Chapter 1

Women’s Health Is a Community Issue
When someone is healthy, they have the energy and strength to do their daily work, to fulfill their many roles in the family and community, and to build satisfying relationships with others. In other words, health affects every area of our lives. Yet for women, their health care has often meant little more than care during pregnancy and birth. These services are important, but they address women’s needs only as people having babies.

This book offers a different view of women’s health. First, we believe that everyone has a right to complete health care, throughout their entire life. A woman’s health care should help her in all areas of life—not just in having babies. Also we believe that health is affected not just by the way our bodies work, but also by the social, cultural, and economic conditions in which we live.

While men’s health is also affected by these factors, women as a group are treated differently from men. Women usually have less power and fewer resources, and lower status in the family and community than men. This gender inequality means that:

- more women than men live in poverty.
- more women than men are denied the education, skills, and jobs they need to support themselves.
- more women than men have little or no access to the health information and services they need, often because decisions about their health care are made by men.

Since gender inequality is one of the main underlying (root) causes of women’s poor health, improving women’s health is not just about treating their immediate health problems. It also requires changing the conditions of our lives so everyone has power over things that affect our health.

When this happens, everyone—each individual, their family, and their community—benefits. Healthy people have a better chance to fulfill all of their potential. Plus, they have healthier babies, are better able to care for their families, and can contribute more to their community. For all these reasons, women’s health is a community issue.

What Is “Women’s Health”?

➤ Good health is more than the absence of disease. Good health means complete well-being, including the body, mind, and spirit.
Women Face More Disease and Poor Health

Because of gender inequality, women face a greater risk of disease and poor health. Here are some common and serious health problems that affect women most:

**Poor nutrition**

Poor nutrition is the most common and disabling health problem for women in poor countries. Starting in childhood, girls are often given less food to eat than boys. As a result, they may grow more slowly and their bones may not develop properly. The problem worsens in early adulthood, because they need more good food as their workloads increase, and when they start having children. Yet women almost always eat last and least.

Without enough healthy food, many women have poor health in general, including exhaustion, weakness, and anemia. When someone who is already malnourished becomes pregnant, they are more likely to have serious complications with childbirth, such as heavy bleeding, infection, too-long labor, or a baby that is born too small.

The health worker told me I should drink more milk and eat green leafy vegetables. But I save all our milk for my husband and son, and we don’t have the money to buy vegetables.

A woman’s health cannot be isolated from her social status. In most of rural India, women drink less milk than their husbands and sons, and they eat only after the men have been served. This usually leaves women with a limited diet, and it also tells about how she is valued.

—CHETNA, Ahmedabad, India
Women Face More Disease and Poor Health

Reproductive health problems

Sexually transmitted infections (STIs), including HIV. Women are more likely to get infected with STIs for many reasons (see page 286). With penis-in-vagina sex, the person with the vagina is more vulnerable to STIs because small tears can happen in the vagina. There is more risk with penis-in-anus sex, because the anus gets small tears even easier. Without a condom, semen stays inside the body after sex and can spread germs into the blood. The vagina may show no signs of infection from an STI, or the signs (for example, sores inside the vagina) may not be visible. So the person may not get treatment.

Even more important, many women have little control over decisions about sex and often cannot refuse unsafe sex. As a result, millions of women get an STI every year, and more than 20 million are already infected with HIV.

Child marriage and frequent pregnancies. In many places, a third to half of young women become mothers before they are 20 years old. Without family planning, most do not have time to get strong again between births. This can lead to poor health and problems in pregnancy and birth. Frequent childbirth also means being less able to control your own life, get an education, and learn skills to support yourself.

Complications from pregnancy and birth. In recent years, fewer infants have died during or soon after birth. Yet every day, 810 women die from a problem related to pregnancy or childbirth. And for every woman who dies in childbirth, 20 to 30 more suffer from injury or infection. This means that over time, about a quarter of all women living in poor countries will be seriously affected by complications from pregnancy and birth.

Unsafe Abortion. Every day, more than 60,000 people try to end their pregnancies by seeking treatment from untrained persons or using unsafe methods. Without access to safe abortion services, many will die, be unable to have children in the future, or will be left with lasting pain, infection, and other health problems.

Female genital cutting. Female genital cutting, in which part or all of a girl’s outer genitals are cut off, can cause serious health problems. These include emotional trauma and ongoing problems, pelvic and urine system infections, pain during sex, and difficulties during and after childbirth. Despite these problems, about 4 million girls are at risk of being cut each year, mostly in Africa but also in parts of the Middle East, Asia, and places where people from these regions have migrated.
General health problems

Women are more likely than men to have certain health problems because of poor nutrition, too little rest, or the type of work they do. A disease can also cause a different kind of harm to a woman than a man. For example, a disease that changes how a woman looks may make her husband or family reject her.

Women’s health problems are often taken less seriously than those of men. And when sick, women are less likely to seek and receive treatment until they are very ill. For example, tuberculosis (TB) spreads among everyone, but fewer women than men get treatment. Almost 13,150 women die every day from TB—at least a third of them did not receive proper treatment or never even knew they had the disease. Some health problems that used to affect mostly men now affect women, too. For example, more women have problems from smoking cigarettes or drinking too much alcohol.

Work hazards

Women face health risks every day from their work. At home, heart and lung diseases from cooking-fire smoke (and burn injuries) are so common that they are considered the main work-related health problem for women. Diseases spread through water are also common, because of all of the time women spend washing clothes, hauling water, or standing in water while farming.

Millions of women who work to earn money suffer health problems due to unsafe conditions and sexual harassment in the workplace. And when they come home from their jobs, they continue to work at home. This leads to exhaustion and an increased risk of illness.

Mental health problems

Women and men have about the same risk of developing a mental health problem. Severe depression, however, affects many more women than men, especially women who are poor, who have experienced loss or violence, or whose communities have been destroyed or undergone great change. Anyone with lower social status, or who feels they do not have a place in their community, may struggle with mental health problems.
Violence
Violence is often overlooked as a health problem. But violence causes serious injuries, mental health problems, physical disabilities, and even death. Violence is also used to enforce inequality—for example, punishing someone who does not look or act appropriately as a man or a woman, or as a servant or child. Rape and sexual harassment are a constant threat to all women, in the community, at work, and at home. Many girls are sexually abused by family members or friends. Many women are forced to have sex or are physically abused by their partners.

Rape and sexual assault are common during wartime.

Even though this violence happens in almost all parts of the world, most of it is not reported, because the police and others often blame women and other targets rather than punishing the men.

How women are forced into a life of poor health
Although not all women have every health problem described above, most will face 3 of them: poor nutrition, pregnancies that are too close together, and overwork. Each problem weakens a woman’s general health, making her more likely to get sick and stay sick. Pregnancy also makes certain health problems worse—such as high blood pressure, malaria, hepatitis, diabetes, and anemia—just as they make pregnancy more difficult and dangerous. All these things make a woman much more likely to have worse general health than a man.
Root Causes of Poor Health in Women

It may be easy to name the direct cause of a health problem. For example, we can say that STIs are caused by harmful germs, malnutrition comes from not eating enough healthy food, and problems during pregnancy are often caused by a lack of prenatal (before birth) care. But beneath these direct causes are 2 root causes: poverty and low status.

POVERTY

When people do not have enough resources to meet their basic needs for survival, they are experiencing poverty. Poverty negatively affects a person’s physical and mental health. Women are more likely than men to be poor, to live in poverty, and to have health problems as a result.

For many women, this begins before they are born. Babies are smaller at birth and are slower to develop when they are born to someone without enough to eat during and after pregnancy. In many poor families, girls get less food than boys, further harming their growth, and they usually get less education. Later, they often work at jobs with no security, and no legal rights or social protection, where they do not earn enough to escape poverty. Even when women do the same work as men, they are usually paid much less. At home, women do at least twice as much household and caregiving work as men. This work is unpaid and too often taken for granted.

The living conditions of poverty cause physical and mental health problems. Poor women (and others with similar low status) often:

• live in housing with little or no sanitation or clean water.
• do not have enough healthy food and spend a great deal of time and energy searching for food they can afford.
• are forced to accept dangerous work or to work too many hours.
• cannot access medical care, even if it is free, because they cannot afford time off from work or have others watch their children.
• are so busy struggling to survive that they have no time or energy to care for their own needs, plan for the future, or learn new skills.
• are blamed for their poverty and made to feel less important than those with more money.

Poverty often forces women into relationships in which they depend on men for survival. Dependence on another person for their own or their children’s survival often causes them to accept things that harm their own health. For example, to keep a man happy, a woman may accept a man’s violence or have unsafe sex for fear of losing financial support.
Low status of women

Status is the power and respect that a person has in their family and community. Status affects how someone is treated, the resources they have, how they value themselves, the kinds of activities they are allowed to do, and the kinds of decisions they are allowed to make. In most of the world, girls and women have lower status than boys and men. Lower status leads to discrimination—being treated poorly or denied resources because of certain characteristics, in this case, for being female. Discrimination may take different forms in different communities, but it always affects a woman’s health.

Wanting sons rather than daughters. Thinking sons are more valuable than daughters often leads to girls being breastfed for a shorter time, given less food and medical care, and educated less or not at all. The pressure to have sons can also lead to many pregnancies very close together.

Lack of legal rights or power to make decisions. In many communities, women cannot own or inherit property, earn money, or get credit. When divorced or widowed, they may not be allowed to keep their children or belongings. Women may be denied the ability to decide how family resources are used, when to get health care, whether to travel, or to participate in community decisions without their husband’s permission. Women do most caregiving work—usually unpaid, low status, physically difficult, and socially isolating—which may prevent them from earning income. All this can prevent them from doing things that support good physical and mental health, such as using family planning, having safer sex, getting enough food, and demanding freedom from violence.

When women are raised to value themselves less than men, they often just accept their low status. They may accept poor health as their lot in life and seek help only when their problems are severe.

A person’s status is also affected by factors like race, ethnic group, religion, wealth, disability, age, health, and language. All these parts of a person’s identity interact so, for instance, a woman whose race is given lower status will have a very different experience than one whose race is given higher status. Both will be treated poorly in a community where all women have low status. But the person with 2 (or more) lower status factors will experience more discrimination and more negative effects on their physical and mental health.
Medical systems do not meet many people’s needs

Poverty and discrimination in the family and community not only lead to more health problems for women, they also make the medical system less likely to serve women’s needs. Government policies and the global economy may add to this problem. In poor countries, many people do not have access to health services of any kind.

Gender roles are restrictive and harmful

Most societies have specific ideas about how people should look and act and what they can do based on their gender. For example: all women can and should have babies, and they should be pretty, hardworking, respectful, and attracted only to men. Likewise, all men can and should make someone pregnant, and they should be strong, in charge, good providers, and attracted only to women. These ideas are taught to us from very early in life, and are supported by every part of the community, including families, schools, religions, and medical and legal systems.

For many people, these ideas do not match how they feel or how they want to live. This may be because the gender roles assigned to them are not what they want—for example, a woman who does not want to have babies or is attracted to other women, not attracted to men. It may be because the gender they feel like (identify with) is different from what their community expects based on their body parts—for example, a person with a vagina and womb who lives as a man. Or it may be they identify as a gender that is not “woman” or “man”—many cultures recognize more genders than only those 2. People who live outside limited ideas about gender often struggle to be accepted, have legal status, go to school, find jobs, have families, get the medical care they need, and live free from violence.

Women and all people must have the right and ability to live healthy lives as they choose, including full participation in their communities. For more information about gender and gender roles, see page 182.
Mira’s Story

When Mira was little, she dreamed of living in a big house, with electricity and a tile floor. Her husband would be handsome and kind, and she would live a happy life. But Mira’s family was poor, and she was the youngest of four daughters. Sometimes, when her father was drinking, he would beat her mother and weep at his misfortune of having so many girls.

When Mira was 14 and old enough to be married, she cried when she learned her father had arranged her marriage to a man he had chosen. He had some land, so perhaps the family would benefit from the marriage. Mira had no say about it.

With the birth of Mira’s second child—a son—her husband stopped demanding sex so often. Mira was very glad for that. Although he did not hurt her, he had warts on his penis that disgusted her. Over the next 20 years, she had 6 more children, including a little girl who died at age 3, and a boy who died at birth.

One day, Mira used the latrine and noticed a bloody discharge coming from her vagina when it wasn’t time for her menstrual period. She had never had a health exam, but now Mira asked her husband if she might see a health worker. He replied that he didn’t trust doctors, and besides, he didn’t have the money to spend every time she worried about something.

Mira was 40 when she started to have constant pain low in her belly. The pain worried her, but she didn’t know who to talk to about it. Some months later, Mira finally decided she had to go against her husband’s wishes and get help. She was frightened for her life, and borrowed some money from a friend.

At the health center, Mira got some medicine for her discharge, although the health worker did not examine her. Mira returned home that night, exhausted and upset that she had defied her husband and spent her friend’s savings. As weeks passed, Mira’s health continued to worsen, and she became discouraged, realizing that something was still wrong.

Finally, Mira became so weak that her husband believed she really was ill, and they begged a ride to a hospital in the big city far away. After waiting several days, Mira was seen at the hospital. She was told that she had advanced cancer of the cervix. The doctor said they could remove her womb, but the cancer had already spread. The one treatment that might save her life was available only in another part of the country and was very expensive. The doctor asked, “Why didn’t you get regular Pap tests? If we had found this earlier, we could have treated it easily.” But it was too late for that. Mira went home and, after a few weeks, she died.
**Why did Mira die?**

Here are some common answers to this question:

**A doctor may say...**

Mira died of advanced cervical cancer because she did not get treatment earlier.

**Or a teacher...**

Mira died because she didn’t know she should have a visual inspection of the cervix or a Pap test done.

**Or a health worker...**

Mira died because her husband exposed her to human papillomavirus (HPV) which caused his warts. This put her at high risk for developing cancer of the cervix.

All these answers are correct. A person who is exposed to HPV (through genital warts) is at higher risk for cervical cancer. And if the cancer is found early (by having a visual inspection of the cervix or a Pap test), it can almost always be cured.

Yet these answers show a very limited understanding of the problem. Each of them blames one person—either Mira or her husband—and goes no further. Mira was at greater risk of dying of cervical cancer because she was a poor woman, living in a poor country.

➤ For more information about cancer of the cervix, see page 377.
How poverty and the low status of women worked together to cause Mira’s death

Mira and her family were poor, so she was forced to marry and start having sex when she was very young. As a woman, she lacked power in her relationship with her husband. She had no say over how many children to have or when she could get health care. Her family’s poverty meant that she had poor nutrition all her life, which weakened her ability to fight illness.

Although Mira’s community lacked many health services, the nearest health center did have some basic ones, like family planning and information about preventing HIV. But the health workers had no information or training about other women’s health problems, even such serious ones as cancer of the cervix. They were not trained how to do a pelvic exam (to look at the vagina, cervix, and other reproductive parts) or a Pap test. So even if Mira had gone for medical care sooner, the health worker may not have been able to help her.

As a result, Mira had to travel a long distance at great cost to see a doctor who could tell her what was wrong. By that time, it was too late to cure her cancer.

Finally, Mira’s country was poor, with little money to spend on health care. Like the governments of many poor countries, her government focused on other important health services, rather than women’s health. What money her government did spend on women’s health went to expensive hospitals in the big city instead of community health programs that could help women like Mira. So the services to find and treat cervical cancer early—and many other common health problems—were not available.

Poverty and the low status of women worked against Mira at all 3 levels—in her family, in her community, and in her country—to create the health problem that caused her death.

➤ You can explore the root causes of Mira’s death or other health problems by using the exercise called “But Why?” on page 26.
Women’s Health Is a Community Issue

Working for Change

For other ideas of how your partner can help, see page 14.

IT DOES NOT HAVE TO BE THIS WAY
The way societies are organized forces many women into lives of poverty and poor health. But societies could be organized in a way that favors health instead of disease.

Since the causes of poor health exist at the family, community, and national levels, changes to improve women’s health must happen at each of these different levels.

Working for change in your family
You can improve your health by learning about common health problems and by making changes in your own life and in your family. Talk with your partner about what you each need to have better health, including practicing safer sex and sharing the workload fairly. You can also work to improve the health and future of your children. Here are some ideas:

Raising our children for a better world
How we raise our children, from the moment they are born, will determine much of what they believe and how they act as adults.

Every day, our children learn from us as parents. For example:

• When our husbands and sons are fed first, we teach our children that girls’ and women’s hunger (and health) is less important.
• When only sons are sent to school, we teach our children that girls do not deserve an education and the opportunities that come from it.
• When our sons learn that it is manly to be violent, we raise violent men.
• When we do not speak out against violence in our neighbor’s house, we teach our children that it is acceptable for someone to beat the people in their family.

As parents, we have the power to share positive lessons with our children. For example:

• If we teach all our children to be kind and compassionate, they will grow up to be kind and compassionate family and community members.
• If we teach our daughters to value themselves, they will expect the same from others.
• If we teach all our children to share and take pride in household work, no one in the family will suffer the burden of overwork.
• If we can teach all our children to finish school or learn a skill, they will gain more security and better contribute to the community.
• If we can teach all our children to respect people for who they are, they will grow up to be responsible sexual partners.

We can raise our children for a better world.
Working for change in your community

You can improve your health and the health of others in your community by sharing this book and by talking with them about health problems faced by women.

Talking with others can be hard. Many people feel shame when talking about parts of the body, or they fear what others will think. Yet talking with others is the only way to learn more about health problems and to discover their causes. Often you will find that other people are worried about the same things and want to discuss them.

Get a small group together to talk about health problems in your community. Try inviting friends, neighbors, or people you work with. Once you have identified a health problem that many people share, it is often helpful to meet again and invite others to discuss it and learn more. When you meet, think about the root causes of the health problem, and plan the changes you can make in your families and community. See pages 26 to 31 for ways to work with a group to plan and carry out actions for change. Also, Hesperian’s Health Actions for Women is filled with ways to work together for change.

Because social conditions affect them differently, different groups of people may need to find different solutions for the same health problems.

My back hurts so much from having to carry water all the way up the hill to my house. The health worker says I shouldn’t carry heavy loads when I’m pregnant—that’s how Mari lost her pregnancy. But how else would my family get water?

It isn’t just a problem during pregnancy! My back is always hurting too. I finally got my husband to start helping me carry water every day.

I was visiting my sister and where she lives they got the city to put in water taps close to the houses. It’s great. Now she doesn’t have to carry water very far at all. Everyone loves it.

Maybe we could get enough people together to convince the city to do the same thing for us. But we would need a lot of people. And we would need to know who to talk to, and decide where we wanted the water taps.

Well, we could talk with José. He’s a teacher and everyone respects him. He could probably help.

By meeting with a small group, you can learn more about a health problem and what can be done to solve it.
Think about involving all adults in the community in discussions about women’s health. It may be difficult at first to talk about topics that are considered taboo for men or “women’s secrets.” But men are often in positions of power, so their help can be useful. Look for men who are supportive of women, are good role models, or treat women and others as their equals.

**How Men Can Help**

*Men can help improve everyone’s health by:*

- raising children to respect all people and treating all children equally, no matter their gender.
- asking everyone in the family what they think, and listening to them. When all family members listen to each other’s concerns and needs, together they can try to find ways to meet the needs of everyone in the household.
- talking with their partners about how many children they want to have, and then taking equal responsibility for family planning.
- encouraging family members to go for regular health exams and helping find the money and time so they can go.
- taking turns caring for the children and sharing household work.
- being faithful to their partner or, if they cannot, being honest about it and practicing safer sex. Anyone who gets an STI should tell all of their sexual partners right away, so everyone can get treatment.
- encouraging everyone to take a fair share of the food that there is to eat—even if nobody is getting very much.
- encouraging all their children to stay in school as long as they can. The longer children stay in school, the more choices they will have as adults and the better their health will be.

*Men can also set a good example in the community by:*

- encouraging everyone, especially those often excluded, to come to meetings and making sure that they have a chance to speak. Or they can encourage women to hold their own, separate meetings.
- encouraging women and people from other disadvantaged groups to become involved in planning and running community projects.
- encouraging others to limit their use of alcohol and drugs—these contribute nothing to the community and waste money and energy. Try to plan celebrations that do not involve alcohol.
- opposing any violence against women, children, or other community members.
- teaching children how to care for their physical, mental, and sexual health and how to prevent common illnesses.
- working to change the image that a strong man is one who has sex with many women. If you value being strong, be a strong partner.
Here are some other activities that can help improve health in a community:

- **Share information.** Find ways to spread helpful information about common health problems in your community, so that everyone will know about them.

- **Form support groups.** People who share common problems—such as those who have survived rape or abuse, new parents, women with disabilities, or sex workers—can form groups to support each other and work together to overcome challenges.

In Zimbabwe, the Musasa Project was created to help women who experienced violence, particularly violence in the home and sexual assault. Musasa found that women who were beaten by their partners were not protected by the law. Many people said that men should have power over women because it had always been that way. Some people said that regular beatings reminded women of their “place.”

Musasa changes these attitudes through public education and by working to change and enforce laws (they helped pass a Domestic Violence Act in 2007). Musasa also provides free 24-hour phone support, counseling, and shelter for survivors. In this way, women, men, teachers, students, police, and health workers are learning that violence is an unacceptable abuse of power.

- **Work toward more independence.** Projects that help women earn money and improve their working conditions also help women start to make their own decisions and gain self-esteem.

In a tiny Mayan village in Guatemala, a group of women formed a weaving group. They sold their weavings through a cooperative store for women’s crafts in the capital city. The women now earn more income than most of the men in their area. As a result, women have gained new status in their families and communities and have more opportunities in their lives.
• Develop community projects. For example, try to find ways for everyone in the community to get enough to eat or to improve community sanitation and access to clean water.

The Green Belt movement in Kenya has involved many women in planting and protecting trees, which prevent soil erosion and provide fuel. Their success at protecting the environment and providing fuel for their families has built their confidence and helped them earn a living.

As one Green Belt member said, “Our forests were running out because of our constant need for firewood. We meet weekly to collect seeds, to do potting and fencing, and tend the trees in our nursery. We also talk to groups and schools about the environment. In this way, we are both helping ourselves and bettering the environment.”

Simple and low-cost community efforts can make a difference

When you first look at a problem, it often seems very hard to make changes. But, in fact, communities can make many improvements that do not cost too much. For example, here are some of the suggestions in this book for preventing or helping solve women’s health problems:

• Start a community stove project. Low-cost cook stoves that are safer, use less fuel, and produce less smoke can prevent many lung infections, burns, and back problems.

• Establish an emergency transportation system. Many deaths from complications of pregnancy, childbirth, and unsafe abortion can be prevented by reaching medical care quickly (see page 101).

• Low-cost cancer screening can prevent many deaths from cervical and breast cancer. Cancers are much easier to treat if they are found early (see page 376).

• Make family planning services and good prenatal care accessible to all. This can prevent many deaths due to complications of pregnancy, childbirth, and unsafe abortion.

• Train more health workers to care for women’s health, including pelvic exams, Pap tests and visual inspection, manual vacuum aspiration (MVA) and medical abortion, breast exams, and counseling. They should also learn how to use medicines for women’s health.
**Working for change in your country**

You can improve your health and the health of many others in your country by joining with other groups in different parts of the country to get laws changed that neglect some people’s needs or discriminate against them. For example, groups might work to make safe abortion available or get laws changed about who can own land or property or demand that men who rape or abuse women—and those who attack gay or transgender people—are punished.

**Many people are organizing to get their governments to:**

- equip rural clinics and train health workers to treat common women’s health problems, so rural women will not be forced to go to urban hospitals for care.
- pay for people from poor areas—especially women and others whose health is often neglected—to get health training. This will help relieve the shortage of trained health workers.
- keep companies from damaging the environment and advertising products that harm people’s health.
- force companies to provide fair working conditions and decent wages for all workers.
- make it easier for people to grow food for their own communities, not for export.
- distribute unused land to those who have been forced from their land

**Gaining power over our own health**

Just as “women’s health” means more than having babies, it also means more than access to health care. To be truly healthy, all people need the chance to make the decisions necessary for good health. And they need access to a fair share of the resources in their communities and in the world.

By joining others in the struggle for health, we can demand the chance to live healthy, full, and joyful lives—free of disease, pain, discrimination and fear.