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Reproducing Inequities - Poverty and the Politics of Population in Haiti

UBC Press | Reproducing Inequities - Poverty and the ...

Reproducing Inequities Summary Reproducing Inequities: Poverty and the Politics of Population in Haiti by M. Catherine Maternowska Residents of Haiti - one of the poorest and most unstable countries in the world - face a grim reality of starvation, violence, lack of economic opportunity, and minimal health care.

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Reproducing Inequities: Poverty and the Politics of Population in Haiti is much more than a study of the vicissitudes of Haitian women seeking to control fertility in a setting where they cannot easily feed or protect their children. It is a painful and harrowing exploration of how aid programs purporting to reduce fertility come to fail their ...

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Reproducing Inequities: Poverty And The Politics Of Population In Haiti Online Read More than half of them are between 16 and 24, and the majority work in the hotel and restaurant business. Americans are legendary for their individualist streak and, in recent history, for their distrust of the federal government. A growing economy helps reduce poverty.

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A Student's Death by Suicide Is the Cost of Inequality. India cannot allow more students to sacrifice themselves on the cross of poverty and humiliation.

Through a detailed study of the attempt to provide modern contraception in the community of Cite Soleil, this book demonstrates the complex interplay between local and global politics that so often thwarts well-intended policy initiatives. It argues that we too easily overlook the political dynamics that shape choices about family planning.

"Examines how food aid, population policies and policy against domestic violence reflected and reproduced existing inequalities based on race, class and gender in 1990s Peru"--Provided by publisher.

"Those involved in women's health issues, Third World studies, and economic development should find food for thought" (Kirkus Reviews). This is an updated edition of the "influential study" (Publishers Weekly) of issues surrounding childbirth and the history of population control programs. Challenging conventional wisdom about overpopulation, and uncovering the deeper roots of poverty, environmental degradation, and gender inequalities, the author uses data and vivid case studies to explore how population control programs came to be promoted by powerful governments, foundations, and international agencies as an instrument of Cold War development and security policy. Mainly targeting poor women, these programs were designed to drive down birth rates as rapidly and cheaply as possible, with coercion often a matter of course. In the war on population growth, birth control was deployed as a weapon, rather than a tool of reproductive choice. Threaded throughout is the story of how international women's health activists fought to reform population control and promote a new agenda of sexual and reproductive health and rights for all. While their efforts bore fruit, obstacles remain. On one side is the anti-choice movement that wants to deny women access not only to abortion but to most methods of contraception. On the other is a resurgent, well-funded population control lobby that often obscures its motives with the language of women's empowerment. Despite declining birth rates worldwide--average global family size is now 2.5 children--overpopulation alarm is on the rise, tied now to the threats of climate change and terrorism. Reproductive Rights and Wrongs reveals how these developments are rooted in the longer history and politics of population control. In this book, a new generation of readers will find knowledge and inspiration for the ongoing struggle to achieve reproductive rights and social, environmental, and gender justice.

In the United States, some populations suffer from far greater disparities in health than others. Those disparities are caused not only by fundamental differences in health status across segments of the population, but also because of inequities in factors that impact health status, so-called determinants of health. Only part of an individual's health status depends on his or her behavior and choice; community-wide problems like poverty, unemployment, poor education, inadequate housing, poor public transportation, interpersonal violence, and decaying neighborhoods also contribute to health inequities, as well as the historic and ongoing interplay of structures, policies, and norms that shape lives. When these factors are not optimal in a community, it does not mean they are intractable: such inequities can be mitigated by social policies that can shape health in powerful ways. Communities in Action: Pathways to Health Equity seeks to delineate the causes of and the solutions to health inequities in the United States. This report focuses on what communities can do to promote health equity, what actions are needed by the many and varied stakeholders that are part of communities or support them, as well as the root causes and structural barriers that need to be overcome.

Rural Women's Sexuality, Reproductive Health, and Illiteracy examines the intimate lives of women in the developing world, their sexuality, and views on family planning and gender inequality. Providing insights on cultural traditions and understanding of modern medicine, it is essential for public health and anthropology scholars and practitioners.

Global health has emerged as a distinct field of academic research and professional activity. Over the last decade, health has become an important element of many nations' foreign policies, a routine agenda item for the G8 and a rapidly expanding focus of bilateral and multilateral development assistance. Some

aspects of health, like the spread of easily transmitted communicable diseases, are self-evidently global in an age of rapid, low-cost air travel. Many more reflect the influence of transnational economic integration ('globalization') and its effects on national economies, societies and health systems. In still other cases, like non-communicable diseases in most low- and middle-income countries, the lack of impact on the interests of more powerful actors outside the borders of the affected areas makes it difficult to generate the concern and action on the part of the global community that may be imperative for ethical reasons. This multinational volume of original contributed papers simultaneously provides an overview of the state of current global health scholarship, reflects the multidisciplinary nature of the field, and highlights the most significant issues for research and policy.

The power of purchasers exposes the weaknesses of conventional thinking on the costs and benefits of priorities. Health policy analysts now have to develop rational criteria to support decisions in a process which may be inherently intuitive. This authoritative and practical text points the way towards clear choices in resource allocation and the implications of these choices on expenditure diverted among different health care programmes.

Many women throughout the world face the challenge of confronting an unexpected or an unwanted pregnancy, yet these experiences are often shrouded in silence. An Open Secret draws on personal interviews and medical records to uncover the history of women's experiences with unwanted pregnancy and abortion in the South American country of Bolivia. This Andean nation is home to a diverse population of indigenous and mixed-race individuals who practice a range of medical traditions. Centering on the cities of La Paz and El Alto, the book explores how women decided whether to continue or terminate their pregnancies and the medical practices to which women recurred in their search for reproductive health care between the early 1950s and 2010. It demonstrates that, far from constituting private events with little impact on the public sphere, women's intimate experiences with pregnancy contributed to changing policies and services in reproductive health in Bolivia.

In *Holding On* anthropologist Alyson O'Daniel analyzes the abstract debates about health policy for the sickest and most vulnerable Americans as well as the services designated to help them by taking readers into the daily lives of poor African American women living with HIV at the advent of the 2006 Treatment Modernization Act. At a time when social support resources were in decline and publicly funded HIV/AIDS care programs were being re-prioritized, women's daily struggles with chronic poverty, drug addiction, mental health, and neighborhood violence influenced women's lives in sometimes unexpected ways. An ethnographic portrait of HIV-positive black women and their interaction with the U.S. healthcare system, *Holding On* reveals how gradients of poverty and social difference shape women's health care outcomes and, by extension, women's experience of health policy reform. Set among the realities of poverty, addiction, incarceration, and mental illness, the case studies in *Holding On* illustrate how subtle details of daily life affect health and how overlooking them when formulating public health policy has fostered social inequality anew and undermined health in a variety of ways.

Indicators and rankings are widely used by governments and international organizations to assess the effectiveness, efficiency, and success of policy decisions. The role of indicators is however little examined. This book closes this gap by evaluating the creation of indicators, their impact on policy decisions, and the implications of their use.

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