



Training Option 1 - Gender and Reproductive Health⁴⁹

Learner Objectives	By the end of the session, participants will be able to <ol style="list-style-type: none"> 1. Describe the cultural, social, economic, and political factors that contribute to poor reproductive health 2. Explain how these factors act as barriers to reproductive health 3. Explain why reproductive health is a gender issue 4. Differentiate between practical needs and strategic interests in programs to improve women and girls' reproductive health
Time	3 hours
Session Overview	A. Cultural, Social, Economic, and Political Factors Related to Reproductive Health 1 hour B. Why Reproductive Health Is a Practical and Strategic Gender Issue2 hours
Materials	Flipchart Markers
Handouts	8A Case Study: A Girl's Life 8B Practical Needs and Strategic Interests

PURPOSE OF THE SESSION

Reproductive health is defined by the World Health Organisation as a state of physical, mental, and social well-being in all matters relating to the reproductive system at all stages of life. The reproductive health of women is compromised by women's lack of power and influence to make decisions related to marriage and childbirth as well as unequal access to health care, nutrition, education, employment, and income. This session examines how cultural, social, economic, and political factors affect a woman's reproductive health. In a case study, participants reflect on how these factors influence a woman throughout her life cycle. The concept of practical needs and strategic interests and their relationship to women's reproductive health is introduced.

A. Cultural, Social, Economic, and Political Factors Related to Reproductive Health (1 hour)

- Step 1** Divide participants into small groups. Distribute Handout 8A, Case Study: A Girl's Life, and ask for a volunteer to read it aloud.
- Step 2** Assign the following assignment:

⁴⁹ Source: CEDPA Gender and Development Training Manual

ASSIGNMENT #1

1. Identify the factors that contributed to Tulsi's poor state of physical and emotional health. Be sure to think about the cultural, social, economic, and political factors that affected Tulsi throughout her life cycle.
2. Prepare a brief summary of the factors.

Time: 20 minutes

Possible answers: poor nutrition in early years; lack of access to education because of gender discrimination; expected role of girls and women; cultural tradition of early marriage; illiteracy; role of husband as decision-maker; preference for sons; poor health education and support from the health center; lack of involvement and responsibility of husband for reproductive health of his wife, etc.

Step 3 Ask each group to present its results.

B. Why Reproductive Health Is a Practical and Strategic Gender Issue (2 hours)

Step 1 In the same groups, ask participants to complete the second part of the task. Assign each group one or two of the factors identified above:

TASK #2

For each factor:

1. Discuss how the factor contributes to poor reproductive health. (The discussion does not need to be limited to the case study.)
2. Identify the gender issues related to the factor.

Time: 20 minutes

Step 2 Ask each group to present its findings. Develop a list of gender issues related to reproductive health.

Possible responses:

- reproductive health concerns both men and women
- males and at times older females dominate decision-making on

matters that affect reproductive health of women—when to have sex, whether or not to use family planning, etc.

- women are biologically more susceptible to STDs and HIV; only women can become pregnant

- where cases of infertility exist, women are held responsible

- methods of family planning tend to be gender-biased

- providers of reproductive health services are usually women

- socio-cultural pressures put women at a relative disadvantage to men in reproductive health matters

- unequal access to education, employment, income and legal services make women dependent upon men for their economic survival; this reduces their power to make decisions that affect their reproductive health—decisions regarding family planning, use of condoms, right to refuse sex, etc.

Step 3

Write the two phrases “practical needs” and “strategic interests” on a flipchart. Ask participants to discuss what they think these phrases mean.

~~Explain that the GAD approach to development discussed in the previous session distinguishes between women’s practical needs and their strategic interests.~~

Step 4

Distribute Handout 8B, Practical Needs and Strategic Interests. Read through the handout with participants. Identify examples of projects that address practical needs and projects that address strategic interests to ensure that participants understand the distinction.

Practical Needs: projects that address such immediate needs as health, family planning, housing, water supply, sanitation.

Strategic Interests: projects such as legislation for equal rights and opportunities for women, eliminating harmful traditional practices and violence against women, increasing women’s participation in decision-making, literacy, education, etc.

Step 5

Divide participants into four groups. Ask two of the groups to identify the **practical needs** of Tulsi and the types of projects that might address these practical needs. Ask the other two groups to identify Tulsi’s **strategic interests** and the types of projects that might address Tulsi’s strategic interests. Allow 20 minutes.

Step 6

Allow each of the groups to present their findings. Point out that it is not necessarily “better” to address strategic interests rather than practical needs. Because the inequities between men and women can be so great, in some situations it is essential to address women’s practical needs before it is possible to address their longer-term

strategic interests. For sustainable empowerment of women to occur, however, programs that meet women's strategic interests must eventually be developed.

Step 7 In the large group, refer to the list of Tulsi's practical needs and strategic interests. Discuss the relationship between them. Which needs are most immediate? Which strategic interests are most essential for women's empowerment that results in real change in status and position?

Handout 8A – Case Study: A Girl's Life

Tulsi was born into a family of six children—four boys and two girls. She was the fourth child and the youngest girl. Her family survived by farming and selling a small amount of cash crops. They also had a few sheep and one cow. Often there was not enough food to feed everybody in the family adequately. As in most families in her community, her father and brothers were fed more because they laboured, then she and her sister ate what was left, and her mother ate last. Tulsi grew slowly, but this was considered normal.

When she was six, Tulsi began school. But after two years, she had to stop because there wasn't enough money to send all the children to school and people said it wasn't safe for girls to go to school in her area. Her two older brothers continued, while Tulsi and her older sister stayed home to help their mother with the livestock, caring for their young brothers, and other household tasks.

By the time Tulsi was 12, the family was better off financially. They'd learned some new agricultural techniques and were selling more crops. Tulsi wanted to return to school, but her father would not let her because his family kept telling him it was inappropriate for a girl to be educated. The school was far away, and he was concerned about her traveling that distance. Also, there was only one female teacher at the school, and he did not find it appropriate that his daughter, who was nearing puberty, be taught by men. Besides, he explained to his wife, Tulsi would be getting married soon—there was no need for her to go to school, and no need to risk her being spoiled before marriage. Her older sister, Naghma, who was 17, had already been married two years and had one child.

When Tulsi was 15 she was married to Ahmad Seyer, a truck driver, and went to live with his family. Within four months she was pregnant. By the time she was 18, she had three daughters. She was always tired, her health was poor, and she often felt isolated and depressed. Though she couldn't read, she had heard about family planning and suggested to Ahmad Seyer that they consider it so she could have a rest. Ahmad Seyer became furious and beat her. He pointed out that she had not yet provided him with a son and that family planning was unnatural, anyway. His mother agreed. Tulsi, feeling that she had been appropriately reprimanded for her bold and presumptuous behavior, did not bring up the subject again.

Tulsi's health continued to deteriorate. She was treated several times at the health clinic for itchiness and discharge in her genital area. Each time, the nurses at the clinic told her that she must use condoms to prevent this sickness. They would become quite annoyed that she had not used them. But Tulsi knew that condoms were only used by prostitutes, and that Ahmad

Seyer would refuse them. Tulsi's fourth child was a son, and Ahmad Seyer was very pleased. He looked forward to his second and third son. Meanwhile, Tulsi became more and more sad and tired.

Handout 8B-1 – Practical Needs and Strategic Interests

Practical needs are linked to women's condition. Women's **condition** refers to women's material state—their immediate sphere of experience. If you ask a woman to describe her life, most likely she will describe her condition: the kind of work she does, the needs she sees for herself and her children (clean water, food, education), where she lives, etc.

Practical needs refer to the requirements for daily living such as water, commodities, sanitation services, and housing. People do not have to be told of these needs—they usually identify them themselves because they are so urgent and critical. Women may identify practical needs related to food and water, the health and education of their children, and increased income. A community where women carry water long distances from a river has a practical need for a well. Meeting such needs through development activities can be a relatively short-term process involving inputs such as equipment, (handpumps, clinics, a credit scheme), technical expertise, and training.

Practical needs can usually be met without changing the social position (status) of the affected population. People's living conditions may improve, but little is done to improve their position and status in society. Projects that aim to meet practical needs and improve living conditions generally preserve and reinforce traditional relations between men and women.

Strategic interests for women arise from their subordinate (disadvantaged) **status** and **position** in society. Position refers to women's social and economic standing relative to men. It is measured, for example, by male/female disparities in wages and employment opportunities, participation in legislative bodies, vulnerability to poverty and violence, and so on.

Strategic interests are long-term and related to improving people's position. These include actions to increase people's knowledge and skills, give them legal protection, and bring about equal opportunities among different social groups. Access to participatory democratic processes is in the strategic interests of the poor in general. Gender equality is in the strategic interest of women in particular. Empowering women to have more opportunities, greater access to resources, and equal participation with men in decision-making is in the long-term strategic interest of the majority of the world's men and women.

Handout 8B-2⁵⁰

Practical Needs

- Tend to be immediate and short-term.
- Are unique to particular women.
- Involve women as beneficiaries rather than active participants.
- Relate to the conditions of daily life—food, housing, income, health care, welfare benefits, etc.
- Are easily identifiable by women.
- Can be addressed by specific material inputs: food, health care services, training etc.
- Can generally be addressed without changing traditional gender roles and relationships.

Strategic Interests

- Tend to be long-term.
- Are common to almost all women.
- Involve women as agents, or enable women to become agents.
- Relate to women's disadvantaged position in society, subordination, lack of resources and education, vulnerability to poverty and violence.
- Are not easily identified by women.
- Can be addressed by gender-sensitization and consciousness-raising, increasing women's self-esteem and self-confidence, education and skill training, political mobilization, and empowerment.
- Can empower women and transform gender relationships.

⁵⁰ Source: "Gender Planning in the Third World: Meeting Practical and Strategic Gender Needs." *World Development*. 17(11). 1799–1825.