

# **GENDER**

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## Addressing Gender

Gender is at the center of sexuality and youth development. While sex determines the biological differences between males and females, gender identifies the social roles and relations associated with being male or female. Gender defines the norms and expectations about appropriate male and female behavior and the interaction between the sexes. Rigid gender norms hinder access to quality services and undermine the reproductive health of young people. As a result of this correlation between gender issues and adolescent sexual and reproductive health, gender is an integral part of the AYA project, which seeks to improve the sexual and reproductive health of young people.

Gender-based power dynamics and stereotypes increase vulnerability and risk affecting both boys' and girls' ability to make decisions related to their reproductive health and to take action to protect themselves.

**Gender & Sexuality:** While differences associated with sex are biological and universal, gender differences are cultural and variable. Gender norms within different cultural contexts help define male and female sexual and reproductive health (SRH) behavior. They determine the power dynamics that influence the way girls and boys experience intimacy, sexuality, and reproduction (Irvin 2000). As youth come of age, gender norms give them clues about what they should know or not know about sexuality, how they should interact with the opposite sex or same sex partners, and whether or not they should have access to reproductive health information and services.

I got this far & realized there was a much less painful way to do it. Call outs for the remaining 6 strategy papers are attached.

**Gender & Youth Development:** Gender norms influence developmental changes among youth by inhibiting their self-confidence, access to information, and opportunities to develop skills. Constraints on girls' knowledge of sexuality hamper their understanding of reproductive systems and disease transmission and prevention. Girls' communication and negotiation skills are restricted by the lead role expected of males in decision-making. Masculine ideals of the strong, silent male can promote violent behavior and limit boys' receptiveness to information, ability to communicate, and openness in intimate and sexual relationships.

Rigid gender norms hinder access to quality services and undermine the reproductive health of young people.

**Gender Dimensions of Vulnerability and Risk:** Gender-based power dynamics and stereotypes increase vulnerability and risk by affecting both boys' and girls' ability to make decisions related to their reproductive health and to take action to protect themselves (Population Council, 2001). Gender-related expectations compromise girls' knowledge and ability to protect themselves from unwanted pregnancy, STIs and violence. Their health risks are increased by norms that teach them to take a subservient role in decision-making; not to question the fidelity of their partners; to tolerate violent sexual behavior; and to have sex, get married and/or produce children at an early age (UNAIDS, 1997b). Married girls are particularly vulnerable to sexually transmitted infections (STIs) and HIV because it is considered unacceptable to ask husbands to use condoms in most cultures, and young women are expected to be monogamous while husbands are not. Gender norms may also support harmful traditional practices, such as female genital cutting, which have extensive health consequences for girls. Gender stereo-

types that encourage boys to be uncommunicative and to adopt multiple sex partners and other high-risk behaviors, such as alcohol and drug use, also increase their chance of infection.

AYA works across all program components to reduce the gender-related barriers that undermine the reproductive health of young people.

### The AYA Approach to Gender

In AYA, attention to gender dynamics and equity is built into every aspect of our work with youth, communities, providers, health facilities, schools, and policy-makers to ensure that the sexual and reproductive health needs of young people - both male and female - are being met. Gender-sensitive approaches are applied at different levels to challenge gender biases that exist at multiple levels and maintain unequal status, access, and life experience for males and females. Social and institutional systems underlie and reinforce gender-based disparities through formal laws and policies (e.g., laws providing for lower age of marriage for girls than for boys), institutional arrangements (e.g., health facilities that assume married girls do not need protection from unwanted pregnancy and STIs), and religious practices (e.g., those constricting access to contraceptives). Gender analysis strengthens program efforts to address the influence of norms on autonomy, connectedness, behavior, and opportunity at each of these levels.

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AYA works with youth and communities to increase awareness of gender-related power dynamics, which improves self-perception among youth and gender equality in decision-making, and reduces risk in sexual relations (Irvin 2000). Discussing gender stereotypes can help boys and girls be more receptive to reproductive health

information, talk to each other about sexual health concerns, and understand the effects of power on individual rights, behavior, and discrimination. Reducing vulnerability and risk-taking among youth requires an understanding of the social context of sexuality and its inherent gender dynamics. Research on HIV prevention confirms the key role of gender in risk reduction. More specifically, evaluations of AIDS prevention and health education programs have shown that sexuality education with open discussion of gender issues helps to delay age of first sex, increase use of contraception, reduce number of partners, and decrease frequency of sex (UNAIDS, 1997a; Kirby, 2001). In addition, encouraging youth to question gender norms has long-term implications for societal change. Challenging social norms is perhaps most effectively done with young people, before their values and behaviors are established.

Building upon existing methodologies and tools, the program applies gender-sensitive approaches in program design, implementation and evaluation.

Building upon existing methodologies and tools, the program applies gender-sensitive approaches in program design, implementation, and evaluation to:

- Reduce SRH vulnerability and risk behavior;
- Promote skills that foster positive health practices;
- Decrease barriers to access and improve the quality of SRH services;
- Improve understanding of the social context of health and disease prevention;
- Increase participation of male and female youth in SRH programs; and
- Promote empowerment and protect individual rights.

AYA works across all program components to reduce the gender-related barriers that undermine the reproductive health of young people. Gender-sensitive approaches aim to achieve a number of goals, in six key areas:

- **Policy and advocacy:** Identify and address gender inequities in laws, policies, and institutional practices that affect the SRH of youth and ensure that the voices of both young men and young women are heard in all program activities.
- **Behavior change communication:** Identify and address gender-related vulnerability and risk through participatory

needs assessments, skill-building exercises, and communication efforts.

- **Youth-friendly services:** Provide guidelines and training to improve the responsiveness of facilities and outreach activities to the different needs of boys and girls.
- **Livelihood skills:** Increase access of girls and boys to healthy economic opportunities by integrating SRH information and

services within training programs and workplaces.

- **Institutional capacity building:** Improve the capacity of local partners to apply gender tools and methods so they can better formulate and deliver programs to meet the needs of girls and boys.
- **Coordination and dissemination:** Disseminate lessons learned and best practices about gender-sensitive approaches.

Examples of Gender-Sensitive Approaches to Gender Barriers in AYA		
Component	Gender-Related Barrier	Gender-Sensitive Approaches
Policy and advocacy	Girls from impoverished families are taken out of school in order to provide help at home, limiting their access to education and SRH information.	<ul style="list-style-type: none"> <li>• Advocate for provision of food in school to provide incentives to families to keep girls in school.</li> <li>• Raise awareness among policy-makers of the links between girls' access to education and negative SRH and development outcomes.</li> </ul>
Behavior change communication	Girls do not encourage their partners to use condoms.	<ul style="list-style-type: none"> <li>• <b>Research:</b> Identify causes of girls' reluctance to discuss condom use through participatory exercises and needs assessments.</li> <li>• <b>Skill building:</b> Strengthen girls' confidence and role in SRH decision making through exercises in communication, negotiation, and problem analysis.</li> <li>• <b>Communication:</b> Encourage girls' active role in condom negotiation through mass media messages showing girls initiating discussions about condom use with their partners.</li> </ul>
Youth-friendly services	Boys do not use reproductive health services.	<ul style="list-style-type: none"> <li>• <b>Facility Practices:</b> Provide guidelines to facilities on how to make services male friendly (e.g., signs aimed at male audiences, male providers experienced with serving boys, and/or special hours for boys).</li> <li>• <b>Provider Practices:</b> Design outreach activities to reach young men in community locations where they are comfortable in accessing counseling and condoms.</li> <li>• <b>Client Satisfaction:</b> Ensure that services and outreach activities elicit the perspectives and respect the privacy and confidentiality of boys.</li> </ul>
Livelihood skills	Girls who are employed cannot use SRH services because they work during health clinic hours.	<ul style="list-style-type: none"> <li>• Provide SRH information and services in training programs and workplaces.</li> <li>• Advocate for clinic hours convenient for working girls.</li> </ul>
Institutional capacity building	Local partners lack expertise in gender-sensitive programming	<ul style="list-style-type: none"> <li>• Train local partners in the use of gender analysis and tools to identify gender barriers and appropriate program responses in their cultural context.</li> </ul>
Coordination and dissemination	Information about boys' participation in SRH programs is limited.	<ul style="list-style-type: none"> <li>• Disseminate lessons learned and best practices about what approaches best involve boys in AYA program efforts and how their participation affects program impact.</li> </ul>

## References & Recommended Resources

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