

Women's Health Exchange

A resource for education and training

A HESPERIAN FOUNDATION PUBLICATION



Issue No. 8, 2001

Improving women's sexual lives Facts about health are not enough

Most sexual health education focuses on topics like how a woman's body works, how to practice safer sex, or how to use a family planning method. This type of education is important, but women need more than facts about health to lead healthy, satisfying sexual lives. To improve women's lives, health workers and communities must address the complicated reasons why women have difficulty asking for what they want and need in their sexual relationships.

Women lack power

Because women have less power than men, especially in decisions about sex, they are often unable to use the information they learn or already know. Around the world, women are still viewed as the property of men. Many people believe that as head of a household a man should be in charge of decisions in the family, especially about sex. This means women are expected to have sex however and whenever their partners want it, even if it is unhealthy for them. A woman may fear that if she does not obey her husband or if she challenges him he will leave her,

and she will have no one to provide for her family. She may also fear the social disgrace of not having a man or not having children.



Women put men's needs above their own

Women are often taught to place the needs of others above their own. In sexual relations this can make women feel that their needs and desires are not as important as men's.

When women do not value their own needs and desires, they can put their health at risk in order to obey or sexually please their husbands or male partners. Here are some examples of health risks women take:

A woman may not practice safer sex because her husband or partner does not like to wear a condom. This can be very dangerous for a woman. If her partner is having unprotected sex with other women, he can give her HIV or another sexually transmitted infection (STI).

A woman may not use family planning because her male partner will not allow it. Without family planning, a woman cannot choose when to become pregnant. Some women have

experienced problems during pregnancy or childbirth and do not want to become pregnant again.

These problems include long and difficult labors, too much bleeding, blocked births, seizures and infections. Along with unsafe abortions, these problems cause thousands of women to die each year. Many of these deaths could be prevented with family planning.

A woman may have "dry" sex because her male partner likes it better. In some communities, women use soap, herbs or powders to dry out the vagina to make sex more pleasurable for the man. But this takes away the natural wetness of the vagina that the woman needs to also have pleasure. In addition, dry sex can be painful and can even put her health in danger. When the vagina is dry during sex, a man's penis can scratch or tear the women's vaginal skin. If a man has HIV in his semen, the virus is even more likely to infect the women through these scratches or tears.

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We produced this issue of the Women's Health Exchange with many thoughtful contributions from health educators and women's groups around the world. The activities in this issue are some of their best practices to help women talk about sex, and to explore how the inequality between men and women affects women's health.

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Training Guide

Talking about women's sexual lives

Many women find it difficult to ask for what they want and need in their sexual relationships. This training guide looks at the reasons why women may feel this difficulty. It also explores how women's lives are harmed when they do not express their needs and desires. The activities in this guide help women:

- talk about sex, even if they feel afraid, embarrassed or ashamed.
- discuss the different expectations of men and women in sexual relationships.
- think about whether or not they have safe and satisfying sexual lives.
- continue working together on sexual health issues.

These activities work best in a group that meets regularly and where the women share a sense of trust, respect and confidentiality. You may need to adapt these activities to address the reality of the women in your community.



Sex can be hard for a woman to talk about because so many things affect how she feels about and experiences her sexual life.

Creating a Safe Place

To participate in a workshop or activity on sexuality, women need to feel like they are in a safe place — where they feel comfortable to express their thoughts and feelings. So, try to meet in a private place so the group can relax and focus on the meeting. If possible, have someone take care of the children during the session.

It may help if the women prepare for the workshop by first talking about any concerns they have about discussing sexuality.

Creating a safe place also means helping women trust that others in the group will respect their feelings and experiences, and not share what they talk about with people outside of the meeting. One way to establish trust is to ask your group to think of some basic rules to help everyone feel safe during the meeting.

It may help to discuss what each rule means to the group, and to make sure everyone agrees to respect the rules.

OUR GROUP'S RULES

1. No one has to talk during the workshop if she does not want to.
2. Try not to interrupt anyone while she is speaking.
3. Everything said today will be kept "confidential."
4. Everyone's opinion will be respected.
5. If someone does not respect these rules, the group facilitator will review the list of rules with everyone.

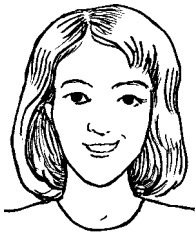
Do we all agree that 'confidential' means we will not talk outside of the meeting about what anyone says today, not even with each other?

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Allow several hours for the following activities and discussion. You can do all of these activities at one meeting or in a series of meetings held soon after each other. It may be necessary to plan other meetings to discuss topics women want to explore that cannot be addressed in this workshop. You might want to

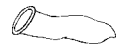
put a list on the wall with the heading "Future Topics" and record any suggestions women have. This way, women can focus on the workshop and know there will be other times to discuss these issues.

1. Talk about men's and women's roles in your community.



Because sex can be difficult to discuss right away, it can help to begin with an activity that is not directly about sex. This activity explores the different expectations we have of men and women in a creative and humorous way.

As an introductory activity, pass out several household objects like the ones described below. Ask the women if an object makes them think about men or women (or both) and to explain why. Discuss the roles of men and women in your community. How are women expected to act, think, look and feel? How are men? Then explore how each of the objects relates to these general expectations or roles of men and of women in the community.



Some example objects are: money, a toy car (representing a real car), a book, a cooking pot, a bottle of alcohol, a mop or broom, a hoe, a machete, a pen and paper, a doll (representing a baby) and a condom.

2. Discuss expectations of men and women in sexual relationships.

Ask the women to think about expectations of men and women in sexual relationships. Discuss how these expectations are different for men and women and how they are similar. You may want to ask questions to help guide the discussion. Here are some examples:

- How are men and women expected to learn about sex? Do they learn differently?
- Do men talk openly about sex? Do women?
- Are men's and women's pleasure both seen as important? Are men ashamed of feeling desire or pleasure? Are women?
- How do the sexual expectations of a young woman change when she gets married? How do they change for a man?
- What does the community think if a man has more than one sexual partner? What about a woman?



It may be interesting to discuss how men and women learn what these expectations are and from whom.

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3. Explore problems women experience in sexual relationships.

Divide the women into groups of 2 to 4 women each. Ask the groups to think of a difficult situation or problem that a woman might experience in a sexual relationship. Each group can present their problem to the other groups as a story, or act it out as a "role-play." After each story or role-play, discuss how this situation affects a woman's sexual health and pleasure and her life in general. It is also important to explore the causes of the problem.

Here is an example of a story and a discussion as well as ideas for other stories or role-plays.



Telling a story or acting out a "role-play" or skit are good ways for groups to discuss complicated situations. Sometimes it is easier to discuss made-up problems than real ones.

EMMA'S STORY

Before her wedding, Emma had never had sex. Now, after 3 months of marriage, Emma and her husband Tomás have sex every day. But Emma still feels embarrassed and uncomfortable about sex. Tomás, however, does not feel the same way. Since their wedding night he has been very aggressive in bed.



Every day Tomás works at a banana plantation and leaves Emma home alone. For Emma, getting used to life as a housewife has been hard. Her family does not live nearby so she does the house chores alone. She must take care of the animals, work in the fields, wash the clothes, walk to the market, build a fire and prepare the evening meal. Also, she has to walk a great distance each day to get water and wood. Sometimes, she is so tired at night she does not feel like having sex. But Tomás always comes home ready to have sex, and Emma cannot tell him "no!"

Her sisters have always told her it is her duty as a wife to please her husband in bed. That is the way things are in marriage. But now Emma does not feel any pleasure at all when she and Tomás have sex, and she is starting to dread the arrival of her husband each evening.

Discussion of the story

1. Discuss how this situation affects the woman's:
 - health.
 - sexual experience or pleasure.
 - feelings about her life.
 - relationships with her boyfriend or husband, and her family.
2. How might this situation affect the woman in the future?
3. Are there general expectations of women that are causing this woman's problem?
4. Who has more control over decisions in the relationship?

Some other ideas for a story or role-play:

- A young, unmarried woman had sex with her boyfriend and thinks she is pregnant. She is afraid to tell her boyfriend or her family.
- A woman suspects that her husband has sex with other women and might have HIV. She wants to ask him to use condoms when they have sex but is afraid he will get angry.

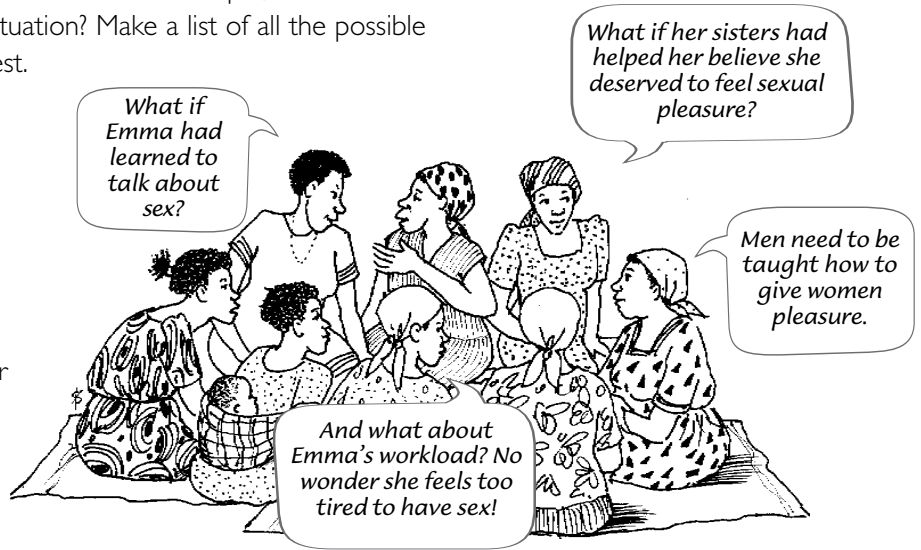
Training Guide

4. Imagine possible changes.

After discussing all the stories, ask the groups to think of ways each situation could have been healthier and more positive for the woman. For example, what could have been different in Emma's life to prevent the situation? Make a list of all the possible changes and improvements the women suggest.

Then refer to the list and ask the group:

- Are there changes here that you think you could make in your own life? In your children's lives? Why or why not?
- How can we make these changes in our families and community?
- What would you need, or what would our group need, to make these changes happen?

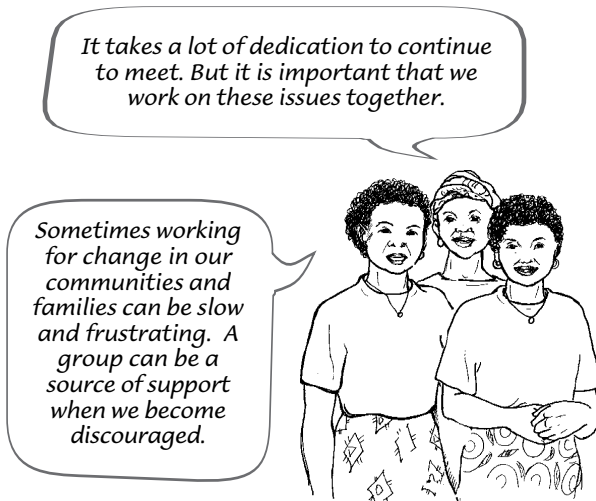


5. Plan next steps.

Go around the group and ask each woman one thing she may want to change in her life after she leaves today's meeting.

It may help if the women discuss ways to support one another. Assure them that the group will continue to work on these issues together. Plan when the next meeting will

be, and decide together what issues the group will discuss. Look at the list of "Future Topics" the group started at the beginning of the meeting. Add any other suggestions women have. Ask the group to list the topics in order of importance, and organize future meetings based on the list.



Here are some ideas for ways you can follow-up on the day's meeting:

- At the beginning of the next few meetings, ask the women to share how they have felt since the last workshop. If they feel comfortable doing so, the women can talk about their experiences and offer each other support, advice or suggestions.
- Plan a meeting to talk with the men in the community. See the HASIK profile on page 8 for ways to include men in discussions on gender issues (men's and women's issues).
For more ideas, read the next page about creative health education techniques used by groups around the world.

— Creative Education —

Activities to support sex education: Helping women build confidence and self-esteem

Shame, embarrassment and fear can keep women from feeling in control of their bodies and sexuality. The following activities are suggestions from our readers to help women explore the reasons why they may feel unable to talk about, learn about, or even enjoy sex.

Saying the words

An activity to help get started

Say a word like "sex," "vagina" or "penis" and ask the group to name all of the other words they have heard people use to describe the same things. Then the group can discuss which of these words are also used as insults to women, and which ones are used because people are too embarrassed to say the medical words. This exercise makes people laugh a bit, and helps them feel more comfortable saying words about sex. At the same time, it helps people begin to talk about gender issues, men's and women's issues.

— Nkechi Chukwuani, Nigeria

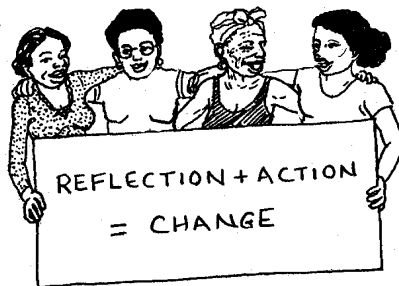


Self-esteem circle

This activity works best with groups that know each other well.

Ask the women to form a circle, with one woman in the center. The woman in the center must look each of the other women in the eye, while they each say 3 positive things about her. She cannot argue with them, but simply says "thank you." Then another woman takes a turn in the circle.

— Barbara de Souza, Brazil

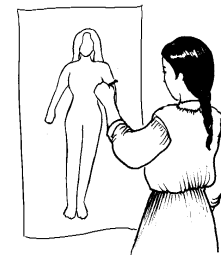


Making a map of the body

This activity is an effective way to communicate with women about their bodies and sexuality.

Draw an outline of the body on the ground with a stick, or on a large piece of paper with a pen or pencil. Ask the women to draw the sexual parts of the body. They can also point out places on the body where women and men feel sexual pleasure.

Many women may be hesitant to draw the private parts of the body.



However, after they see the trainer drawing, they will begin to participate. During an activity, a woman drew the clitoris (the part of a woman's genitals most sensitive to touch) and openly told the group, "This part gives us pleasure. If we want to have pleasure, we have to tell our husbands what needs to be done."

—CHETNA, India

Resources for more information on sexual education

Healthlink Worldwide
(formerly AHRTAG)
Cityside
40 Adler Street
London E1 1EE UK
Tel: 44-20-7539-1570
Fax: 44-20-7539-1580
info@healthlink.org.uk
http://www.healthlink.org.uk

Women's Health Project
PO Box 1038
Johannesburg, South Africa
Tel: 011-489-9917
Fax: 011-489-9922
womenhp@sn.apc.org
http://www.sn.apc.org/whp

Centre for Health Education Training and Nutrition Awareness (CHETNA)
Lilavatiben Lalbhai's Bungalow,
Civil Camp Road
Shahibaug, Ahmedabad - 380 004
Gujarat, India
Tel: 91-79-2868856, 2866695
Fax: 91-79-2866513
indu.capoor@lwhm.net or
chetna@adinet.emet.in

You can also refer to *Where Women Have No Doctor: A health guide for women*, published by the Hesperian Foundation.



Readers' Exchange

Have you ever used the *Women's Health Exchange* newsletter in your work? Have you tried an activity with the women in your community?

If so, we invite you to share with us your stories, experiences, and creative use of activities and information in this issue or past issues of the *Women's Health Exchange*. We would also like to hear about ways you have adapted activities for your group, as well as any suggestions on how to make the newsletter more useful for you. What other women's health topics would you like to see the newsletter address?

Your feedback is important for many reasons. In each issue we will feature reader's feedback in a column of the newsletter called "Readers' Exchange." Your ideas, experiences and lessons can help other groups and trainers who are working to improve women's health around the world. We hope that through this exchange groups can build alliances and learn from each other. Also, your feedback can help us make sure that the *Women's Health Exchange* is meeting your needs, that you find it interesting to read, and helpful in your work.

You can give us feedback by mail, e-mail or fax (see our contact information on the back page). As a way to thank you, we will send a free copy of *Where Women Have No Doctor* to 100 people out of those who respond before January 1, 2002.

Thank you to all of you who have provided feedback in the past! Your experiences, insight and information help us make the *Women's Health Exchange* speak to women around the world. We value your continued collaboration.

This letter is from HELP Resources (Health, Education, Livelihood and Participation), an organization that provides health education services, resources and training in the country of Papua New Guinea.

Dear friends,

Our group learned an important lesson when we evaluated our experience facilitating a training course on reproductive health issues.

While developing the training course with experienced women leaders and health workers, we were open and honest as a group and shared very personal feelings with one another. The group produced an excellent and frank training manual in our Creole language. We felt sure the course would help others openly discuss and learn about reproductive health issues. We expected the program to cause a lot of excitement and be used all over the country.

But that did not happen. Our first community workshop was not as successful as we had hoped. The trainers did not feel comfortable talking openly with members of their own communities about reproductive health and women's rights, sexuality, sexual diversity, and safer sex.

We had overlooked the importance of building mutual support and trust before the training began. It took us a long time to realize that outside of the safe and non-judgmental training environment, it was hard for trainers to raise these issues back in their communities. The program needed a preparatory exercise to deal with the group's taboos, inhibitions, fears, misconceptions and judgments about sexual and reproductive health. This would help both the trainers and participants feel comfortable and free to express themselves.

So we should not be discouraged when there are few permanent changes and a project is not as successful as we had hoped. In our new organization, we are trying to start all over again.

We look forward to the next issue of the WHX. Thank you!

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Here is a list of past issues of the *Women's Health Exchange*:

Education and Cervical Cancer (No. 1)
Domestic Violence (No. 2)
Women and Work (No. 3)
HIV/AIDS (No. 4)
TB (Tuberculosis) (No. 5)
Risks of Childbirth (No. 6)
Environmental Health (No. 7)

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Women must believe their lives are important

Women have to believe their needs and desires are just as important as men's in order to make healthy and fulfilling choices in their relationships. To help women do this, health workers and communities must encourage women to value their own health and happiness, and to share their feelings and ideas. This encouragement is especially important in



communities where women do not openly talk about sex, monthly bleeding, or other women's health issues.

Parents, relatives, teachers and other community members need to start early and teach young girls to have high self-esteem. They also need to provide opportunities for girls to grow and develop, and to ensure they have access to education.

Health education that focuses on the value of women's health and pleasure can help women learn to value their own lives.

Health education must also address the reality women experience at home and in their

communities, and support women in asserting themselves. All women have the right to lead safe and satisfying sexual lives!

We especially thank the following collaborators on this issue:

- ASECSA (Guatemala)
- Christine Bantug - HASIK (Philippines)
- Sarah Bassey - Women Rehab Center (Nigeria)
- Indu Capoor and Pallavi Patel - CHETNA (India)
- Nkechi Chukwuani - WERF (Nigeria)
- Sabet Cox - HELP Resources (Papa New Guinea)
- Nick Danforth (USA)
- Barbara de Souza (Brazil)
- Linda Dhammika (Zambia)
- Laura Goldman (USA)
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- Ngozi Iwere - Community Life Project (Nigeria)
- BA Laris (USA)
- Coni López (Mexico)
- Mujeres Unidas y Activas (USA)
- N.B. Sarojini - Sama Health Forum (India)
- Melissa Smith (USA)
- Orpha Tadi - Care For Life (Nigeria)



HASIK

Although this issue of the *Exchange* is mainly about how to help women empower themselves, men also need to be involved. Unless men understand women's health needs and actively work for change, sexual relations between women and men will not improve. Working for change should not be just the woman's responsibility! There are many learning activities that a community can use to include men in looking at gender inequality (inequality between men and women). An organization called HASIK (Harnessing Self-Reliant Initiatives and Knowledge) in the Philippines has created a popular workshop series that can help give you ideas.

HASIK started in 1988 with the goal of serving the needs of the urban poor. The Gender Seminar for Men (GSM) is one of their many programs that address issues of poverty, discrimination and gender inequality. The GSM seminar takes 2 to 3 days. Its purpose is to help men understand women's oppression as well as share their own experiences. The men are then asked to think of ways to create a more just society, and to agree to work for change in their communities.

The seminar teaches 4 basic ideas: 1) Gender equality is not a war between men and women. 2) Gender equality is not directed against men. 3) Both women and men are victims of gender inequality, although women more than men. 4) Both women and men have responsibility in the struggle.

After having 80 seminars with men of all ages, HASIK could not keep up with the growing demand for more seminars. As a result, they decided to publish a book about GSM so other organizations and community groups could learn how to lead the seminar on their own. If you are interested in ordering the book, send a check or money order payable to HASIK, Inc. to the following address:

HASIK, Inc.
 FCDU Savings Account No. 3084-0035-64
 Bank of the Philippine Islands—Loyola Branch
 299 Katipunan Road
 Quezon City, PHILIPPINES
 email: hasik@surfshop.net.ph

The total price of the book depends on where you live (due to the cost of shipping):
 Asia: \$ 19.00
 USA, Canada, Latin America: \$ 22.00
 Europe and Africa: \$ 23.00

The **Women's Health Exchange** is a publication of the Hesperian Foundation.

The Hesperian Foundation is a non-profit organization committed to improving the health of people in poor communities throughout the world by providing tools and resources for informed self-care. We believe that people can and must take the lead in their own health care.

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