The CRPH in collaboration with the Outreach and Practice Unit (OPU) at the Faculty of Health Sciences organized and hosted its first dissemination meeting on women and youth in Lebanon. The meeting which was conducted in Arabic and took place on May 18, 2010 from 8:30 am to 5:30 pm at the Safir Heliopolitan Hotel in Raouche, Beirut had three main goals: To disseminate CRPH research findings on youth and women’s health in Lebanon • To stimulate dialogue on key issues related to youth and women’s health • To engage in identifying policy and practice implications

The meeting attracted a large group of over 100 participants, including practitioners and policy-makers, and members of UN agencies and NGOs as well as Lebanese universities and research centers. Dr. Bernard Gerbaka, representing HE Minister of Social Affairs, Dr. Salim Sayegh, spoke in the plenary session. Gerbaka expressed an appreciation of the value and importance of meetings such as this one that link research centers with policymakers, and invited researchers to work more closely with the Ministry of Social Affairs in identifying priorities and evaluating existing programs. Dean of the Faculty of Health Sciences, Iman Nuwayhid spoke about the dissemination meeting in the context of the Faculty’s firm belief in transferring the knowledge produced by its researchers and research projects to the wider society. Dr. Zurayk, Director of the CRPH and Dr. Yassin, Director of the OPU said a few words about the activities and contributions of their respective units.

By way of introducing the five CRPH research projects that were going to be presented in parallel sessions, one researcher from each project gave a brief summary that included methodologies, findings and practical and policy implications. A lively discussion followed and then the meeting was divided into two parallel sessions:

• The Choices and Challenges in Changing Childbirth Program
• Qaderoon: Partnership with a Community for Youth Health and Improvement

After lunch, the afternoon sessions followed the same format with:

• The Bedouin: Reproductive Health in Disadvantaged and Marginalized Communities and
• A Community-Based Relaxation Exercise and Social Support Trial (RESST) in the Southern Suburbs of Beirut
• Women and Youth: the Tobacco Epidemic

Each parallel session was followed by discussion with the participants who raised pertinent issues related to the practical implications of these projects. Some participants, although appreciative of the rigorous methodologies adopted in these projects, were less optimistic regarding the wider application of some of the recommendations without structural changes in the policy-making process.

In the final plenary, participants positively evaluated the forum, recommending that CRPH maintain this dissemination meeting as an annual forum and include presentations of research projects from other universities and research centers in the future. Participants also stressed the significance of such forums in fostering a participatory and engaging approach between researchers, practitioners and policymakers especially in setting priorities for both research and policy.

Images relating to the five presentations: RESST, the Bedouin, the Tobacco epidemic, the CCCC, Qaderoon

[Left to right] Professors Yassin, El-Kak, Makhoul, and Nakkash
Tobacco Research: From Evidence To Advocacy

In November 2009 the AUB-Tobacco Control Research Group (AUB-TCRG) received a 2-year grant in the amount of USD 198,258 from the International Development Research Center-Research for International Tobacco Control (IDRC-RITC) to support tobacco control research, dissemination and networking in Lebanon and the region. Led by CRPH Assistant Research Professor, Rima Nakkash, and housed at the CRPH this interdisciplinary group has been actively involved in advocacy and dissemination.

The first activity was a dissemination meeting of the results of the qualitative study evaluating the implementation of smoke-free policies in public places in Lebanon on November 20, 2009. Organized by FHS and the AUB-TCRG, in cooperation with the Ministry of Public Health and the National Tobacco Control Program, the objectives of the meeting were to: share best practices from around the world about smoke-free policies in public places; to disseminate the results of the qualitative study evaluating the implementation of smoke-free policies in public places in Lebanon; and to encourage a discussion about the implementation of such policies. The meeting was concluded with researchers and business owners calling for complete smoking bans in closed public areas.

In February, the AUB-TCRG convened a press conference with other AUB academics and members of Lebanese civil society at FHS calling to adopt a new strong tobacco control law to protect its citizens, especially its children, from health hazards. Addressing a room filled with academics, students, media representatives and members of civil society as well as former MP and President of the National Health Association Ismail Sukkariyeh, and Dr. Walid Ammar, Director-General of the Ministry of Public Health, the panel announced its position on a draft law on tobacco control currently being studied by Lebanese parliamentarians.

In May, the Issam Fares Institute for Public Policy and International Affairs (IFI) hosted a seminar on “How Much Does Smoking Cost Lebanon? An Estimation of the Economic Impacts of Tobacco Consumption”. The data presented, which was the result of an in-depth study by AUB researchers, was released for the first time ever to a huge audience that included several MPs, representatives from several ministries and a throng of journalists. The study found that local net revenues amount to $271.3 million annually, while total costs are estimated at $326.7 million annually. Direct costs are due to smoking-related diseases, loss of productivity or work inefficiency, and environmental degradation through forest fires or street littering for example. Indirect costs are related to pre-mature mortality. The seminar concluded with several policy recommendations: higher taxes on tobacco products, bigger health warnings on tobacco packs, smoking bans in public areas, bans on tobacco advertising, tax incentives for smoke-free restaurants, increased research and awareness on the subject, providing financing facilities and cash to families in rural areas, and giving no grace period for the new law.

The expertise of the AUB multi-disciplinary team has filled a research gap as demonstrated in the publication of an IDRC monograph on the results of: epidemiologic research; the significant contribution of this research to the WHO Advisory Note against waterpipe smoking; the active participation of members of the group in the second and third WHO FCTC Conference of Parties meeting; the appointment of a member of the group as Chairman of the Study Group on Tobacco Product Regulation (TobReg) of the WHO Tobacco Free Initiative; and the appointment of several members to the Lebanon National Committee for Tobacco Control.

At the local level, the project is promoting the translation of research to build support for policy change. Dissemination will, for example, target lay persons regarding the effects of waterpipe (narghile) smoking on health, and policy makers about best evidence for tobacco control policies. This is expected to catalyze the tobacco control policy debate and contribute towards potentially moving it to the forefront of the national agenda. IFI is supporting the AUB-TCRG objective of disseminating to policy makers.

At the regional level, AUB-TCRG will build a research network with a common vision to contribute to the evidence base on tobacco control in the region. The network will also enrich discussions on tobacco control research and promote joint future research projects and funding.

Students smoking in the designated smoking area on AUB campus

Proposed health warning labels for waterpipe tobacco packs and accessories
Research Highlights

How are social capital and women’s smoking habits linked?

Due to the increased marketing efforts of multinational tobacco companies, rates of smoking among women are steadily increasing. In fact, Lebanon has one of the highest smoking rates among women in the Arab region. Although the demographics of tobacco use among adults have been explored in developing countries, most research has looked at men and women together. Furthermore, the influence of social capital and women’s autonomy on tobacco use has not been explored in developing countries. The nature of social capital may be different in developed and developing countries. The extent of women’s autonomy is also different between developed and developing countries. This paper examines the associations between women’s autonomy, social capital, and tobacco smoking among married women from three underserved communities in Greater Beirut, Lebanon.

The data used in this research was taken from the Urban Health Study, conducted in 2002 and 2003 in Burj Barajneh Palestinian refugee Camp (BBC), Hay el Sellom, and Nabaa. The dependent variable was cigarette smoking, and the main independent variables were social capital, measured by group membership, trust, victimization, and satisfaction with the number of friends and neighbors living nearby, and women’s empowerment, divided into decision-making power, geographic mobility, and gender role attitudes.

Results indicated that overall, 35.9% of women in the study reported smoking cigarettes ranging from 21% in BBC and 41% in Nabaa. Social capital and smoking were found to be significantly related for younger women: those who lacked trust and were dissatisfied with the number of friends or relatives living nearby were more likely to smoke. High decision making and high mobility were also significantly associated with smoking among older women. For example, women aged 40-59 years who were able to go out by themselves to 6-7 places were more likely to smoke than those who could go out by themselves to 3 or fewer places. Other significant predictors of smoking were older age, younger age at marriage, household debt, lower educational attainment, labor force participation, community of residence, distress, and unhappiness.

The results generally suggest the need for intervention to curb smoking among women. Policy oriented interventions have been identified as the most effective for tobacco control. However, as Lebanon is unlikely in the near future to impose the types of policies needed to curb smoking such as raising taxes on tobacco products, banning advertising and banning smoking in indoor public places, other interventions need to be considered. The differential impact of social capital and autonomy/empowerment between older and younger women found in this study may suggest that social and cultural roles of women in these neighborhoods are changing with time. More specifically, these results suggest that interventions need to tackle the social determinants behind women’s smoking behavior and that they need to be tailored to age.

Affifi, R., Nakkash, R., Khawaja, M. “Social capital, women’s autonomy and smoking among married women in low-income urban neighborhoods of Beirut, Lebanon” Women’s Health Issues, Volume 20, Issue 2, March –April 2010, pp 156-167

Does working protect older adults against depression?

The decline in fertility and mortality worldwide has led to an increase in the older population. The Eastern Mediterranean Region has also witnessed this phenomenon. Lebanon in particular is taking the lead with 7.4 percent of the population aged 65 or more years.

Until now, Lebanon has lacked an old-age pension scheme for the majority of its older population. Yet, policies force individuals to retire by the age of 64. This results in many older adults becoming economically and socially dependent upon their families. Moreover, the deterioration of the economic conditions and the high cost of long-term health care are making older Lebanese adults particularly vulnerable to depression.

Using data from the Urban Health Study (UHS), this study examines the association between work after retirement and depression among elderly poor males in Beirut (more precisely Nabaa, Hay el Sellom and Burj el Barajneh Palestinian camp), controlling for socio-demographic factors, health characteristics, financial resources and social capital. Excluding women (because very few older women were in the labor force) the data yielded a total of 320 eligible men over 64 years of age.

Results showed a considerable proportion of elderly men who had paid work at the time of the interview (30.6%). The big majority (89.8%) of current workers reported their earnings as the main source of household income, compared to only 18.2% of those who were not in work. Former workers were more likely than current workers to have chronic health conditions (63.5% and 48.0% respectively). Based on 15 items GDS scores, 111 respondents were assessed as depressed (20.4% among those working as compared to 41.0% of the former workers). Lower rates of depression were found among current workers who had always been in the same job (15.5%) and people who trusted nobody were more depressed (58.0%). Finally, adjusted data showed a protective effect of work on depression (OR=0.50, 95% CI=0.25-0.96).

Palestine Team: On-going activities in improving maternity care have continued in various service delivery sites. Five training workshops were carried out with UNRWA midwives from the West Bank refugee camps in line with the midwifery model of care - the provision of antenatal, intrapartum, postpartum and reproductive health care. Midwives in Salfit and Ramallah Government Hospitals participated in training workshops and on-the-job training in the use of the partogram to monitor the progress of labor, and UNRWA midwives and doctors from UNRWA Qalqilya Hospital took part in training on emergency childbirth care. Sahar Hassan presented a paper at the Jordanian Nursing Council’s Second International Nursing Conference in April on “Putting evidence into practice in maternity care”. She participated actively with the Palestinian National Midwifery Committee in data collection for the mapping of midwives in the West Bank and Gaza Strip. Wee’am Hammoudeh presented a study on “The Postnatal Checkup: the Content of the Health Visit and Factors Associated with its Utilization by Palestinian Women” at a conference of the Ministry of Health and the Palestinian Women’s Research and Documentation Center in December 2009. At the “Health under Occupation” Conference at Birzeit University in March 2010, Sahar Hassan and Laura Wick presented “Gazan women and midwives: between bullets and labor pains” and the abstract will be published in the Lancet.

The Egypt Team: has completed the study on the impact of counseling materials on postpartum health-seeking behaviors and is in the process of sharing the findings with the Ministry of Health and Population. The Egypt team also continues to work on the manuscript of the edited volume on the CCCC network’s experience.

The Bedouin Health Project: Intervention and Sustainability

The Bedouins of the Bekaa Valley are among the marginalized populations in Lebanon. Because of the political context, and despite the Bedouin’s ancient presence in Lebanon, many still do not enjoy the same privileges as most of the Lebanese population as many of them have been denied the Lebanese Nationality. This status has affected their livelihood, including healthcare access. The Bedouin Health Project aims to improve the Bedouins’ access to existing healthcare centers and encourage utilization of their services. The project is funded by the European Union, and is implemented by Oxford University, in partnership with the CRPH at AUB. This project began in 2007, and has completed the assessment and data analysis phases, and is currently implementing the pilot interventions derived from a detailed participatory dissemination period.

Within the intervention phase, the first activity was a training workshop targeting the service providers of two primary healthcare centers in Bekaa, one affiliated to a charity NGO, and the other to a municipality. The workshop which took place this year on March 13th, discussed the perception of the Bedouins of the healthcare centers, and the quality of the service provision. The discussion, which was led by Dr Faysal El-Kak, and Dr Nasser Yassin, highlighted some themes that emerged from the collected data. Those include the infrequent implementation of proper hygiene standards by the staff, the compromised quality of care during the health encounter, and the inconsistent records kept for Bedouin patients.

Together, the participants tried to think of specific steps that could be implemented to remedy these issues. Better communication of information (flyers, charts), training the
nurses and administrative staff, and a new, easily managed and updated format for patient files were suggested.

The second series of activities targeted Community Health Volunteers (CHVs). After several dissemination meetings with the Bedouin leaders, eligible females were identified from various tribes to be the CHVs. The CHVs are expected to be the health “promoters” linking the Bedouin community with the primary health care centers, disseminating biomedical information regarding reproductive health and child health, and delivering first aid in case of household emergencies. The training workshops included three modules: first aid training, reproductive health, and child health. The Lebanese Red Cross Center in Kab Elias volunteered to give the first aid training, Dr. El-Kak gave the training on the reproductive health modules, and Dr. Mazhar El-Kak, a pediatrician practicing in a private primary health care center in Faour, gave the third and final training on child health and vaccinations.

The 4th and last regional meeting for the project took place in Istanbul on May 15 and 16, where the Lebanese team met with all the project partners and discussed current challenges, publication plans, and future steps in ensuring the sustainability of the project.

Map of the Bekaa with black squares marking Bedouin settlements

Map of Lebanon with red square marking Bedouin area in the Bekaa

Monique Chaaya
Associate Professor, Department of Epidemiology and Population Health
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Monique Chaaya is completing a national study with 3,000 participants on rheumatologic diseases, the first population-based study of its kind in Lebanon. She also co-organized the 15th Lebanese Epidemiological Society (LEA) conference on Translating Research into Practice and Policy on November 14th, 2009. In July, she will be presenting a paper on rheumatologic disorders at an international conference in Hong Kong.

Rita Giacaman
Professor, Community and Public Health, Research and Program Coordinator, Institute of Community and Public Health, Birzeit University
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Rita Giacaman has been participating in a regional research project on the quality of life of breast cancer patients, which is supported by the Reproductive Health Working Group, in the Arab World and Turkey and housed at FHS/AUB. Rita has also contributed to the Lancet Palestinian Health Series, which was published in 2009, and participated in writing two of the 5 articles of the series. She is currently co-editing the Public Health in the Arab World Book with Dr. Samer Jabbour and Dean Iman Nuwayhid of FHS as well as Professor Marwan Khawaja, former Director of CRPH.

Mayada Kanj
Instructor, Department of Health Behavior and Education
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Mayada Kanj presented 2 papers: Action Research in Health Education and Summary of Key Findings of regional Situation Analyses for Health education at the Inter-country Health Education Meeting organized by the WHO/EMRO in Cairo from May 3 to 6, 2010. She also prepared a paper on Health Literacy in the EMR in collaboration with Dr Wayne Mitic (University of Victoria, Canada) for the Global Health Promotion Conference in Nairobi, Kenya from October 26 to 30, 2009. Kanj has just completed a regional health education assessment in collaboration with WHO/EMRO that included a situation analysis of health education activities in 5 countries in the EMR region; she is also collaborating with the UNESCO Regional office/Beirut to write a final report for Educational Sector Response to HIV and AIDS in the Arab World: a Situation Analysis.

Karima Khalil
Maternal Health Consultant, CCCC regional coordinator for Egypt
dr_karima_khalil@yahoo.com

Karima Khalil, the Egypt team coordinator for the Choices and Challenges in Changing Childbirth Group, has been working with the Egypt team on the final analysis of the study of the impact of postpartum health messages on subsequent maternal health-seeking behaviors. She is also editing the CCCC volume describing the experience and lessons learned of the regional research network, which will be submitted to the publisher in the fall of 2010.

Judy Makhoul
Associate Professor, Department of Health Behavior and Education
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In December 2009, Makhoul submitted a proposal to the Qatar National Research
Sponsored Research Publications December 2009 - June 2010

Afifi R., Nakkash R., Khawaja M. “Social capital, women’s autonomy and smoking among married women in low-income urban neighborhoods of Beirut, Lebanon” Women’s Health Issues Volume 20, Issue 2, March-April 2010, Pages 156-167


Nakkash R., Makhoul, J., Afifi, R. “Obtaining informed consent: observations from community research with refugee and impoverished youth” Journal of Medical Ethics 2009;35:638-643


Tewtel Salem, M., Abdulrahim, S., Zurayk, H. “Using Open-ended Data to Enrich Survey Results on the Meanings of Self-rated health: A Study Among Women in Underprivileged Communities in Beirut, Lebanon” Women & Health, 49(8): 1-17

CRPH Seminar
Health Inequity in Lebanon

In recent years, the gap for health care standards between rich and poor has widened even though Lebanon’s health facilities are improving. This seminar presented two kinds of data that shows that in Lebanon, standard of health care relates directly to income.

Sawsan Abdulrahim Income Inequity and Self-Rated Health

Despite improvements in health outcome indicators in Lebanon since the end of the Civil War, evidence points to widening inequities between rich and poor. This study set out to explore the association between income inequities and self-rated health status among women of reproductive age in Lebanon. It employed nationally-representative data collected in 2004 by the Pan Arab Program on Family Health. The findings reveal that women who live in households with lower income are more likely to report poor health status. The association displays a clear gradient, meaning that with incremental decreases in income there are incremental decreases in health. Regional differences showed that those women who live in middle income households, and not only those who live in poor households, exhibit exceptionally poor health in the South, North, and in the Bekaa.

Nisreen Salti Health equity in Lebanon: a microeconomic analysis

This study, conducted in collaboration with Jad Chaaban and Firas Raad looked at the micro-level inequities in the use of healthcare, in access to healthcare, in the ability to pay for it, and in some health outcomes across geographic regions. Data from the 2004/2005 Multi Purpose Survey of Households shows that with higher expenditure, chronic disease increased whereas disability decreased. The presence of any health-related expenditure is regressive and magnitude of out-of-pocket expenditures on health increase with expenditure quintiles. Catastrophic health payments are likelier among disadvantaged groups (in terms of income, geography and gender). However, the cash amounts of catastrophic payments are progressive. Poverty is associated with lower insurance coverage for both private and public insurance. Not only do the poorest have less of an ability to pay out-of-pocket for healthcare, they also incur healthcare expenditures more often than the wealthy. They have lower rates of insurance coverage, causing them to spend a larger proportion of their expenditures on health, and further confirming results on the vulnerability of the poor.

Assessing the Burden of Communicable and Non-Communicable Diseases; and Health Equity and Human Development. During his stay with us Dr. Boutayeb is working on a paper on health equity in the Arab World.

Niveen Abu-Rmeileh (Palestine)
June 4 - July 4 2010
Associate Researcher, Institute of Community and Public Health, Birzeit University in Palestine. Niveen Abu-Rmeileh has a PhD in Statistical Epidemiology from Glasgow University, UK. (2004)
Abu-Rmeileh’s research interests include: cancer mortality in the West bank, cardiovascular disease and hyperglycaemia; a survey of the carnage in Gaza; improving the quality of mortality data; marriage patterns in the Opt and the study of cesarean births. During her fellowship at the CRPH she will finalize a paper on marriage patterns in the Occupied Palestinian territories (OPT) and draft a paper on comparison of smoking prevalence in three countries under conflict (OPT, Argentina and Colombia).

Announcements

In March, CRPH published its 2nd bilingual issue of Research and Policy Highlights entitled: Level of exposure to secondhand smoke in Lebanon is high: Time to ban smoking in indoor public places and based on a project funded by the International Development Research Centre - Research for International Tobacco Control. Data was collected between May and August 2009. The research team consisted of: Rima Nakkash (Principal investigator/Assistant Research Professor), Joanna Khalil (Project coordinator/Researcher), Rima Afifi (Co-Principal investigator/Associate Professor), and Monique Chaaya (Co-Principal investigator/Associate Professor) at the CRPH.

The new CRPH website was launched in April 2010. Please visit us here: http://staff.aub.edu.lb/~webcrph/index.html

CRPH Monthly Research Seminars

May 24, 2010
Professor Abdesslam Boutayeb
Health (in) equity in Arab countries
Abdesslam Boutayeb Professor in the Department of Mathematics of Oujda University in Morocco visited CRPH as Visiting Regional Fellow in May.

April 19, 2010
Professors Nisreen Salti and Sawsan Abdelrahim
Health Inequity in Lebanon
Presented in 2 sections as follows: Nisreen Salti, Assistant Professor, Economics Department on Health equity in Lebanon: a microeconomic analysis and Sawsan Abdulrahim, Assistant Professor, Health Behavior and Education Department on Income inequality and self-rated health: evidence from population-based data in Lebanon

March 29, 2010
Professor Kathryn Yount
The Concept of Global Health
Kathryn Yount is the URB scholar at the Epidemiology and Population Health Department at FHS. She is also Associate Professor at the Hubert Department of Global Health and Department of Sociology, Rollins School of Public Health, at Emory University.

December 3, 2009
Professor Loulou Kobeissi
Community intervention (3): Medically Unexplained Vaginal Discharge and Common Mental Distress: An Association or not...?
Loulou Kobeissi is Assistant Research Professor in the Epidemiology and Population Health Department, and a CRPH affiliate.

November 29, 2009
Professor Jocelyn Dejong
Research Ideas for a Four Country Approach to Promoting Safety and Quality of Care in Childbirth: Proposal to Welcome Trust
This seminar is a presentation of the multi-country research plans of the Choices and Challenges in Changing Childbirth research network covering Egypt, Lebanon, Palestine and Syria.

October 26, 2009
Afamia Kaddour
Contesting Relative Deprivation: The Ras Beirut Well Being Survey
Afamia Kaddour is a graduate of FHS with a BSc in Environmental Health and a Master of Public Health in Epidemiology and Biostatistics. She also has a Master of Science in Global Health and Population from the Harvard School of Public Health. She is Research Associate at CRPH, currently directing the Ras Beirut Well Being Survey as part of her dissertation work at Paris XI in social epidemiology.
CRPH News is published bi-annually by the Center for Research on Population and Health (CRPH).

CRPH staff:
- Huda Zurayk, Director
- Loulou Kobeissi, DrPH, Assistant Research Professor
- Rima Nakkash, DrPH, Assistant Research Professor
- Ruba Ismail, MPH, Program Administrator
- Hala Dimechkie, MA, Communications Coordinator

Join Us as a Visiting Fellow
CRPH has been sponsoring a Visiting Fellows Program since January 2003. Selected fellows from the Arab region may visit CRPH for one to three months to collaborate with FHS faculty affiliates on ongoing research projects, or to use the Center’s facilities and data resources to undertake their own research. Candidates need to be affiliated with an academic university or research institution, to hold a postgraduate degree and to have good working knowledge of English. A fellowship application may be requested from Mrs. Ruba Ismail, Program Administrator, at crph@aub.edu.lb and should be submitted at least three months prior to the proposed starting date.

The MS in Population Health
The graduate program is designed to provide training in Population Sciences, focusing on the impact of population change on health. It offers basic training in population theory and analysis as well as in quantitative research methods. Students will participate in collaborative research activities with FHS faculty through the Center to gain practical experience. Students will also have access to the Center’s data generated by the Urban Health Study and other studies for thesis research. The university catalogue and graduate admission application form can be requested from the AUB admissions office via e-mail at admissions@aub.edu.lb, or downloaded from http://www.aub.edu.lb

Opportunities for qualified students to receive financial aid are available in the form of Graduate Assistantships, Graduate Scholarships, and other sources of funding, such as FHS administered research grants (when available). Information regarding financial assistance for FHS graduate programs can be obtained from Ms. Mitra Tauk at mt12@aub.edu.lb

Contact Us
To learn more about CRPH research activities, to subscribe to CRPH News, or to request an application for the Visiting Fellows Program, contact us at:

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Upcoming Events

→ RHWG upcoming meeting in Ain Es-Sukhna, Egypt, July 5-7, 2010. Themes include:
- Biotechnologies/Assisted Reproduction Technologies
- Childbirth (including links to mental health and stress)
- Health/Law
- Marriage, motherhood and marital relationships
- Mental health
- Migration/refugees
- Quality of care
- Quality of Life

About CRPH