

# Recent News Coverage of Sexual and Reproductive Health in Lebanon

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Representations of sexual and reproductive health in mass media offer one indicator of women's relative position and value as women in a given society (Bronstein 2005). Media sources also disseminate health messages, influencing people's health choices and health behaviors (Wakefield, Loken, and Hornik 2010). This essay relies on a content analysis of forty-three articles published between August 28, 2015, and June 28, 2017, in Lebanon that used key terms related to reproductive health, sexual health, and breastfeeding. We systematically culled the articles from nine Lebanese newspapers (eight in Arabic) published online.<sup>1</sup> Of these forty-three accounts, nineteen were by men, three were by women, one was coauthored by a man and a woman, and the remaining twenty did not include an author name. With the exception of an account by a woman targeting a male audience, the remainder presumed a female reader. Articles that discussed refugees focused primarily on controlling fertility rates and maternal birth complications. None of the accounts discussed unwanted pregnancies or abortion.

Researchers often use content analysis to analyze newspaper reporting on health issues (e.g., Abdelmutti and Hoffman-Goetz 2009; Clement and Foster 2008; Downe-Wamboldt 1992). We obtained the articles from the Knowledge to Policy Center at the Faculty of Health Sciences of the American University of Beirut, which tracks Lebanese newspaper articles on health topics on a daily basis. We searched for the following key terms: breastfeeding, sex work, international women's day, LGBT, midwife, preterm deliveries, refugees, reproductive health, sexual health, abortion, and Syrian refugees. In examining the articles, we focused on topic, perspective and impression left, mention (or not) of prevention and

treatment, target audience, complexity (difficulty of words, length of sentences), ecological level of concern (individual, interpersonal, organizational, community, or policy), and feminist/nonfeminist perspective. Two coders analyzed a random sampling of the accounts obtaining an interrater reliability rate of 92 percent. They coded the remaining articles independently and in duplicate. A third coder reviewed any disagreement or discrepancy.

The International Conference on Population and Development Program of Action describes reproductive health as “a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity, in all matters relating to the reproductive system and to its functions and processes” (Center for Reproductive Rights 2013). Gender power differentials directly affect the reproductive health of women by interfering in their autonomous decisions about their bodies and controlling their access to resources and services (Roudi-Fahimi 2003). War and humanitarian crises only aggravate challenges to maintaining reproductive and sexual health as they interfere with services and make people more vulnerable to disease, hunger, displacement, poverty, and violence. In Lebanon the latest high influx of displaced people from Syria has put the health care system under huge pressure (Blanchet, Fouad, and Pherali 2016).

The majority of articles (twelve) on breastfeeding covered the National Campaign to Promote Breastfeeding. The remaining four articles on this topic related to the social pressure around ability to breastfeed, the importance of tightening laws around breast milk substitutes, the importance of incentives to promote breastfeeding, and the relationship between diabetes and breast milk. A quarter of the accounts addressed breastfeeding at an individual level: promoting breastfeeding through incentives, encouraging women to breastfeed as part of skin-to-skin contact, and encouraging women to decrease sugar intake to prevent infant diabetes. Three-quarters of the articles focused on interventions beyond the individual, arguing for making environments supportive for breastfeeding. Most of the articles focused on breastfeeding as a reproductive right and covered the breastfeeding campaign as part of the national agenda, including suggestions to enforce legislation against hospitals that promote formula milk. Breastfeeding embodies the concept of using women’s body for the public good (Stearns 1999), with women understood as producers of significant economic value. The breastfeeding campaign advocated for political and institutional recognition of breastfeeding as a “reproductive health right” and a core strategy for “women’s economic advancement.” It did not view breastfeeding as a personal choice.

Eleven of nineteen articles discussed how to maintain a good sexual life, orgasm, and female sexuality in Lebanese society. They discussed the drawbacks of a stressful lifestyle on sexual health, the effect of abortion on female libido, and issues that may explain the difficulty of inexperienced heterosexual women reaching orgasm with older partners. One of these accounts targeted men and discussed male sexual dysfunction (impotence). The articles provided women with tips to enhance

sexual arousal such as Flibanserin, hormone replacement therapy, Zestra oil extract, sexual devices that enhance blood flow to sexual organs, and prevention of stress. About a third focused on the culture of silence, social injustice and gender inequality, institutional oppression of women's voices, and inequitable access to resources. Three accounts discussed the importance of sexual education for youth and teenagers, one discussed the sexual rights of the LGBT community, and one was on menopause. The articles on sex education, written by men, discussed its importance in school curricula and argued that lack of such classes violated youth rights. The LGBT-focused account, also authored by a man, discussed the cancellation of a conference organized by "Proud Lebanon" on the international day against homophobia, transphobia, and biphobia resulting from government pressure. The author interpreted this cancellation as a violation of freedom. The article on menopause discussed the Arabic term for this change, *sin al-ya's* (age of despair), as indicating dominant social perception of women's inability to reproduce and discussed as misconceptions decreased libido and deteriorated mental capacities of postmenopausal women.

The ten remaining articles discussed maternal mortality, fertility rates among refugees, the effects of fasting on pregnancies, and the importance of empowering midwives to better serve women before, during, and after a pregnancy. Although family planning is a major component of reproductive health, the accounts mentioned concerns about high fertility only in relation to refugees. The articles tackled the importance of having policies and legislation to protect pregnant refugee women from maternal complications and (three) expressed concern about preterm labor among Syrian refugees in Lebanon. A negative tone was predominant in these articles, mirroring media and social attitudes toward refugees. One article discussed how women after war are pressured to conceive to compensate for lost children even as international organizations promote family planning. Most of these articles advocated policies such as enhancing funding for women's health, diminishing class discrepancies in access to health care services, and setting a minimum legal age to prevent early marriage among refugees.

The articles examined did not address unwanted pregnancies and abortion, possibly to avoid religious or legal controversies and probably because the majority responded to conferences, campaigns, and press releases. Men were rarely included or targeted in articles that addressed women's reproductive and sexual health despite their influence on it (Dudgeon and Inhorn 2004). None of the forty-three articles examined used testimonies or women's experiences, and only one included a quote from a Syrian refugee who mentioned her desire to conceive after the war.

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