Sensitization Workshop

ISAY-India Safe Abortion Youth Advocates

Asia Safe Abortion Partnership (ASAP)

27th and 28th April, 2018

Grant Medical College and J.J. Hospital, Mumbai
**Introduction:**

India Safe Abortion Youth Advocates (ISAY) conducted its 5th Sensitization Workshop in Mumbai on 27\(^{th}\) and 28\(^{th}\) April, 2018 where a total of 12 medical and non-medical students from various colleges across Mumbai participated, and were sensitized on issues relating to gender, sexuality, and access to legal and safe abortion services.

**Background:**

ISAY is a network of medical students (based at JJ Hospital, Mumbai), who work together to promote women’s right to safe abortion. Started formally in 2017, ISAY aims at establishing itself as an advocacy group working to sensitize key stakeholders (primarily medical students and healthcare workers) on sexual and reproductive rights and the understanding behind why safe abortion and its access must be a human right.

**Vision:**

A society in which Indian medical students (and doctors) empathize, recognize and advocate dignity, sexual and reproductive rights and health for women.

**Goal:**

An increasingly broader and deeper network of medical students and key stakeholders (like doctors and health service providers) in India across different ages and discipline so as to collaborate to change the way in which medical students are taught in colleges.

**Mission:**

To educate and sensitize young medical students in India about women's sexual and reproductive rights and health in India by promoting knowledge about the necessity of universal access to comprehensive safe abortion services.
The day started with an introductory session where the participants and the organizers got to know each other. This was followed by a quick briefing about ISAY, ASAP and their work and motive as an advocacy group.

**Session 1: Understanding the concept of gender & sexism in mass media**

The day started off with Youth Champion Zainab Engineer taking the first session on understanding Gender and Sex. She asked the participants if they knew the two terms and the difference between them. Although some of them knew the basic definitions, most were surprised to know about the vast difference in meaning and how they are conveniently interchanged during common talk in everyday life. She then conducted a small activity where pictures of different people were displayed on the screen and the participants were asked to guess their gender identity. Although there was no confusion identifying gender conforming cisgender individuals, the same could not be said for gender non-conforming, transgender individuals and even drag performers.

Zainab then went on to explain how society doesn’t just comprise of only males and females but also a wide variety of individuals lying at different points on the gender spectrum and thus guessing a person’s sex or gender identity based on simply their looks or clothing leads to insensitive or ignorant remarks which could end up hurting another person. She emphasized on the importance of asking questions and addressing individuals by their preferred pronouns and how all of us can come together to help the marginalized communities become a part of society completely without any discrimination.

The group then discussed the life of people not belonging to the comfortable cisgender identities. A lot of the participants were aware of the hardships faced by transgender people in using public restrooms or getting admitted to the ward of their preferred gender in a hospital and they discussed various ways to tackle those hurdles specially taking into consideration difficulties faced by doctors during treatment. They realized that the process isn’t going to be easy and it will take extra effort on our part as a society to cross these hurdles. Some of them addressed their confusion regarding gender queer and fluid identities, about how they decide where they lie on the gender spectrum and how they express their identity, which was explained via various examples. Zainab ended the session with by advising the group to be sensitive and accepting of others choices even if it’s personally difficult to understand them because only then can we create a society that is inclusive to one and all.
Session 2: Opening up about sexuality

This session was conducted by Simran Garg. She began by asking the participants to close their eyes and raise their hands if their answers were affirmative to assess the knowledge they had before the workshop. She followed by explaining sexuality as a form of expression of every sexual being, how it’s affected not only by gender identity and hormonal influence but also societal views. She asked the classes of different types of sexual orientation they had heard about. The participants were well versed with term such as heterosexual, homosexual but hadn’t heard about asexuality, demi-sexuality and skolio-sexuality. She briefly spoke of the hetero-normative culture, the use of the terms ‘straight’, ‘gay’, coming out before introducing her activity.

There were four ‘situation’ chits and four ‘reaction’ chits which were picked by four groups of participants at random.

Situations-

1. Boy reveals that he is bisexual to his ultra-masculine (macho) friends
2. Explaining asexuality on your first date
3. Women coming out to her family a month before her arranged marriage
4. Adolescent asking his/her grandparent about his/her feeling for members of the same gender

Reactions-

1. Hesitant
2. Trying to reform them
3. Confusion
4. Disgust

Participants perfectly portrayed the anxiety and fear felt by young individuals before coming out, and the response of the friends who tried to pass it off as ‘a phase’. When talking about asexuality, they also highlighted the expectation of sexual want in men, pressure of producing children, difference between romanticism and sexuality. They also spoke about the opinions of society and fall in their social standing if the person is homosexual. Such feelings that he has are due to the modern western culture. They also expressed woe regarding the shame of a broken marriage and worry about the consequence for their other daughter.
Session 3: Approach to sexuality

Conducted by YC Shweta Poduval, the session began with participants being asked to justify why it was wrong for certain identities to face stigma, discrimination and marginalization. These identities included a couple who does not have children, a non-heterosexual person, sexually active women, PLWHIV etc. Participants spoke of how it was their ‘choice’ and they had the ‘right’ to be free from this sort of discrimination. This then took the discussion to human rights and what they are. We discussed principles of human rights in that they are universal, indivisible, interlinked and inalienable. A video on ‘The Story of Human Rights’ was shown and it ended with the introduction of the landmark document on human rights, the UDHR, to the participants.

A doubt that participants came up with was that if these ‘rights’ were in fact universal and inalienable, why was it that we see so many human rights violations daily? We then clarified the concept of fundamental or constitutional rights and how they differed from human rights. In an ideal world, rights would not be given or taken but would just be theirs without any question.

The session then went on to introduce the concept of SRHR or Sexual and Reproductive Health & Rights. It was explained how this big term consists of four related, but yet distinct terms. The difference between sexual and reproductive health was stressed on. A brief interactive discussion led participants to conclude that these rights are also human rights. With a deeper understanding of how sexual and reproductive rights worked, we ended the session with the introduction of a rights-based approach and the merits of the same over a needs-based one.

Session 4: Brushing up on contraception

YC Shreeya Mashelkar took the session on contraception and started off with an interactive quiz with the participants. She asked them questions based on contraceptives to test their basic knowledge and the misconception they had regarding this topic. Following this, she spoke to them about contraceptives. What were questions a person generally would ask before using a contraceptive. The various types of contraceptives available in the market, their mechanism of action, effectiveness was discussed. The practical approach to using the contraceptives was tackled. What were the criteria that has to be met before using a particular contraceptive were discussed.

Misconceptions regarding the use of contraceptives was cleared out from the participants’ mind. A few common misconceptions were regarding the return of fertility after the use of contraceptives and the probability of having a miscarriage after the use of a contraceptive. The doubts posed by the participants were met with adequately. The samples of contraceptives available were shown to the participants. The various scenarios in which a person can use a particular contraceptive was discussed. The session ended with linking of how contraception links to abortion.
Session 5: Let’s talk about abortion

Conducted by Shwetangi Shinde, this session talked about abortion as a medical procedure and its legal framework and implications. She began by defining abortion and then went on to talk about the types of procedures, namely, surgical and medical along with their techniques and indications. She then asked the participants about the abortion law in India, and found out that most of them were aware of the Medical Termination of Pregnancy Act (1972). She also talked about consent as a part of the Act and compared it with the abortion laws in other Asian countries to show that the law is still quite liberal.

Then, she talked about how in spite of that, when we come to the actuality of it, unsafe abortion still continues to be the third most important cause of maternal mortality in India, and presented some lethal statistics to make them realize that access to abortion is still an issue that has not been discussed in the open. She concluded the session by presenting the idea that there is no such thing as 'no abortion' it's either 'safe' or 'unsafe' abortion.

The day ended with the screening of 'If these walls could talk', and the participants were asked to create content based on the knowledge they gained on day one of the workshop.
The day started with a quick recap from the previous day, and a short discussion on the film ‘If these walls could talk’, where the participants enumerated the various obstacles the woman seeking abortion faced and the social stigma surrounding abortion.

**Session 6: Performing Manual Vacuum Aspiration (Papaya Workshop)**

The demonstration was performed on a dragon fruit which acted as the uterus using a Manual Vacuum Aspiration syringe. The procedure was first explained to the participants through an animated clip and the importance of using well sterilized apparatus was conveyed. They were also informed about the compulsion of the procedure being performed only by a skilled licensed abortion provider making sure that the woman seeking it receives a safe abortion.

The session concentrated more on the social importance of using MVA as a method of performing first trimester abortions and busting the myths around the procedure itself. Doubts were cleared which included ways of how and why confidentiality is important, counselling of the woman undergoing the procedure and what can the woman expect during the process. Later, all the participants paired up and actively did the demonstration themselves.

**Session 7: Barriers to access to safe abortion**

This session facilitated by Riti Sanghvi, started with an activity where the participants were asked to imagine a woman, the conditions she lived in, and the barriers she would face while trying to seek an abortion in India, knowing just a couple of details about the woman which was given to them written on a chit and was different for every participant.

Situations-

1. I have just started going out with a guy...
2. I just moved to the city for further education.
3. I don’t plan on marrying.
4. I belong to a middle class conservative family. My parents haven’t had ‘THE TALK’ with me yet.
5. I am a working mother with one child.
6. My husband wants another child (preferably a boy) but we already have two children (both daughters).
7. After my mother died, I had to drop out of school to cook for my family and look after the household work.
8. My husband drinks a lot. I am the only working member in the family.
9. I live in the interiors of Maharashtra and the nearest clinic or healthcare center is at a distance of 65 km.
10. I hide my OC pills in a safe place. But, one day, my husband found them. He was furious. He threw them away, and he beat me.
11. It’s difficult for me to take the pill. The priest said it is not acceptable in our community.

Most of them thought of economic barriers, lack of information on contraception and awareness regarding abortion, but the most common problem each one of them faced was social stigma. She then explained to them how gender patriarchy, gender roles, sexism in day to day life, and the stigma around sexuality contribute to being a barrier to abortion and its provision, which ultimately leave women with no choice but to opt for unsafe abortion practices.

Emphasis were made on the fact that how unmarried women are rejected safe abortion services and shamed for having pre-marital sex, whereas a married woman is expected to bare children after marriage even if she doesn't wish to. Further discussion was carried out on the difficulties women face for even negotiating a condom with their partner(s), domestic violence, and lack of contraception availability and accessibility especially in the rural areas, and in general about the unmet need for safe abortion services in India. She concluded the session with stating that there are multiple barriers to abortion, and how it is not viewed as a right of the woman, instead a decision made for her by her family, partner and even the doctor providing it.

Session 8: Mind your language

Suyash Khubchandani took the session that was meant to help the participants to have a check on the words we speak in our everyday lives. The objective was to identify the demons in our language such as subtle sexism, assumptions of heteronormativity, and patriarchal gender roles among others.

We started off by discussing the importance of open, free, and appropriate communication. The session progressed by talking about casual lingo and how it affects in reinstating the values that we possess.

Additionally, a conversation about how necessary language is for lawmakers and stakeholders to implement laws appropriately and particularly in the field of SRHR. The session ended by figuring out a middle ground on how to communicate appropriately and effectively.
Session 9: Fighting Rape Culture

YC Shruti Jeyakumar started by giving the participants an example of a real incident where a 21 year old lady had been brutally raped by 3 men after she got in a share auto late at night. On asking the participants their view, most of them were of the opinion that why was she out so late, or why did she take a share auto with 2 strange men in it and so on. The concept of rape culture was then explained reinforcing important points such as victim blaming, how we teach girls how to avoid rape but do not teach kids about consent. Misconceptions like her clothes, more is she asking for it and various other such notions which are prevalent in our society and our daily life were reflected upon. Clips of speeches by eminent politicians were shown, depicting how deep rooted rape culture is in our society. Even examples of Bollywood songs and movies were given showing how they influence the mindsets of masses. At the end of the session, there was a discussion with all the participants, where they spoke about the small changes they can make in their lives to fight rape culture.

Session 10: Talking about abortion and arguments against abortion

In this session led by Suyash Khubchandani, participants were divided into pairs and were given statements of an anti-choice sentiment. The objective of the whole activity was to defend arguments in an authoritative, yet logical manner.

The following statements were debated over -

1) You provide abortion to young women who are still children themselves. Why would you do that?
2) How does it feel to help young women enjoy sex without any consequences? They should be punished for having sex in the first place, and not be allowed to have abortions.
3) Young women are not mature enough to make such an important and terrible decision to have an abortion. They will always regret it.
4) Why don’t young women use birth control? There is no excuse for abortion nowadays! There should be no unwanted pregnancies!
5) Adolescents are too young to have sex in the first place.
6) Making abortion available to young women will encourage promiscuous behavior and make it easy for them to use it as a method of birth control.

Suyash spoke from the opposite perspective and set the participants up for discussions. The focus was based on making concrete points, using appropriate language, backed up by adequate studies/scientific facts/logical statements. However, having counter-arguments put forth requires a 100% understanding of the topic you’re speaking on. Most of the statements revolve around the women’s right to control their own fertility, the necessity for access to comprehensive sex education, and how the issues stigmatizing access to abortion are basically prejudiced mindsets against pre-marital sex or people expressing their sexuality which does not fit into the societal norms.
Session 11: What it means to be a Youth Advocate?

This session was conducted by YC Anushka Kale. In order to give them a better understanding about Accompaniment, they held an activity wherein the crowd was divided into 2 and one side was represented by a person seeking an abortion and the other side was represented by an abortion provider.

She took on the group of the abortion seeker where the participants contributed widely, bringing forth many points in the backstory. They coordinated well with each other and decided upon all the details beforehand. One of them was chosen to speak on the phone and she played her part with emotion and sincerity. She stuck to the backstory and had the required urgency in her voice as one would expect.

Nethra later explained to the other half about how to be a Youth Advocate and how to speak and reassure any abortion seeker. She told them about what to ask, when to ask and how to make the abortion seeker feel at ease. The group member selected to act as the abortion provider spoke well in response to the seeker, asking all the right questions and making her feel comfortable.

She spoke about what it advocacy really is, why it is required and why are the participants chosen to be sensitized. She put forth many suggestions on how to advocate for safe abortion throughout the population including medical and people from non-medical background. They also understood the need for awareness and why as medical students, they are at the crux of making an important and required change in mindset of society and in the medical field. In retrospect, the participants really grasped the importance of advocacy and the role they had to play as a Youth Advocate.

Creating Content

The workshop ended with a display of the contents that the participants created which reflected upon their understanding of the topics covered during the workshop, and also as a way to spread awareness on various topics relating to access to safe abortion.

The participants were awarded with a workshop completion certificate which marked the closing of the sensitization workshop.
<table>
<thead>
<tr>
<th>Timing</th>
<th>Name of Session</th>
<th>Facilitator</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>DAY 1</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2:30-2:45pm</td>
<td>Introduction</td>
<td></td>
</tr>
<tr>
<td>2:45-3:00pm</td>
<td>Briefing about ASAP, ISAY and our vision</td>
<td>Suyash Khubchandani, Shweta Poduval</td>
</tr>
<tr>
<td>3:00-3:30pm</td>
<td>Understanding gender, sex, and how hetero-normativity defines gender roles</td>
<td>Zainab Engineer</td>
</tr>
<tr>
<td>3:30-4:15pm</td>
<td>Opening up about sexuality</td>
<td>Simran Garg</td>
</tr>
<tr>
<td>4:15-4:55pm</td>
<td>Approach to sexuality</td>
<td>Shweta Poduval</td>
</tr>
<tr>
<td>4:55-5:10pm</td>
<td>Break</td>
<td></td>
</tr>
<tr>
<td>5:10-6:00pm</td>
<td>Brushing up on contraception</td>
<td>Shreeya Mashelkar</td>
</tr>
<tr>
<td>6:00-6:40pm</td>
<td>Let’s Talk About Abortion</td>
<td>Shwetangi Shinde</td>
</tr>
<tr>
<td></td>
<td>Closing day 1 and creating content assignment</td>
<td></td>
</tr>
<tr>
<td>Timing</td>
<td>Name of Session</td>
<td>Facilitator</td>
</tr>
<tr>
<td>-----------------</td>
<td>-----------------------------------------------------</td>
<td>----------------------------------------------</td>
</tr>
<tr>
<td><strong>DAY 2</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9:00-9:45am</td>
<td>Recap, Performing Manual Vacuum Aspiration (Papaya Workshop)</td>
<td>Riti Sanghvi, Suyash Khubchandani</td>
</tr>
<tr>
<td>9:45-10:30am</td>
<td>Barriers to access to safe abortion</td>
<td>Riti Sanghvi</td>
</tr>
<tr>
<td>10:30-11:00am</td>
<td>Mind Your Language</td>
<td>Suyash Khubchandani</td>
</tr>
<tr>
<td>11:00-11:30am</td>
<td>Fighting Rape Culture</td>
<td>Shruti Jeyakumar</td>
</tr>
<tr>
<td>11:30-11:45am</td>
<td>Break</td>
<td></td>
</tr>
<tr>
<td>11:45-12:30pm</td>
<td>Talking about abortion and arguments against abortion (Debate)</td>
<td>Suyash Khubchandani</td>
</tr>
<tr>
<td>12:30-12:50pm</td>
<td>What it means to be a Youth Advocate?</td>
<td>Anushka Kale</td>
</tr>
<tr>
<td>12:50-1:00pm</td>
<td>The Road Ahead</td>
<td>All YCs</td>
</tr>
<tr>
<td></td>
<td>Closing Day 2 and Valedictorian Ceremony</td>
<td></td>
</tr>
</tbody>
</table>
Annexure 2: Participants’ List

Ajay Basude
Ambareen Khatri
Arwa Udaipurwala
Batul Sakriwala
Isha Kiran Kane
Jagruti Dasi
Luluah Sitabkhan
Meera Mokashi
Parth Doshi
Sakina Sakarwala
Saniya Nadiyadi
Vaibhav Bhandari

facebook.com/isayadvocates
isayadvocates@gmail.com