

# Sex & Population

## It takes two!

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## **Abstract Sex and Population: It takes two!**

**Topic:** After the ICPD in 1994 the focus within the population field shifted from demographic targets towards individuals with sexual, reproductive rights and health (SRRH). Working with the concept of SRRH for 16 years, the question arises whether sex and population issues have become more integrated.

**Research aim:** Describe the current state of research in the combined field of sex and population, to provide an overview and stimulate discussion on what 'the field' *is* about, what *not* and what it *could* be about.

**Research questions:** How much and what kind of research has recently been conducted in this combined field (focusing on topics, theories, methods, units of analysis and geographical locations)?

**Methods:** Systematic database search and qualitative text analysis.

**Data:** Databases (Popline, JSTOR) were searched for the hits combining specific search terms on both population and sexuality issues. From a sample of 96 publications the abstracts were analyzed to identify the research structure. **Main**

**Findings:** Not much (empirical) research combined both topics. Focus is mainly on women and health. Many different developing countries are considered, but attention for cultural differences is marginal.

**Recommendations:** Adopt a more critical, contextualized, inclusive and broader approach in population and SRRH research and policy.

# Index

	Page	
<b>1. Introduction</b>	<b>4</b>	
1.1. Background	4	
1.2. Research Aims	4	
1.3. Relevance	5	
1.4. Research approach	5	
1.5. Research questions	5	
1.6. Research output	6	
1.7. Report Structure	6	
<b>2. Data and Methods</b>	<b>7</b>	
2.1. Research Methods	7	
2.2. Data	7	
2.3. Units of analysis	9	
2.4. Data Analysis	9	
<b>3. Operationalization</b>	<b>10</b>	
3.1. Data gathering	10	
3.1.1. Defining concepts	11	
3.1.2. Population Issues	11	
3.2. SRRH issues	12	
3.2.1. Search words	14	
3.2.2. Population Issues	14	
3.2.3. SRRH issues	15	
3.3. Search Entries	15	
3.4. Research Structure	16	
<b>4. Results</b>	<b>17</b>	
4.1. How much research?	17	
4.1.1. What kind of research?	20	
4.1.2. Topics	20	
4.1.3. Theories		22
4.1.4. Methods		22
4.1.5. Units of Analysis	24	
4.2. Geographical locations	26	
4.3. Main findings	27	
<b>5. Conclusions</b>	<b>28</b>	
<b>6. Discussion &amp; Recommendations</b>	<b>29</b>	

References	30
Appendices	33
A: Search Entries	33
B: Code Book	40
C: Results separate database searches	49
D: Sample references	43

#### List of Tables

Table 1: Dimension Population Debates	12
Table 2: Research combining 'SRRH' and 'Population' issues	19
Table 3: Topics mentioned in SRRH & Population research	22
Table 4: Theoretical models used explicitly	22
Table 5: Data collection methods applied	24

#### List of Figures and Maps

Figure 1: Type of publications	23
Figure 2: Units of analysis	26
Map 1: Countries mentioned in SRRH & Population Research	28

## 1. Introduction

This first chapter provides an introduction to the research. After introducing the research topic, the aims of this study, its relevance and the research approach are described. Also the specific research questions are mentioned and the expected research output. The structure of the whole report is provided in the last paragraph.

### 1.1. Background

Do sexuality and population issues have any common ground besides their mutual connections to reproduction? Sexuality entered the population debate at the International Conference on Population and Development (ICPD) in 1994 (Petchesky, 2000). Here the focus of the international population field changed radically (Finkle and McIntosh, 2002). Macro scale concerns and demographic targets were replaced by a micro scale perspective and an individual rights approach became dominant. In the conferences' Program of Action advancing sexual and reproductive rights and health (SRRH) were explicitly formulated as goals too (UNDPI, 1995). While the 'language about sexuality and reproductive health ... was considered new and groundbreaking in 1994 [it] is now part of the health lexicon in most countries' (Asford, 2004).

But has this shift in paradigm left any room for population concerns? Since the ICPD the population field has grown in scope and complexity. As a consequence, coherence and focus might have been lost (Finkel and McIntosh; 2002, p.20). Family Planning is not such a hot topic anymore and the general commitment to achieving the ICPD goals seems to have fallen too (Blanc and Tsui, 2005). Despite the many pressing global problems linked to overpopulation, the topic might have become a taboo altogether (Erhlich, 2008, Campbell, 2007).

Can individual sexual rights be connected with macro scale population concerns? More than sixteen years after the ICPD the question remains whether and how sexuality and population issues can be integrated. This study explores the recent scientific research which combined both sexuality and population related topics to provide a descriptive 'state-of-the art' overview of this research field.

### 1.2. Research Aims

This study aims at providing a descriptive overview of recently published research in the combined field of sexual and reproductive rights and health and population issues. By doing so, it hopes to contribute to:

- a) Reflexivity of SRRH-population actors on their own work;
- b) Guidance of future research activities.

### 1.3. Relevance

Four reasons make this explorative study relevant. First of all, combining sexuality and population approaches to SRRH has proven difficult in practice. A Dutch SRRH NGO, Rutgers-WPF, recently merged from the more sexuality oriented Rutgers NISSO Group and the more population oriented World Population Foundation. Both organisations already worked on SRRH, but while repositioning themselves, they struggled with combining both perspectives in their new organisation. Was such a combination even possible and if so, how? Their question was thus how sexuality and population were combined in the scientific literature.

Secondly, a preliminary literature study revealed that so far no research *had been* conducted on this topic.

Thirdly, for a future repositioning of the field itself it might be very useful to have an inventory on what had recently (not) been done in the combined SRRH and population field. Representing a field's state of the art of knowledge allows getting a picture of gaps in the knowledge. 'This all makes clear where future research is needed, and what can safely be used in policy-making or decision-making processes' (Popping, 2007, p. 692).

And finally, more fundamentally, the severance of overpopulation related problems demand attention. As do the place of individual rights in general, and sexual and reproductive rights more specifically, in solving these essentially common goods problems. In deciding on what should be done, looking at what has been done might be useful.

### 1.4. Research approach

Research is conducted from a critical realist perspective. The population field is seen as an 'issue culture', which is defined as an "ongoing discourse that evolves and changes over time, providing interpretations and meanings for relevant events" (Gamson and Modigliani, 1989, p.1). For this study this perspective implies that overpopulation and SRRH, the two key components of this issue culture, are seen as socially constructed but with strong links to an objective reality. By doing so, current use of both concepts is viewed as meaningful and researchable. It also leaves the possibility open that the concepts could be used differently too. Research and other activities within the issue culture can re(de)fine the meaning of both SRRH and population issues.

### 1.5. Research Questions

#### Main Question

How can the research in the combined field of 'SRRH and Population' be described, *when looking at the most recent publications in English, peer-reviewed, demographic scholar literature published since 1994?*

#### Sub-questions

The main research question will be answered with two sub-questions:

1. How much research on 'SRRH and Population issues' *has been* published in the English, peer-reviewed, demographic scholar literature since 1994?
2. How has this research been structured in terms of *employed*:
  - 2.1. Topic
  - 2.2. Theories
  - 2.3. Methods for:
    - 2.3.1. study design
    - 2.3.2. data collection
  - 2.4. Units of analysis
  - 2.5. Geographical location

## **1.6. Output**

The research will be disseminated with a poster presentation at an international symposium, namely Population Footprints May, 25<sup>th</sup> and 26<sup>th</sup> 2011 at the University College of London, in London. In addition a research report will be written.

## **1.7. Report Structure**

After this introductory chapter, the data and methods are described more extensively in Chapter 2. The operationalization of used concept is provided in Chapter 3. Chapter 4 contains the study results. Chapter 5 contains the conclusions and in the last Chapter 6 some points for discussion and recommendations for further research are mentioned. The Appendices contain the specific search entries, the hits from the separate databases, the code book of the text analysis and the references included in the sample for the text analysis.

## 2. Data and Methods

This chapter explains how the research is conducted. It starts by describing the research methods and units of analysis. Then it continues with describing the operationalization: which data were used, how they were gathered and why these specific data were used. This was done by defining the concepts of 'Population' and 'SRRH' and identifying specific search words. The chapter finishes by describing how the data were analyzed.

### 2.1. Research Methods

This study used text analysis as the main research method. Because research activities are often documented and communicated via articles in scholar journals, a text analysis of these documents is a useful way for exploring research.

A descriptive, thematic and representational approach is used to analyze the manifest meanings of the publications. Text analysis is used a research method because by conducting a text analysis, replicable and valid inferences can be made from texts to their content (Krippendorff, 2004). A descriptive approach is used since no theory is used to guide the research. A representational approach is applied, because the texts are taken as a means to understand the meaning intended by the author and not to test the researchers own theory (as in instrumental text analysis) (Shapiro, 1997). The thematic type of text analysis means that variables are used to indicate the occurrence of themes contained in blocks of texts (Popping, 2010).

This method is used to assess how the research combining 'SRRH & Population' issues has been structured and which issues are raised. Findings are presented by tables, chart pies and a map.

To assess how many research on 'SRRH & Population' issues has been published a different method is applied, namely a systematic database search for literature. This provides a general indication on what kind of research is available in both a quantitative and qualitative manner. Output will be a cross tabulation depicting with the used search words and the resulting numbers of unique articles from all the different searches combined.

### 2.2. Data

The study used scholar publications obtained from two important demographic literature databases, namely POPLINE and JSTOR. Articles were obtained by combining SRRH and Population search words. Further inclusion criteria for the articles were that they had to be written in English, be peer-reviewed, published after 1994 and accessible via the database itself. Searches were also restricted to 'keywords' and 'abstracts' to make sure the search words reflected what the articles were really about. Data were retrieved on April 19<sup>th</sup>, 2011.

Scholar publications were chosen because research activities are assumed to reflect the broader field of interest and research is frequently presented in this form. Demographic databases were chosen



because this focus of this study is on how research in the population field incorporated sexuality related issues (and not the other way around, namely how sexuality research has incorporated population issues). To make sure certain relevant information would not be missed two databases were searched for literature. This had to be done because the indexed journals differ per database, as do the keywords used to find articles and their hierarchical ordering (Krippendorff, 2004). POPLINE was chosen because it is the world's largest database on reproductive health and contains almost 400.000 documents (Popline, 2011). And JSTOR has indexed 27 journals specific for Population Studies (Jstor, 2011). Only English articles were included so that the researcher could understand their meaning. The peer-review criterion was applied to make sure the quality of the publications was generally considered reasonable. A bottom-line for publication dates was used because this study focused on recent research. The year 1994 was chosen because this was the year in which SRRH really entered the population field via the ICPD. And finally, only the articles available in the database itself were included. Otherwise the data search would be extended outside the database and also generate hits obtained via a general internet search.

The first sub-question included all the publications fulfilling the inclusion criteria. The second sub-question was answered using a sample from all previously obtained articles. Which articles were included was based on the results of sub-question 1.

Included in the sample were publications resulting from the combinations between:

- *Population search words*: all except 'Population Dynamics' and 'Population Distribution', so; population growth, population density, overpopulation, population pressure, optimum population, population stabilization, Malthus, carrying capacity, population problem, population concern, population policy, population control population law;
- *SRRH search words*: Sexuality, sex behavior, sexual pleasure, sexual rights, reproductive rights, SRHR, bodily integrity, privacy, autonomy, ICPD, sexual minorities, sexual violence, rape, sexual abuse, sexual trafficking, sexual exploitation, sexual harassment, sex education, sexual health. 'Sexuality', 'Rights', sexual minorities, 'Violence' (not sex discrimination), Sex Education, and Sexual Health.

This specific selection was made because articles obtained in this way were supposed to be really about sexuality and population. This selection resulted in 96 unique references which are provided in Appendix D. From these 96 articles the abstracts were analyzed. If descriptors were available they were used for the analysis too.

Not included in the sample were articles obtained by using search words 'Population Dynamics' and 'Population Distributions'. This was done because almost all these hits were generated as Popline Keywords. 'Dynamics' is a very broad key word. It generated a lot of literature which was not really related to the research topic. Population Distribution appeared to be not that relevant too. 'Reproduction', 'Family Planning' and 'Contraceptives' were left out too. These search words were included in the database search to provide a reference on how much research is conducted on the more traditional link between population issues and reproduction. Because they are not really about sexuality, the focus of this study, they were not included in the sample. 'Gender issues' was neither

included because the generated literature was not really about sexuality and neither about population issues. 'Sex Discrimination' was left out because the generated literature used 'sex discrimination' mainly in the sense of differentiating between age, sex, etc. This meaning was not of interest for this research. Finally, 'Reproductive Health', 'Maternal health' and 'Abortion' were left out. These categories were provided as a reference, but not included in the sample since they are not really about sexuality itself.

### **2.3. Unit of analysis**

For the first sub-question the unit of analysis is the number of publications resulting from each combination of search words.

The second sub-question was answered by using the publications' abstracts. Abstracts were chosen as unit of analysis because scholar, peer-reviewed articles usually have informative abstracts, which provide the most important information about the research structure. Analysis of abstracts should therefore provide most of the required information. If the required information is not mentioned in the abstract, the authors themselves probably do not regard those points as relevant for their study. In that sense, absence of information is informative too.

### **2.4. Data analysis**

Analysis of the data was done in two different ways. For the first sub-question references were compared to obtain the unique hits. To answer sub-questions 2 and 3, all the obtained textual data was analyzed using a qualitative approach to text analysis as described by Hennink et al. (2011, Chapters 9 and 10). The computer program MAXQDA was used to manage the textual data and assist in the analysis.

After the data was gathered, the first analysis step was coding it. Coding is 'the process whereby raw data are systematically transformed and aggregated into units which permit precise description of relevant content characteristics' (Holsti, 1969, p. 94).

Codes were developed in a deductive and inductive manner. First broad category codes were deduced a priori from the research sub-questions themselves. For instance, for sub-question 2 the first broad category code was 'Topic'. Subsequently, more detailed codes were developed inductively a posteriori and based on the data itself. By doing so, the data could speak for itself (Hennink et al., 2011, p.230). For example, a more detailed inductive code relating to 'Topic' was 'data on gays and lesbians in USA datasets' (Black, 2000). The dictionary with all the used codes is provided in Appendix B.

Coding was done by hand.

After coding all the data, codes were described and compared. The results are presented in Chapter 4 following a research based structure.

## 3. Operationalization

### 3.1. Data gathering

Data on the combined research field of SRRH and Population issues was gathered by searching demographic scholar literature databases JSTOR and POPLINE. By combining search words related to SRRH and Population issues, publications were retrieved. Further inclusion criteria applied were English Language, Peer-reviewed articles, published after 1994, only accessible via the database. Searches were also restricted to 'keywords' and 'abstracts' to make sure the search words reflected what the articles were really about.

Before retrieving publications from the databases, the specific search words had to be chosen. These were chosen by first defining the concepts 'SRRH issues' and 'Population issues'. After that, relevant keywords available in POPLINE were selected. The available keywords did not cover the definitions, so additional search words were added based on the researcher's ideas. For instance, 'Sexual rights' is not a POPLINE keyword (Popline, 2010). But due to its relevance for this study, it was added as a search term.

After formulating the search words, specific search entries were constructed. By using these slightly different search entries, as much relevant data as possible could be retrieved. Search entries were constructed by removing pre- and suffixes of the search words and adding appropriate Boolean operators to the word stem.

All the search entries and their combinations were organized in a cross tabulation. In this cross tabulation also the resulting numbers of hits from the database searches were stored. The obtained references were stored in the reference management program RefWorks (Refworks, 2011). For each specific combination of search entries the bibliographies from both databases were retrieved and compared. In this way, the unique number of hits for that combination was determined. Findings are presented in a cross tabulation.

To export the references obtained in POPLINE, the results were displayed as 'FullRec-ShortLabels'. This generated a text that could be copied and pasted into Refworks' 'Import references'. For successfully importing the references, the correct data filter and data base had to be selected, namely POPLINE and POPLINE. References obtained from JSTOR could directly be exported to Refworks. Once imported, the references were stored in maps. The maps were named with abbreviations and started with 01(Database search)(Population issues)(SRRH issues). References could be retrieved from Refworks by creating bibliographies for each map (APA 6<sup>th</sup> style, in Rich Text Format).

Based on the resulting output table of sub-question 1, a sample was drawn to answer sub-question 2 (see Chapter 2.2. Subsequently for all the 96 references the abstracts and (if available) descriptors were obtained. All publications had an abstract, so a final sample size of 96 abstracts was analyzed.

## 3.2. Defining concepts

Population and SRRH issues are key concepts in this study. Their meaning is however not self-evident. Therefore the next two paragraphs try to describe both concepts to formulate an operationalizable definition.

### 3.2.1. Population issues

The scope of problems linked to population size and growth is broad (Finkle and McIntosh, 2002, p. 20). Without fully going into the content of the whole population debate, some general points can be made about its structure. In general, the debates revolve around two questions; whether there is a problem and -if so- how it should be solved (Sinding, 2000). When addressing these questions it is first of all important to realize that population numbers themselves cannot be considered problematic but only in relation to certain values and circumstances (Ryberg, 1998). Overpopulation is a normative concept, which refers to an ideal situation. It implies there is such a thing as an optimum population size. It does however not determine what that ideal size is, nor does it make clear for what the considered population size is problematic, for whom or which timeframe to consider. Finally, 'overpopulation' most definitely does not say much about how problems should be solved.

How to address overpopulation strongly relates to how it is defined. Unfortunately, discussions about overpopulation hardly ever use satisfactory definitions of what overpopulation exactly means (Ryberg, 1998). Every component of a possible definition has been implicitly filled in completely differently by the diverse actors in the population field.

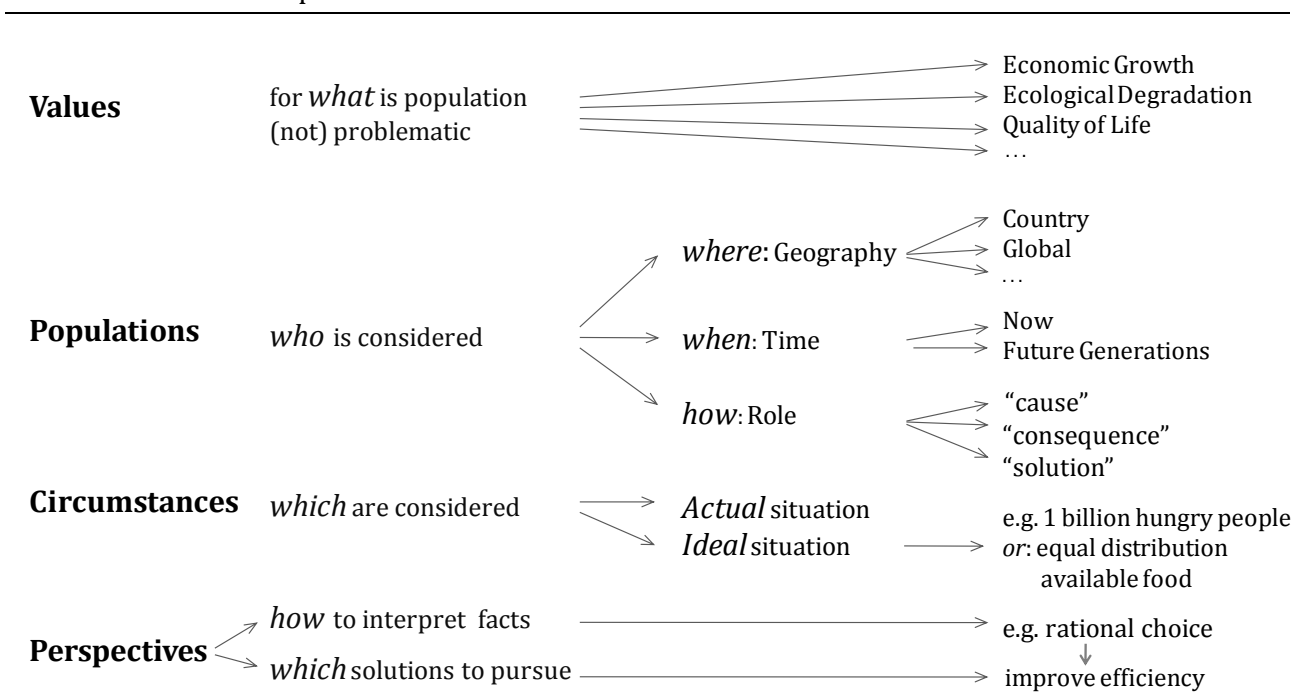
To start with, some of the values considered have been as diverse as economic growth, quality of life and ecological sustainability (Wilmoth and Ball, 1995). For whom these goals should be optimized also differs. Distinctions can be made on a geographical scale as well as on a temporal one. For example, are local or global populations the focus point and are those populations the current ones or future ones?

With regard to the circumstances, actors can refer to the actual situation, or refer to some ideal situation (Ryberg, 1998). To give an example, consider the almost 1 billion undernourished people in today's world (FAO, 2010). Based on this figure alone and referring to the actual situation, overpopulation could be claimed to be a serious problem. But a completely different conclusion could be drawn when referring to an ideal situation. Globally, food production levels are high enough to feed everyone (FAO, 2002). The distribution of the available food is however very unequal. If that distribution would be more just, there would be no problem at all (STWR, 2011). This food justice perspective therefore discards overpopulation as problem. It refers to an ideal situation in which the other relevant circumstances -like economical and political systems- would be different. These circumstances are often regarded as 'given', but they are at least as relevant and logically as changeable as population numbers themselves (Ryberg, 1998).

Ones perspective strongly influences which circumstances are considered most relevant and thus determines both whether and how to solve population issues. Much of the critique on the population debate provided by social sciences relates to the 'given' circumstances and can be summarized as issues concerning equity, efficiency and identity (Ratner, 2004). As far as solutions go, it should be clear by now that the population debate is a complex one and population policies can never be justified as the only solution.

Table 1 illustrates the different dimension to keep in mind when participating in population debates.

**Table 1:** Dimension Population Debates



**Note:** The table depicts different aspects of the population debate on which actors can (implicitly) disagree.

In summary the population debate could be generally described by four distinct aspects. Namely: the actors' perspective's that guide their interpretations of demographic facts (such as population size, distribution and growth) and result in attempts to influence those facts by policies. This study operationalizes the concept 'population' by using these broad categories 'perspectives', 'facts', 'interpretations' and 'influence'. These categories are worked out by identifying related search words for each.

### 3.2.2. SRRH issues

The previous paragraph made clear that the population debate and 'overpopulation' are difficult to define. The field of Sexual Reproductive Rights and Health (SRRH) might be just as broad and as hard to define.

In the past decade, the field of sexuality, sexual health and sexual rights has rapidly expanded (Parker et al., 2004). Sexuality and the pleasure derived from it are seen as a central aspect of human beings throughout life, whether or not a person chooses to reproduce (WHO, 2011a; IPPF, 2008: Principle 4). Sexuality is broadly defined as encompassing "sex, gender identities and roles, sexual orientations, eroticism, pleasure, intimacy and reproduction" (WHO, 2011c).

The field's focus has shifted from mainly biomedical and behavioral concerns to those of rights and social justice. The emergence of concepts as sexual health and sexual rights has made that clear (Parker et al., 2004, p. 362). Sexual rights can be understood as human rights related to sexuality (IPPF, 2008, p.10.). But a clear conception of what those rights entail is lacking. As Petchesky (2000) explains, the concept of both sexual and reproductive rights might be more like a code, meaning

different things to different people. What is understood by sexual rights largely depends on one's position and background (Parker, 2010, p. 61).

A key distinction structuring debates and activities in the field is between so-called negative and positive approaches to sexual rights and health (Parker et al., 2004; Parker, 2010). The distinction between negative and positive approaches is basically the difference between freedom from and freedom for (Parker, 1997; Petchesky, 2000; Parker et al, 2004).

Negative sexual rights redress harm. Among them are some general human rights, such as the safeguard against force, discrimination and violence. Related key topics are sexual violence, sex trafficking and female genital mutilation (Parker et al., 2004, pp. 374, 375).

Positive sexual rights are understood as a good in themselves and relate to enabling conditions to practice sexual autonomy, pleasure and health (Ibid.). Closely related is the IPPF's notion of sexual rights which sees them as "a set of entitlements which emanate from the rights to freedom, equality, privacy, autonomy, integrity and dignity of all people" (2008, p.10). Key topics following this approach are sex education, (same-sex) marriage and HIV/AIDS (Ibid.).

A different way to distinguish between negative and positive rights is in terms of responsibilities. The former are then understood as requiring others to refrain from certain conducts and the latter put others under a duty to do something (Shue, 1980). This might be a useful approach too when linking sexual rights to broader social justice aims. As Parker et al. (2004, p. 388) mention: "If the purpose of sexual rights is to grant freedom from harm and freedom for diverse sexualities and pleasures ... [it] would require ... connecting the struggle for sexual rights to the struggle for a transformation of unjust and unequal social and economic systems".

A conclusive conceptualization of SRRH is lacking. But building "... an affirmative and emancipatory notion of sexual rights, and to use it as the foundation for a new understanding of human health and dignity ..." is seen as "... the fundamental task confronting those who work in fields related to sexuality, sexual health, and human rights ..." (Parker et al, 2004, p. 389). Although the concept of SRRH might not be completely clear, its relevance for broader development goals like the MDG's is evident (Sinding, 2005).

In the mean time, many international agencies have thus adopted the set of working definitions formulated by the World Health Organization (Parker et al, 2004). These working definitions are based on various sources, including international law, international consensus agreements and the work of experts and organizations (Ibid.; WHO, 2011b).

Sexual health and reproductive health are defined as health in general, namely as a "state of complete physical, mental and social well-being, and not merely the absence of disease or infirmity" (WHO, 2011c). Sexual health relates this definition to all aspects of sexuality and reproductive health relates it to all aspects of reproduction (Ibid.).

The WHO also explicitly includes non-medical rights in their health definition. Because respecting and fulfilling person's rights are necessary to attain and maintain health itself. For reproductive health it "implies that people are able to have a responsible, satisfying and safe sex life and that they have the capability to reproduce and the freedom to decide if, when and how often to do so. Implicit in this are the right of men and women to be informed of and to have access to safe, effective, affordable and acceptable methods of fertility regulation of their choice, and the right of

access to appropriate health care services that will enable women to go safely through pregnancy and childbirth and provide couples with the best chance of having a healthy infant' (Ibid.). Abortion is also seen as a crucial part of reproductive health and already included in the ICPD Program of action (UNDPI, 1995).

In conclusion, the definitions of sexual and reproductive rights and health are all interrelated and partly overlap. Based on the previous paragraphs, it is clear that an operationalization of SRRH will have to include a broad range of topics related to sexuality itself, to rights (positive and negative), gender issues, violence, reproduction, information and education and health.

### 3.3. Search words

Population issues and SRRH issues are unfortunately difficult to operationalize. However, an attempt is made based on the descriptions provided in the sub-chapter 3.2.

#### 3.3.1. Population issues

As explained, the population debate can be described by four different aspects namely: perspectives, facts, interpretations and influence. By identifying related search words for each category, the concept 'population' was operationalized. The category 'perspectives' was left out despite its relevance. This was done because perspectives are often implicit and therefore extremely difficult to retrieve by this way of data gathering which depends on the explicit mentioning of topics. For the other three categories the following search words were used:

- *Facts*: population dynamics, population growth, population distribution, population density
- *Interpretations*: overpopulation, population pressure, optimum population, population stabilization, Malthus, carrying capacity, population problem, population concern
- *Influence*: population policy, population control, population law

The word 'Population' itself is not included as a search word. It was left out because the word has an idiomatic ambiguity, which means the concept can have different meanings (Popping, 2007). For instance, it can refer to the inhabitants of a country but also refer to the sample used in a scientific study. Using 'Population' as a search word would thus also result in retrieving publications which have nothing to do with the demographic notion this study is interested in. To avoid this problem, 'population' as such is not included as a search word, but only in combination with other words like 'problem' or 'policy'. The same goes for 'Population size'.

Although not strictly demographic, the search words 'Malthus' and 'Carrying capacity' were added too. This was done because Malthus' view has been very influential in the population debate and there are often references made to his ideas. In addition, carrying capacity is a key term in discussions about sustainability and population. 'Population problem' and 'population concerns' were added to retrieve some additional literature.

Search words relating to population decline were not included, because the demographic focus of this study is on population growth. A further study could include search words as 'population decrease'

and 'underpopulation' too, since a connection can be logically made between pro-natalist policies and (fear) of population decline.

### 3.3.2. SRRH issues

As for 'Population' the operationalizing of 'SRRH' issues is difficult. As explained in paragraph 3.2.2 it should include a broad range of topics related to sexuality itself, to rights (positive and negative), gender issues, violence, reproduction, information & education and health. By identifying related search words for each category, the concept 'SRRH' was operationalized. Based on the definitions provided by the WHO, the IPPF and the keyword guide from POPLINE (2010), the following search words were selected:

- Sexuality: sexuality, sex behavior, sexual pleasure
- Rights: sexual rights, reproductive rights, SRHR, bodily integrity, privacy, autonomy, ICPD
- Gender: gender issues, sexual minorities
- Violence: sexual violence, rape, sexual abuse, sexual exploitation, sexual trafficking, sexual harassment, sex discrimination
- Reproduction: reproduction, family planning, contraceptives
- Education: sex education, family planning education
- Health: sexual health, reproductive health, maternal health, abortion

The word 'Sex' itself was not used as a search word, because its meaning is ambiguous too. It can refer to sexuality or to the biological characteristic of a person in which this study is not interested.

### 3.3.3. Search entries

The exact search entries used to search the databases differ slightly from the search words specified above. Adjustments were made to obtain as much literature as possible.

After formulating all the search words the specific search entries were determined. This was done by removing any pre- and suffixes of the search words. For instance, from the search word Malthusian the 'ian' was removed. In addition, so called Boolean operators were added to expand the scope of the search words (Popline, 2011b; Jstor, 2011b). For instance a '\*' can be added to the word stem. By doing so, the word is truncated and it thus no longer matters what the exact letters are after the word stem. The search entry Malthus\* could generate literature mentioning Malthus, Malthusian or Malthusianism.

Also, differences in spelling between UK English and American English are important. For example: population stabilisation or stabilization. To avoid this problem the word was either truncated or the Boolean operator ~ was added to allow for alternative spellings.

Appendix A contains all the specific search entries used.



### 3.4. Research structure

The research structure was operationalized as following:

- Topic: the main focus of interest in the abstract;
- Theories: “ .... systematic sets of interrelated statements intended to explain some aspect of social life” (Babbie, 2010, p.44);
- Methods for:
  - Study design: The type of publication, for instance a critique or a research report.
  - Data collection: research techniques to collect the data and also to analyze the data
- Units of analysis: “... are those things we examine in order to create summary descriptions of all such units and to explain differences among them” (ibed. p.99)
- Geographical location: the geographical location where the data was collected or to which the research applied.

## 4. Results

To describe the research conducted in the combined field of 'SRRH and Population', three sub-questions were answered. This chapter presents the study results. For this a research design approach will be used (Hennink et al., 2011, p 279). First, the detailed results of each sub-question are provided subsequently. In addition, a summary with the main research findings is presented at the end.

### 4.1. Sub-questions 1: How much research?

The first sub-question was: 'How much research on 'SRRH and Population issues' has been published in the English, peer-reviewed, demographic scholar literature since 1994'?

This question was answered by conducting a systematic database search (see Chapter 2.2 for details). The results from all those searches are depicted in Table 2 on page 19. Detailed information about the separate searches in each database can be found in Appendix C.

When looking at the uncombined searches, depicted on the left side of and above the double line, it becomes clear that by far more research has been conducted SRRH topics than on Population issues.

Reproduction, Family Planning and contraceptives generate most literature. Sexual behavior and reproductive and maternal health also generate a lot. Sexuality is remarkably frequently mentioned in Popline abstracts too.

For the population issues 'Population dynamics' was the keyword that generated the most literature. Population Growth, distribution and Policy also generated quite some literature, many as a popline Keyword.

Not so abundant are other SRRH issues. For several of them Popline does not even have a keyword, for instance Sexual Pleasure, Rights or Health are not present. More literature was generated about negative rights than positive rights.

The amount of literature generated by almost all population search words is limited, especially when considering the time frame for the data (sixteen years). For 'Overpopulation' only 5, 11 and 6 publications were found in the different database searches. In general the search words relating to Interpretations are discussed the least, those to demographic Facts the most and when Influence is considered this is not done in terms of laws and hardly in terms of control.

When looking at the combined searchers for SRRH and Population issues, the first remarkable finding is that many combinations do not generate any literature at all, or very little. Combinations with Population Dynamics do generate a lot of data. As do combinations with Population Distribution and Population Policies. Especially together with the search words Reproduction, Family Planning and Contraception. Sexuality, Sexual Behavior, Gender issues, Reproductive Health and Abortion generate quite some literature too.

If a combination of SRRH and Population issues does generate literature, this literature almost always forms a larger share of the population literature, than of the SRRH literature. For instance consider the combination of Family Planning and Population Policy. There are 6027, 1417 and 553

articles about Family Planning. 169 of these articles also mention Population Policy, which forms at most  $(169/6027 * 100 =)$  3 percent. There are 304, 72 and 36 articles mentioning Population Policy. Of these articles, the share of the combination with Family Planning is at most  $(169/304 * 100 =)$  56 percent!

Also remarkable is that health and violence issues receive more attention than education about sex or family planning.

**Table 2:** Research combining 'SRRH' and 'Population' issues

"SRRH issues"				"Population issues"												Influence																																
				Facts				Interpretations																																								
Number of Hits				pop. Dynamics			pop. Distribution			pop. Growth			pop. Density			Overpopulation			pop. Pressure			Optimum pop.			pop. Stabilization			Malthus			Carrying Capacity			pop. Problem			pop. Concern			pop. Policy			pop. Control			pop. Law		
database				PK	PA	JA	PK	PA	JA	PK	PA	JA	PK	PA	JA	PK	PA	JA	PK	PA	JA	PK	PA	JA	PK	PA	JA	PK	PA	JA	PK	PA	JA	PK	PA	JA	PK	PA	JA	PK	PA	JA	PK	PA	JA			
	PK	PA	JA	6708	35	17	865	11	5	118	178	173	28	32	0	5	11	6	22	15	10	0	1	0	2	8	4	14	19	30	29	6	19	X	9	43	X	2	63	304	72	36	46	38	4	3	0	0
Reproduction	3538	2401	718	1086		24	44		2							4		2			0			5			7			1			3			13	33		15			0						
Family Planning	6027	1417	553	1319		69	67		5							1		5			0			6			12			5			4			11	169		33			1						
Contraception	4964	4279	800	994		54	50		4							2		1			0			4			7			0			4			12	100		24			0						
Sexuality	384	6125	762	39		9	<b>11</b>		<b>2</b>							0		0			0			<b>1</b>			<b>2</b>			0			<b>8</b>			<b>7</b>	<b>7</b>		<b>4</b>			0						
Sexual Behavior	4017	1323	106	523		126	<b>4</b>		0							0		0			0			0			0			0			<b>1</b>			<b>1</b>	<b>7</b>		0			0						
Sexual Pleasure	X	52	14	0		0	0		0							0		0			0			0			0			0			0			0	0		0			0						
Sexual Rights	X	33	13	0		0	0		0							0		0			0			0			0			0			0			0	0		<b>1</b>			0						
Reproductive Rights	132	71	34	26		3	<b>3</b>		0							0		<b>1</b>			0			0			<b>3</b>			<b>1</b>			<b>3</b>	<b>21</b>		<b>9</b>			<b>1</b>									
SRHR	X	22	32	0		0	<b>2</b>		0							0		0			0			0			0			0			0			0	0		0			0						
Bodily Integrity	X	4	1	0		0	0		0							0		0			0			0			0			0			0			0	0		<b>1</b>			0						
Privacy	22	75	17	3		1	0		0							0		0			0			0			0			0			0			0	0		0			0						
Autonomy	X	149	48	0		0	0		0							0		0			0			0			<b>1</b>			0			0			0	<b>4</b>		0			0						
ICPD	X	95	44	0		0	<b>10</b>		<b>1</b>							<b>1</b>		0			0			<b>2</b>			<b>1</b>			<b>2</b>			<b>4</b>	<b>13</b>		<b>4</b>			0									
Gender Issues	810	34	47	155		33	3		0							0		0			0			0			0			0			1			1	20		3			0						
sexual Minorities	X	13	3	0		0	0		0							0		0			0			0			0			0			0			0	0		0			0						
sexual Violence	X	144	23	0		0	0		0							0		0			0			0			0			0			<b>1</b>			<b>1</b>	0		0			0						
Rape	171	140	47	29		9	<b>1</b>		0							0		0			0			0			0			0			<b>1</b>			<b>2</b>	<b>3</b>		0			0						
sexual Abuse	253	158	41	50		7	0		0							0		0			0			0			0			0			<b>1</b>			<b>1</b>	<b>4</b>		0			0						
sexual Trafficking	37	1	9	14		0	0		0							0		0			0			0			0			0			0			0	<b>5</b>		0			0						
sexual Exploitation	15	26	98	2		0	0		0							0		0			0			0			0			0			0			0	0		<b>1</b>			0						
sexual Harassment	29	16	6	7		1	<b>1</b>		0							0		0			0			0			0			<b>1</b>			0			0	0		0			0						
sex Discrimination	108	7	32	20		3	<b>1</b>		0							0		0			0			0			<b>1</b>			0			1			1	3		0			0						
Sex Education	396	219	33	71		9	0		0							0		0			0			<b>1</b>			0			0			<b>1</b>			<b>1</b>	<b>4</b>		0			0						
F. P. Education	85	7	0	21		1	0		0							0		0			0			0			0			0			0			0	<b>1</b>		0			0						
Sexual Health	X	410	55	0		0	<b>1</b>		0							0		0			0			0			0			0			0			<b>1</b>	<b>1</b>		0			0						
Reproductive Health	885	1168	357	198		17	19		0							0		2			0			3			2			1			1			8	54		14			1						
Maternal health	1144	262	35	442		18	2		0							0		0			0			1			0			0			1			0	8		1			1						
Abortion	370	611	436	184		5	9		0							0		0			0			0			1			0			2			7	22		3			0						

**Note:** To determine the amount of research conducted in the combined field of 'SRRH' and 'Population' a systematic database search was conducted. The table displays the number of hits resulting from the database searches. The numbers on the left and above the black line show the hits each separate search word generated in each of the database searches. PK, PA and JA denote the three different database searches and are abbreviations for Popline Keywords, Popline Abstract and JSTOR Abstracts. In the cross-sections the unique numbers of hits generated by the specific combinations of search words are depicted. Per cross-section the results from all three database searches were combined and double references were removed. The **bold cells** in the grey rectangle were included in the sample to answer sub-question 2. This combination generated 96 different references.

**Main finding:** Not much research has combined sexuality and population related topics.

**Data:** References were retrieved from databases POPLINE and JSTOR. Inclusion criteria were English language, peer-reviewed, published since 1994, and publications only accessible in the database itself. In JSTOR only the 'Population Studies journals' were included and only articles containing an abstract. For the exact search entries, see Appendix A.

**Sources:** Popline and JSTOR, 18-23/4/2011.

## 4.2. Sub-question 2: What kind of research?

The second sub-question was about how the research that had combined SRRH and Population issues could be described. This study analyzed the topics, theories, methods (study design and data collection), units of analysis and geographical locations as described in the abstracts. The results of all these questions are provided subsequently in the following paragraphs. The selection of articles that was included in this analysis is depicted in Table 2 on the previous page.

The first general finding was about the quality of the abstracts themselves. Most abstracts were not well written. Based on title, descriptors and abstracts it was often not clear what the article entailed. Neither is clear how the research is conducted and scarcer mentioned are the theories, analysis techniques and units of analysis. The geographical orientation however, was clear in most cases.

### 4.2.1. Topics

The research combining SRRH & Population issues cover a wide range of topics. Table 3 at the end of the paragraph depicts the broad categories of topics that were mentioned together with the frequency. Because some topics could be categorized in more than one category, the grouping is unfortunately somewhat arbitrary. For instance, one article discussed the issue of realizing reproductive rights for people living with HIV and AIDS. This article was grouped as 'Reproductive Rights', since that was considered to be its main focus. However, one could also argue the article was about HIV/AIDS. This ambiguity in categories occurred quite often. Therefore, not too much emphasis should be placed on the precise values indicated under frequencies.

The most frequently mentioned topic was Policies. Of these 16 studies, seven were about the impact of (changed) policies. Another seven studies were specifically about reproductive health. The last two publications were about factors influencing contraceptive policies and about the development of population policies.

Contraceptives were the main issue in fifteen studies. Seven of these publications were about their use (determinants for, among adolescents and for both HIV and pregnancy prevention). The (lacking) new technological developments were the focus of three articles. Another three publications were about Emergency Contraceptive Pills and the last two articles dealt with Fertility Regulating Vaccines.

Family Planning (FP) was central to nine publications. Three of these were about programs and their impact. Another three were about the relevance of FP. Furthermore discussed were the USA's 2003 FP program priorities, FP as a concept throughout history and the knowledge and attitude towards FP among adolescent girls in India.

Development was central to nine papers. Six of these publications were about several threats to or prerequisites for development. Also mentioned once were the political behavior of developing states on population, environment and development, the changes and effects of population and development programs in the last twenty years and the views of traditional indigenous peoples on population sizes as a model for sustainability.

AIDS and STD's are central to seven publications. Four of these studies are about projections, two are about risk factors and one is about identifying suitable populations for a trial intervention to prevent HIV.

Advocacy is the main topic for six papers. For four of them the central issue is challenges. Also discussed are the strategies for Sexual and Reproductive Rights advocacy in the conservative Philippines and the past alliance between feminists and neo-Malthusians.

Refugees and migrants are the focus of five articles. The broad range of topics include prejudices against migrants, trafficking and migration of female domestic workers in Indonesia, the approaches used by migration organizations, the identity and citizenship of refugee women and finally global forced migration.

Pregnancies are the central theme to five publications. Two of these papers are about (perceptions of) reproductive trends, another two are about unintended pregnancies and one paper is about the association between early childbearing and low cognitive ability in the USA.

Demographic trends and data are the main topic in five articles. Three of them are about data estimations (of the frequency of sexual intercourse, the methods to estimate the size of high risk populations and retrieving information about gays and lesbians in several USA databases). Also mentioned are the ways in which distorted sex ratios are generated in China and the demographic trends among the youth in sub-Saharan Africa.

Crime and violence are central to four papers. Three of them deal with experiences of sexual violence, and another paper is about problems in anti-trafficking work.

Population problems are the main issue in four publications. Two of them deal with the relevance of population problems, another one is about the awareness of population problems (among adolescent girls) and the last one is about combining climate and population goals.

Healthcare is focus in three papers. Mentioned twice is reproductive health (for adolescents and the roles of stakeholders in its provision in Turkey). Also mentioned is the use of maternal health services.

Gender is central to three articles. Mentioned are women's issues in India, the effect of religion on the status of women and that gender should be central to demography.

Abortion is central three times too. Mentioned are the impact of global policies on the access to safe abortions in Africa, safe abortions for refugees and the perceptions about abortions laws in Trinidad.

Finally, Reproductive Rights are central twice: once in the context of ensuring them for people living with HIV and once in the pro-natalist setting of Serbia and Croatia.

**Table 3:** Topics mentioned in SRRH & Population research

Topic	Freq.
Policies	16
Contraceptives	15
Family Planning	9
Development	9
AIDS, STD's	7
Advocacy	6
Refugees and migrants	5
Pregnancies	5
Demographic trends and data	5
Crime and violence	4
Population problems	4
Healthcare	3
Gender	3
Abortion	3
Reproductive Rights	2

#### 4.2.2. Theories

Theoretical models are mostly not mentioned explicitly in the abstracts. It was only done in nine cases. Implicit axioms were identified in another 39 cases. For 59 abstracts no theory was identifiable at all.

The nine theoretical models mentioned are depicted in Table 4 hereunder. The implicit axioms cover a wide range of topics. However, since they are not used as an explicit theoretical model they are not considered any further.

**Table 4:** Theoretical models used explicitly

Theoretical models
Individualism, Hierarchy and Egalitarianism (arguments to reduce population growth)
Neo-liberalism
Political Economy of fertility framework
Gender systems approach
The Doyle model
Thomas Homer-Dixon's model of environmental security
Stratified reproduction
Fertility transition (mentioned twice)

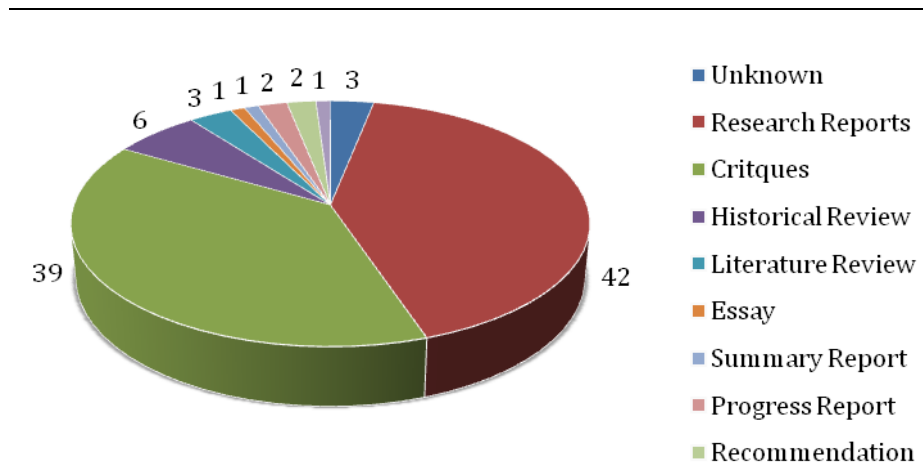
#### 4.2.3. Methods

##### Research Design

The types of publications are presented in Figure 1 hereunder. Based on the abstract, the determination of publication type proved impossible in three instances. Of the articles that could be categorized, the largest group is some kind of research report. This category makes up less than half of the sample with forty out of the 96 publications. The second

largest group, with 37 publications, is composed of critiques. The remaining publications were historical reviews (six times), literature reviews (thrice), recommendations (twice), progress reports (also twice) and furthermore an essay, an evaluation and a summary report were present.

**Figure 1:** Type of publications (in percentages)



#### Methods data collection and analysis

For more than half of all the publications (52), there was no clue whatsoever about how the data were collection or analyzed.

A summary of the data collection methods mentioned is depicted in Table 5. The most frequently used method was some kind of survey. Surveys were used at least in 17 studies, of which eight certainly used a nationwide survey like a DHS. Literature reviews were conducted in six studies. Focused group discussions were used five times of which twice in combination with other research methods. Interviews were conducted in five studies, of which three times in combination with other methods. A model or research method was tested four times. One used the demographic Doyle model, another ‘various count data models’, a third used mathematical models and the last tested tree estimation techniques for population sizes (using capture-recapture, multiplier model and the reverse tracking method). Case studies were mentioned explicitly as method twice. The following techniques were all mentioned once: discourse analysis, participant observation, charting, GIS, monitoring, ethnographic research and capture-recapture.

A combination of different research methods and data sources is not very common. Remarkably absent is action research. It was mentioned just once, but only as a descriptor for a conference proceeding.



**Table 5:** Data collection methods applied

Data used	Freq.
Survey's	17
FGD's	5
Interviews	5
Literature Review	6
Case study	2
Model testing	4
Other	7
Discourse analysis	1
Ethnographic research	1
Participant Observation	1
Charting	1
Monitoring	1
Capture- Recapture	1
GIS	1

(Statistical) data analysis techniques were mentioned only twelve times. In two of these occasions the description was not more specific than 'descriptive statistics' and 'various demographic and statistical techniques'. Most often, some kind of regressions was used (seven times). Chi<sup>2</sup>-tests were conducted thrice and survival analysis was conducted only once.

#### 4.2.4. Units of analysis

The units of analysis were not so easy to determine for two reasons. First of all, many articles were not real research articles and secondly, the ones that were, hardly ever mentioned it explicitly. For ten publications it was not possible at all to determine the unit of analysis. For the other 86 cases, its determination was often ambiguous.

Eventually five different groups were identified: people and groups (27); programs and policies (20); arguments, debates, strategies and concerns (17); documents (2); and others (20). Findings are visualized in Figure 2 on page 26.

##### People and groups

Of these 27 articles, seven studies were explicitly about women, one was about men and one was about couples. A total of 11 articles were about youth and eight articles were about other sorts of groups.

Articles about women included one about sex workers and all the other women were in their reproductive ages. Refugee women, rural women, married women, unmarried women and women sterilized without proper consent.

From the youth category, three studies only included girls, the other eight included both sexes.

The other groups of people included social movements, longtime international SRR activists, a homeless population, community populations, a rural county, clients from an STD clinic and high risk populations for HIV.

##### Programs and policies

Of these 17 articles population policies were central to five articles. Reproductive Health programs were central eight times and Family Planning was central thrice. In addition, there were two other

studies about policies. In one, the different approaches to anti-trafficking were discussed and in the other the politics of reproduction were discussed.

#### Arguments, debates, strategies and concerns

Of these twenty publications two of these articles were about migration. One of them was about prejudices towards migrants and the other about the approaches used migration organizations.

The other 16 were all about population, development, Family Planning, Reproductive health and advocacy in these areas. Three publications were about controversies around contraceptives. Concerns mentioned were about reproductive rights and health, sexual and reproductive health and the pledges for MDG's. Another concern discussed were those of women's movements in the SRR field and women's issues in general. Other analyzed concern was the violations of reproductive rights.

Advocacy strategies were mentioned twice, once in the context of Sexual and Reproductive Rights movements and once in the international family planning movement. Perceptions about abortion laws were central once.

Perspectives on the population debate were mentioned six times. The debate itself, the views of developing countries, the views of traditional indigenous people and those of young Indian girls were considered. In addition, arguments why to accelerate fertility decline were mentioned once and the link between population issues and climate change was mentioned once too.

#### Documents

Documents were the unit of analysis twice. One was about the Program of Action formulated at the ICPD in Cairo. The other was about the USA's Office of Population Affairs announcement about funding of family planning programs.

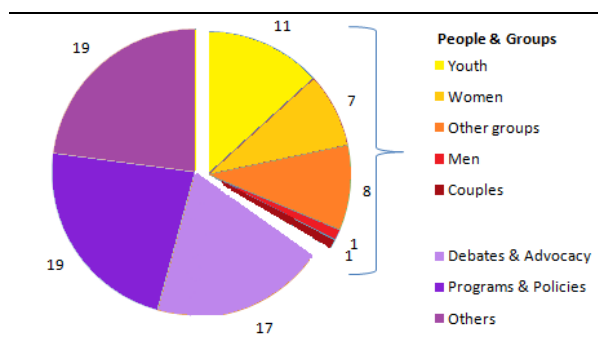
#### Other

For twenty articles the unit of analysis could not be grouped and was classified as 'other'. In this category four clusters were identified. The first was about pregnancies, abortions and (emergency) contraceptives. Four were about population and development, family planning as concept, the distance to reproductive health services. Three were about data itself and another three were about mathematical models, one was about demography as discipline. Further mentioned was forced migration, domestic workers migration, status of women and Latina reproduction.

Largely absent as unit of analysis are males. They are the focus of only one study, in which their increased risk as migrants for HIV/AIDS is studied. In another study, men having sex with men are also included as a high risk population for HIV, but in this study the main interest is the research methodology itself. The last case in which men are mentioned is in the context of male involvement in reproductive health, but in this case the focus is on the conceptualization and programs and not so much on the men themselves. Also absent are couples.

These findings are summarized in Figure 2 on the next page.

**Figure 2: Units of analysis**



#### 4.2.5. Geographical locations

In total 132 segments were coded with a geographical location. The number of codes is larger than the number of abstracts (namely 96). This is possible because some studies are about more than one region. Only for one publication determining the location was not possible. For all other publications at least a general indication could be made. On the next page Map 1 shows which countries have been mentioned and how frequent.

The content of 18 articles was about globally issues. This was done explicitly 9 times. Twice both developed and developing countries were mentioned as such and seven times the topic suggests that the articles' content applied globally.

Sixteen publications were about Western countries (the USA was mentioned twelve times, The UK four times). Former USSR countries were mentioned four times (Russia, Serbia, Croatia and Uzbekistan).

The rest of the articles were about developing countries, which were mentioned in total 95 times and 15 times explicit. Of these countries, most were in Asia (mentioned 53 times). India was mentioned 15 times, China nine times and Vietnam six times. Further mentioned were Asia in general (4x), Bangladesh (4x), Thailand (3x), Indonesia (2x) and The Philippines (2x). All mentioned only once were Laos, Cambodia, Malaysia, Sri Lanka, Myanmar, Nepal, Pakistan and Turkey.

Second largest group of developing countries are located in Africa (mentioned fourteen times). Except for Egypt (1x) and Africa (1x) all other regions and countries mentioned are located in Sub Sahara Africa. This region is twice mentioned explicitly. South Africa is mentioned three times, Nigeria twice and the following countries only once: Kenya; Sudan; Malawi, Ethiopia and Zimbabwe.

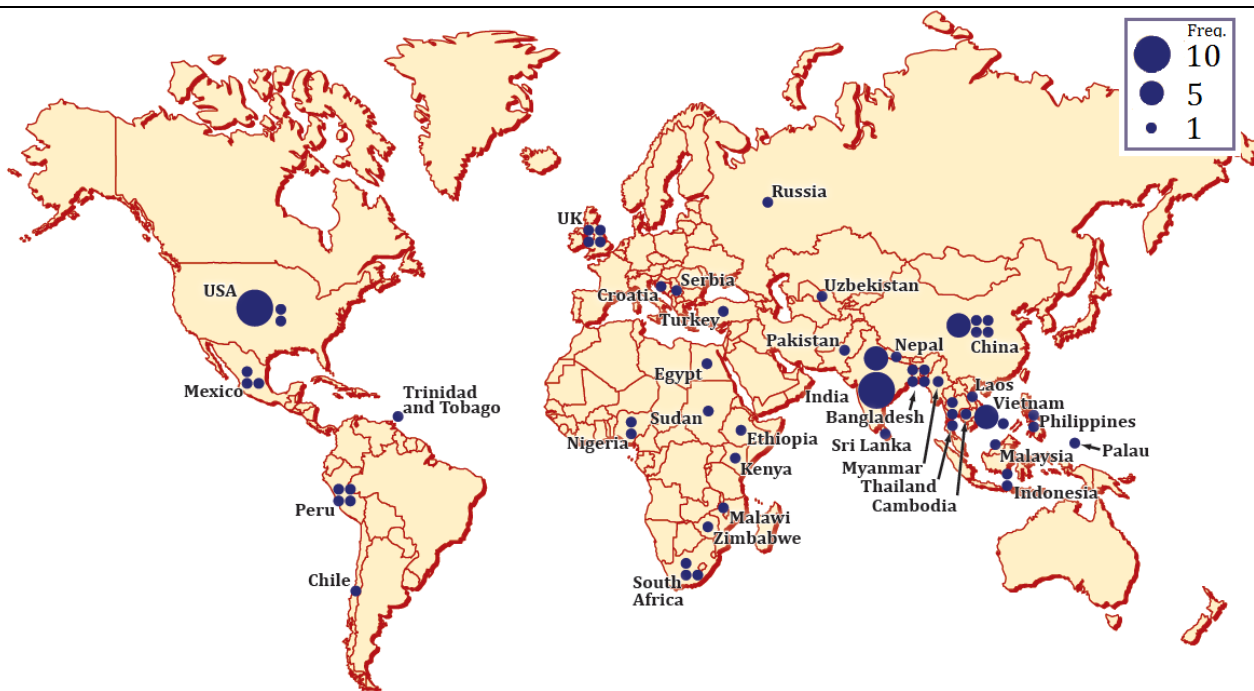
Latin America was mentioned nine times. Peru was mentioned most frequent (4x), followed by Mexico (3x). Chile was mentioned once just like Trinidad and Tobago.

Oceania was mentioned twice explicitly and Palau is mentioned once.

Also the in-vivo code 'Traditional Indigenous People's' came up and was grouped as a developing country code.

In summary, most articles are about developing countries. This group is mainly composed of South East Asian countries. Sub-Sahara Africa is second closely followed by Latin America. Quite some articles are about global issues too.

**Map 1: Countries mentioned in SRRH & Population Research**



**Note:** Displayed are the countries mentioned in the sample of SRRH & Population abstracts. In addition to these countries 18 articles were 'global', 15 were about 'developing countries' in general', 4 about 'Asia' and twice mentioned as region were Sub-Sahara Africa and Oceania.

### 4.3. Main findings

Main findings with regard to *how* much research has been conducted are first of all that not much research combined population issues with the more sexuality related SRRH issues. There is more research on SRRH topics than on population issues. In general population issues consider SRRH issues more frequent than vice versa.

With regard to the *kind* of research that has been conducted the following can be said. This research deals with a wide range of topics. Most abundant are policies, contraceptives, family planning and development. Theoretical models are hardly mentioned explicitly. The types of publications in this combined field are mainly research reports and critiques. Surveys are the most frequent type of data collection. Data triangulation does not occur often. Mentioned only once, but not in a research report, was action research. The largest share of Units of Analysis is made up of people and groups, but often policies and programs are central too. Most articles are about developing countries. This group is mainly composed of South East Asian countries. Sub-Sahara Africa is second closely followed by Latin America. Quite some articles are about global issues too.

## 5. Conclusions

This study aimed at exploring the quantity and structure of research in the combined field of 'SRRH and Population'. Based on the *number* of publications, it seems like not much literature combines both SRRH & Population issues. Especially the more *sexual* SRRH issues are hardly combined with the population issues. This is illustrated by the fact that the sample used for sub-question two contained only 96 articles, while publications since 1994 on a broad range of topic combinations were included.

In general, it seems like more research has been conducted on SRRH topics than on Population issues. The difference in attention for SRRH and for population topics might suggest that the SRRH field, and especially Family Planning, has managed to establish itself firmly and independent of population issues. Population issues seem to be not so hot anymore. The numbers of publications on overpopulation, population pressure, etc. are limited. A similar observation has been made earlier by Ehrlich (2008) and Campbell (2007) too.

Relatively speaking, it seems like SRRH topics are discussed more frequently within population issues than vice versa. The amount of articles combining SRRH & Population issues usually composes a (much) larger share from the specific population publications than from the specific SRRH publications.

While population policies are often linked to Family Planning, they are hardly linked to sex – and family planning education. These topics are remarkably absent anyway. Improving sex education has however been mentioned several times as an explicit recommendation in the sampled abstracts.

With regard to the *kind* of research conducted in this combined field, the following can be said.

Topic wise there has been quite some attention for policies. Several articles discuss the relevance of policies related to reproductive health, family planning and population. However, there has been limited research interest for underlying questions about *how* to design and implement policies in a constructive way. Also, there could be more attention for the evaluation of policies in terms of impact assessments and how to involve different stakeholders.

Theories are hardly mentioned in the abstracts. This could indicate that research in the SRRH & Population field is mainly descriptive. Perhaps a theoretical understanding and explanation of issues is not of major interest.

When looking at the type of publications, it is remarkable that there are almost as much critiques, recommendations and historical overviews as there are research reports. Perhaps the balance could be shifted towards some more empirical research.

With regard to the design of the studies, the limited qualitative research and the absence of action research is noteworthy. At least to some extent the SRRH & Population field relates to emancipation, development and social change. Therefore, the involvement of the people considered could be reflected more in the research methodologies.

About the people considered, the fields focus seems to be on women. Men and couples are almost absent as units of analysis and could receive more research interest.

Most publications are about developing countries and quite some apply globally too. This might suggest that SRRH & Population issues are international concerns mainly about developing countries. In addition, the global perspective might have restricted the interest for local realities. Research about the role and relevance of cultural differences and their implications for policies are hardly present and are therefore recommended too.

## 6. Discussion & Recommendations

### Methods

A first point for discussion relates to the validity of the estimated amount of research. There might be an underestimation of the total available research for two reasons. To start with, strict search criteria were applied during the database searches. Related research using different terminology might have been overlooked (see Appendix A for some other search word suggestions). Secondly, research published in journals which are not included in the searched databases is missed out too.

When searching literature, a tradeoff is made between generating as much data as possible and generating relevant data. In this study, the narrower approach was used. For instance, the search words had to occur in a publication's abstract. The assumption was made that this would at least generate interesting literature. Unfortunately, not much literature was generated. It is not clear whether this is entirely due to the restricted literature search, or whether not much is published on (population) related topics. For instance only ten percent of all the literature available in JSTOR contains an abstract, implying that ninety percent of the available literature could have been missed. However, as mentioned earlier, other authors have also observed an absence of interest in overpopulation as topic (Ehrlich, 2008; Campbell, 2007). For a subsequent study additional strategies to generate literature may be used such as snowballing from reference to reference. Extra search words could be used too such as gender equality and high fertility.

### Findings

The structure of the research was determined by analyzing the abstracts. However, most abstracts were written descriptive instead of informative. As a consequence the required data was often not (unambiguously) available in the abstracts. For a future study the abstracts may thus not be the most useful unit of analysis, perhaps it is more useful to include the whole text.

In addition, it might be useful to code and recode the data several times by different coders to reduce some of the arbitrariness in the findings.

Furthermore valuable older research is missing in this study. Gaps in recent research do not necessarily imply lacking knowledge. Since valuable previous research has been left out in this study, it might well be those current gaps reflect extensive, or sufficient, *previous* research in these areas, which would justify a different contemporary focus.

### Recommendations future research

For the field in general a first recommendation would be more empirical research. It would be interesting to include a positive notion of sexuality and a more thorough analysis of what population problems are and how they could be addressed. To do so, it might be useful to adopt a broader, more inclusive and more critical approach. This could be done by including other disciplines and their insights with regard to f.i. decision making, natural limits, the role of cultural differences and policy design. Also useful could be shifting the main focus of women and health towards more attention for youth, couples and men and the role of sex education and consumption levels. Methods wise more action research might be useful, both to get better insights in local realities as to successfully improve them. A more critical mindset first of all implies that universal rights and global problems do *not* mean the solutions have to be similar all over the globe. More attention to what kinds of solutions are needed and useful on smaller geographical and temporal scales might be a nice start in realizing universal sustainable lives worth living.

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## Appendices

### Appendix A: Search Entries

Topic:	Search word:	Search entry:		
		Popline Keywords	Popline Abstracts	Jstor Abstracts
<b>Population issues</b>				
Facts	Population Dynamics	<b>Population dynamics</b> (Changes in population processes.)	Population* dynamic*	"population dynamics"
	Population Growth	<b>Population Growth</b> (Increase, over a specific period of time, in the number of individuals living in a country or region.)	Population* grow*	"population growth"
	Population Distribution	<b>Population Distribution</b> (Physical arrangement and location of populations.)	Population* distribut*	"population distribution"
	Population Density	<b>Population Density</b> (Number of persons per unit of land area.)	Populat* dens*	"population density"
Interpretations	Overpopulation	<b>Overpopulation</b> (Condition in which the amount of land and resources available in an area are not sufficient to support the human population of that area)	Overpopulat*	overpopulat*
	Population Pressure	<b>Population Pressure</b> (Sum of factors arising within a population that reduces the ability of the environment to support the population)	Population* pressur*	"population pressure"

	Optimum population	<b>Optimum Population</b> (Population size at which a population as a whole enjoys the highest quality of life.)	Optim* Population*	"optimal population"
	Population stabilization	<b>Population Stabilization</b> (The achievement and maintenance of a stable population size)	Population* stabili*	"population stabilization~"
	Malthus	<b>Malthusianism</b> (Doctrine based on the Malthusian theory of population growth which recognizes the need for a limitation of population growth in order to maximize economic welfare)	Malthus*	malthus* OR neomalthus* OR neo-malthus*
	Carrying capacity	<b>Carrying capacity</b> (The ability of natural resources to sustain the largest population under specified conditions or to support that population at an assumed standard of living)	Carry* capacit*	"carrying capacity"
	Population problems	<b>N.P</b>	Population* problem*	(Population problem)~3
	Population concerns	<b>N.P</b>	Population* concern*	(Population concern&)~3
Influence	Population Policy	<b>Population Policy</b> (Decisions and actions by public bodies intended to guide and usually to determine present and future decisions influencing demographic variables)	Population* polic*	"population policy&"
	Population control	<b>Population control</b> (Government regulation of growth, density, and distribution of people.)	Population* control*	"population control*"
	Population Law	<b>Population Law</b> (Legislation to influence population growth.)	Population* law*	"population law&"

<b>SRRH issues</b>				
Sexuality	Sexuality	<b>Sexuality</b> (The quality or state of being sexual)	Sexual*	sexual~
	Sex behaviour	<b>Sex behavior</b> (Sexual behavior of humans)	Sexual* behav*	“sexual behavior~”
	Sexual pleasure	N.P.	Sexual* pleas*	“sexual pleasure”
Rights	Sexual rights	N.P.	Sexual* right*	“sexual rights”
	Reproductive rights	<b>Reproductive rights</b> (Human rights as they relate to reproduction)	Reproduc* right*	“reproductive rights”
	SRHR	N.P	sexual and reproductive health and rights / srhr	(sexual reproductive health rights) OR SRHR OR SRRH
	Bodily integrity	N.P	Bodi* integrity	(bod* AND integrity)
	Privacy	<b>Privacy</b> (The quality or condition of being secluded from the presence or view of others)	privacy	privacy
	Autonomy	N.P.	autonomy	autonomy
	ICPD	N.P.	ICPD / international conference on population and development	(ICPD* OR “international conference on population and development*”)
Gender	Gender issues	<b>Gender issues</b> (Topics surrounding the relations and interactions of males and females)	Gender* issue*	(gender AND issue&)
	Sexual minorities	N.P.	Sexual* minorit*	“sexual minorities”

Violence	Sexual violence	N.P.	Sexual* viol*	"sexual violence"
	Rape	<b>Rape</b> (Unlawful, forced sexual behavior)	Rape	Rape*
	Sexual abuse	<b>Sexual abuse</b> (The sexual maltreatment of an individual)	Sexual* abus*	(sexual abuse~)
	Sexual trafficking	<b>Sexual trafficking</b> (Clandestine trafficking and sale of women and children across borders and within countries for commercial sexual purposes)	Sexual* traffick*	(sexual trafficking~)
	Sexual exploitation	<b>Sexual exploitation</b> (Any abuse of a position of vulnerability, differential power or trust for sexual purposes; this includes profiting monetarily, socially or politically from the sexual exploitation of another)	Sexual* exploit*	(sexual exploit~)
	Sexual harassment	<b>Sexual harassment</b> (Unwanted and offensive sexual advances or sexually derogatory or discriminatory remarks, such as those made by an employer to an employee)	Sexual* harass*	(sexual~ AND harass*)
	Sex discrimination	<b>Sex discrimination</b> (Differential treatment by exclusion or assignment to a lower social status because of one's sex)	Sex* discrimin*	(sex AND discriminat~)
Reproduction	Reproduction	<b>Reproduction</b> (The production of offspring.)	Reproduc*	reproduc*
	Family planning	<b>Family planning</b> (Voluntary planning and action by individuals to have the number of children they want, when they want them)	Famil* plan*	"family planning"

	Contraceptives	<b>Contraception</b> (All methods of conception prevention)	Contracept*	Contracepti*
Education	Sex education	<b>Sex education</b> (Instruction in all aspects of human reproduction and sexuality)	Sex* educat*	"sex* education"
	Family planning education	<b>Family planning education</b> (Education of clients in family planning; includes adult education, clinic and postpartum education, and health education to encourage family planning)	Family planning educat*	"family planning educat*"
Health	Sexual health	N.P.	Sexual* health*	"sexual health"
	Reproductive health	<b>Reproductive health</b> (The health of an individual's reproductive processes, functions and system from puberty through the adult life span.)	Reproduct* health*	"reproductive health"
	Maternal health	<b>Maternal health</b> (The physical, mental, and social well-being of a mother)	Maternal health*	"maternal health"
	Abortion	<b>Abortion</b> (Removal of a fetus from the uterus by any of a number of techniques)	Abort*	abort*

<p><b>Notes:</b></p>		<p>N.P= Not Present</p> <p>Hierarchical ordering</p>	<p>*= truncation</p> <p>/ = or</p> <p>&amp;= and (used to combine the search entries)</p>	<p>Boolean operators are used in the way that maximized the resulting hits (not always logical application).</p> <p>&amp; = plurals</p> <p>~ = alternative spellings</p> <p>*= truncation</p> <p>" " = exact</p> <p>AND = and</p> <p>OR = or</p> <p>( ) = both words in any order</p> <p>~3 = in three words distance</p>
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In Popline the keywords are ordered hierarchical (Popline, 2010). This implies that some search entries will generate a proportion of the articles that were already generated by another search word. For instance, all the articles generated by the *narrower* keyword 'Population control', will also be generated by the *broader* keyword 'Population policy'. The broader keyword also generates other related literature. In this example 'population policy' also includes the keywords 'antinatalist policy', 'pronatalist policy', 'Family planning policy' and 'migration policy'.

To obtain as much literature as possible, it is tempting to permit alternative spellings and spaces between the search words. However, by doing so, a lot of a specific undesirable literature is gathered too. For instance, allowing for alternative spellings for abortion also generates literature containing the words 'above' or 'about'. Loosely spelling 'contracept' generates 'continent' or 'construct' etc. Malthus~ also generated 'Matters', which was especially inconvenient since the title of a prominent journal is 'Reproductive Health Matters', and thus generated a lot of unintended hits. Using more specific search entries on the other hand, generates less literature and excludes variations that might be interesting too.

Because of the scope of this study, the trade off was made to use the narrower, more specific search entries, but generate less a-specific literature. The assumption was made that publications which are really about f.i. policies addressing the size of a population use the concept 'population policy' in their abstract of keywords. This might have led to an underestimation of the amount of research conducted and missing relevant publications which used slightly different phrasing. Unfortunately, this does limit the reach and validity of the conclusions drawn from this study. On the other side, the studies which were retrieved were expected to be of greater interest.

In a subsequent study, it might be useful to use the term 'Gender *equality*' in stead of 'Gender *issues*'. Sex discrimination can be left out, since it is not specific enough. References that were retrieved usually used the term differently than intended (discriminating by sex, age, region etc.). Also 'high fertility', 'reproductive policy', 'STD's', and 'condoms' could be used. In stead of using 'sexual minorities' it might be useful to use the more explicit 'lesbians', 'gay', 'homosexuals' etc.

The databases were explicitly asked to show articles containing the search words in their abstracts. But JSTOR seemed to generate literature that contained abstracts, but searched the full-text of those articles for the occurrence of the search words. (Only 10 percent of the literature in the database contained abstracts anyway, (JSTOR, 2011)).



## Appendix B: Codebook

The codes used during data analysis are depicted in the table below, which is based on the table provided by Hennink et al. (2011, p. 226).

Deductive	Inductive categories	Inductive codes	778
	<b>Theories</b>		0
	?		59
	explicit		0
		The Doyle model	1
		fertility transition	2
		Stratified reproduction	1
		gender systems approach	1
		political economy of fertility framework	1
		neo-liberalism	1
		Thomas Homer-Dixon's model of environ security	1
		individualism, hierarchy and egalitarianism to reduce pop growt	1
		Carrying capacity	1
	implicit hypotheses		0
		FP policy influences teen birth rates in usa	1
		population is problematic, or not	1
		SRH essential for development	1
		demographic transistion	1
		FP essential for development	1
		degree nationalistic extremism	1
		available space for groups to mobilize	1
		nation's RR situation understood by its sociopolitical context	1
		anti-female ideologies	1
		conceptualization and lacking data result in problems	1
		population is a problem	1
		m feminist social and econ perspective	1
		political pressure, legal rest, religion serv prov barrier S Ab	1
		ideological consid superseded public H and ethical concerns	1
		responsibility, efficiency, efficacy, additionality, sovereignit	1
		male involvement important repr health progr	1
		socioeconomic inequaity essential to hum dev and reduce fert	1
		m hegemony market values	1
		reduce MM by sufficient em. contraception	1
		girls scholing essential for human dev and reduce fert	1
		womens literacy and autonomy reduce fertility	1
		population is relevant for development	1
		collaboration between social movements	1
		acces the health services explains modern contr use	1
		feminist agenda of women's	1
		concerns unprotected sex HIV preg Viet Nam adoles warented	1
		populatin control as sustainable dev goal	1
		politics of fear	1
		female (sexual) autonomy will reduce fertility rates	1
		reproductive health is essential for development	2

	offic classif, male bias, cult norms, subversion cause bias SR	1
	m neo-Malthusianism	1
	role FPprogr mainly important during high fertility	1
	providing contraceptives leads to poverty reduction	1
	racially-charged demographic	1
	imbalance N and S in economic, social well being and Human Righ	1
	neo-Malthusian degradation	1
<b>Topic</b>		0
RR		0
	how to ensure SRRH for people with HIV	1
	RR in pronatalist setting Serbia Croatia	1
Healthcare		0
	stakeholder roles in provision RH services, Turkey	1
	Use of maternal health services	1
	Adolescent reproductive health	1
refugees and migrants		0
	predjudices agains migrants	1
	migration fm domest workers and traffickin, indonesia	1
	approaches used by migration organisations	1
	identity and citizenship of refugee woman	1
	Global forced migration	1
advocacy		0
	alliences	0
	alliances feminists and neo-malthusians	1
	strategies	0
	where the feminist womens health movement should be going	0
	advocacy strategies for SRR in conservative Philipines	1
	challenges	0
	history RR struggles, India	1
	limitations POA, requirements for feminists	1
	Challenges facing feminist w health movement 10 years > cairo	1
	challenges for SRH in India	1
gender		0
	womens issues in india	1
	gender should be central to demography	1
	effect of religion on status of women	1
demo trends		0
	retrieving data about gay&lesbians in USA datasets	1
	ways in which distorted sex ratio's are generated, china	1
	demographic trends among SSA youth	1
	projections	0
	three methods to esimate high risk population sizes, india	1
	frequency sexual intercourse estimation	1
crime and violence		0
	experiences	0
	sexual harassment experiences teenagers, Nigeria	1
	(sex)violence experiences homeless m and f Dhaka	1
	problems in anti-traffickingwork	1
	prevalence and risk fact sexual violence, Chile	1
population problems		0

	relevance	0
	reasons why spend public money on accelerating fert decline	1
	relevance population debates for 21st century	1
	awareness population problem adolescent girls	1
	how to combine climate and population goals	1
abortion		0
	impact global policies on safe abortion access in Africa	1
	safe abortion for refugees	1
	perceptions about abortion laws, Trinidad	1
FP		0
	programs and impact	0
	FP programs Asia when low fert attained	1
	scaling up needs based pilot FP program in China	1
	cheap FP programs, evaluation	1
	link between FP policy and increased teen birth rates, USA	1
	FP as concept through history	1
	relevance	0
	different ideologies contributing to int FP assistance	1
	why FP should be integral to dev strategy poverty reduction	1
	agenda	0
	new program priorities FP USA 2003	1
	Knowledge and attitude FP adolescent girls india	1
pregnancies		0
	reproduction trends and perceptions	0
	fertily trends in SA in HIV context	1
	latina reproduction and public disourse	1
	unintended	0
	Unintended pregnancy among newly	1
	unintended pregnancy and abortion, unmarried women, China	1
	Association of early childbearing and low cognitive ability USA	1
AIDS STD's		0
	risk factors	0
	does sexual activity adolescents jeopardize their health,VietNa	1
	risks sexworkers on HIV, Viet Nam	1
	projections	0
	considerations about future AIDS global	1
	projection impact HIV on death causes in SSA	1
	The impact of AIDS on birth	1
	projection HIV prevalence SA	1
contraceptives		0
	FRV	0
	arguments around development Fert Regu Vaccines	1
	considerations around vaccine contraceptives	1
	new tec developments	0
	influence women's health advocay on contraceptive development	1
	discrepancy FP and tech progress	0
	(not) available contrceptives, descripancies FP and techn	1
	developments in contraceptives	1
	use	0
	determinants	0

	proximity to health service and modern contrp use	1
	predictors contraceptive discontinuation STD clinic cliets	1
	circumstances in which male migrants use condoms	1
	determinants contraceptive use in Africa	1
	adolescents	0
	use contraceptive pills under 16 UK	1
	contraceptive knowledge and use, Asian adolescents	1
	condoms for prevention both pregnancy and HIV, SA	1
	ECP	0
	knowledge about emergency contraceptive pills	1
	shifts in USAID/Peru policy emergeny contraceptives	1
	Emergency contraceptive pills	1
policies		0
	impact	0
	FP to SRH policy implications	1
	reproductive health policies do not contribute to SH youth	1
	Effect peru's Pop pol on reproductive health since 1994	1
	impact Pop pol India after Cairo on development	1
	the emergency period in India	1
	history of targetsetting in pop policis india	1
	unintended	0
	unintened cons interplay pop policy, docters, dev on FP decisio	1
	interventions	0
	identified populations for intervention trail HIV prev	1
	RH	0
	intergate STD/HIV interventions in FP/RH agenda's	1
	forced sterilizations, RH no RR, Peru	1
	how to keep RRH in centre of policy making	1
	sexuality, reproductive health on the policy agenda	1
	shifts in pop pol inclusion RRH in China	1
	how usa RH policies changed under Bush	1
	conceptualization m involvement RH pol docs and effect?	1
	demography, health, HR morality influenced contracept policies	1
	Development of population policy	1
development		0
	reproductive health is essential for achieving MDGs	1
	political behav developing states on pop env dev	1
	changes in and effects pop and dev programs last 20 years	1
	unrealized development pledges	1
	reposition population on global dev agenda	1
	role socioecon inequality in edu inequal deserves more attention	1
	tradit indig peoples pop size and ethic model for sustainabilit	1
	neo-liberalism threatens achievement ICPD goals	1
	SRH essential in global poverty reduction efforts	1
<b>Study Design</b>		0
	RESEARCH REPORT	36
	Qualitative RR	1
	Research report Qualitative	1
	THEORETICAL STUDIES	1
	AUDIENCE RESEARCH	1

	Quantitative	2
	matched-pairs nested	1
	PROSPECTIVE STUDIES	2
other	MM	2
	HISTORICAL REVIEW	8
	Literature review	4
	CLINICAL RESEARCH	1
	ACTION RESEARCH	1
	essay	1
	NEEDS ASSESSMENT	1
	case study	3
	SUMMARY REPORT	2
	PROGRESS REPORT	4
	RECOMMENDATIONS	3
	COMPARATIVE STUDIES	2
	CONTRACEPTION RESEARCH	4
	Evaluation as Design	15
	method evaluation	3
? no clear SD		3
CRITIQUE		33
	? Critique	4
<b>Data Collection</b>		0
qualitative		0
focus-group-discussion		2
roundtable discussion		1
INTERVIEWS		2
ethnographic research		1
charting		1
quantitative		0
General Practice Research Database		1
Models		0
capture-recapture, multiplier, reverse tracking the		1
mathematical model		1
model, demographic Doyle		1
Various count data models		1
multiple sources		1
standard soc sc data sources		1
Scale FP and B Contr Attitude		1
capture-recapture		1
literature review		3
systematic review		1
(un)published reports		1
survey		3
DHS		3
NFHS, BDHS		1
? Survey		1
questionnaire		1
National Longitudinal Survey of		1
DHS, national survey's, other data		1

	CONTRACEPTIVE PREVALENCE SURVEYS	2
	HIV risk, behaviour and biological survey	1
	KAP SURVEYS	1
	GIS	1
	? Monitoring	1
	CASE STUDIES	2
	Mixed methods	0
	PA and IDI	1
	MM Lit review and survey	1
	discourse, quan data, OLS	1
	interviews, multivariate survival analysis (Cox)	1
	IDI & FGD	1
	State stats, DHS, FGD	1
	? Unknown data collection	52
Ananalysis	Regression analysis	0
	ordered logit models	1
	Stat OLS (1)	1
	bivariate and multivariate	1
	multivariate logistic regression	1
	Chi2 and log regr	1
	T-test, Chi2, Multiple Log Regr	1
	Multivariate survival analysis	1
	Chi 2	1
	var Demo and Stat techniques	1
	Stat Descriptive	2
<b>UoA</b>		0
	Scale UoA	0
	7872 couples, 87-88 to 94-95	1
	130 girls	1
	24, 10 and 5 people=39	1
	? Scale UoA	40
	1 case, 53 int women, docters, nurses, mexico, 3 years	1
	2 countries	1
	several policies, one country, since 1994	1
	several policies since 1976, 1 country	1
	406 clients STD clinic (1)	1
	9 studies	1
	1 document (1)	1
	county	1
	various models	1
	1 case (250 000 women)	1
	1 city 444 street workers, 486 bar workers	1
	1500 adolescents	1
	several countries	4
	2067 people	1
	400 girls	1
	3 models	1
	several organisations	1
	896 homeless, 11 areas, 13 months 2007-2008	1

	Several developing countries	1
	1 upscaled program	1
	650 youths( 293 m, 357f)	1
	part country	3
	2 movements	1
	2 case studies	1
	2 scenario's	1
	1 document	1
	Global, since 1990	1
	1 discussion 3 participants	1
	global 1984-2004	1
	Country	11
	Country, from 1994-2003	1
	10 national magazines, 35 years	1
	2 large scale surveys	1
	SSA region	1
	global	1
	21847 women in rural KwaZula-Natal	1
	354 m migr, 2 mex municipal	1
	one case refugee camp ?	1
	2,510 resp tert edu	1
Type UoA		0
	? Type of UoA	10
	documents	0
	grant request FP	1
	POA document	1
	arguments, attitudes, concerns, debates	0
	Other	0
	? Prejudices against migrants	1
	approaches used by migration organisations	1
	population, FP, RH, development	0
	key concern womens movement SRR	1
	women issues, india	1
	advocacy methods SRR	1
	pledges for MDG's	1
	SRH	1
	RRH	1
	contraceptives	0
	controversies, contraceptives	1
	arguments around vaccine contraceptives	2
	RR violations in pronatalist setting	1
	preceptions, persons abortion (law)	1
	issues in population debates	1
	views traditional indigenous pop on land and pop sizes	1
	perspectives, developing countries on pop env dev	1
	arguments why accelerate fert decline	1
	linked concerns in Climate change and population	1
	perceptions pop problem adolescent girls, India	1
	actors strategies gain support for int FP	1
	other	0

pregnancies, abortion, contraceptives	0
developments in available contraceptives	1
teen birth rates and FP policies, USA	1
unwanted pregnancies, india	1
prescription oral contraceptives under 16 females	1
emergency contraception	1
other	0
migration domestic workers, women, indonesia	1
Latina reproduction and perceptions	1
status of women	1
forced migration	1
population, FP, RH	0
concept FP	1
population and development	1
Distance Acces to RH services	1
Data	0
Stand Soc Science databases (Gay & Lesbians groups)	1
data on socioeconomic status and education	1
population growth rates	1
model variations, 3	1
count data models	1
scenario leading causes of death (HIV)	1
demographic scientific discipline	1
policies/programs	0
other	0
politics of reproduction	1
aproaches anti-trafficking work, problems	1
Population	0
Emergency Period in India	1
Population and FP program, India	1
popuation policies and issues in bangladesh	1
population policy, china	1
Peru's population policy	1
RH	0
abortion policies and pograms in africa	1
abortion services for refugees	1
RH policies, global	1
RH programs and policies, Turkey	1
RH policies, USA	1
programs helping HIV patients to realize Reprgoals	1
male involvement RH, programs policy documents	1
RH policies and Programs	1
FP	0
STD/HIV/AIDS interventions in FP programs	1
FP program, China	1
FPprograms, Asia	1
people and groups	0
other (groups)	0
longtime international SRR activists	1
homeless population in Dhaka	1



	social movements (feminists and neo malthusianists)	1
	community populations, 5	1
	1 rural county	1
	clients STD clinic, USA	1
	high risk HIV populations (sex worker, gay, drug users)	1
youth		0
	only girls	0
	female college students, santiago, chile	1
	adolescent girls 15-19, india	1
	girls under 18, usa	1
	both sexes	0
	sexually active men and women, 15-24 years, SA	1
	youth SSA	1
	young adults (SH)	1
	Adolescents Nigeria tertiary education	1
	adolescents, asia, perceptions	1
	college aged students with acces to EmergContr	1
	out-of-school teenage pop nigeria	1
	adolescent boys and girls, 15-22 years, vietnam	1
couples		0
	newly married couples, china	1
males		0
	Male migrants Mex-USA	1
females		0
	sexworkers, vietnam	1
	women, sterilized without proper consent, peru	1
	Refugee women	1
	rural women (childbearing ages)	1
	women, currently married, fecund, 15 to 49 years, ethiopian	1
	a rural female SA population	1
	unmarried women, studies on, china	1
<b>Geographical location</b>		0
	? Geo.	1
	Cont. North America	0
	USA	12
	Cont. Europe	0
	UK	4
	Former USSR	0
	Uzbekistan	1
	Croatia	1
	Serbia	1
	Russia	1
	Developing countries	15
	Cont. Oceania	0
	Palau	1
	Oceania	2
	Cont. Latin America	0
	Chile	1
	Trinidad and Tobago	1
	Mexico	3

	Peru	4
	Cont. Africa	0
	Africa	1
	Egypt	1
	SSA	2
	Sudan	1
	South Africa	3
	Nigeria	2
	Kenya	1
	Malawi	1
	Ethiopia	1
	Zimbabwe	1
	Cont. Asia	0
	Lao People's Democratic Republic	1
	China	9
	India	15
	Asia	3
	SE Asia	1
	Phileppines	2
	Vietnam	6
	Thailand	3
	Bangladesh	4
	Cambodia	1
	Myanmar	1
	Pakistan	1
	Nepal	1
	Turkey	1
	Sri Lanka	1
	Indonesia	2
	Malaysia	1
	Trad Indigenious peoples	1
Global		9
	Both Developed and developing countries	1
	? Global	7

# Appendix C: Results database searches, separate tables

Database		Popline, Keywords	"Population issues"															
Date	19-4-2011		Facts				Interpretations				Influence			Perspectives				
	"only peer reviewed journals", english, NOT<1994, keywords		population dynamics	population growth	population distribution	population density	overpopulation	population pressure	optimum population	population stabilization	population policy	population control	population law	Malthus	carrying capacity	population problem	population concern	population issue
Criteria	hits		6708	118	865	28	5	22	0	2	304	46	3	14	29	X	X	X
<b>"SRRH issues"</b>																		
Reproduct	reproduction	3538	<b>1084</b>	<b>3</b>	<b>24</b>	0	0	0	0	0	<b>9</b>	<b>2</b>	0	0	0	-	-	-
	family planning	6027	<b>1319</b>	<b>30</b>	<b>69</b>	<b>3</b>	0	<b>4</b>	0	<b>1</b>	<b>145</b>	<b>26</b>	<b>1</b>	<b>6</b>	<b>4</b>	-	-	-
	contraception	4964	<b>992</b>	<b>13</b>	<b>53</b>	<b>3</b>	0	0	0	0	<b>76</b>	<b>10</b>	0	<b>3</b>	0	-	-	-
Sexuality	sexuality	384	<b>39</b>	<b>2</b>	<b>8</b>	0	0	0	0	0	<b>2</b>	0	0	<b>1</b>	0	-	-	-
	sexual behavior	4017	<b>523</b>	<b>4</b>	<b>126</b>	0	0	0	0	0	<b>7</b>	0	0	0	0	-	-	-
	sexual pleasure	X	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Rights	sexual rights	X	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	reproductive rights	132	<b>26</b>	<b>2</b>	<b>3</b>	0	0	<b>1</b>	0	0	<b>20</b>	<b>5</b>	<b>1</b>	<b>2</b>	<b>1</b>	-	-	-
	SRHR	X	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	bodily integrity	X	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	privacy	22	<b>3</b>	0	<b>1</b>	0	0	0	0	0	0	0	0	0	0	-	-	-
	autonomy	X	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Gende	ICPD	X	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	gender issues	810	<b>155</b>	<b>2</b>	<b>33</b>	0	0	0	0	0	<b>19</b>	<b>3</b>	0	0	0	-	-	-
Violence	sexual minorities	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	sexual violence	X	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	rape	171	<b>29</b>	0	<b>9</b>	0	0	0	0	0	<b>2</b>	0	0	-	-	-	-	-
	sexual abuse	253	<b>50</b>	0	<b>7</b>	0	0	0	0	0	<b>4</b>	0	0	0	0	-	-	-
	sexual trafficking	37	<b>14</b>	0	0	0	0	0	0	0	<b>5</b>	0	0	0	0	-	-	-
	sexual exploit	15	<b>2</b>	0	0	0	0	0	0	0	0	0	0	0	0	-	-	-
	sexual harassment	29	<b>7</b>	0	<b>1</b>	0	0	0	0	0	0	0	0	0	0	-	-	-
sex discrimination	108	<b>20</b>	0	<b>3</b>	0	0	0	0	0	<b>3</b>	0	0	0	0	-	-	-	
Educat	sex education	396	<b>71</b>	0	<b>9</b>	0	0	0	0	0	<b>4</b>	0	0	0	0	-	-	-
	family planning education	85	<b>21</b>	0	<b>1</b>	0	0	0	0	0	<b>1</b>	0	0	0	0	-	-	-
Health	sexual health	X	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	reproductive health	885	<b>198</b>	<b>6</b>	<b>17</b>	0	0	<b>1</b>	0	0	<b>43</b>	<b>8</b>	<b>1</b>	<b>1</b>	<b>1</b>	-	-	-
	maternal health	1144	<b>442</b>	0	<b>18</b>	0	0	0	0	0	<b>7</b>	<b>1</b>	<b>1</b>	0	0	-	-	-
	abortion	370	<b>183</b>	0	<b>5</b>	0	0	0	0	0	<b>16</b>	0	0	0	0	-	-	-

Database		"Population issues"																
Date		Facts				Interpretations				Influence			Perspectives					
Criteria		population dynamics	population growth	population distribution	population density	overpopulation	population pressure	optimum population	population stabilization	population policy	population control	population law	Malthus	carrying capacity	population problem	population concern	population issue	
"SRRH issues"		hits	35	178	11	32	11	15	1	8	72	38	0	19	6	9	2	9
Reproduct	reproduction	2401	<b>3</b>	<b>30</b>	0	<b>2</b>	<b>2</b>	0	<b>5</b>	<b>21</b>	<b>12</b>	-	<b>7</b>	0	<b>1</b>	0	0	
	family planning	1417	<b>1</b>	<b>35</b>	0	<b>2</b>	<b>1</b>	0	<b>6</b>	<b>29</b>	<b>11</b>	-	<b>5</b>	0	<b>2</b>	<b>1</b>	<b>2</b>	
	contraception	4279	<b>1</b>	<b>27</b>	0	<b>1</b>	<b>2</b>	0	<b>4</b>	<b>23</b>	<b>16</b>	-	<b>3</b>	0	<b>1</b>	<b>1</b>	<b>1</b>	
Sexuality	sexuality	6125	0	<b>10</b>	<b>1</b>	<b>2</b>	0	0	<b>1</b>	<b>5</b>	<b>3</b>	-	<b>1</b>	0	0	0	0	
	sexual behavior	1323	0	0	0	0	0	0	0	0	0	-	0	0	0	0	0	
	sexual pleasure	52	0	0	0	0	0	0	0	0	0	-	0	0	0	0	0	
Rights	sexual rights	33	0	0	0	0	0	0	0	0	0	-	0	0	0	0	0	
	reproductive rights	71	0	<b>1</b>	0	0	0	0	0	<b>2</b>	<b>4</b>	-	<b>1</b>	0	0	0	0	
	SRHR	22	0	<b>1</b>	0	0	0	0	0	0	0	-	0	0	0	0	0	
	bodily integrity	4	0	0	0	0	0	0	0	0	<b>1</b>	-	0	0	0	0	0	
	privacy	75	0	0	0	0	0	0	0	0	0	-	0	0	0	0	0	
	autonomy	149	0	0	0	0	0	0	0	<b>3</b>	0	-	<b>1</b>	0	0	0	0	
Gende	ICPD	95	0	<b>6</b>	0	<b>1</b>	0	0	0	<b>12</b>	<b>3</b>	-	<b>1</b>	0	0	0	<b>1</b>	
	gender issues	34	0	0	0	0	0	0	0	0	0	-	0	0	0	0	0	
Violence	sexual minorities	13	0	0	0	0	0	0	0	0	0	-	0	0	0	0	0	
	sexual violence	144	0	0	0	0	0	0	0	0	0	-	0	0	0	0	0	
	rape	140	0	<b>1</b>	0	0	0	0	0	<b>1</b>	0	-	0	0	0	0	0	
	sexual abuse	158	0	0	0	0	0	0	0	0	0	-	0	0	0	0	0	
	sexual trafficking	1	0	0	0	0	0	0	0	0	0	-	0	0	0	0	0	
	sexual exploit	26	0	0	0	0	0	0	0	0	0	-	0	0	0	0	0	
	sexual harassment	16	0	<b>1</b>	0	0	0	0	0	0	0	-	0	0	0	0	0	
Educat	sex discrimination	7	0	0	0	0	0	0	0	0	0	-	0	0	0	0	0	
	sex education	219	0	0	0	0	0	0	<b>1</b>	0	0	-	0	0	<b>1</b>	0	<b>2</b>	
Health	family planning education	7	0	0	0	0	0	0	0	0	0	-	0	0	0	0	0	
	sexual health	410	0	<b>1</b>	0	0	0	0	0	<b>1</b>	0	-	0	0	0	0	0	
	reproductive health	1168	0	<b>11</b>	0	0	0	<b>1</b>	<b>3</b>	<b>12</b>	<b>6</b>	-	<b>2</b>	0	0	0	0	
	maternal health	262	0	<b>1</b>	0	0	0	0	<b>1</b>	<b>1</b>	0	-	0	0	0	0	0	
	abortion	611	0	<b>3</b>	0	0	0	0	0	<b>5</b>	<b>3</b>	-	0	0	0	0	0	

Database		JSTOR, Abstracts		"Population issues"															
Date		23-4-2011		Facts				Interpretations				Influence			Perspectives				
Criteria	"only peer reviewed journals", english, NOT<1994, abstracts	"SRRH issues"	hits	population dynamics	population growth	population distribution	population density	overpopulation	population pressure	optimum population	population stabilization	population policy	population control	population law	Malthus	carrying capacity	population problem	population concern	population issue
				17	173	5	0	6	10	0	4	36	4	0	30	19	43	63	116
Reproductive	reproduction	718	1	11	0	-	2	0	-	0	10	1	-	0	1	2	13	24	
	family planning	553	0	14	0	-	0	1	-	0	13	1	-	1	1	2	10	13	
	contraception	800	1	12	1	-	0	1	-	0	11	1	-	1	0	3	11	10	
Sexuality	sexuality	762	0	3	0	-	0	0	-	0	2	1	-	0	0	8	7	16	
	sexual behavior	106	0	0	0	-	0	0	-	0	0	0	-	0	0	1	1	2	
	sexual pleasure	14	0	0	0	-	0	0	-	0	0	0	-	0	0	0	0	0	
Rights	sexual rights	13	0	0	0	-	0	0	-	0	1	1	-	0	0	0	0	0	
	reproductive rights	34	0	0	0	-	0	0	-	0	0	1	-	0	0	0	3	5	
	SRHR	32	0	1	0	-	0	0	-	0	0	0	-	0	0	0	0	3	
	bodily integrity	1	0	0	0	-	0	0	-	0	0	0	-	0	0	0	0	0	
	privacy	17	0	0	0	-	0	0	-	0	0	0	-	0	0	0	0	1	
	autonomy	48	0	0	0	-	0	0	-	0	1	0	-	0	0	0	0	1	
Gender	ICPD	44	0	4	0	-	1	0	-	0	6	2	-	1	1	2	4	11	
	gender issues	47	0	1	0	-	0	0	-	0	1	0	-	0	0	0	1	8	
Violence	sexual minorities	3	0	0	0	-	0	0	-	0	0	0	-	0	0	0	0	0	
	sexual violence	23	0	0	0	-	0	0	-	0	0	0	-	0	0	1	1	1	
	rape	47	0	0	0	-	0	0	-	0	0	0	-	0	0	1	2	1	
	sexual abuse	41	0	0	0	-	0	0	-	0	0	0	-	0	0	1	1	0	
	sexual trafficking	9	0	0	0	-	0	0	-	0	0	0	-	0	0	0	0	0	
	sexual exploit	98	0	0	0	-	0	0	-	0	0	1	-	0	0	0	0	1	
	sexual harassment	6	0	0	0	-	0	0	-	0	0	0	-	0	0	1	0	0	
Educatic	sex discrimination	32	0	1	0	-	0	0	-	0	1	0	-	1	0	0	1	3	
	sex education	33	0	0	0	-	0	0	-	0	0	0	-	0	0	1	1	6	
Health	family planning education	0	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
	sexual health	55	0	1	0	-	0	0	-	0	0	0	-	0	0	0	1	1	
	reproductive health	357	0	4	0	-	0	0	-	0	7	0	-	0	0	1	8	11	
	maternal health	35	0	1	0	-	0	0	-	0	0	0	-	0	0	1	0	0	
	abortion	436	1	6	0	-	0	0	-	0	4	0	-	1	0	2	7	7	

## Appendix D: Articles in sample sub-question 2

The references were obtained by combining population and SRHR related search words. The sample contains the reference resulting from the following combinations;

*population search words:* population growth, population density, overpopulation, population pressure, optimum population, population stabilization, Malthus, carrying capacity, population problem, population concern, population policy, population control, population law;

*SRHR search words:* Sexuality, sexual behavior, sexual pleasure, sexual rights, reproductive rights, SRHR, bodily integrity, privacy, autonomy, ICPD, sexual minorities, sexual violence, rape, sexual abuse, sexual trafficking, sexual exploitation, sexual harassment, sex education, sexual health.

This selection resulted in a sample of the following 96 different references:

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17. Concepcion, M. B. (2006). From Mexico to Cairo and beyond: Twenty years of population challenges and development goals. *Asia-Pacific Population Journal*, 21, 21-46.
18. Connelly, M. (2006). Population control in India: Prologue to the emergency period. *Population and Development Review*, 32(4), 629-667.
19. Corrêa, S., Germain, A., & Petchesky, R. P. (2005). Thinking beyond ICPD+10: Where should our movement be going? *Reproductive Health Matters*, 13(25), 109-119.
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