Health Actions for Women
Practical Strategies to Mobilize for Change

Teaching Guide
Developed by Rhonda Sarnoff, DrPH at University of San Francisco
Teaching with Health Actions for Women: 
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*Health Actions for Women: Practical Strategies to Mobilize for Change* was written to help women and men mobilize their communities through the process of problem recognition, understanding the impact of the problem on the community, and carrying out effective action for change. It focuses on the change process as it applies to key issues of women’s health. While the book identifies major issues and barriers to women’s health, it does not attempt to specify the changes a community needs to make but rather how to identify and organize for change. Those changes are dependent on the local context and needs of each community. The core elements of the change process are shared across communities.

The book provides a guide to community organizers working to improve women’s health. It breaks the change process into component steps and presents a wide range of practical, hands-on activities to engage community members and other stakeholders in each of those steps. The change process is described in relation to a range of issues basic to women’s health. These include: gender, sexuality, family planning, healthy pregnancies, and safe abortion. The activities include: guided discussions, games, role-plays, storytelling, community mapping, art, and alternative media that engage a broad array of community actors.

*Health Actions for Women* is a valuable tool for other audiences as well, including those working in public and private organizations and agencies with a mission of supporting local organizing activities. By understanding the community change process and learning about effective strategies for change, those agencies may be better able to effectively support community-led initiatives with the patience and guidance appropriate to their needs.

Undergraduate and graduate students planning to work with communities on social change also will find the book a useful tool. It complements their technical training and theoretical preparation with descriptions of successful community strategies to improve women’s health in a variety of settings, as well as an understanding of the change process and activities that can be shared with community members to facilitate this process.
Engaging Community Members in Local Activism
Communities Organize for Women's Health (Chapter 2)

Chapter 2 provides a case study of the process by which a woman's group in the highlands of Peru organizes to improve access to quality maternity care for the community. The study highlights both the unrecognized resources within the group as well as the adaptive nature of the organizing process as it integrates the lessons learned as the process evolves. While the organizing experience will vary from one community to the next, there are important lessons from each experience that can inform the work of other communities.

Discussion Questions:

1. What was the first key step in the process of organizing for change?

2. How did the recognition of health as a human right come to light for Vilca Women's Voices?

3. Who assumed leadership roles in the initial formation of the group and how did they adopt these roles? Why was this important?

4. Why might it be important to distinguish long- and short-term goals?

5. What were some of the key lessons learned in the process of organizing?

6. Were these integrated into the process as it moved forward? How?
Examining the Effect of Gender Roles on Health
Gender and Health (Chapter 3)

Chapter 3 promotes a self-awareness and understanding of the concept of gender in one’s own socio-cultural environment through a series of group and individual exercises. Only by understanding how the society’s definition of gender affects how we view the attributes, potential, and rights of men and women, can we understand how these views affect society’s expectations of and opportunities for each group. An awareness of one’s societal definition of gender is necessary for one to question the assumptions implicit in the definition and to begin to organize for change.

Discussion Questions:

1. Gender roles affect the power men and women have over their lives and one another. Discuss specific paths by which a gender role affects a woman’s power over her life.

2. In what specific ways do a society’s gender roles affect women’s health?

3. The chapter focuses on the negative impact of certain gender roles ascribed to women. Can you think of gender roles relevant to women that they might not want to change? What would those be? Do you think they are advantageous to women? Why or why not?

4. Including men in these exercises and discussions can have benefits and disadvantages. When would you include or exclude men in these discussions and why?

5. Laws often have a large impact on the power women exert. Can you give three examples that illustrate how a law can empower or disempower women?

6. Lay people often don’t have a complete understanding of the laws that affect the power they have over their lives, even when they understand that their power is limited. Can you provide two examples of how educating women on the content of a specific law might empower them?

7. Do you think that gender norms can be changed? Can you describe one example where you have seen such change underway?
Reproductive Health Education in the Community
Sexuality and Sexual Health (Chapter 4)

Sexuality is an aspect of women's lives in which they are least empowered. Taboo and stigma envelope sexuality in a veil of silence that support male dominance. Organizing women around their own sexuality can be a challenging, demanding skill requiring sensitivity to the local context and the community's readiness to engage.

Chapter 4 presents the knowledge and processes to help break through the taboos and stigma surrounding sexuality to empower women to find greater sexual pleasure in their relationships by understanding their sexual needs and desires and how to express them. Promoting women's sexual awareness and empowerment can ultimately improve the sexual health of couples.

Discussion Questions:

1. Sexual health entails freedom in relation to one's sexuality. In what ways is sexual freedom exercised?

2. Why might learning to name and identify the sexual and reproductive parts of their bodies be important to empowering women?

3. How might you approach the topic of sexuality in a group of women who are embarrassed or uncomfortable discussing the topic?

Exercise: “Preparing to lead discussions about sex and sexuality” (page 82). Reflect on and share your responses to the questions exploring your thoughts and feelings on sexuality.

4. In what ways do traditional gender roles (Chapter 3) affect a woman's sexuality?

Exercise: “What is sex for a man? What is sex for a woman?” (page 94). Discuss the women's and men's expectations about sex in single sex groups to see how gender roles influence sexual relationships.

5. Is sexual health a human right? If so, can the human rights approach be adopted to promote inclusion of LGBT individuals? How would you make the connection in your community?
Increasing Communication and Knowledge Around Sexually Transmitted Infections
Preventing Sexually Transmitted Infections (Chapter 5)

The stigma and shame that surround sexuality also make it difficult for women to speak about sexually transmitted infections (STIs). The goal of chapter 5 is to promote an understanding of these infections to help women view STIs like other health problems so that they can talk more openly about them and take action to protect themselves and their family.

Discussion Questions:

1. How can traditional gender roles for women and men expose women to a heightened risk of STIs and limit their ability to protect themselves?

2. How does biology also contribute to women’s greater risk of STIs than men?

3. Complete the following table to review some facts about STIs:

<table>
<thead>
<tr>
<th>Sexually Transmitted Infection (STI)</th>
<th>Treatment Exists (yes/no)</th>
<th>Symptoms Female</th>
<th>Symptoms Male</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gonorrhea</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chlamydia</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Syphilis</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trichomoniasis</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chancroid</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Herpes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hepatitis B</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Human Papilloma Virus</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Human Immunodeficiency Virus</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. In the last chapter, we discussed how freedom of expression impacts the sexual health of women. Explain how freedom of expression and effective communication can reduce women’s risk of STIs.

Exercise: “Community mapping” (pages 134 and 218). Create a map of sexual health resources in your community. Try to specify the age group and sex of the individuals who are likely to use each of the resources to help identify where gaps may exist.
Engaging Women and Men in Addressing Gender-Based Violence

Ending Gender-based Violence (Chapter 6)

Gender-based violence includes all ways power or force is used to control women and girls and to punish men who violate gender norms. It encompasses any act or threat of violence to women and girls to enforce gender norms and lower their status. The violence can be physical, sexual, emotional or economic. Chapter 6 examines the structural causes of gender-based violence and introduces a variety of strategies for confronting it that include the participation of both men and women.

Discussion Questions:

1. Our views of gender-based violence often focus on sexual and other forms of physical assault between a man and a woman. While these are very serious concerns, it is important to understand the many forms gender-based violence can take. Provide specific examples that illustrate the different expressions of gender-based violence in society. These should illustrate both the varied forms of control and of victims. Try to think of examples that you don’t usually consider.

2. Gender-based violence can impact the health of women and girls through several direct and indirect ways. Describe the pathways by which gender-based violence impacts health.

3. Explain the many ways that gender norms make it difficult to prevent gender-based violence.

Exercise: “More powerful vs. less powerful” (pages 154-155). Make a chart with two columns (More Power and Less Power) and ask students to list groups of people for each column. This exercise can help illustrate the interaction of gender, race and ethnicity with power and its relationship to violence.

4. Understanding how gender-based violence can affect the lives of men and boys, as well as women, girls and those not conforming to traditional gender roles, can ultimately help prevent violence against all who are vulnerable. In what ways might boys and men also suffer from gender-based violence?

5. Discuss the specific efforts (i.e. programs, laws, campaigns) that are being made in your community to reduce gender-based violence. (If the group is not aware of these efforts, have them do some research to learn more about what is happening in their communities.)

Exercise: “Group investigation” (pages 172-173). Discuss as a group who you can turn to for help if there is an incident of violence against women. Fill in the grid shown on page 172, analyzing what power each type of authority figure has. Complete this exercise making sure to identify gaps in the law or enforcement.

6. Think of a situation in which you witnessed violence or the threat of violence against an individual. Describe the situation and how you responded. In retrospect, how would you have liked to respond? Why do you think you did not do so?
Increasing Access to Family Planning
Protecting Women’s Health with Family Planning (Chapter 7)

Women’s control over their sexuality, their sexual relations, and their reproductive health are heavily impacted by their access to family planning. Women with higher incomes and levels of education are more likely to have information and resources to access family planning services. Access to effective family planning methods allows women to pursue their educational and professional goals uninterrupted by unplanned pregnancies. Chapter 7 provides a framework for starting conversations about family planning information and opinions, and methods to improve availability of services.

Discussion Questions:

1. What are some of the reasons that women (or men) might be uncomfortable talking about family planning?

2. How can the discussion of family planning be reframed so as not to focus solely on sexual behavior to facilitate the discussion?

3. Explain how the relationship between access to family planning and women’s educational and economic opportunities operates in both directions.

4. What additional challenges do adolescents sometimes face in accessing effective family planning compared with those confronting adults?

5. An individual’s selection of the appropriate form of family planning takes into account many factors in that person’s life. What are the many conditions women consider in deciding which form of family planning is appropriate for them?

Exercise: “Problem tree” (pages 202-203). Create a problem tree to discuss obstacles to family planning for the group. Be sure to delve into the root causes as well as the consequences of each obstacle.

Exercise: “Yarn toss” (page 205). Work as a group to brainstorm solutions to the obstacles identified in the problem tree. Include solutions from individual, family and community levels.
Facilitating Better Maternal Health Care
Healthy Pregnancies and Safe Births (Chapter 8)

Chapter 8 explains the many factors that contribute to a healthy pregnancy and delivery throughout the life cycle. It explains the importance of access to quality, affordable health care along with a supportive community and good nutrition. It also emphasizes community strategies to promote women’s health during pregnancy, childbirth and the postnatal period.

Discussion questions:

1. Explain how unequal status and traditional gender roles from infancy to the time of delivery can directly impact women’s pregnancy and delivery.

2. We often focus on quality health care when promoting a healthy pregnancy and delivery. While such care is essential, there are many ways that friends, family, and the community can support a woman during pregnancy and delivery. Discuss what these are and why they are important.

Exercise: “But why?” game (page 222). Analyze and discuss Vanna’s story (pages 220-221) to reveal the underlying causes of problems in pregnancy and delivery.

3. Explain how planning for birth can specifically help address the four delays during pregnancy and birth. Where planning is not a sufficient response, suggest other possible solutions.

4. Describe some of the danger signs of an obstetric or postnatal emergency requiring hospital care.

5. Considering the problems that women face during pregnancy and delivery and their underlying causes, explain specific pathways by which organizing women in their communities promote a healthy pregnancy and delivery.
Advocating for Access to Safe Abortion
Preventing Deaths from Unsafe Abortion (Chapter 9)

Chapter 9 describes the dangers of unsafe abortion for women’s health. It provides accurate information on the risks and benefits of access to safe, quality abortion services, while correcting common myths and misinformation. It also explores the relationship of access to safe abortion to women’s rights and gender equity. The discussion highlights the difficulties of discussing abortion in different political, religious and social contexts and presents strategies to facilitate community dialogue.

Discussion Questions:

1. Abortion is a highly charged issue in many communities. How might you reframe the discussion of abortion to help people think and talk about it more openly and calmly?

   **Exercise:** “A walk in her shoes” (page 254). This exercise is a good tool to move abortion from an abstraction that arouses strong feelings to a personal level through situations in the local context that are familiar to the participants.

2. Understanding the causal relationship between unintended pregnancies and abortion is fundamental to reducing the risks of unsafe abortion. What are the factors that lead to both unintended pregnancy and unsafe abortion?

   **Exercise:** “Problem tree” (pages 256-257). Using one of the unintended pregnancy stories from page 255, compare the consequences of each option available to women (safe abortion, unsafe abortion, no abortion). Discussing unintended pregnancy helps understand causes and consequences of different options.

3. Misinformation and myths about abortion are common. What are some of the erroneous “facts” you have heard or read about the reasons for and risks of abortion? What strategies could you use to correct this misinformation?

4. Wherever access to safe, affordable abortion is limited, post-abortion care is essential to protect the lives of women. Describe the signs of the need for emergency medical care following an unsafe abortion and the steps to take while transporting the woman to a hospital or clinic.
Mobilizing Communities for Social Change
Building a Women’s Health Movement (Chapter 10)

The power of organizing women around a variety of health issues has been described throughout this book. Chapter 10 provides practical guidance on successfully organizing women to achieve meaningful change in their right to health and access to quality health care.

Discussion Questions:

1. Gathering with other women facing similar health problems or needs is essential to building a women’s health movement.
   • Why is coming together so important?
   • Some societies have beliefs and practices that limit such gatherings through religious prohibitions or social norms. Identify the places in which women with limited resources are already meeting one another in your community.
   • Would any of these provide opportunities for sharing experiences around their health needs?
   • If not, can you suggest strategies for creating such opportunities that would be culturally acceptable in those communities?

2. Women are very aware of their needs but don’t always have a clear vision about how things would be if they were improved. Think about a group of women in your community that lack access to quality health care. Describe the ways in which their access is restricted and how it affects their health.

Exercise: “What would women’s ideal health services be like?” (page 279). Try to answer this question for the group you have identified in Question 2. Establish at least two goals that support achieving this vision. (Ideally, you would engage representatives of those women in the exercise.)

3. Women’s health needs are embedded in a web of institutional and individual interests. Identifying the institutions and individuals who will be affected by the changes women seek to achieve is essential to building alliances and advocating effectively with supporters and opponents of the proposed change(s). Make a list of the institutions and individuals who are affected by your access to health services.

Exercise: “Power map” (pages 284-285). Using the group you identified in Question 2, prepare a power map around one or two of the goals that you identified in the previous exercise.

4. Based on the power map you have just produced, which of the strategies for organizing do you think will be needed to achieve the specified goals? Explain why and how you would employ the strategy. (In many situations, more than one strategy may be employed.)
5. Effective advocacy requires framing the message to suit the opinions and beliefs of the audience you aim to reach. A single message will not be effective with different audiences. Referring to your power map, frame a message advocating for the change(s) envisioned for each of the following groups of stakeholders: supporters, opponents, undecided.

6. Holding accountable those responsible for providing access to quality health services and other basic health-related services like clean water and sanitation requires an understanding of one’s rights, and who is responsible for delivering the services and ensuring the rights are respected. Do you know what your right to health is? In what document or legislation is this established? To what services does this right entitle you?