agency in delaying marriage and first pregnancy in India. Eunice Muthengi and Karen Austrian present an integrated, multisectoral model to prevent child marriage and early childbearing in Kenya. The last chapter in this part, by Brittany Chambers and Jennifer Toller Erausquin, focuses on the US setting and the stigma surrounding teenage motherhood.

The second part of the book focuses on childbearing, with three chapters touching on different topics. The chapter by Kara Francisco and Morgan Sanchez examines the perceived autonomy of black women in the USA in choosing vaginal births after previous cesarean sections. The chapter by Charlotte Warren and colleagues relates the experiences of women living with obstetric fistula in Kenya. Finally, Aparajita Gogoi and colleagues explore access to and quality of maternal health care in India through an innovative mobile phone program.

The third part explores reproductive control: fertility, contraception, and abortion. Mellissa Withers and colleagues examine cultural influences on fertility preferences in Bali, Indonesia. Then, the chapter by Deborah Mindry and colleagues presents strategies to promote safer contraception among HIV-positive women in sub-Saharan Africa. The final two chapters of this part relate to abortion: Natalie Whaley and Jenn Brandt examine abortion in the USA through the lens of media (both mainstream and
Michele Eggers presents experiences of women in Chile, a context in which abortion is criminalized.

The next part focuses on violence against women and its role in sexual and reproductive health. In the first chapter in this part, Shonali Choudhury and colleagues use in-depth life history interviews to examine the intersections of individual agency, experiences of violence, and HIV risk among female sex workers in Tijuana, Mexico. Next, Jamila Stockman and Kristin K. Gundersen provide evidence for a continuum of sexual violence among Black women in the USA. Abigail Hatcher and colleagues present a conceptual framework for addressing intimate partner violence in pregnancy, used in the South African context. Then, Jennifer McCleary-Sills and colleagues examine the evidence surrounding violence against an understudied population: older women. In the last chapter of this part, Lillian Artz and colleagues present a criminal justice perspective on women’s exposure to sexual violence across the lifecourse in South Africa.

The final part of the book addresses topics beyond reproduction. Elizabeth Reed and colleagues start off this part with a discussion of the promise of cash incentives for improving sexual and reproductive health, with a focus on HIV/STI prevention. Jennifer Toller Erausquin discusses HIV knowledge and behaviors across relationship types for women in the Dominican Republic and Haiti, indicating a potential need for better-targeted interventions. Next, Lwendo Moonzwe Davis presents evidence from a mixed-methods study conducted in Zambia to understand links between women’s intimate relationships and their sexual and reproductive health. The next chapter in this part by Laura Pascoe examines the understanding and experience of sexual pleasure among heterosexual women of various racial, ethnic, socioeconomic, and religious backgrounds in Cape Town, South Africa. The following chapter by Megan Huchko describes the development of a promising cervical cancer prevention project in East Africa. Finally, Engida Yisma and Stephanie Ly examine the conceptualization of menopause across cultures.

Although our aim is to present a wide range of challenges relating to global women’s sexual and reproductive health, this book does not provide a comprehensive analysis of all issues. A multitude of important topics were left out, including sex-selective practices that have led to gender ratio imbalances, and the importance of male engagement in sexual and reproductive health. In addition, several key populations were not included in the chapters selected for this book, including lesbian, bisexual, and transgender women; non-cisgender persons; indigenous women; and women in the Middle East. Although these topics and populations were beyond the scope of this book, we do not wish to diminish their importance. Meeting the needs of all women is a critical part of the advancement of sexual and reproductive health globally.

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