



Advocacy for Women's Reproductive Health and Rights: Developing a Grassroots Strategy in Poland

The Federation for Women and Family Planning

Before 1994, reproductive health and rights were not discussed as integrated concepts in Poland. But thanks to the action plans adopted at the International Conference on Population and Development (ICPD) in Cairo that year and at the Fourth World Conference on Women (FWCW) in Beijing the following year, these concepts are now beginning to appear in health policy dialogue, as well as in every day language. However, the promotion of reproductive health and rights faces many financial, political, religious, and cultural barriers in Poland. Abortion remains illegal, family planning services are generally unavailable through the public health care system, and sex education in the schools receives low priority.

Although official statistics are not maintained, it is estimated that only about 12 percent of Poles use modern forms of family planning.¹ Barriers to the widespread use of modern methods include the lack of published material about reproductive health, the small number of family planning associations available to provide accurate information, and the high cost of contraceptives (in early 1998, the government withdrew subsidies for contraceptives). According to reproductive health advocates, the information on contraception disseminated by the media, as well as most textbooks, is often negative, misleading, or false and serves to strengthen gender stereotypes and prejudices. Furthermore, the Polish Doctors Council issued a recommendation that doctors not provide women with contraceptives unless they specifically request them.

Democratic mechanisms such as grassroots advocacy and lobbying are still in the process of being recognized and developed in Poland. Many citizens doubt that they as individuals can influence public policy. In response to the need to improve information and services concerning reproductive health and rights through lobbying and advocacy, the Federation for Women and Family Planning ("the Federation") designed a two-year project to involve women in the process and equip them with tools for making changes through democratic processes.

The Federation was established in 1992 as a coalition of nine nongovernmental organizations (NGOs) to promote and defend the reproductive health and rights of women in Poland.² Federation members believe that a woman's right to choose and decide freely if and when to have children is a basic human right, without which women are denied full and equal participation in personal and societal development.

¹ Taken from the UNDP website on "World Contraceptive Use 1998" at www.undp.org/popin/wdtrends/wcu/wcu.htm.

² Member organizations of the Federation are: Pro Femina Association; NEUTRUM (the Association for Ideologically-free State); Polish YWCA (Young Women and Christian Association); the League of Polish Women; Democratic Union of Women (Poznan Branch); Center of Protection Women and Families' Rights; the Educational Association ("Arbor"); the Family Development Association for Women's Rights; and the Movement of Protection of Women's Rights.

Objectives

The project's long-term goal is to improve reproductive health care services for women in Poland and to increase their reproductive rights by raising public awareness, influencing health policymakers, and creating an exchange of information and common agendas. Specific objectives were to:

- ▶ Develop a national network of women's reproductive health and rights advocates;
- ▶ Target Polish health care providers, health policymakers, and politicians to promote international standards on reproductive rights and health as adopted in the ICPD Program of Action and the Beijing Platform for Action;
- ▶ Design a media campaign regarding the status of women's reproductive health and rights.

Advocacy Design

In order to provide various audiences with accurate information, the Federation prepared an initial report on the status of reproductive health in Poland and circulated it among chosen scientists, parliamentarians, women's organizations, and journalists. They also formed a 10-member Advisory Council of scientists, politicians, and health policymakers to help create policy messages, target audiences, and advise on advocacy strategies. Members of the council included the President's Advisor on Health, a member of the Parliamentary Group of Women, the co-founder of Gender Studies at Warsaw University, and a sociologist at the Polish Academy of Science. Project activities

were centered on the production and dissemination of written materials (i.e., press releases, fact sheets, bulletins, and guides), as well as the organization of meetings, workshops, seminars, and conferences.

Target Audiences

The target audience for the advocacy network included Federation supporters, participants in their seminars and workshops, and members of other women's organizations. This nationwide audience was 70 percent female, encompassing many teachers, psychologists, sex educators, social workers, health care promoters, doctors, nurses, midwives, activists, and journalists.

To influence key policymakers who would promote new health care policies in Poland, the Federation targeted politicians responsible for health and social care who had been supportive of past Federation activities. These included Parliamentarians, representatives of ministries and the President's Commission on Health, political party members, and local authorities. Further, the Federation learned to target individual journalists and cultivate relationships with them. From their own network, they started with a group of 15 journalists representing press, radio, and television, who were very helpful in identifying other media groups.

Results

As a result of this research study, a network of national health advocates was formed, international health standards were promoted, and some extremely useful and accessible fact sheets are available to be used for advocacy purposes.

Organization of Health Advocates Network

The Federation formed a nationwide network of 220 advocates, who in turn created nine local support groups.³ Participants in the Federation's workshops and seminars worked vigorously on local and

regional levels on behalf of reproductive health and rights, particularly in the areas of family planning and sex education. The Federation regularly provided advocates with manuals, publications, brochures, and fact sheets. Three times per year, 6,000 bulletins were circulated to help widen the network and provide advocates with relevant information.

As a result of these activities, over 50 schools in the area began offering sex education courses—where there had previously been no courses or educators—and are planning to

continue them. The Federation distributed 10,000 fact sheets on sex education to these schools and trained 52 new sex educators.

In addition, the Federation's advocacy activities helped spur action and cooperation from NGOs toward improving women's health and reproductive rights. Ten local women's organizations organized seminars aimed at improving health services for women and initiated information campaigns in the local media about patients' rights, modern contraception, and family

³ The support groups are located throughout Poland: Poznan, Wroclaw, Opole, Slupsk, Krakow, Olsztyn, Lomza, and Konin.

planning. Service improvements were also noted in three Warsaw clinics and in five local clinics where doctors had attended the Federation's seminars and roundtable meetings and had read their publications. For example, doctors in these clinics began to do breast examinations and inform patients about modern contraception and family planning. Clients reported that these doctors respected patients' rights to information, choice, privacy, continuity of service, and confidentiality.

Promotion of International Standards to Policymakers and the Media

The Federation's *Reproductive and Sexual Health and Rights* guide was the first Polish publication presenting the government's commitments to the international standards on women's reproductive and sexual health and rights as defined in the ICPD Program of Action and the Beijing Platform for Action. The guide was favorably reviewed by law professors, sex education specialists, and women's NGOs. The guide is currently being used by Warsaw University lecturers and in post-graduate studies for sex educators in Warsaw and in gender studies in Olsztyn. The guide has been distributed to members of Parliament, governmental institutions, and Warsaw health centers, as well as during meetings and workshops organized by the Federation, the League of Polish Women, and the Democratic Union of Women.

Almost all of the advocacy and information campaigns were aimed at initiating legislative processes for reproductive rights or at stopping

the attempts to limit those rights. The following fact sheets were disseminated to members of Parliament, local authorities, government policymakers working on education and/or health care, and the media as part of the promotional campaigns:

- ▶ **Reproductive Health.** This fact sheet was especially useful in clarifying the commonly misunderstood terms "reproductive health" and "reproductive rights."⁴ It also covered sexual rights and health, gender-sensitive health care, and patients' rights as human rights.
- ▶ **Sex Education.** For readers this fact sheet was often their first exposure to international commitments and standards for sex education, gender-sensitive perspectives, and male responsibility. This fact sheet was used by supportive parliamentarians—and the president himself—during debates on sex education in Polish schools.
- ▶ **Male Responsibility.** Published as a detailed addendum to the sex education fact sheet, this one emphasizes men's shared responsibility and promotes their active involvement in responsible parenthood, including family planning. The Federation is planning to use it for future strategies to encourage men's socially responsible sexual and reproductive behavior.
- ▶ **Sterilization.** This fact sheet was written to change stereotypes concerning voluntary sterilization, as well as to contribute to the dialogue on the internationally recognized reproductive rights of parents to decide whether or not

to have children. It provides information on the legal regulations in Poland and argues for sterilization to be made a legal contraceptive method.

- ▶ **Contraception.** During the campaign against the government's decision to withdraw its subsidies for contraception, this fact sheet provided data concerning contraception usage, methods, and access in Poland; teenage pregnancy rates; and HIV/AIDS. It also raises awareness about the international commitments concerning a woman's right to contraception and aims to reverse deeply rooted negative stereotypes about the dangers of oral contraception.

All publications detailing the Federation's activities were sent to the media: dailies, magazines, television stations, and radio programs. Three major newspapers and the bulletin of the Women's Information Center stressed that the *Reproductive and Sexual Health and Rights* guide served as an exemplary manual. Each dissemination effort spurred requests for interviews and meetings.

The Federation was mounting its information and advocacy campaign in a changing, and often hostile, political climate. Although the president of Poland ultimately vetoed the attempt, in December 1998, Parliament voted to withdraw sex education courses from public schools. Women's reproductive health, including family planning policies, were excluded from the National Health Program for 1996-2005. Further, the government office responsible for women's

⁴ At the ICPD, reproductive health was defined as "the state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity, in all matters relating to the reproductive system and its functions and processes" (ICPD Program of Action, para. 7.2). Reproductive rights were discussed as the rights of all individuals to control their bodies, to have sex that is consensual, free from violence and coercion, and to enter marriage with the full and free consent of both parties.

equality, the Government Plenipotentiary for the Family and Women's Affairs, was replaced with an office whose mandate no longer includes gender equality but promotes a traditional approach toward women's roles within the family.⁵ Frequent reductions in public resources allocated for reproductive health also undermined the Federation's advocacy efforts.

Conclusions

The Federation introduced new and important perspectives on sexuality, human rights, and gender relations into discussions on reproductive health in Poland. Because of its advocacy activities, the Federation became better known, particularly in political circles and to the media, and gained new supporters (the mailing list increased by more than

2,000). Its Executive Director was also elected to the local Mazovian District Parliament. Despite the difficulties caused by the changing political situation, the Federation was successful in achieving its objectives. The Advisory Council proved to be very useful in interpreting Polish law, estimating the political situation, and providing entrée to target audiences.

Recommendations and Lessons Learned

The following recommendations emerged from the project:

► **Involve men further.** Women in Poland bear most of the responsibility for family planning. The Federation's future strategies should foster shared responsibility between partners and active involvement in responsible sexual behavior. Targeting more men would lead to improved access to information and sexual and reproductive health services, particularly outside of Warsaw.

► **Update medical training programs.** The Federation's research uncovered many examples of doctors endorsing outdated methods, particularly in the areas of family planning and contraception. The Federation should continue to work for updated medical training

programs and to target doctors and other health professionals with accurate updates on reproductive health choices and information stressing the concept of patients' rights as human rights.

The following lessons emerged from the Federation's work:

► **A flexible, multi-target approach to advocacy is most effective.** Especially in a potentially hostile political environment, advocacy groups must set basic priorities and develop multiple tools for influencing key policymakers. The Federation successfully used a package of written and interpersonal communications to simultaneously influence practitioners, policymakers, NGOs, community members, and the media.

► **Dissemination of accurate data and information to policymakers is essential.** The lack of accurate information has been a major impediment in the promotion of desirable legislative responses to reproductive health issues. Well researched, objective fact sheets and other reports are invaluable in countering widespread myths and misinformation.

► **Representation in elective bodies can be an effective advocacy strategy.** The Federation found that lack of experience with legislative and policy procedures was a major obstacle to promoting reproductive health and rights. By having a Federation official elected to the local Parliament, it was able to wield influence and become more knowledgeable about bureaucratic road blocks.

⁵ The changes in this office may seriously hinder the implementation of the National Action Plan on Women developed and adopted after commitments made at the Beijing conference.

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