

. Journal of Obstetrics Gynecology and Reproductive Sciences

Sofía López de Nava Tapia *

Open Access Review Article

Specification of a model based on published findings from 1961 to 2020 for the study of reproductive choice

Sofía López de Nava Tapia 1*, María de Lourdes Morales Flores 1 and Cruz García Lirios 2

- ¹Universidad Nacional Autónoma de México
- ² Universidad Autónoma del Estado de México

*Corresponding Author: Sofía López de Nava Tapia, Universidad Nacional Autónoma de México.

Received date: January 06, 2021; Accepted date: March 18, 2020; Published date: March 22, 2021

Citation: Sofía L. N. Tapia, María L.M. Flores and Cruz G. Lirios (2021) Specification of a model based on published findings from 1961 to 2020 for the study of reproductive choice. *J. Obstetrics Gynecology and Reproductive Sciences* 5(3); DOI: 10.31579/2578-8965/054

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Abstract

The discussion and specification of a model for the study of reproductive choice was the objective of this paper. A documentary study was carried out with an intentional selection of sources indexed to Academia, Copernicus, Dialnet, Ebsco, Latindex, Publindex, Redalyc, Scielo, Scopus, WoS, Zenodo and Zotero from 1961 to 2020. The relationship between the calculation of costs and benefits with risk behaviors was established, although the research design limited the discussion with the literature consulted, suggesting the extension of the work to the revision of its dimensions; incommensurability, unpredictability and uncontrollability.

Keywords: sexual health, reproductive health, rational choice, interruption of pregnancy

Introduction

As of the time of this writing, the pandemic caused by the SARS-CoV-2 coronavirus and COVID-19 are the causes of 15 million infected, 9 million sick and 600 thousand deaths worldwide. In Mexico, 350 thousand have infected, 230 thousand become ill and 40 thousand have died.

Health policies have focused their strategy on the confinement of people, the use of masks, the washing of hands, clothes and utensils with the purpose of preventing infections, diseases and deaths, as well as mitigating cases to guarantee public health care in hospitals.

A problem derived from the confinement of people is violence against women. In the case of sexuality, the issue has focused on the social protection of the State or the pursuit of justice rather than on autonomous training. It is a deliberate, planned, and systematic process in which rational choice precedes reasoned action, planned behavior, and systematic behavior.

The objective of this paper is to discuss the theoretical, conceptual and empirical frameworks around the freedom of choice and with respect to the sexual and reproductive rights of entrepreneurial female heads, specific case merchants of coffee products and services.

The hypothesis that guides this work is that freedom of choice anticipates sexual and reproductive rights. This is so because equality (everyone starts from the same goal and ends at the same goal) limits the guarantees of expression, transit or grouping that are essential for the self-correction of the system. On the contrary, freedom allows scrutiny, debate, agreements and joint responsibilities around the system of relations free of violence.

It carried out a desk study with a sample source repository indexed in Latin America - Academia, Copernicus, Dialnet, Ebsco, Latindex, Publindex, Redalyc, Scielo, Scopus, WoS, Zenodo and Zotero from 1961 to 2020 accordance with the criteria information search by keyword; freedom of choice, sexual and reproductive rights, heads of family and entrepreneurship.

The document will serve to establish the topics and axes of discussion in the agenda, as well as to discuss the scope and achievements to specify a model for the systematic investigation of the problem and balance and prospective scenarios.

In this way, the first section reviews the context in which sexual and reproductive rights are forged with the intention of highlighting the foundations of freedom of choice. In the second section, theoretical and conceptual frameworks around freedom of choice are discussed in order to establish the axes, trajectories and relationships between the determining variables of this phenomenon. In the third section, a model for the study of the problem is specified, considering a review of the literature from 1961 to 2020. Finally, the future implications of discussion are included.

History of reproductive sexual rights

In the framework of the policies of confinement of people, the suspension of sexual and reproductive rights is not possible because the current international and national law makes it impossible for the health or political authority to suppress individual guarantees.

The relationship between reproductive rights, centered on the decriminalization of abortion and the freedom of choice over one's own

body, with respect to self-management and administration of financial resources aimed at subjective well-being is demonstrated [1].

Since the 1970s, rape as an aggravating circumstance of abortion was a probable cause in the decriminalization of those who requested the assisted interruption of pregnancy; however, public health policies in general and reproductive health in particular did not allocate sufficient funds for the equipment, promotion and medical assistance in the bulk of the population until well into the 1980s [2].

The concept of reproductive autonomy is crystallized in 130,824 cases of assisted interruption, 7,653 in minors, 73% of the cases were requested by residents of Mexico City, 24% of the State of Mexico and 3% of other entities [3]. Regarding the cases in which the request was made, but did not attend the assisted interruption session, they only represented 13.5%. 83% of requests and interruptions were made by people whose age ranges between 18 and 35 years and only 4% of cases have been made more than once [4].

Regarding the levels of instruction, 8.3% finished only the primary, 32.9% finished the secondary, 17.2% studied a higher level, 0.4% a technical level and 1.7% did not. He mentioned some level of studies [5].

In summary, sexual and reproductive rights are guarantees that cannot be suppressed by any constitutional attribution of the health authority or by the municipal, state or federal public administration.

Theories of freedom of choice

In a scenario of freedoms and individual guarantees that cannot be suppressed by political or health actors, the theoretical and conceptual frameworks that explain freedom of choice have built a discussion agenda focused on the needs, expectations and capacities, essential for the study of freedom from contingencies, risks or threats.

The theory of happiness suggests that there is a close link between happiness and rationality [6]. In such a relationship, the reasoning capabilities correspond to the choice. In this sense, the rational and free individual will be the one who pursues happiness through the calculation of their objectives, achievements and expectations that make up a virtuous circle of learning and continuous knowledge, as well as a constant review of the scope and limits of the capacities of thinking, reasoning, planning and systematization [7].

However, the Aristotelian approach ignores the factors of need and motivation as drivers of human relationships between individuals who share objectives and synchronize capacities aimed at achieving their expectation [8]. Humanist theory holds that human relations determine the purposes, goals and tasks or collaborations between those who show a legitimate interest in benefiting each other [9].

In this way, the humanist theory, unlike Aristotelian thought, warns that the sum of the wills and efforts is more significant than the high capacity of reasoning of an individual [10].

One aspect of humanism is in Maslow's pyramid of hierarchy of needs and motivations, which points as the basis of any personal relationship to the needs of scarcity or deficit, those that derive from the lack of training and the absence of constant motivation [11].

Then, the physiological needs that allude to the feeding and maintenance of the organisms and consequently, suppose features of prevention of diseases and accidents, performance enhancers and productivity [12].

If efficiency, effectiveness and effectiveness are determined by good nutrition and maintenance of brain neurons, then safety needs allude to the perceptions of individuals [13]. In this sense, the risks and threats expected in the face of an immeasurable and unpredictable event in its consequences suppose a system of constant monitoring of strategies and styles for the prevention of crime and violence [14].

Therefore, security opens the expectation of belonging or categorization and identity towards a reference group or towards another group that wants or wishes to belong [15]. That is to say that security needs, focused on prevention and protection, even in the claim, are antecedents of the attachment and care of an environment in which the closest people are valuable because they form part of the security scheme of the individual [16].

Once people come together and develop their interpersonal relationships, they feel the need to encourage their affections and emotions [17]. This is the case of the relationship between governors and the governed with respect to a security project. In this way, recognition emerges as a need of the first order once all those exposed have been met [18].

Transcendence, according to the Maslowian theory, is the goal of the needs and the maximum achievement of the capacities impelled by the motivational systems. It is needs to be more than of having, apparently belonging [19].

However, the freedom of choice to be present in each of the needs, now of carrying out the actions and implement the capabilities, seems to be determined by a social and ideological structure that would determine the hierarchy of these [20]. Therefore, freedom of choice seems to be rather transitory and applicable in moments and circumstances in which a decision is made that is not entirely deliberate or completely convincing [21].

In the case of the full exercise of sexual and reproductive rights, the theories of freedom of choice only contextualize the possibilities based on the priorities of individuals, avoiding ideological issues and social mobilization such as sexuality and interruption. Assisted pregnancy unwanted or unplanned [22].

Classer's theory of rational choice considers that individuals behave as agents that compete in an economic system for resources, or else they are actors that a political system defines the strategies of action and mobilization with the intention of carrying out a conflict and a change of social or collective dimension [23].

Reproductive rights are, in the first instance, represented by a sector of the population as an instrument of support against an unwanted pregnancy or that in any case compromises the plans of the woman involved [24]. In this sense, social representations or the objectification, anchoring and naturalization of beliefs, perceptions, motives, attitudes and intentions of cases occurred, present events and future scenarios in which the management and administration of resources play an important role, many times essential and central in decision-making when requesting and assisting an assisted interruption of pregnancy [25].

Even such a decision supposes a series of expectations that are determined by the available information about the risks of requesting and carrying out the assisted interruption [26]. It is a freedom of choice delimited by the rights of third parties [27]. Stuart Mill proposed that freedom is the determinant of choice, but if it involves third parties, then it is the election that affects freedom [28].

In the opposite case, when freedom generates choices that inhibit the rights of third parties, progress is asymmetric [29]. If there is more consensus liberties and d and elections, then progress is embodied in a representative democracy [30]. Therefore, freedom is divided into that of thought and action or instrumental [31].

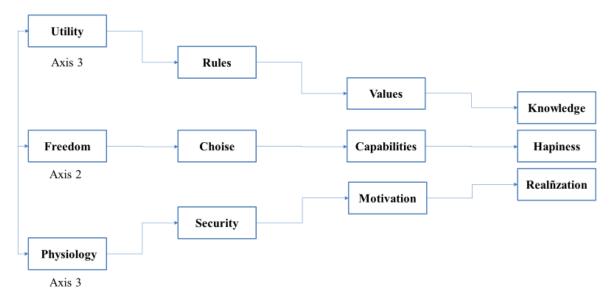
The reflection of the environment can be unlimited, but the intervention in its processes is limited by the rights of third parties [32]. It deals with ethical principles in which it is intended to regulate human relations, the

establishment of its objectives, the instrumentation of its capabilities and the achievement of its goals [33].

In short, intermediate-range theories of rational choice try to explain the deliberate, planned, and systematic process of sexuality. They present dimensions and determining factors of decision-making, intentionality and action regarding sexual and reproductive rights.

Specification of the chosen reproduction model

The study of reproductive choice, defined as the balance of environmental requirements with respect to freedoms, needs, motivations and management and consensus capacities, can be carried out following the logical trajectories of the relationships between the variables used in the theoretical framework and conceptual wielded (see Figure 1).



Note: elaborated from the literature review

Figure 1. Specification of a model for the study of reproductive choice in COVID-19

Axis 1. In the model, the freedoms of choice are determinants of the reasons that everyone develops in their desire to establish differences with respect to needs [34]. From the Aristotelian perspective, the link between liberties and happiness is in the capacities, but from Maslow's vision, it is the needs that mediate the relationship between freedoms and choices [35].

Therefore, an election will be defined by the hierarchy of human needs, although the reasons are inherent to the needs, the freedoms of choice separate the needs of the motives to establish the limits of the individual process with respect to a process collective [36].

Axis 2. Consequently, capacities are factors that from the approach they define the rational choices of actors and agents rather than of individuals or groups [37]. It is assumed that the election process reflects a context of scarcity and competition for resources [38]. Therefore, a greater capacity for processing and assimilating liberties, supposes the hierarchy of needs and the delimitation of the reasons for carrying out an election [39].

Axis 3. However, the observation and anticipation of the reproductive choice is different from a rational choice based on costs and benefits, or, different from a consensual choice based on the availability of information, deliberation and agreements or co-responsibility [40]. It is first and foremost the result of the influence of liberties and their regulation on needs, motives and capacities [41]. That the freedom of thought and the freedom of action, according to the stuartmillist theory they are two factors that can be integrated in the model to explain a choice of reproductive type [42].

In summary, the three axes of discussion make up the rational, deliberate, planned and systematic agenda. The trajectories that go from physiological needs to self-realization suggest that reproductive sexuality is an instrument of self-management in which personal values stand out, although with the help of the group to which one belongs or wishes to belong. In the second axis relative to freedom of choice up to personal happiness, it supposes a structure of determining factors under the control of the individual who, from her rationality, will reach her goals. In this sense, sexuality is the result of the consolidation of decisions in normative situations. In the third route alluding to utility and self-knowledge, sexuality is implemented as part of human capital. It is an exploration of desires and emotions but regulated by notions of cost and benefit.

Final considerations

The contribution of the present work to the state of the question lies in the discussion and specification of a model for the study of reproductive choice, although the design of the documentary research suggests the extension of the model from the collateral literature.

The choice and partner, sexual and reproductive depends on the expectation of relationship whenever the couple succeeds in establishing their decisions based on the degree of commitment to the relationship, but if not, then the choice will depend on people close to the couple, such as the mother. In the present work it has been highlighted that the choice of couple follows the guidelines of rational decision making in which costs and benefits establish a criterion to be followed.

The reproductive choice is rather assessed by perceptions of aversion to the prevention of diseases, propensity to risk behaviors and aversion to a healthy future, suggesting that sexuality is an emergent phase of risky lifestyles. In the present study, a continuum is established that goes from the freedom of choice to the restorative action that supposes self-care itself that has been conceptualized as a reaction to contingencies and risks.

The interruption of pregnancy is not the result of a rational, deliberate, planned and systematic choice since it is rather the product of the combination of cultural and cognitive factors. In the present work, reproductive choice has been discussed as part of a valuation and normative corpus focused on costs and benefits, but in relation to a reference and belonging group. It is a complex decision process in which the interpersonal relationships are conditioned by the subjective and intersubjective norms, as well as by the dispositions towards the relationship and the commitment of loyalty and fidelity.

References

- Aldana W. Governance of health responsibility in town in central Mexico. Nur. Enf. 1 (1), 5-17
- Amuchastegui A, Flores E, Aldaz E. (2015) Subjective dispute and social dispute. Religion, gender and social discourses in the legislation of abortion in Mexico. J. Gen. S, 5 (41), 153-195
- Bustos J. (2019) Expectations towards policies for terminating pregnancy in inmigrants from the state of Mexico. Inv. 14 (3), 2-33
- Carreon J, Hernández J, Morales M, García C. (2013)Intentions of consensual sex and induced abortion in students of a public university in Mexico. Psy.; 13 (2), 24-38
- 5. Espinoza F. (2019) Governance of migratory flows from establishment of identity and agenda of occupational health. Hue. Mig.; 4 (7), 139-171
- 6. García C, Carreon J, Aguilar J. Rosas F. García E. (2014) Contrast of a model of reproductive sexuality. Psy,; 5 (1), 45-64
- García C, Carreon J, Hernández J, Bautista M, Méndez A. (2012) Socioeconomic and demographic determinants of attitudes towards abortion. Psy.; 15 (28), 262-270
- García C, (2016)Morales M, Méndez A, Delgado M, Vilchis F, López S, García C. Exploratory factorial structure around variables related to the interruption of pregnancy in students. Pub H, 12 (23), 1 5-28
- García C, Morales M, Méndez A, Delgado M, Vilchis F, López S. (2015) Reliability and validity of an instrument that measures perceptions of sexuality Rum.; 10 (12), 87-93
- 10. Garcia C. (2020) Specification a model for study of attitude towards groups carrying VIH / SIDA. Enc. Mul.; 64, 1-9
- García C. (2012) Attitudes towards assisted legal abortion. Soc. W.; 50, 269-279
- 12. García C. (2014)Beliefs about induced abortion in a public hospital. Pub. H.; 22, 13-19
- 13. Garcia C. (2019) dimensions of human development theory. Equ. Int. Wel. Pol. Soc. W.; 11 (1), 27-54
- Garcia C. (2019) Expectation of former migrants to the request for abortion legally assisted: A study for transparency. Int. J. Tra. Equ.; 9 (1), 1.8
- 15. Garcia C. (2019) Exploratory dimensions of the attitude toward occupational health. Glo. Res.; 17 (3), 1-8
- Garcia C. (2020) Hybrid factor structural of subjective wellbeing.
 J. Psy, Dep. Anx.; 6 (1), 29-36

- 17. Garcia C. Marcos teóricos y conceptuales en torno al desarrollo local. Mar. 85 (1), 1-11
- Garcia C. (2018) Politica de salud comunitaria y la adhesión al tratamiento del cáncer cervical en una comunidad del centro de Mexico. Epsys,; 21 (1), 1-6
- 19. Garcia C. (2020) Specification a model for study of community health. Glo. J. Adi. Reh, Med.; 6 (5), 63-67
- Garcia C. (2020) Specification a model for study of occupational health. Glo. J. Man. Bus. Res.; 20 (1), 1-6
- Garcia C. (2019) Specification a model for study of reproductive choice. Aca. J. Edu. Res.; 3 (3), 1-4
- 22. Garcia C. (2019) Specification a model for study of reproductive sexuality. Hor. San.; 18 (3), 253-260
- 23. Garcia C. (2019)Specification a model of study of reproductive sexuality. J. Man. Bus. Res.; 14 (6), 11-14
- 24. Garcia C. (2020) Specification a model of study of sexual reproductive. J. Neu.; 2 (1), 1-4
- 25. Garcia C. (2019) Specification of a self-care model. Lux. Med.; 42 (1), 15-25
- 26. García C. (2011)Study of attitudes toward abortion in university students in Morelos, Mexico. Xhi.,; 7 (13), 61-82
- 27. Garcia C. (2019) Theory of quality of life in local development policies. Int. J. Neu.; 1 (3), 1-6
- 28. Garcia J. (2018)Reliability and validity of an instrument that measures health welfare. Eur. 2018, 15 (2), 44-52
- 29. Hernandez J. (2020)Specification a model of sexual violence. Bri. J. Med. H. Sci.; 2 (2), 1-4
- 30. Hevla A, Villar M, Martínez F. (2006) A critical review of the debate on human needs from the focus on the person. Polis, ; 5 (15), 1-18
- 31. Lopez S. (2019) Specified model based on meaning related to climate of the institutional norm of workers in health center Mexico. Equ. Int. Wel. Soc. W.; 11 (1), 11-25
- 32. Moscovici S. (1961) Psychoanalysis, its image and its public. Buenos Aires, Huemul.
- National Institute of Women. Statistics of the decriminalization of abortion. Mexico: Inmujeres. (2010)
- 34. National Population Council Gender and abortion statistics. Mexico: Conapo. (2018) Quintero M, Valdés O, Delgado M, García C. Evaluation of a model of the institutional self-care strategies. Condom use and prevention in university students. H. Pro; 12 (23).
- 35. Quintero M. (2019) Reflective factor structure of occupational health governance. Sum.; 1 (1), 69-86
- 36. Romero R.(2014)Theory of freedom of choice: Application in ethical praxis. Quipukamayoc, ; 22 (42), 149-167
- Sandoval F, García C, Bustos J. (2016) Exploratory factor structure of planned abortion in students of Xochimilco, Mexico City. Per.; 2 (2), 4050
- 38. Velez S, Rosas F, García C. (2018) Reliability and validity of an instrument that measures perceptions of couple relationships. Eureka,; 15 (2), 269-282
- 39. Velez S. (2018) Reliability and validity of instrument that measures perception of relationships. Eur.; 15 (2), 269-282
- 40. Villegas E. (2018) Social work towards a quality of life and wellbeing subjective. Int. J. Res. Hum. Soc. Stu., 5 (6), 1-14
- 41. Zaratiegui J. John Stuart Mill (2001) an economist who loves freedom. C. Adm; 14 (23), 31-149