Critical demography

Thursday 4 September, 9am

Sex and the Survey: A Cross-national Comparison of Surveys Questions on Sexual and Reproductive Health and Rights

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Nationally representative surveys are a critical tool for producing data that can be used to measure progress across a range of sexual and reproductive health and rights (SRHR) indicators. The questions eliciting SRHR data are the result of a range of decisions, definitions, and assumptions setting the framework for survey data quality. However, how and what questions are asked varies across contexts, highlighting that SRHR data remain deeply political and the product of several assumptions.

We interrogate the similarities and differences between SRHR questions through a cross-contextual analysis of nationally representative surveys in four countries: France (Baromètre de Santé, FECOND), Ghana (DHS, PMA2020, MICS), Senegal (DHS), and the United Kingdom (Natsal-3). Surveys were deemed relevant if they were used to measure two separate indicators relating to SRHR, per the World Development Indicators. If the survey was part of a series, all surveys within that series between the years 2010 and 2019 were included for analysis. Operationalising the Guttmacher-Lancet definition of SRHR, we iteratively developed a codebook extracting relevant questions of all surveys for thematic analysis.

Our preliminary findings highlight critical differences between surveys in the Global North and South. By contrast to surveys in the Global North, surveys in the Global South were focused on biomedical components of SRHR focused heavily on contraceptive use and the contexts in which contraceptives are not being used. Such assumptions minimise the capacity for policies and programmes to meet the holistic SRHR needs of a population and continue to pathologise sex and reproduction.

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Irish Traveller Women's Reproductive Citizenship: An Exploratory Study of Experiences & Intervention Michaela Nudo - Trinity College Dublin

This project investigates the multifaceted impacts of poor health system outcomes among GRT women in Ireland. Anchored in an ongoing, broader analysis of sexual and reproductive health (SRH) policy, this study interrogates the historical and cultural dynamics that have contributed to systemic inequities between GRT communities and the Irish state. The investigation focuses on identifying key drivers of SRH disparities and exploring participatory research methodologies that empower GRT women as active agents in shaping health policy. Preliminary analysis has revealed that participant-led approaches, which involve co-designing intervention strategies and fostering policy dialogue, are crucial to bridging entrenched barriers and promoting sustainable health outcomes. Drawing upon both academic scholarship and community-based perspectives, the research aims to develop an ethical, reflexive framework that aligns with the United Nations Sustainable Development Goals (#3: Good Health and Well-being; #5: Gender Equality). This abstract emphasizes the need for robust interdisciplinary dialogue and systematic community engagement through qualitative and quantitative approaches, including detailed case studies and policy analyses.

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Extraversion, Neuroticism and the Risk of Technology-Induced Job Loss Lara Patrício Tavares - Universidade de Lisboa, Morten Blekesaune - University of Agder, Vegard Skirbekk Center for Fertility and Health, Norwegian Institute of Public Health

To minimize the negative impact of automation on the labour markets, it is important look at what is often dismissed as unobserved and try to identify who works in the occupations that will most likely be affected. Most existing research has focused on factors such as formal competences, educational and current work. It is important to consider some other individual traits that may have social and health related consequences,

and which may help our understanding of the likely economic and labour market implications of automation. We know less about how personality traits relate to technologically induced job loss risk, for example. Understanding this relationship is important for developing more appropriate policies and initiatives for how individuals can adapt in terms of retraining or finding other jobs, which in turn may reduce the risks of financial hardship and adverse health impacts. To do this, we combine data on personality from a large-scale Norwegian health survey (HUNT) with register-based information on occupations. Our findings show that individuals low in extraversion and high in neuroticism are more likely to have jobs that are in risk of disappearing due to robotization. The neuroticism effect is partially, but not fully, explained by the fact that neuroticism is also correlated with low levels of education.

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Rethinking Weight as an Indicator or Marker of Health Wendy Sigle - London School of Economics and Political Science

In a 1993 review of research published in Demography, Susan Watkins found that a rather limited set of variables was used to in fertility research to "represent women's demand for children". They reported being "surprised to realize that largely the same [limited set of variables] ...appear in articles on mortality and on migration" (p. 559). Although Watkins made those observations three decades ago, it remains the case that "What goes into our analyses, and what is left out, is in part a function of the data available" (561). One characteristic, widely measured in surveys – and recorded in administrative data sources – is bodyweight. Demographic studies frequently contain measures that identify people on the higher end of the weight distribution and interpret those measures as direct indicators of health or a marker of health. This research often reinforces dominant narratives which suggest that weight loss is both achievable and sustainable and that it will lead to health improvements. Drawing on previous research which documents the ways discrimination inflicted on people in larger bodies can damage their health and on evidence from clinical and epidemiological studies of the physical and psychological effects of calorie restriction, this paper calls for more critical reflection on the way measures of bodyweight are used and interpreted in quantitative research on health. Specifically, the paper also invites demographers to consider the potentially harmful discursive effects of research which reproduces notions of an obesity crisis or epidemic, and which perpetuates the fear of being or becoming fat.

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