

A systematic review of menstrual regulation, safe abortion and post abortion care adopted and implemented in 'natural' disasters during response and recovery phase

Citation

Winifred Ekezie, Nibedita S. Ray Bennett, Isha Biswas, Denise M.J. Corsel, David Cowie, Azukaeogo Nanji, Nimra Choudhary, Nimisha Goswami, Lasith Dissanayaka. A systematic review of menstrual regulation, safe abortion and post abortion care adopted and implemented in 'natural' disasters during response and recovery phase. PROSPERO 2022 CRD42022353014 Available from: https://www.crd.york.ac.uk/prospero/display_record.php?ID=CRD42022353014

Review question

What sexual and reproductive health (SRH) for menstrual regulation (MR), safe abortion (SA) and post-abortion care (PAC) approaches/models for service delivery have been adopted in 'natural' disasters?

What components in those SRH for MR, SA, and PAC interventions implemented were most effective in increasing 'availability, accessibility, acceptability and quality' framework in hard-to-reach (H2R) areas?

What are the challenges and opportunities of implementing these SRH for MR, SA and PAC interventions in 'natural' disasters?

Searches

The following databases will be used to search for peer-reviewed primary studies published, regardless of study design: MEDLINE, EMBASE, PsycINFO, PubMed, CINAHL

International reports and grey literature will be searched from relevant databases and websites, including: WHO Global Health Observatory, The Humanitarian Data Exchange World Bank Health, Health Data Collaborative, Institute of Health Metrics UN institutions (UNFPA, UNICEF, UNHCR, UN Women, UN Refugee, UNOCHA), Inter-Agency Working Group on Reproductive Health in Crisis (IAWG), ResearchGate, Grey literature from ProQuest Dissertations and Theses, Ethos and OpenGrey,

Search dates: Only studies conducted in 2010 or later will be included

Language restrictions: Only studies in English language will be included due to time constraints.

Authors who have only published an abstract will be contacted to conduct a comprehensive search looking for unpublished articles or "grey literature". Also, the reference lists of all included articles will be reviewed to identify relevant cited articles not identified in the initial database searches.

Types of study to be included

Inclusion criteria: Studies using any research design (both quantitative and qualitative e.g. RCT, cross-sectional, ethnography and mixed-methods studies), International guidelines, Studies published from 2010 to date.

Exclusion criteria: Commentaries, editorials, conference papers and letters to editors without intervention components evidence, Animal-based studies. Studies before 2010, Non-English studies.

Condition or domain being studied

Sexual and reproductive health services such as menstrual regulation, safe abortion and post abortion care for the women

of reproductive ages adopted and implemented in natural disaster settings during response and recovery phase will be studied in this review. This is because we are looking for interventions that are adopted and implemented at primary health care facility level in everyday life and also under comprehensive SRH service package during active natural disaster crisis. In contrast, in humanitarian set-ups permanent and physical primary health facility may not exist making it difficult to properly implement appropriate SRH services. Hence studies focusing only on humanitarian settings will not be considered for this review.

Participants/population

Inclusion criteria:

Women and girls of reproductive ages (15-49 years) living in natural disaster settings.

Exclusion criteria:

Women and girls who do not undergo menstruation and those who have attained menopause.

Women of reproductive ages in humanitarian crises settings.

Intervention(s), exposure(s)

Sexual and reproductive health (SRH) interventions such as menstrual regulation (MR), safe abortion (SA) and post abortion care (PAC) at primary health care facility level will be reviewed.

Comparator(s)/control

None.

No studies will be excluded if they do not include a comparator/control group.

Context

The focus of this review will be women and girls of reproductive ages in natural disaster settings only.

Main outcome(s)

This systematic review will identify the components of implemented packages that contribute to the success of the interventions at primary health care facility level.

Measures of effect

Not applicable

Additional outcome(s)

None

Measures of effect

None

Data extraction (selection and coding)

Studies will be screened using the inclusion criteria followed by title, abstract and full-text screening and the

PRISMA-P 2020 flowchart will be used to document the process. Data from all the included studies will be extracted

into a spreadsheet in excel. The following data will be extracted: author (s), year of publication, country of intervention, socio-demographic characteristic of the participants, study location, inclusion and exclusion criteria, study design, sample sizes, intervention type and description, intervention target population and duration, outcome data, findings/results and intervention limitations. Data screening and extraction will be conducted independently by two reviewers and disagreements resolved through discussions with a third reviewer.

Risk of bias (quality) assessment

Included studies will be critically assessed by two independent reviewers for methodological quality using JBI standardised critical appraisal tools. The JBI tools use a series of criteria that can be scored as being met (yes), not met (no), unclear or not applicable (not applicable). Two reviewers will independently assess each criterion and comment on it. Any disagreements that arise between the two reviewers will be resolved through discussions. If consensus is not reached, then a third reviewer will be involved. All studies, regardless of their methodological quality, will undergo data extraction and synthesis, where possible.

Strategy for data synthesis

A narrative synthesis of the SRH interventions like MR, SA and PAC will be the most appropriate mode of synthesis because of the broad inclusion criteria of the study designs. The intervention component and evidence will be assessed based on the availability, accessibility, acceptability and quality of SRH services using the "Essential Health Service Package, Comprehensive SRH service, and the Global Strategy for Women's, Children's and Adolescents Health 2016-2030" framework. In addition, the most effective service components will be summarised into a simple model recommending the best package.

There will likely be high levels of heterogeneity resulting from variations in the definitions, measures, sample designs, modes of data collection, methods of estimation, the time of data collection, and populations. Hence, a meta-analysis will not be conducted, as the study is not focused primarily on quantitative data.

Analysis of subgroups or subsets

Where sufficient data are available, we will conduct sub-analyses by location, age groups and similar intervention components.

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Type and method of review

Intervention, Narrative synthesis, Service delivery, Systematic review

Anticipated or actual start date

07 August 2022

Anticipated completion date

30 April 2023

Funding sources/sponsors

Government of the People's Republic of Bangladesh National Institute of Population Research and Training (NIPORT)

Conflicts of interest

Language

English

Country

England

Stage of review

Review Ongoing

Subject index terms status

Subject indexing assigned by CRD

Subject index terms

Abortion, Induced; Female; Humans; Natural Disasters; Pregnancy

Date of registration in PROSPERO

16 August 2022

Date of first submission

13 August 2022

Stage of review at time of this submission

Stage	Started	Completed
Preliminary searches	Yes	No
Piloting of the study selection process	No	No
Formal screening of search results against eligibility criteria	No	No
Data extraction	No	No
Risk of bias (quality) assessment	No	No
Data analysis	No	No

The record owner confirms that the information they have supplied for this submission is accurate and complete and they understand that deliberate provision of inaccurate information or omission of data may be construed as scientific misconduct.

The record owner confirms that they will update the status of the review when it is completed and will add publication details in due course.

Versions

16 August 2022