



SAFE ABORTION ADVOCACY INSTITUTE FOR YOUTH CHAMPIONS

Asia Safe Abortion Partnership (ASAP)

12th to 14th October, 2017

Grant Medical College, Mumbai, India



Introduction

The Asia Safe Abortion Partnership (ASAP) was formed in March 2008. The organization's goal is "To promote, protect and advance women's sexual and reproductive rights and health in Asia by reducing unsafe abortion and its complications, by promoting access to comprehensive safe abortion services."

Objectives Of The Institute

- 1. To create a community of trained and sensitized **youth champions** who have an understanding of access to safe abortion as a gender and sexual and reproductive rights, as well as human rights issue.
- 2. To facilitate the utilization of **social media** and other community level networking and communication by the youth champions through capacity building and ongoing mentoring.
- 3. To support the **ongoing engagement** of the youth champions, within and outside their community to ensure implementation of the above strategies in order to advocate effectively for improved access to safe abortion services, including medical abortion.

The alumni will be facilitated to emerge as a community with a strong voice on this discourse at local, national and regional levels and to engage with the issues on an on-going basis through the online network as well as through participation in relevant meetings.

Day 1

Session 1: Understanding Gender And Patriarchy And It's Linkages With Safe Abortion Issues

Manisha Gupte conducted the first session on gender, patriarchy and the need for feminism. She is the founder of MASUM, an organization working towards welfare and development of women in Pune, she's equipped with a PhD in Sociology. The session was centered around explaining the participants the difference between gender and sex, and how gender is primarily a social construct forced upon us via means of patriarchy, which leads to gross inequalities in everyday life, some which we never even perceive.

Manisha Gupte started out by explaining how we unknowingly develop these gender biases. From birth, we expect girls to sit indoors and play while we send the boys out explore, which influences ones personality, behavior etc.

Hence, stating that social differences between the two sexes are many more than actual biological differences. She then moved onto the taboo that surrounds gender, ie. masculinity and femininity. We discussed how society shames masculine behavior in females, and to a more amplified aspect, feminine behavior in men. E.g.: Girls playing any sport, guys picking up a doll to play with, men cooking, women having a higher pay check then men.

Manisha Gupte then took on the topic of patriarchy; she explained how it's the **root cause of genderism and a means of distributing property and power to males.** Women are seen as objects, which produce babies. A question is always raised when a woman doesn't have a child. Public patriarchy leads to injustice towards women when they face crimes such as domestic violence. Patriarchy is like a tree, where the leaves do all the work and resemble the females, identify the tree.

She then introduced the participants to ideological dominance (also called hegemony), which is the concept of oppressing an individual, using ideologies of the oppressors, which they consider to be the perfect/ an ideal scenario. She explained

how it all boiled down to the male ego and it need to oppress the female counter part for one specific reason: Motherhood is a necessity whereas fatherhood is uncertain. Hence for a man to be certain that it's his child, he must oppress the women, which is the basis of Patriarchy.

She ended the session by explaining how caste and religion too play a critical role in establishing patriarchy within society, quoting Dr. Ambedkar, "Caste is endogamy, and endogamy is caste". Many concepts were tough for everybody to grasp but Manisha Gupta, using her vast experience and day-to-day examples helped clarify many of those misconceptions.



Gender And Sexism In Mass Media

A session on gender and sexism in mass media was conducted by one of the YC **Soham Virani** Participants were shown advertisements to show them how over generalization of roles and characters leads to **gender stereotyping** which ultimately leads to sexism. Women on screen, drinking or smoking are looked down upon by society, sexualizing daily activities like eating a burger. Suggesting that domestic violence is the best way to keep "your wife in check" Sexist and **body shaming** advertisements discriminate and are also often derogatory to women. Products like vaginal tightening cream, skin whitening creams were required to be an **ideal**

woman.



Session 2: Human Rights, Sexual and Reproductive Rights.

Also conducted by **Manisha Gupte**, this session was aimed at educating the participants about human rights. They are **rights we have**, **simply because we are born human**, **and they exist universally**. The Universal Declaration of **Human Rights** is a declaration adopted by the United Nations General Assembly on 10 **December 1948 . The very first right is the right to dignity.**

Till date however, gross human right violations occur all over the world. She explained how there is a link between human rights and the governance patterns, whether it be democracy or dictatorship. The question raised was, 'If our government provides us with every necessity such as food, education, health care etc, do we have a right to complain? Do we have a right to vote against this government if all of our basic needs are being looked after?

Activity: Needs v/s rights based approach

Manisha Gupte divided the class into two halves. She asked one group to state all the reasons she would need to seek an abortion and the other why she had the right to an abortion. Participant Zainab Engineer stated needs such as, being unmarried, not being ready for a child financially, in the case of rape. Participant Nethra Jain gave her rights to autonomy over her body, right to medical treatment without question or judgement. Manisha ma'am concluded that if there is a needs based approach the need may or may not be met but when it's rights based the needs are always met even if it is not required, abortion should be given as a right and not a need.



Session 3: Values Clarification And Case Studies

Next session of Values Clarification was taken by YCs **Simran Garg** and **Chaitanya Kalra**. Participants were asked to stand in a neutral space. Statements were displayed on the screen and they were asked to move to either sides of the space giving two ground agreement or disagreement. The statements were extremely controversial such as **sex workers cannot be raped, women with HIV have the right to reproduce, sex determination must be a reproductive rights** etc. For some of the statements, participants found it extremely difficult to pick a side and defend their stance.

For instance, the statement 'Women with HIV/AIDS should not have babies' being in favor would be denying the woman her right to choose, but being against of it would be jeopardizing the child's health and wellbeing. Participants also didn't have prior knowledge about **antepartum antiretroviral therapy**, which reduces chances of fetal transmission. Participants brought out many interesting arguments. It provided them with a platform to practice voicing their opinion on such sensitive issues.



Activity: Powerwalk And Intersectionalities

This innovative and interesting activity was conducted by **Dr. Shilpa Shroff** along with **Nandhini Iyer**, one of the Youth Champions. The participants were made to stand in a straight line and were assigned with characters of people like refugees, doctors, people with disabilities, young boys and girls, orphans, educated working women etc. The facilitators read out a list of questions. If the answer to it was 'YES', as per the character assigned, a step forward was to be taken and if 'NO', the same

position was maintained.

Depending on their identity, people with powerful statuses were standing ahead while the vulnerable ones were near the start. This reflected on how society discriminates one individual from another depending on their age, gender, race, religion and so on. So the importance of equality and non-discrimination was highlighted at the end of this activity.



They were then shown the movie DIRTY DANCING.

Day 2

Day 2 began with a recap of the previous day and what was the one thing everyone learnt and what was new. Many of them liked the values clarification session and found it new. Some shared their experience of the power walk and how they found themselves helpless while the others continued to take steps ahead

Activity: Condom/Pad buying experience

At the end of day 1, the girls were asked to purchase condoms and the boys were asked to purchase pads. This was so that they got to experience what members of the other sex experiences. The girls admitted to feeling shy and hesistant towards the activity, they worried most about the judgement of the pharmacist and surrounding people. Most had empowering experiences and felt much more confident after buying a condom. Katya Saksena was glad when she learnt that condoms come in a variety of flavours and textures. Nikita Kendale felt very much like a 'grown up' after the experience. Nethra Jain noted that the condom was 'hidden' in a brown packet

Session 4- Basic updates on reproduction, contraception, safe abortion and Role play

YC Simran Garg begins the session by asking the participants what they remember about the menstrual cycle.

They are then asked to draw rough diagrams of the male and female reproductive systems. The participants discuss all the phases of the menstrual cycle. A video is shown as a recap of the same. **Dr Suchitra** then conducts an interesting discussion on how one can guide a maid/non medico regarding menstrual problems. The taboos related to menstruation still prevalent in our society are discussed and some participants share their personal experiences An interesting article is shown which had the guidelines of a temple which revolved solely around strictly forbidding menstruating females from entering /performing rituals with the normal public. The article is so well fabricated with unproven facts that any layman would end up believing non-existant concepts of "menstruating women being easily susceptible to negative energies"

Stigmatic advertisements are shown like the "Whisper-Touch the Pickle"-which actually seems like women empowerment but it actually just another marketing technique.

This was followed by an activity

Role play 1 - An unmarried couple have been regularly using condoms but the woman comes to you for missed period. What do you do?

The scene started by the conversation between the boyfriend and girlfriend about the condition and she calls the friend to the Role play 2 – A woman goes to a workshop in another village and she forgets her oral contraceptive at home. What does she do?

The person drew the female reproductive system and everyone was asked to label out different methods of contraception on the diagram. A few of them were Tubectomy, copper T, cervical cap and the way it acts were discussed. Why isn't vasectomy preferred was discussed. They were shown a proper representation of how an abortion happens and also how the position of the women is important because in case of unsafe ones it may lead to sepsis. Abortion pills were discussed afterwards.



Session 5 SEXUALITY ORIENTATION and DISABILITY, SEXUALITY

The session started off by addressing binaries. **Sumit** spoke about homosexuality and bisexuals. Spoke about transgender being an umbrella term. He asked the participants where had they seen transgenders in their daily life

HEALTHCARE for the LGBT community was discussed-lack of awareness and refusal for treatment. He spoke about the lack of interaction and the drawbacks it has, and the lack of acceptance by family and society itself which is the source of aggression for the transgenders. To stop labelling and not offer pity and treat them with respect.

Questions regarding marriage for transgenders and laws regarding it. Section 377 -regarding unnatural sex- punishable, what is Queer- LGBTQI. How bisexual people shouldn't be included in LGBT because they were confused.



Session 6

VISUAL DISABILITY AND NEGOTIATION OF HEALTHCARE

Session started off by **Nidhi** saying that there isn't the need to point out the disability of any one person. She talks about how one feels a bit superior when interacting with a disabled person which shouldn't be the case. It would ease out the conversation. She asked the participants to think about the words which come to our mind when we think of the disabled.

She spoke about the disability movement, the activities which are carried out. Spoke about how being disabled, the view point of every person being different. Example of mountaineers and a regular person climbing 50 floors.

Disability and sexuality- Talked about the relation between the two and how it is assumed that a disabled person doesn't have sexual desires, them being termed asexual. Spoke about the mentally challenged people and hyper sexuality. No one talks about sexuality to the disabled which leads to problems. Doctors being an important point of contact.



Session 7

Abortion laws in Asia

Dr Shilpa asked the class what they knew of the Indian abortion laws and how only medical procedure that requires a law, explained menstrual regulation can be used as long pregnancy is undetected.

Barriers against access to abortion in India were discussed.

She then conducted an activity in which participants were given 5 case, participants are divided into 4 groups that hypothetically have to advice the president which 3 women get an abortion and a preference order to learn the mindset of the participants.

At the end of it participants learned to question everything around you. Rights based over needs based is reflected here. We seem to fall in with authority and follow.



Session 8 Critique of publications and articles

Participants were given various articles and were asked to share what they had just read. Some of the articles were related to experiments on homosexuality-description of the "gay gene".

1. The article even spoke about the harsh treatments met out to homosexuals. Participants shared their views about how the authority isn't in any position to decide what was considered normal or natural.

2. Women in Nazi Germany-couple would be given a loan which would be cut short according to the number of babies they had. A reward system created which was unnatural. Reproductive rights manipulated by the government to their own needs.

3. Pakistani you tuber- strangled by her brother, he being proud of it and not having any remorse, having a regressive mindset



Session 9 Interpersonal Communication

Dr Shilpa hosted the session assisted by Youth Champions.

First Activity

Chinese whispers with a twist - both sides passed different messages. Both sentences were distorted and participants realized how important it is to pass on the right message at each stage and that too many cooks spoil the broth.

What is communication exactly was explained, the various aspects and importance of communication and stressed specifically on doctor-patient interaction were discussed.

Second Activity: Drawing Happy face.

Round 1: Participant wasn't allowed to ask questions and ended up drawing meaningless figures.

Round2: allowed to ask questions and ended up making a smiley face.

Third activity

Importance of eye contact in conversations. Participants realized that body language is an essential component of communication and conveys a lot of information.

Session 10: Medical Textbook Analysis

YC Nandhini lyer spoke about contraception; the definition included the word mother and only spoke about family planning, no mention of unplanned pregnancy and no mention of STIs. Only the use of the term "couple "and never

spoke of a woman only's consent. Participants pointed out the line surgeon should be convinced, which leaves the woman at the doctor's mercy.

There were other fallacies regarding the description of Sterilization and Virginity There was no mention of male rape and definition of rape itself was incomplete.

PSM textbook described the sex ratio in a very haphazard manner.



Day 3

Recap

Everyone shared one thing they learned from yesterday. Many of them spoke about Nidhi's session where she spoke about disability and how healthcare is affected. The Chinese whispers activity which conveyed the importance of interpersonal communication also had an impact. Participants spoke about the 5 cases and who are we to put forth ones need forward compared to the other.

Session 11 What it means to be Pro Choice?

This session was taken by Dr. Suchitra.

What do you mean by pro-choice? What is control over the body, life and death? What is the difference between Suicide and Euthanasia? Participants were explained to see choice as a rights based approach and not needs based approach. Countries and laws shape the way you determine your choice.

The rights include when to have a child, how many children should we have and what spacing should be used and what kind of child? How does sex selection affect the ratio? What are the grounds for marriage?

Rape isn't about numbers. Rape is about power. Sex selection will even create an ironical situation where she will be forced to deliver an unwanted girl child. Kazakh culture study was then shown



Session 12

DISNEY SHAPING UP OUR VIEWS SINCE CHILDHOOD

YC Nitish started by talking about Disney and why it is the main influence on us since childhood and how when people say you are not beautiful it is the inner beauty that matters – rather why not say if you are not beautiful it is the inner wisdom that matters.

Disney princess setting ideals of beautiful looks as standards and perfect prince who comes to her rescue and how no one really knew the background of the prince? The word prince just made us understand that he is of a high socioeconomic background. Nothing else is known about this random character entry into the movie, who portrays success and beauty.

Various misleading photographs from the world of Disney and movies are shown like "Star Wars", "Avengers", "Princess Lea" which are setting baseless ideals right since childhood.. He concludes saying stand up for yourself and start challenging.



Session 13

NETWORK ADVOCACY

Dr. Suchitra shared what other countries have been doing and what activities they had been involved in like Pakistan Nepal Bhutan Lebanon etc.



Session 14 Creating Content

Coming towards a close, **Dr. Suchitra Dalvie** explained how the youth champions work, producing content which contains more than just originality and creativity; how these reflect upon effective communication and the impact over viewers. The participants were then given time pre and post lunch break to think out of the box.

The students came up with some brilliant, witty, artistic and comical pieces to display. A group made a small silent skit with captions like the key to safe abortion is equal rights. Another group presented an extremely motivated talk about patriarchy and how it leads unsafe abortion. Another participant presented comprehensive sex ed and how the need for it is never met which leads to ignorance. One participant used humorous memes to address important issues like stigma against menstruation and sexism in mass media



Closing and Valedictory

To conclude the 3 day YAI, both **Dr. Suchitra** explained the role and the future as a youth champion. They were also informed about the acquiring of grants for projects and more such YAIs. They handed out certificates and visiting cards to

all the new YCs and pictures were captured, smiles exchanged. It had been a different experience for everyone who had entered the hall for the first time, one to remember.





Asia Safe Abortion Partnership

The Safe Abortion Advocacy Institute for Youth Champions



Dates: Thurs 12th –Sat 14^{th October} 2017

Venue: Grant Medical College, Mumbai, India

Objectives of the Institute

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<u>Agenda</u>

Thursday 12th Oct 9-9:30am

Welcome, Introductions and Expectations **Suchitra Dalvie**

Sessions

Day One - Thurs 12th Oct 2017

Timings	Session	Learning objectives	Speakers
9:30-11:00am	Session 1: Understanding Gender and Patriarchy and its linkages with safe abortion issues	 Objective: At the end of this session the participants should be able to: Understand the difference between sex and gender, the social construct of gender and the role of patriarchy in perpetuating the gender inequalities. Understand the cascade effects this has on the differential control over resources and decisionmaking powers especially with reference to healthcare systems 	Manisha Gupte
11-11:15 am	Tea Break	• Gender and sexism in mass media	YC Soham Virani
11:15- 12:45pm	Session 2: Human rights, sexual and reproductive rights.	 Objective: At the end of this session the participants should be able to: Know the definition of sexual and reproductive rights and the linkages with other rights in upholding them. Understand the significance of the paradigm shift at the ICPD, from demographic goals to individual reproductive rights. Obtain clarity on the rights based perspective towards safe abortion. 	Manisha Gupte
12:45-1:45 pm	Lunch		

1:45-3 pm	Session 3: Values Clarification and Case Studies	 Objective: At the end of this session the participants should be able to: Appreciate the impact social 'values' can have on individual rights Understand the nuances of policy interpretations being enabling or disabling Counter statements made by antichoice groups 	Suchitra Dalvie Manisha Gupte YC Chaitanya Kalra & YC Simran Garg
3-3:45pm		Power walk and intersectionalities	YC Nandhini Iyer
3:45-6pm	Film Screening	(For discussion on day 2) Dirty Dancing	

Day Two - Fri 13th Oct

9:00 – 9:30 9:30 a.m10.30 am	Recap and review Session 4:	Objective: At the end of this session the	
	Basic updates on reproduction, contraception, safe abortion and Role Play	 participants should be able to: Understand how pregnancy occurs and how it can be prevented Clarify myths and misconceptions around these issues Explain safe abortion techniques and related concerns in simple language to a layperson 	Suchitra Dalvie Participatory session YC Simran Garg
10.30 – 11.00 am	Tea Break		

11.00 am -12 noon	Session 5: Ethics in Medicine	 Objective: At the end of this session the participants should understand the role of ethics in medicine patriarchy in healthcare systems (and its impact on abortion) 	Dr Amar Jesani
12-1 pm		SOGI and access to healthcare services	
1.00 pm -1.45 pm	Lunch		
1:45 to 2:45 pm	Session 6: Abortion laws in Asia:	 Objective: At the end of this session the participants should be able to: Understand the implications of the law and its impact on services Understand the barriers created by laws and practises to safe abortion services Discuss positive amendments to country laws which would facilitate access. PCPNDT , MTP, relevance, amendments 	Shilpa Shroff YC Chaitanya Kalra
2:45 to 3:15 pm	Session 7: Critique of articles and publications.		
3:15 pm -4.00 pm	Session 9: Interpersonal communication	Objective: At the end of this session the participants should be able to: • Understand the communication	Shilpa Shroff

10:00 am – 11.30 am		loop and the importance of message and mediumUsing social media for advocacy	YC Soham Virani
4:00 pm – 4:30 pm	Tea Break		
4.30 pm - 5.30 pm	<u>Networking and</u> <u>Sharing</u>	Objective: Sharing of the work at country Advocacy Networks	Shilpa Shroff
			All YCs will assist
5.30 pm -6.00 pm	Assorted clips	Discussion next day	YC Simran Garg

Day Three - Sat 14th Oct

9:00 - 9:30	Recap and clarifications		
9.30 pm – 10am	Assorted clips	For discussion immediately afterwards	YC Nandhini Iyer
10:00 am - 11.30 am	Session 8: What does it mean to be prochoice?	 Objective: At the end of this session the participants should be able to Advocate for safe abortion as a choice and a right for women (sex selection as an issue) Communicate clear messages about pro choice issues via social media and other channels Being a change agent. Domestic violence, sexual abuse, role of healthcare providers 	Suchitra Dalvie

		Role of Subversion	
11.30-11.45 am		Tea break	
11.45am – 12.30 pm	Session 10 Disability and Sexuality	Objective: At the end of this session participants should understand: • Politics of the internet Identify and analyze good campaigns	Nidhi Goyal
12.30-1.00 pm	Session 11:	Medical textbook analysis	YC Nandhini Iyer
1.30 pm -2.15	Lunch break		
2.15 pm -4.00 p.m. 4.00 – 4.30pm	Session 11: Creating Content	 Objective: At the end of the session participants understand What effective communication entails How to produce content: curating and creating Tea break 	Dr Suchitra Dalvie All YCs will assist
4.30-6 pm		Valedictory and closing	Suchitra Dalvie

Participant list

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