



TAHSEEN Project
CATALYST Consortium

Gender and Reproductive Rights Training for Mothakef Sokany



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Gender and Reproductive Rights Training for Mothakef Sokany

Date and Location

December 15-19, 2004 at Minia Aton Hotel

Training Goals

The Gender and Reproductive Rights Training Manual used for this training was developed by CATALYST Consortium. The manual is based on the training modules used in Latin America and the Caribbean, which were developed by PROFAMILIA/ Columbia's South-to South Collaboration Program. The manual is used to train service providers to improve the quality of RH services by incorporating gender and rights perspectives into institutional policies, programs and action plans, and was first piloted with service providers in Minia Governorate in March 2003.

After piloting the manual feedback from the participants was incorporated and the manual was tailored for the Egyptian context, further simplified and a male involvement section added. The adapted and simplified manual was then used for the first time to train *mothakef sokany* and *raedat rifiat* (male and female community health workers) who are entrusted with providing accurate family planning/reproductive health (FP/RH) information to men and women.

Training Objectives

- To have trainees understand and use gender and rights perspectives as strategies to improve quality of RH care services
- To relate theory and practice for better understanding of reproductive rights
- To develop individual action plans that address the gender issues presented in the manual

Technical Content of the Training

The training consists of nine sessions. The first two sessions include the opening, introductions and an overview of the training. Sessions three to nine address the following topics: gender and rights; gender-based violence (GBV), reproductive rights, international framework, informed choice, action plans and quality of RH services.

The training employs a participatory methodology that acknowledges:

- Training as a process of learning and exchange
- The development of a collective knowledge based on the experiences of each individual



- The success of the training is dependent on the active participation of each trainee based on the sharing her/his life experiences, personal and professional practices

Day One: Participants examined the definition of gender, including societal views and attitudes toward gender roles. Trainers used two puppets Zeina (female) and Muhammadein (male) to elicit responses from the trainees about what gender means to them. Participants were involved in group exercises and activities during the day. One group exercise asked participants to divide into three groups to map out the activities of a married couple (in a rural and urban setting) during a 24 hour period. The purpose of the exercise was for participants to learn first hand the inequitable gender distribution of domestic responsibilities.

Day Two: The first part of the session focused on how women are portrayed in the media. Participants watched three short movies about gender discrimination. The first movie examined a case study of a young Arab woman who is raped by her brother's friend. The second movie portrayed a situation of domestic violence in an Arab couple's life and the third movie examined domestic violence in an Egyptian family. Participants were asked to provide an ending for each case study. It was interesting to note that none of the participants put forth an ending whereby the male perpetrator would be disciplined by the law for his transgression. It could be argued that the female and male participants shared the traditional view that a woman is to be blamed for her predicament (rape, physical and psychological abuse). She is at fault. Furthermore, the participants failed to note that a woman who is abused is fearful of telling her family and/or friends that she has been abused. This means that the participants are complicit in blaming the victim.

The second part of the session examined local interpretations of gender relations in Islam. The facilitators examined the cultural interpretation of a religious teaching allowing a husband to discipline his wife and proceeded to shed light on the gendered nature of specific Egyptian family laws, emphasizing how these laws are contradictory to religious teachings. The facilitators, in a logical manner, presented the biased nature of the laws and how they contravene with the spiritual teaching of Islam. The facilitators were very persuasive in their arguments and the participants listened intently to the presentation. None of the participants seemed offended by this presentation.

Day Three: Participants focused on women's reproductive rights, male involvement and quality of care. Participants were divided into groups and took part in a role-play about the difficulties clients face when seeking medical care. Each group was asked to put forth positive and negative experiences that clients encounter. Participants compiled a list of negative experiences and possible solutions including:

- The lack of bathroom for men who accompany their wives to the clinic. Participants suggested having separate bathrooms for males and females.
- The need to show educational videos in waiting rooms such as the pros and cons of birth control methods and legal rights of women
- Physicians coerce clients into using a particular method of FP that is likely to financially benefit the physician
- Some physicians do not know how to remove an IUD or Norplant
- The need for a nursery or safe space to leave children when mothers undergo medical examination



- Physicians do not spend time talking to or counseling clients. Participants suggested that nurses be involved in the counseling of the clients.
- Long waiting period in the clinic. Participants suggested that clients be given a number the minute they enter the clinic so that they know how long they have to wait before they are seen.
- Lack of patient confidentiality among ancillary clinic staff such as the cleaners

Day Four: The program focused on how to write and execute an action plan. The facilitators trained participants to write realistic and goal oriented action plans. Participants were asked to write an action plan that they would carry out within a period of three months. It was agreed that a follow-up session would take place in March 2005 whereby participants would share their challenges and successes while they implemented their action plans. Some participants worked together and established a group action plan in which they would conduct awareness raising seminars within the community. Other participants developed individual action plans such as targeting twenty households with pubescent daughters to educate them about the harmful effects of FGM and follow-up with these families to assess the outcome of their intervention.

Note: On December 19, Dr. Adel Al-Madani shared the remarks of the participants regarding the quality of care at the clinics with Dr. Ton van der Velden, Quality Improvement specialist of TAHSEEN.



Training Results and Conclusions

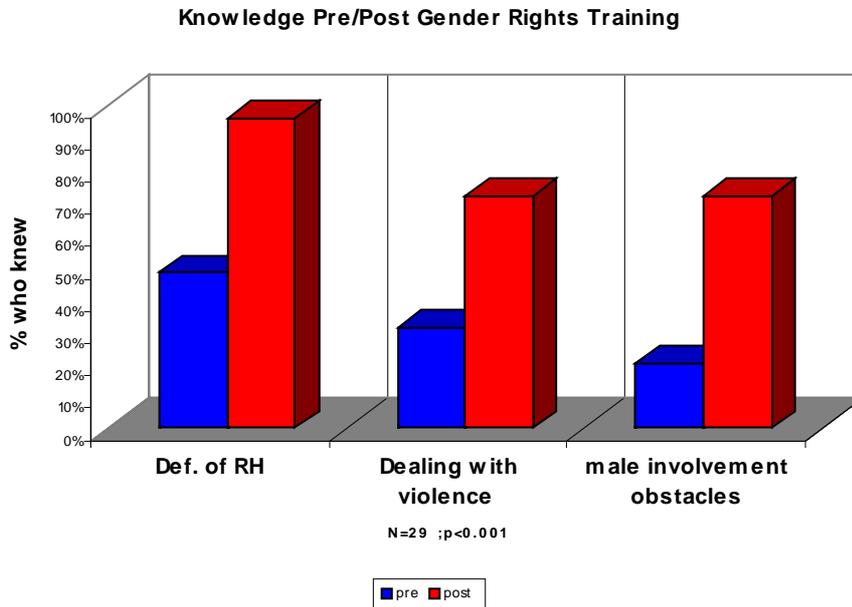
The training was very successful in bringing about a heightened awareness of the implications of gender and rights on the quality of RH service provision. In addition both male and female participants were forced to question their own attitudes and practices towards gender roles and the topic of GBV.

The trainees had a positive response to the trainers: two male physicians from Al Azhar University who were knowledgeable from both medical and religious points of view. The trainers encouraged open and lively discussions about gender norms and roles after using a projection technique. The technique makes use of puppets in an exercise where each participant whispers what they were deprived of, because of rigid gender roles in their respective communities, to a puppet.

Pre- and Post-test Results

Three questions were developed to test the knowledge of the trainees before and after the training.

1. What is the definition of reproductive health?
2. What are four different forms of dealing with gender-based violence?
3. What are the obstacles at the population policy level that hinder male involvement in RH?



Training Follow-up

The training of gender and reproductive rights provides conceptual and methodological tools to advance from the change of personal attitudes towards incorporating gender and human rights perspectives into the adoption of action plans. Each participant formulates a separate action plan to be implemented in his/her community. These action plans incorporated the different topics addressed in the training. A one day follow up session will be held after three months to assess the progress (successes and challenges) of implementing the action plans developed during the training.

Lessons Learned

- The projection technique used in the training was very effective in encouraging participants to overcome their inhibitions about communicating their experiences of gender bias
- The fact that the trainers were male doctors reflected the unbiased views of TAHSEEN
- Reflections and synthesis of participants' knowledge and experiences were essential learning process techniques

Facilitator's Recommendations

- Choose a younger age group of participants for future trainings
- Train all health clinic staff (professional and ancillary staff) on gender and rights
- Establish an electronic chat line whereby all the trained *mothakef sokany* and *raedat rifat* can share their concerns and experiences with one another

Training Course Evaluation

The final evaluation of the training showed a high appreciation for the content, the techniques and the trainers. The participants noted that the training objectives were successfully met and that participants understood how gender relations impact and significantly influence the reproductive health of women and men alike.



List of Participants

Hanan Ali Abou Zeid
Abdo Edward Abdo
Wagdy Boshry Yasy
Magdy Louis Faris
Sylvia Sadek Kamel
Safaa Abdel Dayem Ibrahim
Ahmed Essa Mohamed Essa
Hanan Salah Abdel Rahman
Nagah Abdel Aziz Abdel Alim
Refaat Ashak Girgis
Magda Ibrahim Wadia
Samia Ayad Youssef
Mona Zareif Nagy Abdel Aal
Iman Shehata
Abdalla Hashem Abdalla
Shaimaa Abdel Salam Khattab
Mohamed Mohamed Gaber Abdel Moula
Abdalla Mohamed Osman
Nagah Zeinhom Mohamed Shehata
Mostafa Abdel Rehim Mubarak
Abdel Fattah Sayed Mohamed
Aman Mahmoud El Shenawy
Khaireya Maurice Abdo
Sabah Adly Nashed
Ibtisam Kamel Nakhla
Zakaria Adly Shehata
Samir Mounir Wahba
Mikhail Beshara Ayad
Mohamed Ibrahim Abdel Aziz Hassan
Louis William Hakim



Training Agenda

Day	Session	Name of the Session	Time
1	1	Opening and introduction	1 hr
	2	Module: Presentation and know the participants' expectations with respect to the training.	1 hr
	3	Gender & rights definition and roles	4 hrs
2	1	Gender – based violence Definition – repercussions Dealing with violence	5 hrs
	2	Action plan	2 hrs
3	1	Quality of care	3 hrs
	2	Practical and strategic needs	3 hrs
	3	Requirements of improving quality	1 hr
	4	Evaluation	½ hr

