Health Actions for Women

Practical Strategies to Mobilize for Change

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The creation of Health Actions for Women has been a labor of love initiated by a group of women devoted to ensuring that the world’s poorest and most vulnerable women gain access to information and improve their lives. This effort grew out of the Hesperian newsletter, the Women’s Health Exchange, a collaboration among community organizers and women’s health educators. Dr. Melissa Smith, the medical editor of Where Women Have No Doctor and a contributor to the Exchange, convened a steering group with Hesperian staff members to shape and guide the project. Our deep appreciation goes to this international group of remarkable women — Lucille Atkin along with Deborah Billings, Mirai Chatterjee, Jill Hackett, May Haddad, Catherine Muthoni, Pallavi Patel, Paula Rojas, Paola Sesia, and Aruna Uprety — who so generously contributed their knowledge, experience, creativity and time to move this project from a dream to a reality. Jane Maxwell deserves special recognition for nurturing this project and its process, passionately engaging the participation of a wide and varied international network of community-based groups and individuals.

Field testing by 41 community-based partners in 23 countries brought together diverse groups of younger and older women, groups that combined adolescent girls with young married women, and mixed gender groups. An astounding 1,400 people participated in discussions, tried out activities, and submitted their feedback and insights about the issues most important to their communities.

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How to use this book

*Health Actions for Women* was written to help women and men move their communities from recognition of a problem, to discussion of how it affects us, to action for change to improve women’s and girl’s health. The book is organized to help that process along. You do not need to read the chapters in the order they are listed on the next page. Start wherever you find the content or topics that best address your needs and your issues.

Chapter 2: Communities Organize for Women’s Health, and Chapter 10: Building a Women’s Health Movement, can help you think about the process of creating plans for action and community organizing. Both Chapter 3: Gender and Health and Chapter 4: Sexuality and Sexual Health contain important information, analysis, and activities that provide a foundation for the education and organizing work on the issues covered in the other chapters.

Each chapter begins with a Table of Contents listing the main sections and activities included in that chapter. You can also use the Activities list that follows the Table of Contents on the next page to find your way directly to activities throughout the book. Appendix B: Good Meetings, from Start to Finish, and Appendix C: Activities to Encourage Participation contain more activities as well as tips on how to facilitate meetings, guide difficult discussions, and help a group of people become comfortable meeting and working together.

The women in my organization tried out several of the activities in this book. We sent in suggestions about what worked and did not work for us, and how we changed the activities to fit our culture. I am glad to see our advice and suggestions included in the book along with the activities — maybe they will help you too.

A list of all the groups who shared their experiences in promoting women’s health and empowerment with us is found on pages 328 to 330, along with their contact information. A collection of print and online resources that we have found helpful, and we hope may help you too, is on pages 331 to 338.

A book like this is never done. To share your activities, experiences, and other good resources you have found or developed with Hesperian and other health educators and community organizers, please use the website: healthactions.hesperian.org. We can’t wait to hear from you!
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