



AMREF INTERNATIONAL UNIVERSITY
SCHOOL OF PUBLIC HEALTH
DEPARTMENT OF COMMUNITY HEALTH
MASTERS IN SEXUAL AND REPRODUCTIVE HEALTH RIGHTS AND POLICY
END OF SEMESTER EXAMINATION JAN-APRIL 2025

HSR 709: POPULATION MANAGEMENT POLICIES & RIGHTS RELATING TO CONTRACEPTION

DATE: April, 2025

TIME: Three Hours

Start:

Finish

Instructions

- 1) This paper has two sections; Section A and Section B
- 2) Answer **Question one (1)** in **Section A**
- 3) For **Section B**, answer **any three (3)** questions of your choice
- 4) Use the university examination booklets provided
- 5) Write your student registration number on all your answer sheets

Note:

Each question carries a maximum of 15 marks.

SECTION A: ANSWER ALL TWO QUESTIONS

1. A developing country with a high Total Fertility Rate (TFR) of 5.2 has recently expanded access to modern contraceptive methods. However, contraceptive prevalence remains low, and there are significant disparities in usage across different socioeconomic groups. As a public health policymaker, propose a multi-faceted intervention to improve contraceptive uptake while considering cultural, economic, and logistical challenges. (15 marks).

SECTION B: ANSWER ANY THREE QUESTIONS

2. A middle-income country is experiencing significant outmigration of highly skilled workers, leading to concerns about "brain drain." At the same time, it is receiving an increasing number of low-skilled migrant workers from neighboring countries. Using migration theories, explain the push and pull factors driving both the emigration of skilled workers and the immigration of low-skilled laborers and its implications for the country's development. (15 marks).
3. A rapidly urbanizing country is experiencing shifts in population dynamics, including declining fertility, increasing life expectancy, and rural-to-urban migration. Policymakers are seeking to understand these demographic changes using theoretical frameworks. Compare and contrast how the **Demographic Transition Theory** and **Modernization Theory** explain the observed demographic changes in this country. (15 marks).
4. Compare the legal and policy approaches to contraception in two countries—one with **progressive** reproductive health laws and another with **restrictive** policies. What lessons can be learned from their experiences? (15 marks).
5. In a low-income country, surveys indicate that 28% of women of reproductive age have an **unmet need for modern contraceptives**, leading to high rates of unintended pregnancies and maternal mortality. Despite government efforts, barriers to contraceptive access persist. Discuss the key **demographic, socioeconomic, and cultural factors** contributing to unmet needs for modern contraceptives in this context. How do these factors vary across urban and rural populations? (15 marks).
6. A government initiative aims to expand access to contraceptive services, but ethical concerns have emerged regarding **informed consent, autonomy, and equity** in service delivery. Some marginalized groups, including adolescents and low-income women, face additional barriers to accessing contraceptives. Analyze the ethical tensions between **individual autonomy** and **public health goals** in contraceptive service provision. How can policies balance the right to access contraception with concerns about coercion or undue influence? (15 marks).