

# REPRODUCTIVE HEALTH *matters*

## 18th Annual Report 1 January – 31 December 2010



# Contents

	page
1 RHM has expanded over the past decade to become a multi-language, multi-media and multi-activity project . . . . .	1
2 Role and value of RHM . . . . .	1
3 RHM highlights 2010 . . . . .	2
4 RHM journal 2010 . . . . .	4
5 RHM in translation . . . . .	5
6 Repoliticizing SRHR: Langkawi meeting and report . . . . .	9
7 Women, men, HIV/AIDS and SRH: CD-rom . . . . .	9
8 RHM readers' survey 2009–2010: findings . . . . .	10
9 RHM's participation in other international networks . . . . .	13
10 Expanding RHM's online presence. . . . .	14
11 RHM online . . . . .	16
12 Outreach and impact. . . . .	18
13 Subscriptions, orders and distribution . . . . .	20
14 Contract with Elsevier . . . . .	21
15 ScienceDirect accounts and downloads . . . . .	22
16 Promotion activities – RHM office. . . . .	23
17 Promotion activities – RHM at Elsevier . . . . .	25
18 Other activities of the editor . . . . .	26
19 Contribution of RHM's boards . . . . .	27
20 RHM staff, consultants, editors and boards 2010 . . . . .	28

# 1. RHM has expanded over the past decade to become a multi-language, multi-media and multi-activity project

- Publishes a twice-yearly multidisciplinary journal with a comprehensive approach to all sexual and reproductive health and rights and related topics (including HIV, population policy, health systems and services, social determinants of health)
- Supports the production of the RHM journal in seven languages in addition to English – Chinese, Arabic, Hindi, Portuguese, Spanish, French and Russian – by a network of editorial teams
- Produces books and journal supplements for other organisations/institutions
- Produces collections of articles on CD-rom for dissemination at conferences, e.g. the International AIDS conferences
- Organises international seminars, workshops, and conferences with other NGOs every two to three years
- Capacity building for authors, peer reviewers and staff
- Creates materials for authors and peer reviewers on writing for publication, including seminars and workshops
- Maintains access to RHM publications on a range of websites and most recently via social media
- Coordinates international networking, e.g. via the “Repoliticising SRHR group” who organised an international meeting in 2010

## 2. Role and value of RHM

- RHM made women-centred perspectives its first and main goal at a time when there was very little written from this perspective.
- RHM as a network of its board members, authors and readers has helped to define a whole way of thinking about sexuality and reproduction globally and contributed to the building of an environment in which sexual and reproductive health and rights are accepted and promoted.
- The publications and meetings are for the development and dissemination of research and knowledge, providing models for programmes, service delivery, laws and policies, and to analyse and give expression to women’s and men’s sexual and reproductive health needs.
- RHM defines and helps to maintain a radical/progressive perspective in the face of conservative forces.
- RHM is educating authors and peer reviewers in supporting advocacy and blueprints for action on the ground.
- RHM publishes a large proportion of the work on abortion internationally and also, until quite recently, on the intersection of sexual and reproductive health and rights and HIV/AIDS.
- RHM is one of the few journals covering comprehensive aspects of sexual and reproductive health and rights in a multidisciplinary way, developed under the themes for each journal issue.
- RHM covers topics from cosmetic surgery to privatisation of health systems to human resources from an in-depth sexual and reproductive health and rights point of view where other journals cover them far more broadly.
- It is one of the few international journals with the majority of its articles being by and about developing countries, and whose authors and peer reviewers are also mostly from developing countries.

### **3. RHM highlights 2010**

In 2010, Reproductive Health Matters was 18 years old.

Here are highlights from our work during the year:

#### **I. The RHM journal was published and distributed in eight languages by the RHM office and the seven other RHM editorial teams:**

##### **RHM in English**

- Cosmetic surgery, body image and sexuality – one of the most controversial topics RHM has ever covered, particularly in relation to visual imagery of the body.
- Privatisation in sexual and reproductive health services – one of the most politically important topics RHM has ever covered, given its importance for the future of health systems.

##### **RHM in Chinese**

- Task shifting
- Criminalisation

##### **RHM in Arabic**

- Reproductive cancers

##### **RHM in Portuguese**

- Second trimester abortion
- Reproductive cancers

##### **RHM in Spanish**

- Sexuality, sexual health and human rights

##### **RHM in Hindi**

- HIV-AIDS and human rights

##### **RHM in French**

- Maternal mortality

##### **RHM in Russian**

- Privatisation

#### **II. We co-organised an international meeting with ARROW in Langkawi, Malaysia, and published a report of the meeting**

- The subject of meeting was “Repoliticising sexual and reproductive health and rights: a transformative framework beyond ICPD and the MDGs” – a cutting edge meeting addressing the purpose and goals of work in the field now and beyond 2015.

#### **III. We created a new CD-rom with all RHM’s papers on women, men, HIV and SRHR and sent 500 copies to the International AIDS Conference**

- The CD – “Women, men, HIV/AIDS, sexual and reproductive health” – contains a collection of all the RHM papers on this theme published in the journal, from 1996 to 2010. 500 copies distributed at Vienna International AIDS Conference.

#### **IV. We analysed our 2009-10 readers' survey and began to make changes based on the findings**

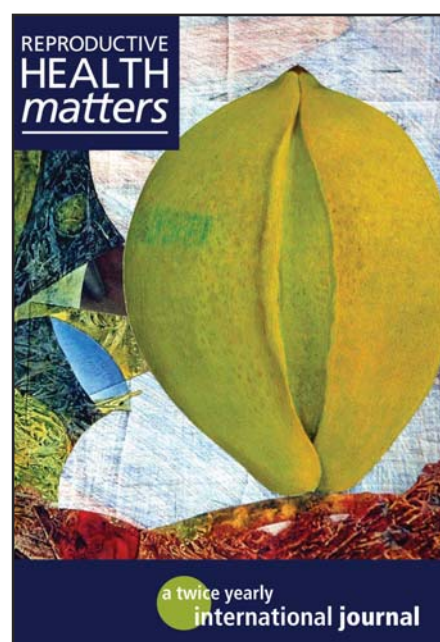
- "I look forward to every edition with anticipation and then satisfaction."
- "Keep innovating! Keep improving! The world needs you."

#### **V. RHM's editorial assistants expanded RHM's online presence**

- We began posting more news items every week, joined Facebook and Twitter, and began to expand the information on the website to increase its outreach and content, including compatibility for mobile phone users.

#### **VI. RHM's promotions manager sent journal issues to three important conferences and sent promotional materials to 40 more**

- We contributed 50 copies of the RHM journal to these two important conferences
  - i. International Association of Women Judges conference, Seoul, Korea – Criminalisation (RHM34)
  - ii. Stop Cervical Cancer in Africa conference, Accra, Ghana – Reproductive cancers (RHM32)
- We contributed 250 copies of the 'By and for Young Women and Men' issue to the International Students' Conference on Reproductive Health, Makerere University, Kampala, Uganda.
- We sent materials to more than 40 other conferences and courses.
- We created new leaflets promoting single journal issues.



#### **VII. The editor spoke at 10 conferences and meetings and reviewed WHO's updated guidance on safe abortion**

- The editor gave presentations at 10 conferences and meetings which took place in England, Malaysia, Norway, Portugal, Spain, USA, and Viet Nam.
- She participated in an expert consultation on WHO's new safe abortion guidance and reviewed the draft text of all chapters.

#### **VIII. RHM's boards distributed RHM materials to others from many countries and used the journal and articles in their work**

- Board members distributed the Calls for papers, articles and promotional materials at conferences and seminars, in academic courses, sent journal issues to key people working on issues covered by the journal, and encouraged potential authors to submit papers.

## 4. RHM journal 2010

We produced and distributed two issues of the RHM journal (Volume 18, Numbers 35 and 36): in May on cosmetic surgery, body image and sexuality and in November on privatisation of sexual and reproductive health services, with sub-themes on abortion law and policy and on violence against women.

### Cosmetic surgery, body image and sexuality

Vol. 17, No. 35, May 2010

Cosmetic surgery is not a new phenomenon. However, a “body-changing culture” is currently being popularised and becoming pervasive in many countries, and includes modifications through surgery to the most intimate parts of the body. This surgery emanates from the private, profit-making health sector and has become a high earner. Women are its prime targets but increasingly men also. The papers in this journal issue are about cosmetic surgery in Brazil, Burkina Faso, Iran, Lebanon, South Africa, Sweden, UK, and USA, and in the Round Up sections also on Lebanon and Senegal. Most are about surgery on women’s genitals; one focuses on breast augmentation and the many risks it entails. Issues these papers raise include the relationship between female genital mutilation and female cosmetic surgery; informed consent and regulation of professional practice; and ensuring that people know the risks and complications of the surgery they are electing to have in pursuit of fashionable ideas of what is sexually appealing and beautiful, especially as regards breast implants, penis enlargement and labia reduction.



The most controversial part of this journal issue is to do with the cover that was originally chosen for it, from a photograph of a sculpture called “The Great Wall of Vagina”, which consists of plaster casts of women’s genitals. The cover created a vociferous debate about its appropriateness as a cover amongst the authors of papers in that edition and RHM’s board members, which is reproduced in the journal almost in full, and created wide-ranging debate across the globe.

### Privatisation

Vol. 18, No. 36, November 2010

Private health care used to be available only to the rich. Today, in almost every country, deliberate policies promoting privatisation in health services are changing the financing of health services and their ownership, management, and training. The private sector is said to be seeing more and more patients, both in the poorest countries and among the poor in more affluent countries, some funded by development aid. This is happening across sexual and reproductive health care, from small private hospitals offering antenatal and delivery care and NGO clinics offering safe abortion, to social marketing of contraception – often alongside public services. The growth of the private sector has arisen from neoliberal economic policies, tied to development aid and loans, which require governments to hand over responsibility for health care to a range of organisations and agencies who may or may not work together, and who may or may not agree to achieve a set of coherent, comprehensive public health goals, let alone universal coverage. This is one of the most politically important topics RHM has ever covered, given its importance for the future of health systems, including for sexual and reproductive health care.



## 5. RHM in translation and editors' reports

RHM supported the production of four editions of the RHM journal in translation in 2010. Some of these editions will not be completed until 2011. Editions in the three other languages in translation were published in 2010 but funded in 2009.

It still seems extraordinary to us that we have found partners in seven other countries prepared to work so hard to produce and distribute editions of RHM in their languages with very little funding, yet to such a high standard, on top of all their other responsibilities.



Language	Editorial team	Issue and theme*	Print run
Chinese	National Research Institute for Family Planning, Beijing	No.33 Task shifting No.34 Criminalisation	5,000 per issue
Arabic	New Woman Foundation, Cairo	No.14 Reproductive cancers (funded 2009)	600
Spanish	Universidad Peruana Cayetano Heredia, Lima	No.6 Sexuality, sexual health and human rights (due 2011)	1,000
Portuguese	Coletivo Feminista Sexualidade Saude, São Paulo	No.4 Second trimester abortion Reproductive cancers (funded 2009)	1,000
Hindi	Creating Resources for Empowerment in Action (CREA), New Delhi	No.5 HIV/AIDS and human rights (due 2011)	1,000
French	Cellule de Recherche en Santé de la Reproduction du Burkina Faso, Section de Bobo Dioulasso	No.2 Maternal mortality (funded 2009)	500
Russian	Society for Women's Health Problems, Moscow	No.3 Reproductive cancers (funded 2009) No.4 Privatisation (due 2011)	500

\* Funded and published in 2010 unless otherwise indicated.

## **Additional developments related to the Arabic, French and Portuguese editions**

- RHM in Arabic – We supported an evaluation by two colleagues, one North African and one Egyptian, of the translation of several papers from the Arabic edition, which gave a very favourable response. The 2009 edition in Arabic was distributed in 2010. As the New Woman Foundation decided in 2010 that they could no longer produce the Arabic edition, we circulated a call for proposals to Arabic-speaking colleagues for production of the Arabic edition from 2011.
- RHM in French – There was no edition in French by the Cellule de Recherche en Santé de la Reproduction du Burkina Faso, Section de Bobo Dioulasso, because the editor was moving to another country in 2010. We circulated a call for proposals to colleagues in French-speaking Africa and Europe for production of the French edition from 2011.
- RHM in Portuguese – There was no edition in Portuguese because the NGO where the editorial team is based were sorting out financial and organisational issues.

Excerpts from the 2010 reports of the Hindi, Chinese and Arabic editorial teams and a summary of the evaluations of the articles in Arabic follow below.

The journal in English continues to include abstracts of all features in Spanish and French. These are freely available on the RHM-Elsevier website along with the English abstracts.

### **RHM in Hindi: Report from CREA, New Delhi**

RHM in Hindi was the first peer-reviewed journal in Hindi on sexual and reproductive health and rights, and continues to be the only such journal in India. RHM is produced at CREA under the ambit of its work on Building Information, Knowledge and Scholarship. With this, CREA aims to expand and encourage debate and discussion on the issues in the field. As a bilingual organisation, CREA recognises the lack of knowledge and scholarship available to Hindi-speaking activists and organisations. CREA's resources in Hindi on human rights and reproductive and sexual health and rights have opened these discourses to a larger group of people.

RHM in Hindi is one of the most important publications that CREA brings out annually. We have received an overwhelming response from readers, since the first issue was published in 2006 on 'Sexuality and rights'. Since then, four issues of RHM have been brought out and disseminated widely to our networks. One of the many stages that is part of producing the Hindi edition is creating a dissemination plan. The Assistant Program Coordinator creates, implements and manages this plan, and CREA distributed 1,000 copies of the 4th edition on HIV/AIDS and human rights within a year and will be reprinting it in 2011 for further distribution.

RHM in Hindi is read by a large cross-section of activists, practitioners and organisations who work in Hindi in Hindi-speaking Indian states. These include women's health and rights advocates; service providers; policymakers, ministries and health, education and other state departments; NGOs and other civil society organisations focusing on development and human rights; academics and students in law, medicine, demography and public health; university and post-graduate education and training courses for social work professionals; and university libraries and resource centres.

The dissemination plan is multifaceted and geared to the theme of each edition, e.g. for the HIV/AIDS issue we developed a mailing list of organisations specifically working on HIV/AIDS. We keep track of all important national conferences and make sure that all editions of RHM in Hindi are displayed and distributed. In 2010, RHM was displayed at CREA's booth at the National Bioethics conference in New Delhi, and we received subscription requests there for RHM.

CREA uses the journal in Hindi as resource material in the annual Hindi training on Sexuality, Gender and Rights and Human Rights Institute for discussions on reproductive and sexual health and rights. Participants in all training sessions receive free copies, which they take back to their resource centres.

For the past year, CREA has been using Constant Contact, an email marketing tool, through which we now disseminate information regarding RHM to around 7,000 people across the world.

Increasing demand for the Hindi editions of RHM by grassroots organizations, civil society groups and universities has validated the need for resources in Hindi on issues of sexuality, gender and rights.

## **Chinese: Report from National Research Institute for Family Planning, Beijing**

RHM in Chinese provides up-to-date knowledge on different aspects of reproductive health and experiences from different countries for Chinese readers. It's proven useful to clinicians, teachers and scientists in research institutes, and administrators in family planning commissions. Activities:

We produce and distribute two editions of the RHM journal in Chinese annually. Each edition includes papers from the most recent edition of RHM in English and comes out six months after it. We have expanded our distribution nationally. We run courses for clinicians and service providers using the Chinese RHM and other material. We have provided additional training for the translators. We publish the Chinese RHM on our website. And we carry out periodic readers' surveys.

We have expanded the number of selected articles to eight, including the editorial of each issue. These are usually on reproductive health in different countries, more from developing countries in Asia, Africa, and South America. The number of pages in each edition has also increased to about 100.

We have improved the quality of translation and review by inviting some professors of sociology from the Academy of Social Sciences and a professor of epidemiology from the Chinese Academy of Medical Sciences.

Our distribution network has been expanded and covers institutions such as hospitals, family planning clinics, universities, biological and social science research institutes, governmental and non-governmental organizations, as well as individual readers. We have increased the number of copies distributed to 5,000 copies, providing information to more readers working in both medical and social aspects of reproductive health.

## **Arabic: Report from New Woman Foundation, Cairo**

As the RHM editorial on reproductive cancers said, this is an urgent issue that has been long and inexcusably neglected. This fact is true also in the Arab countries, which are going through a transitional phase of development where we are carrying a dual burden of both communicable and non-communicable diseases, including a high incidence of HPV-related cervical cancer and a rising incidence of breast cancer.

With maternal mortality rates high above acceptable levels in many of the countries of the region, statistics show that reproductive cancer-related deaths also have a large share. For example, breast cancer represented 37.6% of all reported cancers in Egyptian women in 1999-2001, with an estimated annual crude incidence rate of 20.1 per 100,000 women. As for cervical cancer, reports indicate a crude incidence rate among North African women of 9.2 per 100,000 women with a high crude mortality rate of 7.4 cases per 100,000 in 2009, and with age standardised incidence rates varying from 15.6 in Algeria to 6.8 in Tunisia.

Efforts for prevention and early detection and treatment of reproductive cancers are scarce and sporadic. In 2003, WHO data show that only Morocco and Tunisia amongst the Arab countries reported on women ever having had a Pap smear (4% and 10%, respectively), or mammogram (2% and 7%, respectively), compared to an average of 70-75% in Western Europe. Data from other countries were not reported.

Many of the articles in this issue echoed situations we encounter in our region, low government spending on health, inadequate health systems, and above all lack of leadership and political will. It also provides ways to take action and gives success stories. We hope producing the Arabic edition on reproductive cancers will help to draw the focus of attention of both officials and civil society to these matters.

We have reached out to some members of pilot projects on early detection of cervical cancer at Ain Shams Medical School, and at the Early Detection and Prevention Unit of the National Cancer Institute. We will invite them to the launch and seminar of the 2010 Arabic edition scheduled for June 2010.

### **Assessment of the Arabic translation 1**

The articles translated are of good quality and overall easily understood. The terms used report faithfully the content of the original version and the overall meaning. The terms used are overall accurate but some scientific terms are translated differently from one article to another, e.g, episiotomy. A strength is that the articles could be read easily by the general public. Some paragraphs and sentences are translated literally into Arabic... which makes some sentences awkward and difficult to understand. The Arabic language used seems more Middle Eastern and the terms [and numbers] used are quite different from those commonly used in North Africa but in general, this does not affect the overall understanding of the articles. Recommendations for future translations:

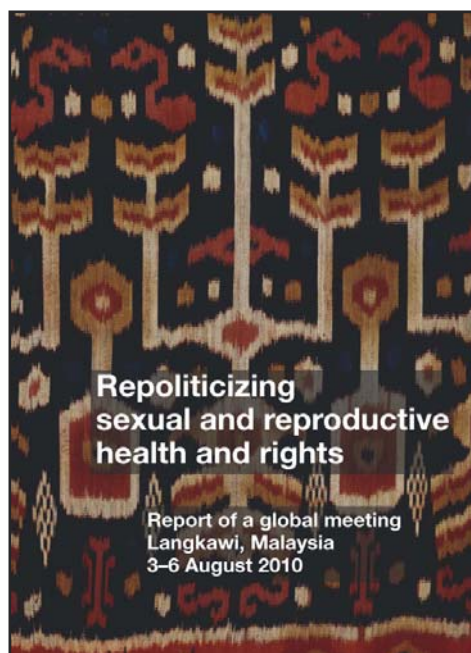
1. Use standardised terms to have a consistent translation.
2. Be in touch with the original author of the article in case some sentences are not clear for the translation.
3. Depending on the audience, it would be better to use Arabic terms that can be understood in both North Africa and the Middle East, maybe through having the translation checked by someone from both areas.
- 4 It is better to use scientific rather than informal language.
5. It is better to translate the overall meaning and not word by word.

### **Assessment of the Arabic translation 2**

I congratulate the translators for their efforts and the initiative to provide this valuable material in Arabic. In response to the first question of whether the translation is good enough for its purpose, my evaluation is that it is more than good enough and it is needed. The overall quality in terms of accuracy and ease of comprehension is very good. The messages, problems, contexts, challenges are clear, as well as the recommendations and conclusions of the papers. The strength of the translation comes essentially from the strength of the original articles, being to the point, well researched and clear in their conclusions. The weakness, if any, derives in my opinion from the difference in structure between the Arabic and English languages, e.g. Arabic requires some kind of link between sentences, and the order of words in the two languages is different.

## 6. Repoliticising SRHR: Langkawi meeting and report

In June 2008, members of the RHM board of trustees and editorial advisory board and a number of other activists and researchers in the field of sexual and reproductive health and rights met during the RHM annual meeting to discuss growing concerns about the fragmentation of work in the field and the absence of a collective critique of where it is heading. Progressive donors have changed their agendas. Health care provision is being privatised. There has been a backlash against many of the gains made since the 1990s, and the agenda is getting more conservative in response. Human rights are being challenged, especially in relation to sexuality and gender identity. Attention to sexual health is being limited mainly to surviving sex, and attention to reproductive health is being narrowed to surviving pregnancy. There are dozens of networks in the field but they are not talking to each other. NGOs are being forced to focus on and quantify targets and outcomes. And sexual and reproductive health and rights are disappearing from governmental and inter-governmental agendas.

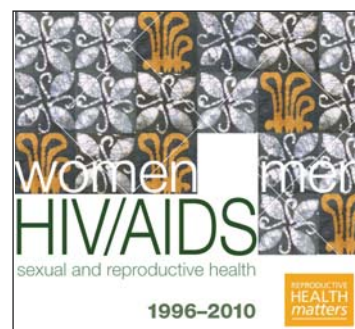


It was agreed to launch an initiative to call for repoliticising sexual and reproductive health and rights. To this end, we organised an international meeting jointly with ARROW in August 2010, to discuss a transformative agenda for moving beyond ICPD and the MDGs, and RHM produced a report of that meeting, prepared by TK Sundari Ravindran. The report, which is being disseminated by RHM in 2011, contains extensive summaries of the presentations, the responses to them, and the discussion and conclusions arising from them, and notes on the many ways the participants could see for moving forward.

## 7. Women, men, HIV/AIDS, sexual and reproductive health: CD-rom

This CD contains all the papers on HIV/AIDS and sexual and reproductive health and rights from the RHM journal, journal supplements and books published from 1996 to May 2010. They are grouped by year to coincide with the biennial AIDS conferences (2000, 2002, 2004, 2006, 2008 and 2010) where they have been distributed, and then under the following themes:

- Strategies for preventing HIV transmission
- Maternal health, HIV and preventing mother-to-child transmission
- Making sex safer
- About and for young women and men
- Sexuality and gender perspectives
- Rights, ethics and criminalisation
- Socio-political issues
- Linking HIV/AIDS and sexual and reproductive health services
- Policies, programmes and health systems issues



## 8. RHM readers' survey 2009–2010: findings

One of the biggest frustrations in publishing a journal is not knowing how much of it anyone is reading, or what they are doing with what they have learned from it, a frustration felt by the whole RHM staff, who proposed that we do a readers' survey. We developed the survey questions in 2008, pilot tested them on the Editorial Advisory Board, and then included it as an insert in the November 2009 and May 2010 journal issues.

The questions covered who our readers are professionally, what sections of the journal they read, what they think about having a main theme each time, and how they use the journal in their work and in the world. Having received quite a lot of responses by the time we wrote the 2009 Annual Report, we included a page of quotes from some of the survey respondents in that report. Below is a summary of the survey findings, followed by another page with quotes from readers of how they use the journal in their work.

As always with such surveys, the response rate was low but typical. There were 22 (out of 40) responses from board members for the pilot and 178 (or 4.2% out of  $\pm 4,200$  readers) responses from readers. More came from Africa and Asia than other regions (see table). Even so, there was a wide cross-section of organisations represented: 46% academic/research institutions, 29% medical/health service, 22% NGO/charity, 20% women's health/feminist group, 12% government/ministry/UN agency, and the remaining 11% media and others. Many respondents identified their organisations as being more than one of these.

Region	Survey respondents (%)	Proportion of all subscribers (%)
Africa	52%	42%
Asia	34%	28%
North America	4%	3%
Latin America	3%	11%
Australasia	2%	5%
Middle East	2%	3%
Europe	1%	9%

### How the journal is used

The ways in which respondents used the journal in their work were wide-ranging and showed that RHM's goal from the start of publishing a journal that can be used for making the world a better place is being fulfilled by its readership:

- 58% for professional/academic interest,
- 51% to increase public awareness,
- 44% for research purposes,
- 40-42% for writing reports/presentations/articles,
- 39% for use in training and teaching,
- 37% to improve service delivery,
- 36% for designing educational materials,
- 32% for designing projects or programmes,
- 30% for advocacy work, and
- 28% in developing policy and guidelines.

In addition, 31% used the information in their daily lives, proof (if it was needed) that people read about these issues for personal as well as political reasons.

## **Their fields of expertise**

The fields of expertise of the respondents represented the gamut of sexual and reproductive health and rights issues. The greatest proportion said they worked broadly in reproductive health (67%) and sexual health (46%). More specific SRH issues they are involved in were: HIV/AIDS (49%), family planning (43%), maternal mortality (39%), abortion (24%), population policy (22%), and infertility and assisted conception (16%).

Many were also involved in policy and programmatic issues: health systems (35%), human rights (27%), national SRH programmes and services (25%), human resources (16%), and law and policy (12%).

## **Which parts of the journal they read**

A large majority of respondents read the articles on their field of expertise (79%), on the main theme (72%), and on their own region (70%), while 71% read the editorial. Half read the articles on topics that were “other topics” for them, while 53% read the Round Up sections.

As many as 34% of the total said they read the journal from cover to cover.

## **Content and format**

As many as 69% of respondents said they liked the journal to have a main theme while 33% said they would prefer a greater mix of papers. This is a fairly accurate reflection of the views on this topic within the RHM boards as well. A full 86% thought the journal was a “good length” while 9% said they would “prefer more”. Only 3% thought it was too long.

Most respondents preferred to get the journal in print. We asked what they would do if the journal became web-only. Fifteen per cent said they would continue reading it with no problems; another 71% said they would continue reading it, but preferred to get it in print. Thirteen per cent said they would stop reading it, however, either because they would have technical difficulties or because they do not read online publications. Given the move to online journal production in many quarters, this is an important consideration for RHM.

## **What we need to improve**

The only disappointing thing we learned is that fewer respondents than we expected were using the three main RHM websites – our own and Elsevier’s with the journal back issues. 28% said they accessed RHM articles on the web. And as regards the RHM website, 17% used it to find out future journal themes, 16% to read the international news, 10% to read the submission guidelines, 8% to use the cumulative index, but only 3% to access RHM journal issues in translation.

As many as 57% said they had not used the RHM website, though several said the survey had prompted them to access it. These responses have given us food for thought and we are discussing how to address them, especially since downloads of RHM articles via Elsevier’s ScienceDirect and other gateways have increased massively over the past eight years.

## Outreach of each copy

To end on a very positive note, we learned that for every print copy of the journal mailed to the 4,200 organisations/individuals on our mailing list, many more people are reading it. Only 3% of respondents said they were the only person to read their copy, while 15% said 1–2 others read it, 35% said 3–5 others read it, 16% said 6–9 others read it, 13% said that 10–19 others read it, and 17% said that 20 or more others read their copy.

If these proportions hold true for the entire subscribers list, then through the 4,200 total subscribers, as many as 49,966 people read each print edition of RHM. When added to the numbers accessing individual papers on the web, RHM in print is circulating far more widely than we would have dreamed was the case.

## How and when the journal has been useful in their work:

- It was very useful when I was preparing the Maputo Plan of Action on SRHR and advocacy materials and reports for its implementation, and follow-up by the African Union. (Inter-governmental agency, Ethiopia)
- Magazine is comparable to the Lancet. Keep going with spirit! (Medical organisation/women's group/NGO, India)
- Because abortion is illegal here, information about it is scarce and difficult to access. By reporting on other countries, RHM helps on advocacy to decriminalise abortion here. (Academic/women's group, Philippines)
- Used the journal effectively during our training workshops as it gives numerous examples from other countries and how we should really be committed to safe motherhood initiatives. Very educational – long live RHM publications. (Academic, Uganda)
- Updates my knowledge and makes me a better professor and supervisor to my undergraduate and post-graduate students in law. (Law professor, Nigeria)
- My organization has a human rights desk; we have often referred to RHM publications to inform policy development and advocacy, especially on women's rights, more so those affected by and living with HIV. RHM is very informative and the best reference material on reproductive health. (NGO, Kenya)
- Very useful for our reproductive rights research and advocacy on maternal mortality, specifically best practices from Asia on family planning and emergency obstetric care and how these can be replicated. (NGO, Ghana)
- It gives me a good background in dealing with my patients, especially in use of contraception and dealing with unwanted pregnancies and gives me real percentages of dangerous cases. (Doctor, Syria)
- It is helpful to me when I present articles to train community leaders about female genital mutilation and also HIV/AIDS. (Hospital, Ethiopia)
- These materials are important for reproductive health programmes through training and research, and really benefit us when working in the field. (Medical organisation, academic, media, Indonesia)
- During staff and leaders' meetings; if a maternal death occurs and during litigation. In the last few years I have been involved in the policy and guidelines group for the Ministry of Health. (Doctor, Saudi Arabia)
- I give a lot of health talks to schools, churches, and charity organisations and NGOs. I find the topics treated in the journal indispensable in this regard. (Ob/gyn, Nigeria)
- Developing coursework for masters in public health programme on sexual and reproductive health, for background papers for a Maternal Health Ministerial Taskforce in Papua New Guinea, and for

teaching on qualitative research and health policy. I look forward to every edition with anticipation and then satisfaction. (Academic, Australia)

- I refer to the journal on a daily basis in my work. (NGO/women's group/health care, South Africa)
- I have written a couple of articles in my language dailies and introduced entire issues of the journal. (Media, India)
- In my research work on gender and sexuality, for my class on human sexuality, and as reference material when writing papers for publication. (Academic, Kenya)
- We use it in our work and public health projects. You are the best! (NGO, Tajikistan)
- The journal has been useful to me, especially in my radio programme on health. (Health service organisation, Cameroon)
- For seminar presentations to nurses and health sciences students at the school of nursing and midwifery – topics on medical access to abortion care. (Academic/women's group, Nigeria)
- Our library users, faculty, students and scholars read all sections, use the journal in all ways listed in our work, as a course compendium, as reference material, and as a core journal in the field of reproductive health. (University librarian, India)
- Keep innovating! Keep improving! The world needs you. (Academic, Nigeria)

### **Several other subscribers wrote these in 2010:**

- My organisation – Youth Dignity International, a grassroots organisation working on sexual and reproductive health and rights of young people at border towns in Nigeria, are on your mailing list but are requesting for a single copy of all back issues and supplements as we have just set up a youth resource centre in Lagos and are currently sourcing for journals, books and publications for the centre. RHM journals are a great tool that will be very important in the centre.
- I could do with more copies [of RHM17] which we can distribute to various units in the University of Nairobi e.g. the Medical School, the main library and other specialised libraries in the university. In this part of the world, where so many higher institutions of learning are mushrooming, learning materials will always be in short of demand.
- Kenya is going through a constitutional review process and the opposition is hard pressed on having fetal rights entrenched in the constitution! These back issues might provide some facts to use as leverage to win this war!
- I don't know how many back issues it is polite to ask for, but if we could get 15 or 20 it would be great: there are two abortion cases pending in the Supreme Court and I would love to give a copy to each Justice before the decision comes down. (Law school, Mexico)

## **9. RHM's participation in other international networks**

RHM is a member of the following organisations and networks:

- International Consortium for Medical Abortion
- IUSSP (International Union for the Scientific Study of Population)
- International AIDS Society
- AWID (Association for Women's Rights in Development)
- Voice for Choice (Coalition of UK pro-choice groups)
- UK Consortium on AIDS & International Development
- UK NGO Sexual and Reproductive Health and Rights Network

## 10. Expanding RHM's online presence: October–December 2010

We worked throughout the year to expand the RHM website. We particularly expanded the publications section so that it now contains details of all our publications: current and back issues of the journal, supplements, meeting reports, books, and a section highlighting papers from various journal issues on specific themes (abortion, condoms, HIV/AIDS, so far).

In October 2010, RHM created the job of Online Editorial Assistant with a mandate to make RHM's online presence broader, stronger and more active.

The main focus in the first months has been to strengthen all of RHM's existing online material; to create solid new platforms for content dissemination; to link up with others in the field and to make more RHM content available to more people.

### RHM website

We made a systematic tour of the site, checking every page and every link. Small changes were made throughout to increase search engine optimisation (SEO, the facility with which search engines such as Google find web pages), achieve more clarity and solve problems (for example email address formats were changed to reduce spam).

A 'News Ticker' was added to the home page, containing alerts about new or interesting content and adding a sense of 'liveness'. Editorials were made available to read within the site.

Buttons were placed on the site to make accessing and subscribing to the journal easier. An RSS feed was created with a button on the site, allowing users to subscribe to news updates from RHM. When we began a social networking drive, buttons allowing easy access to Facebook and Twitter were added.



### Researching the field

A web survey was made of around 50 organisations in the field of reproductive and sexual health and rights, looking at their online presence and use of social media. No 'norm' was found, but instead that organisations were engaging with online tools and the online community to very different degrees. Some organisations with a very good online presence (e.g. AWID) were taken as inspiration for the development of RHM online.

### New developments online

#### Facebook

An RHM organisation page was created on Facebook. Using the 'wall' facility, we have been posting links to news items on the RHM site and to other trusted online sources, links to the editor's blog, updates and pictures. This has the effect of creating more incoming links to the RHM site (assisting search engine optimisation), as well as connecting with a community of interested people online. The RHM Facebook page has 39 'favourites' (organisations we like), and is 'Liked' by 17 people, meaning they receive our updates. These are numbers we hope to improve through active contact with RHM's readers and our website users in the next stage of development.



## Twitter

A twitter account was set up for RHMJournal. Time was spent finding and following similar organisations, resulting in ‘following’ 64 entities and having 32 ‘followers’ (a good ratio). These numbers will, we anticipate, increase as we actively contact more people.

## Wikipedia

A Wikipedia entry was written and submitted. Though awaiting independent review it is live and shows up in online searches.

## The Berer Blog

A blog for the RHM editor was created using blogging software from Wordpress. This is linked to the RHM site via the ‘About the editor’ page and the news ticker. New blogs are announced on Facebook and Twitter. Some cross-posting has taken place with RHRealityCheck, a leading multi-participant blog in the field. This is a relationship we are keen to develop. Starting in January 2011, RHM’s editor began to post periodic blogs.

## In development

Profiling individual papers on Facebook.

Creating personal, subject-specific press releases for journalists.

Adding more content to the RHM website – ‘Best of RHM’, more advice for authors, more abstracts and editorials available through the site, re-design of the section with the back issues, more collections of papers on similar themes.

Creating visual and video content, e.g. adding photographs from events and videos of interviews with people linked with RHM.

## Next steps

RHM has certainly become more active online, and the platform for a broader and stronger engagement with the online community has been put in place. The next stage is to actively contact the RHM community, including its nearly 5,000 subscribers and greater readership online via Elsevier, and encourage them to engage with RHM online. A contact database is currently being compiled for this purpose.

## 11. RHM online

All the growth in journal subscriptions and reading of single journal articles globally in the past decade and more has been through the Internet. Elsevier has made RHM a fully web-based journal, and included it in various packages of journals that are sold to large institutions and accessed via ScienceDirect. This, in addition to an Elsevier–RHM website for our subscribers and others to be able to read all back issues of the journal, or browse through abstracts, has rapidly and steeply increased our outreach through the web and our visibility in academic and governmental institutions worldwide. RHM retains full ownership of the journal and copyright in all articles and books.

### RHM's own website

< [www.rhmjournal.org.uk](http://www.rhmjournal.org.uk) >



During 2010, there has been a steady increase in visitor numbers to this website and in the number of countries visitors come from. There has also been a noticeable rise in the number of authors looking at the Call for Papers and the author/submission guidelines.

The site received 8,198 unique visitors, averaging more than 670 per month and peaking at 825 during November. 70% of all visits came via search engines (predominantly Google).

Nearly 14% of visits came from referring sites, largely through Elsevier, but also from others, for example, AWID (Association for Women's Rights in Development), k4health (Knowledge for Health), International Women's Health Coalition and recently from Facebook. Visitors entered the site directly for the roughly 16% of the remainder of visits.

The site received visitors from 158 countries worldwide, with the majority coming from the USA (nearly 24%) and UK (over 23%) and India (7%), and 46% from 155 other countries.

Statistics on pages visited show more than 30% of the nearly 30,000 page views were of the home page, 20% the pages about our publications, 14% the news pages, and 13% the Calls for papers, author/submission guidelines, and future themes.

### RHM on ScienceDirect

< [www.sciencedirect.com/science/journal/09688080](http://www.sciencedirect.com/science/journal/09688080) >

The full text of each issue of the journal and supplement is carried in ScienceDirect, a platform of some 2,000 Elsevier journals. All RHM back issues are available, and tables of contents and abstracts are freely accessible. RHM can be purchased as part of a package of journals through an institutional subscription. ScienceDirect contains two search engines in which RHM is indexed: Scopus, for searching and browsing abstracts and references, and giving coverage to citation counts available; and Scirus, a search engine for scientific information that searches journal sources online, at <[www.scirus.com/srsapp](http://www.scirus.com/srsapp)>.

## **RHM-Elsevier for RHM's subscribers**

< [www.rhm-elsevier.com](http://www.rhm-elsevier.com) >

This is the Elsevier website with all issues of RHM for RHM's group, personal and supported subscribers. All RHM back issues are available, and tables of contents and abstracts are freely accessible without a subscription. There are links for subscribing and ordering back issues, a sample journal issue on request, a link to the RHM website and more. In 2010, there were 91,141 page views on this website in 39,008 visits. There were in all 34,129 unique visitors and 10,729 repeat visitors.

## **HINARI**

< [www.healthinternetwork.net](http://www.healthinternetwork.net) >

RHM is on the Health InterNetwork Access to Research Initiative (HINARI), providing free or nearly free access to major journals in biomedical and related social sciences for public institutions in developing countries.

## **Jstor**

< [www.jstor.org](http://www.jstor.org) >

This digital archive, open to participating libraries and other institutions, containing back issues of RHM up to three years prior to the current issue, is being used increasingly.

## **Online indexes/databases that include the RHM journal**

Contemporary Women's Issues, Cumulative Index to Nursing and Allied Health Literature, Current Awareness in Biomedicine, Current Contents, Excerpta Medica (EMBASE), Family and Society Studies Worldwide, Feminist Periodicals, Health Promotion Information, International Bibliography of the Social Sciences, Kinsey Institute for Research in Sex and Reproduction (website), List of Free Materials in Reproductive Health, Medline, Ohio Database of Women's Studies, Popline, Public Affairs Information Service (PAIS), PubMed, Research Alert, Social and Behavioral Sciences, Social Planning/Policy and Development Abstracts (SOPODA), Social Science Research Network, Social Sciences Citation Index, Sociofile, Sociological Abstracts, Studies on Women Abstracts.

## 12. Outreach and impact

RHM's editorial policy from early on has been to promote laws, policies, research and services that meet the sexual and reproductive health needs of both women and men, and support women's right to decide whether, when and how to have children. The journal continues to explore what is meant by these needs and their relationship to sexual and reproductive rights, and how these can best be met. We set ourselves the task of addressing fundamental concerns and dilemmas, and acknowledging the multifaceted nature of problems and solutions. Finally, we wanted to foster increased communication and cooperation, new thinking and action, and new forms of consensus in the field.

We have tried to "measure" our success in this, difficult as that is when an NGO is trying to cause a seachange in thinking and action, by looking at who our audience and authors are, how we give editorial support to them to produce new knowledge and information which we can disseminate, the extent of our coverage globally in doing so, how many subscriptions we have in all eight languages we publish in (both paid and supported by donor funding) and where these subscribers live and work, and the extent of usage of RHM's articles on the ScienceDirect website, which is used by large institutions and represents a different readership base from those who subscribe to the journal in print and online as single usually small organisations and as individuals. The survey of our readers, described earlier, was a major aid in obtaining some of this information. Lastly, the ISI impact factor is an academic and publishers' way of measuring impact, based on the number of times articles from a journal are cited in other papers, though of course for RHM, whether we are changing the world is more important.

### ISI impact factor

2005	2006	2007	2008	2009
0.857	0.624	1.169	1.671	1.430

The impact factor is the ratio of recent citations of RHM articles to the total number of recent citable articles. The trend is upward since 2005 though it seems to rise and fall somewhat annually. The five-year impact factor is 1.429. Importantly, RHM journal articles have longevity and stay relevant, which is shown in the fact that they are cited for a median of 5.6 years after they have been published.

### Audience and authors

- national and international policymakers, agencies and donors in the field, health ministries and health departments, including heads of women's health, maternal and child health, family planning and STIs/HIV;
- reproductive health service providers, including obstetrician/gynaecologists, midwives, family planning providers and associations, and counsellors;
- researchers in a broad range of specialisms and disciplines, including the biomedical and social sciences, and in both non-governmental organisations (NGOs) and universities;
- women's sexual and reproductive health advocates, groups and organisations, and a broad range of other women's groups and organisations;
- NGOs focusing on health, population and related fields such as development and human rights;
- university and NGO libraries, and other resource and information centres;
- national and international professional associations, training courses, academics and their students, including in law, medicine, demography, public health, women's studies, social sciences, development, sexology, nursing and midwifery;
- newsletters, journals, journalists and authors in health-related fields.

## Editorial support to authors and editors

RHM's editorial policy remains to provide editorial support to authors, some of whose papers would not be recommended for publication by a "standard" peer review. There are always two peer reviews per paper, and sometimes three. The editor offers detailed comments alongside the peer reviews and does copyediting. This policy has served to support a larger pool of published authors, including young and inexperienced authors and those whose first language is not English, who may find it more difficult to get published in English.

*"...Many thanks indeed! I agree with what you have suggested to add to the paper. I am really learning a lot in the process of writing this paper with you being my mentor. I am really lucky! I am planning to write another paper about teenage mothers in Hong Kong in the near future. I shall be more aware of what I want to state and argue, and to substantiate the arguments with facts. It has been a great learning process to me."* (Young author, Hong Kong)

## Author and regional coverage

RHM aims to maintain a balance between regions in its geographical focus and to address global issues broadly in the papers it publishes. The themes for each journal issue sometimes attract more submissions from one region and discipline than others, however. Within these parameters, the journal's policy is to focus more on developing countries because the problems are so much greater. However, it also regularly covers issues in developed countries, as these have international influence and raise different types of problems and challenges, and because reproductive health and rights can be highly problematic for women in developed countries too, especially poor and marginalised women. Furthermore, influences today are cross-regional, and solutions and models of excellence exist in all regions. Information from all regions thus needs to be shared globally.

In many international journals, papers about developing countries are commonly written by authors/researchers from developed countries. RHM's editorial policy since 1994 is that preference should be given to papers about developing countries written by or in collaboration with authors from those countries. These policies have steadily increased the proportion of authors from developing countries published by RHM and of peer reviewers from developing countries as well. These proportions continue to compare very favourably to those of other international journals.

Authors receive a one-year free subscription and peer reviewers are given a free copy of one journal issue, as thanks for their reviews. Many organisations continue to send information and publications in exchange for the journal, which are used in the editorial, the journal Round Up and in the RHM website news.

## Papers, authors and peer reviewers by region

The focus of papers in 2010 continues to be strongly on international and developing country issues, which has been the case for many years. There has also been a gradual shift towards a higher proportion of developing compared to developed country authors and towards a greater balance in the proportion of peer reviewers, with a gradual shift towards more developing country representation. RHM 35 in May 2010 was an exception to this, as issues of cosmetic surgery have been far more explored in resource-rich countries. Even so, articles about Brazil and Burkina Faso were an important contribution to global perspectives on these matters in that journal issue, both because Brazil is a world capital for cosmetic surgery and because research in Burkina Faso allowed a comparison of people's views on the traditional practice of FGM and "labia reduction surgery" pursued as a "fashion" by young women in developed countries.

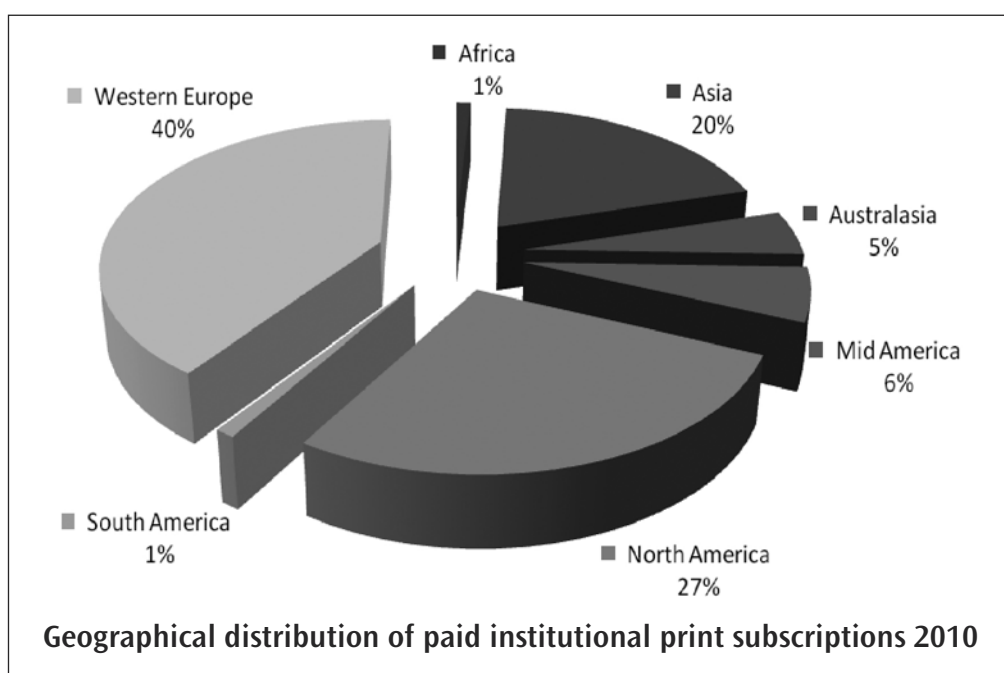
### 13. Subscriptions, orders and distribution

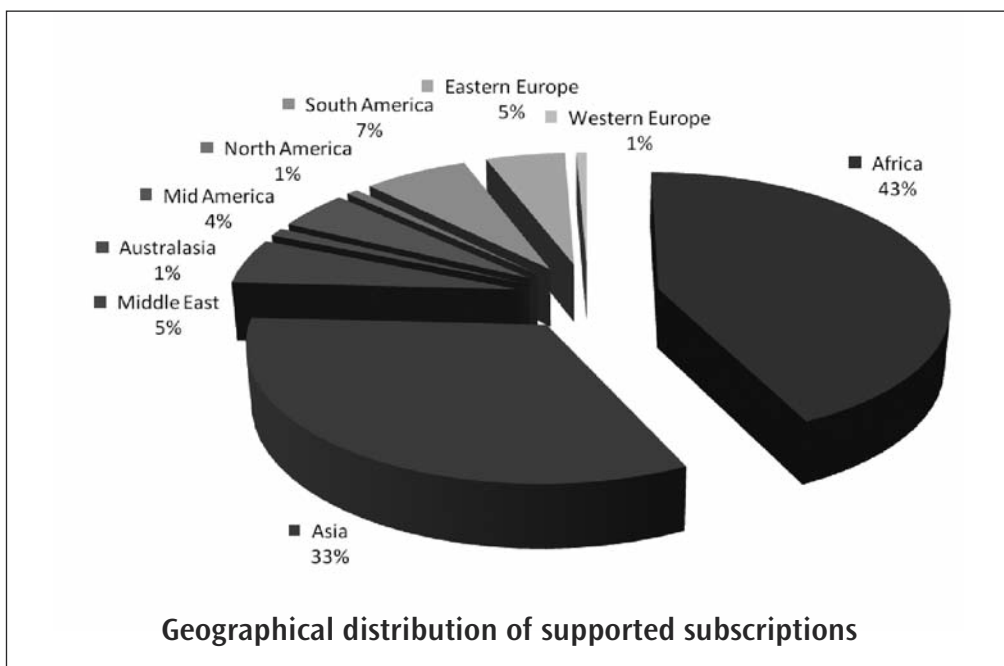
Most paid subscriptions and orders continue to come from developed countries, while almost all subscriptions and orders from developing countries are free, supported by grants from RHM’s donors. Supported subscribers are based in governments, health services, NGOs, women’s health groups, libraries, universities, and a range of professional associations and institutions, almost all in developing countries. As in previous years, RHM’s publications continue to reach organisations and individuals in 190 countries.

Paid subscriptions to the print journal, both from organisations and individuals, have remained low, and have fallen every year, which is true for most journals as web usage has risen and budgets continue to be squeezed. Of our total subscribers, 80% are supported by grants, in line with our policy that the journal is mainly both by and for developing countries. Following a clean-up of the supported subscribers list in 2009, those numbers have begun to rise again in 2010.

RHM in English Distribution 2010	Number of copies
<b>Print run</b>	<b>10,250</b>
RHM18(35) May 2010	5,000
RHM18(36) Nov 2010	5,250
<b>Subscriptions – total</b>	<b>4,097</b>
Institutional – paid	102
Personal – paid	51
UNFPA (worldwide) – paid	477
Supported – individuals, groups and organisations in developing countries	3,287
Gratis – authors and peer reviewers in 2010 and RHM board members	180

#### Geographical distribution of two types of RHM subscribers





## 14. Contract with Elsevier

RHM's contract with Elsevier Ltd, begun in 2003, has been renewed for a further three years, 2011–2013. RHM has had a productive relationship with Elsevier Ltd since it started, which has been particularly beneficial for dissemination of the journal, especially online via ScienceDirect. Elsevier handles subscriptions, distribution, bulk orders, promotion at major conferences such as the FIGO conference, and commercial reprint permissions. They promote RHM alongside journals such as *Contraception*, *International Journal of Obstetrics & Gynecology*, *Social Science & Medicine*, *Health Policy* and the *Lancet*.

Below are details of the growing number of ScienceDirect accounts that include RHM and the number of downloads of abstracts and articles, which should be added to the print subscriptions to get a picture of the total outreach of the journal.

## 15. ScienceDirect accounts and downloads

### ScienceDirect entitled and active accounts

There were 6,033 current institutional subscribers entitled to access RHM on ScienceDirect worldwide in 2010, of which about 42% were in active accounts, that is, accessing RHM articles on a monthly basis. Active usage by country of RHM full-text articles from ScienceDirect institutional account holders rose from 63 in 2007 to 78 countries in 2008, 83 countries in 2009 and 88 in 2010.

	2006	2007	2008	2009	2010
Entitled accounts	3,827	4,363	3,445	5,924	6,033
Active accounts	1,386	1,690	1,864	2,395	2,558

### 12 top active ScienceDirect accounts

Requests for articles 2010	Number
Harvard University, Boston MA, USA	1,698
London School of Hygiene & Tropical Medicine, London, UK	1,588
Johns Hopkins University, Baltimore, USA	1,435
University of Melbourne, Melbourne, Australia	1,121
University of Leeds, Leeds, UK	1,064
Columbia University, New York, USA	995
Curtin University of Technology, Perth, Australia	967
University of New South Wales, Sydney, Australia	815
Mahidol University, Nakornprathom, Thailand	679
University College London, London, UK	634
World Health Organization, Geneva, Switzerland	611
South African Consortium – University of KwaZuluNatal, Durban, South Africa	605

### Full-text downloads from ScienceDirect and abstracts/articles accessed through other gateways

The total number of downloads of full-text articles from ScienceDirect has continued to increase year on year, by 18% in 2010 compared to 2009. The number of abstracts and articles accessed through all external gateways has fluctuated while HINARI access has increased.

Number	2006	2007	2008	2009	2010
Full-text article downloads	36,637	50,112	63,642	80,998	95,255
RHM abstracts and articles accessed through external gateways					
All external gateways, mainly PubMed and CrossRef	10,289	9,331	10,133	6,496	7,921
HINARI and other developing country gateways	924	1,367	1,726	2,640	2,647

## 16. Promotion activities – RHM office

The RHM office continued to promote the journal at conferences, meetings and workshops. Brochures, sample copies and CD-roms were distributed at a wide variety of conferences and training courses throughout the world, including RHM's own stand at the European Society of Contraception and Reproductive Health Conference, The Hague, Netherlands.

Individual promotion continued to participants at conferences attended by the Editor or RHM board members and to authors and practitioners in the field, authors found in publications and e-mail circulars received by the office and on websites researched.

The office targeted promotion of specific issues of the journal to particular audiences as well. For two conferences that we felt were of particular importance, we sent 50 copies of the journal issues on the themes of those conferences:

- the Criminalisation issue (2009 ) to the International Association of Women Judges, 10th Biennial Conference, Seoul, South Korea, and
  - the Reproductive cancers issue (2008) to the Stop Cervical Cancer in Africa Conference, Accra, Ghana.
- 250 copies of the 'By and for Young Women and Men' issue went to the International Students' Conference on Reproductive Health, Makerere University, Kampala, Uganda. Fliers are now being routinely printed to promote individual journal issues and to reach out to audiences beyond RHM's familiar constituencies.

The CD-ROM on HIV/AIDS was updated for the International AIDS Conference in Vienna, Austria, where more than 500 copies were distributed.

### Brochures and sample copies

Brochures, sample copies, special publications and CD-roms were sent to the following courses, workshops, conferences and meetings:

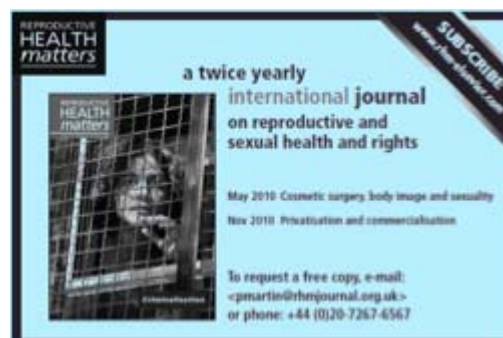
- 1st Asian Congress on Women's Health and Unsafe Abortion, Bangkok, Thailand
- Sexuality, HIV & AIDS in Africa, Addis Ababa, Ethiopia
- ICMA Conference, Lisbon, Portugal
- The Pregnancy Intentions of HIV-Positive Women: Forwarding the Research Agenda, Group on Reproductive Health & Rights, Harvard University, USA
- From Abortion Rights to Social Justice – 2010 Reproductive Justice Conference, Hampshire College, USA.
- Nursing education in a global community, 3rd International Nurse Education Conference, Sydney, Australia
- International Association of Women Judges 10th Biennial Conference, Seoul, South Korea
- Vietnam-France Obstetrics & Gynecology Conference, Ho Chi Minh City, Viet Nam
- Countdown 2015, University of the South Bank, London, UK
- National HIV/AIDS, STI/ORID Research Conference, Gaborone, Botswana
- Culture, Communication, Contraception, European Society of Contraception and Reproductive Health Conference, The Hague, Netherlands
- Women Deliver, Washington DC, USA
- From Evidence and Principle to Policy & Practice, 2nd Annual Symposium on HIV, Law and Human Rights, Canadian HIV/AIDS Legal Network, Toronto, Canada
- 4th Global Sexuality, Gender & Rights Institute, CREA, Istanbul, Turkey
- Dateline 2010: Global Health Goals and Metrics, Global Health Council, Washington DC, USA
- Doctoral courses in Maternal Health and Abortion, Bergen University, Bergen, Norway

- International AIDS Society Conference, Vienna, Austria
- 4th Stop Cervical Cancer in Africa Conference, Accra, Ghana
- MDG Toolkit and Abortion Advocacy Training, Centre for Women and Development, Hanoi, Viet Nam
- Repoliticizing Sexual and Reproductive Health and Rights, Langkawi, Malaysia
- Global Maternal Health Conference 2010, New Delhi, India
- III CSBR Sexuality Institute, Women Living Under Muslim Laws, Jakarta, Indonesia
- 13th European Health Forum, Bad Hofgastein, Austria
- Globalizing Beauty. German Historical Institute, Washington DC, USA
- Australian Sexual Health Conference, Sydney, Australia
- Australasian HIV/AIDS Conference, Sydney, Australia
- Achieving Excellence in Abortion, FIAPAC, Seville, Spain
- 16th International Congress of the International Society of Psychosomatic Obstetrics and Gynecology, Venice, Italy
- Khartoum Conference on Maternal Health, Khartoum, Sudan
- Gender and SRHR at the Heart of the MDGs, EuroNGOs Annual Conference, London, UK
- Keeping Our Promises: Addressing Unsafe Abortion in Africa, Ipas Conference, Accra, Ghana
- International Seminar on the Health, Social and Economic Consequences of Unsafe Abortion, IUSSP, Mexico
- Difficult Dialogues, National Women's Studies Association, Denver, USA
- Global Symposium on Health Systems Research, Montreux, Switzerland
- 1st Asian Population Association Conference, New Delhi, India
- Current Choices, Faculty of Sexual and Reproductive Health, London, UK
- International Students' Conference on Reproductive Health, Makerere University, Kampala, Uganda
- Controversies in Obstetrics and Gynaecology, Royal Society of Medicine, London, UK
- Health, Embodiment and Visual Culture, McMasters University, Hamilton, Canada
- African Network for Medical Abortion Regional Workshop on Medical Abortion, Nairobi, Kenya
- Healthy Environments, Healthy People and Public Health Advocacy, London, South Africa
- International Conference on Texts of the Body, Universitat Autònoma de Barcelona, Spain
- Sex, Sexualities and the Law: Changing Attitudes or Perpetuating Stereotypes? Institute of Advanced Legal Studies, London, UK
- Health Care Rationing Conference, Erasmus Observatory on Health Law, Rotterdam, Netherlands

## Press releases

The RHM office worked with the Elsevier marketing team on press releases about both journal issues. These were posted on the Elsevier websites, and circulated by e-mail to several hundred journalists and other media. The press releases were also distributed to RHM's own list of journalists.

*Advertisement for a  
Medical Libraries Association  
Conference brochure, USA*



## 17. Promotion activities – RHM at Elsevier

RHM is part of Elsevier's Leading Resources in Women's Health, a section of the Elsevier website which provides access to news, resources and information about Elsevier's 61 publications in obstetrics & gynaecology and areas related to women's reproductive health.

### Conference promotions

The RHM journal was promoted at an Elsevier exhibition booth at the following conferences:

- Royal College of Nursing Annual Congress
- Royal College of Nursing: International Nursing Research Conference
- 21st European Congress of Obstetrics & Gynaecology
- 11th Congress of the European Society of Contraception & Reproductive Health
- IV American Association of Laparoscopic Gynecologists International Congress on Minimally Invasive Gynecology
- British International Congress of Obstetrics & Gynaecology
- European Society of Human Reproduction & Embryology
- European Association for Communication in Healthcare
- World International Federation of Fertility Societies Congress
- World Organization of National Colleges, Academies and Academic Associations of General Practitioners/Family Physicians European Regional Meeting
- American Public Health Association 138th Annual Meeting
- European Public Health Association Annual Meeting

### Branding and awareness

Elsevier ran a series of integrated campaigns around the impact factor release in June 2010 including e-mail and website promotion. They created online and print adverts focused on different customer markets, for example promoting particular issues or attracting new authors and placed these in relevant journals published by Elsevier.

### Usage marketing

Elsevier has continued to stimulate online usage of RHM through email alerting services notifying subscribers of newly published articles using their own search criteria or topic alerts.

### Press release campaign

Elsevier worked with the RHM office on press releases for both journal issues and announced the publication of new journal issues on:

- the RHM-Elsevier homepage at <[www.rhm-elsevier.com](http://www.rhm-elsevier.com)>;
- ScienceBlog, a website that reports press releases from science-linked organisations and publications;
- HighBeam Research, an online archive of magazines and journals; and
- Science News, the bi-weekly news magazine of the Society for Science & the Public.

## 18. Other activities of the editor

### Publications

- How should the pro-choice movement (in the UK) respond to internet sales of medical abortion pills, February 2010 (Unpublished)
- Cosmetic surgery, body image and sexuality (Editorial). RHM 2010;18(35):4-10.
- The cover covered: introduction. RHM 2010;18(35):11-28.
- Labia reduction for non-therapeutic reasons vs. female genital mutilation: contradictions in law and practice in Britain. RHM 2010;18(35):106-10.
- Article for Index on Censorship on the RHM35 cover covered, May 2010
- A critique of the UN Draft Joint Plan on Women's and Children's Health, June 2010
- Medicines and technologies for sexual and reproductive health, for Langkawi meeting, with Jane Cottingham as first author, August 2010
- Response to presentation on donors and donor funding, for Langkawi meeting, August 2010
- Who has responsibility for health in a privatised health system? (Editorial). RHM 2010;18(36):4-12.

### Presentations and participation in meetings

The editor gave presentations at and participated in the following conferences, courses and meetings:

- Amnesty International, London office, on maternal mortality
- London School of Hygiene & Tropical Medicine graduate course, on sexual health and human rights
- International Consortium for Medical Abortion conference on access to medical abortion worldwide, Lisbon
- Commonwealth Secretariat, London, on reproductive rights and human rights
- University of Bergen summer school, Norway – taught three sessions of post-graduate students from a wide range of developing countries, on maternal health and maternal mortality, politics of abortion and research on unsafe abortion, and on sexual and reproductive health and rights
- WGNRR/Asia Safe Abortion Project training on abortion as a public health issue and an introduction to medical abortion, Hanoi
- Repoliticising SRHR: a transformative agenda, Malaysia, on medicines and technologies for SRH and the role of the pharmaceutical industry
- FIAPAC conference, Seville, called “Two steps forward, one step back”
- EuroNGOs conference, London, on gender, equity and the right to sexual and reproductive health
- Harvard Group on SRHR, Cambridge MA,

### Expert consultation

The RHM editor participated in an expert consultation and reviewed the draft text of WHO's updated and revised Safe Abortion: Technical and Policy Guidance for Health Systems.

### Voluntary activities

- Chair, Steering Committee, International Consortium for Medical Abortion
- Member, Voice for Choice, UK

### *Professional affiliations*

- European Association of Science Editors
- English PEN
- FIAPAC

## 19. Contribution of RHM's boards

The RHM Board of Trustees and Editorial Advisory Board continue to make a substantial contribution to RHM's work in promoting sexual and reproductive health and rights. Most importantly, as important actors in the field internationally and nationally, they use and help to promote the information contained in the journal as part of their own activities.

As the trustees of a charity and directors of the limited company, the trustees are the legal interface between the donors and the project, and the Charity Commissioners and the project. Their main responsibilities are to approve and monitor the direction of the project and exercise overall control of its financial affairs and legal obligations. At their annual meeting, they approve the direction of project for the year, budget for the year and any new sources of funding which may be perceived as controversial. They also monitor the quarterly accounts against the agreed budget and the activities through the editor's report. And in general they ensure proper procedures are in place for financial control and staffing matters.

Editorial board members (and trustees) submit papers, act as peer reviewers and suggest others, encourage other authors to submit relevant papers, suggest material for the journal, promote the journal, give advice to the editor, and at their biennial meeting help to choose key themes for future issues of the journal and any special publications.

All board members receive the journal free and expenses are paid for those who attend annual (trustees) and biennial (trustees and editorial advisory board) meetings.

### Examples of board members' contributions in 2010

- Over the past year I have worked with US filmmaker Carol Ciancutti-Leyva to lead discussions of her excellent documentary, "Absolutely Safe", about breast implant safety. At these screenings, copies of Diana Zuckerman's RHM 18(35) article on this topic were made available to women and gender studies programs, often piquing interest in the many other articles in RHM on other topics. (I usually took a sample RHM issue as well.) This has spread the word about RHM to students and faculty in about 10 universities in the USA, e.g. University of California at Los Angeles, San Francisco State University, University of New Mexico, University of Massachusetts, and Portland State University. One of the reasons we are doing these screenings is to determine the extent to which women's health documentaries can stimulate activism at the community level. (*Judy Norsigian, USA*)
- I distributed the Call for papers, articles and promotional materials to colleagues in Sweden and in countries where I work, e.g. Viet Nam, Uganda, Iran, the Palestinian Occupied Territory and through other channels too. In my courses at the Karolinska Institutet in Stockholm, I also distributed RHM and often use papers from RHM in teaching. (*Annika Johansson, Sweden*)
- I distributed RHM brochures in meetings and sent a number of journal issues to key people in Colombia, such as the Vice-Minister of Health, lawyers at the Constitutional Court, feminist NGOs, associations of obstetrics and gynaecology, doctors in general, and other experts in meetings. (*Ana Cristina Gonzalez, Colombia*)
- I used RHM papers in my teaching, distributed brochures and copies of specific issues in special courses on relevant themes, encouraged potential authors to submit papers to RHM, and talked about RHM whenever the opportunity arose. (*TK Sundari Ravindran, India*)
- RHM articles are included in the syllabus of the courses on International Reproductive and Sexual Health Law and the Health Equity and Law Clinic at the University of Toronto Law School, Canada. We also announce RHM issues on our listserv and note that you pick up some of the commentaries from our listserv for your legal and policy section in the journal, which makes us very happy to see the multiplier effect [in both directions]. (*Rebecca Cook, Canada*)

## 20. RHM staff, consultants, editors and boards 2010

### Staff and consultants

#### *Editor*

Marge Berer

#### *Editorial office*

Pathika Martin

#### *Finance*

Paula Hajnal-Konyi

#### *Editorial consultants*

Ellie Bard

Cassie Werber (from October 2010)

#### *Translators*

Françoise DeLuca-Lacoste

Lisette Silva

#### *Publications production management*

Boldface

#### *Website management*

Curr@nt

### Editors: RHM in translation

#### *Chinese*

Prof Bilian Xiao

#### *Arabic*

Amal Abd el Hadi (until October 2010)

#### *Portuguese*

Simone Diniz

#### *Hindi*

S Vinita

#### *Spanish*

Nancy Palomino Ramirez

#### *French*

Blami Dao (until November 2010)

#### *Russian*

Irina Savelieva

### Board of Trustees/Directors

Berit Austveg, Chairwoman

Norwegian Board of Health, Norway

Pascale A Allotey

Professor, Monash University, Sunway Campus,  
Malaysia

Angela Davies

Director, Partridge Consultancy (UK) Ltd, UK

Jocelyn DeJong

Associate Professor, Faculty of Health Sciences,  
American University of Beirut, Lebanon

Simone Diniz

Coletivo Feminista Sexualidade e Saude;  
Department of Maternal and Infant Health,  
Faculty of Public Health, University of São  
Paulo, Brazil

Geetanjali Misra

Executive Director, CREA, India

## Editorial Advisory Board

Regina M Barbosa

Senior Researcher, Population Studies Center,  
State University of Campinas, Brazil

Toni Belfield

Specialist in sexual health information and  
consultant, UK

Lidia Casas

Researcher and Professor of Law, Universidad  
Diego Portales, Facultad de Derecho, Chile

Rebecca Cook

Professor, Faculty of Law, University of  
Toronto, Canada

Jane Cottingham

Independent consultant in sexual and  
reproductive health and rights, Switzerland

Thérèse Delvaux

Researcher and Lecturer, STD/HIV Research  
and Intervention Unit, Institute of Tropical  
Medicine Antwerp, Belgium

Mahmoud F Fathalla

Professor of Obstetrics & Gynaecology, Faculty  
of Medicine, Assiut University, Egypt

Aníbal Faúndes

President, CEMICAMP, Brazil

Tine Gammeltoft

Associate Professor, Institute of Anthropology,  
University of Copenhagen, Denmark

Asha George

Health Specialist, Community Based  
Approaches, Health Policy & Evidence,  
Programme Division, UNICEF, USA

Adrienne Germain

President, International Women's Health  
Coalition, USA

Rita Giacaman

Professor of Public Health, Institute of  
Community and Public Health, Birzeit  
University, West Bank, Occupied Palestinian  
Territories

Ana Cristina González

Consultant, researcher and international  
advisor in public health issues, Colombia

Sofia Gruskin

Associate Professor and Director, Program on  
International Health and Human Rights,  
Harvard University School of Public Health,  
USA

Anissa Helie

Assistant Professor, History Department, John  
Jay College of Criminal Justice, USA

Sharad Iyengar

Chief Executive, Action Research Training for  
Health, India

Shireen Jejeebhoy

Senior Associate, Population Council, New  
Delhi, India

Annika Johansson

Senior Researcher, Karolinska Institute,  
Division of International Health, Department  
of Public Health Sciences, Sweden

Julia Kim

Cluster Leader, Millennium Development  
Goals and Universal Access to HIV Prevention,  
Treatment and Care, HIV/AIDS Practice,  
Bureau for Development Policy, UN  
Development Programme, USA

Frances Kissling

Visiting Scholar, Center for Bioethics,  
University of Pennsylvania, USA

Eszter Kismodi

Human Rights Adviser, Gender, Reproductive  
Rights, Sexual Health and Adolescence,  
Department of Reproductive Health and  
Research, World Health Organization,  
Switzerland

Barbara Klugman

Freelance strategic planner and evaluator;  
Honorary Associate Professor, School of Public  
Health, University of the Witwatersrand, South  
Africa

Bene Madunagu  
Coordinator, Dawn; Chairperson, Executive Board, Girls Power Initiative, Nigeria

Philippe Msellati  
Epidemiologist, Centre de Coordination et de Recherches du Site ANRS Cameroun, Hôpital Central de Yaoundé, Cameroon

Judy Norsigian  
Executive Director, Our Bodies, Ourselves, USA

Wanda Nowicka  
Director, Federation for Women and Family Planning; Coordinator, Astra Network, Poland

Jeffrey O'Malley  
Director, HIV/AIDS Practice, Bureau for Development Policy, UN Development Programme, USA

Rosalind P Petchesky  
Distinguished Professor of Political Science, Political Science Department, Hunter College/ Graduate Center, City University of New York; USA

Phan Bich Thuy  
Training & Services Senior Advisor, Concept Foundation, Viet Nam; Steering Committee member of Asia Safe Abortion Partnership (ASAP)

Silvina Ramos  
Senior Researcher, Centro de Estudios del Estado y Sociedad; ICMA Regional Network Liaison Officer, Argentina

Susanna Rance  
Research Associate, Birthplace in England Programme, Kings College London, UK

TK Sundari Ravindran  
Independent researcher on gender, women's health and rights; Secretary, Rural Women's Social Education Centre, India

Juliet Richters  
Associate Professor, School of Public Health and Community Medicine, University of New South Wales, Australia

Iqbal Shah  
Coordinator, Preventing Unsafe Abortion, Special Programme of Research, Development and Research Training in Human Reproduction, Department of Reproductive Health and Research, World Health Organization, Switzerland

Saira Shameem  
Executive Director, Asian-Pacific Resource & Research Centre for Women (ARROW), Malaysia

Johanne Sundby  
Professor, Institute of Community Medicine, University of Oslo, Norway

Michael Lim Tan  
Chairperson, Department of Anthropology, University of the Philippines, Philippines

Viroj Tangcharoensathien  
Director, International Health Policy Programme, Ministry of Public Health, Thailand

Paul Van Look  
Consultant in sexual and reproductive health, Switzerland; Honorary Professor, University of Szeged, Hungary; Honorary Professor, Shanghai Institute for Planned Parenthood Research, China

Charlotte Watts  
Professor, Sigrid Rausing Chair in Gender Violence, Health Policy Unit, London School of Hygiene and Tropical Medicine, UK