



Gender and Reproductive Health 101



Facilitator Guide



1 day

Note to Facilitator:

This module serves as an introduction to gender and reproductive health programs, principally for use with USAID personnel and partner organizations both in the United States and overseas. It assumes participants have little or no knowledge about gender and health—although many people who have experience also find it useful as a refresher course on the issues. It is essential that the facilitator be familiar with the various tools/frameworks included in the module, including the gender integration continuum and gender analysis.

Workshop objectives:

By the end of this workshop, participants will be able to

- ✓ Define gender and related terms;
 - ✓ Understand the IGWG Gender Integration Continuum as a lens for assessing project approaches;
 - ✓ Understand USAID and PEPFAR requirements for addressing gender; and
- Apply a process for gender analysis.

Pre-workshop preparation:

1. Read the “So What Report,” “Gender Integration Manual,” and other IGWG publications (from www.igwg.org) to familiarize yourself with the content and language.
2. Tailor the workshop objectives and agenda to your audience’s needs.
3. Prepare flipcharts.
4. Print 2 copies of the continuum case studies. Trim and paste them on colored paper (different colors for each case study).
5. Select the program objectives for gender analysis and integration exercise (Session VI).
6. Make copies of the handouts for each participant.



Gender and Reproductive Health 101



Facilitator Guide

Materials

Flipcharts and markers

Printed flipcharts:

- Introduction Questions
- Workshop Objectives and Agenda
- Gender Definitions and Terms
- IGWG Gender Integration Continuum Graphic
- Gender Continuum Group Task

Facilitator sheet: Statements for “Vote With Your Feet”

Continuum case studies, printed and color-coded

PowerPoint presentation: “Gender 101 Master Presentation”

Handouts:

- Workshop Objectives and Agenda
- Gender Terms and Definitions
- IGWG Gender Integration Continuum
- Tables 1 and 2: Integrating Gender into the Program Cycle
- Participant Evaluations



Gender and Reproductive Health 101



Facilitator Guide

Agenda

I. Welcome/Introductions/Agenda	60 minutes
II. “Vote With Your Feet”	45 minutes
Break 15 minutes	
III: Defining Gender and Related Terms	45 minutes
IV: Gender in USAID’s Automated Directives System (ADS)	45 minutes
Lunch 1 hour	
V. IGWG Gender Integration Continuum	90 minutes
Break 15 minutes	
VI. Introduction to Gender Analysis and Integration	120 minutes
VII. Close/Evaluation	15 minutes

Optional Exercise: Recognizing that USAID Missions may be working with different frameworks and/or expectations, an additional exercise may be added between Sessions V and VI, using the Problem Tree to explore gender issues in the context of health. The Problem Tree is an excellent, well-tested tool; however, it requires strong facilitation and probing skills and in-depth knowledge of gender issues in the local context. This optional exercise is described at the end of this facilitator’s guide (pp. 21–22).

Session I: Welcome, Introductions, Review of Objectives and Agenda

Materials

Flipcharts and markers


Printed flipcharts:

Introduction Questions


Workshop Objectives and Agenda

Handouts: Workshop Objectives and Agenda

Activity 1: Welcome and Introductions

 Total: 40 minutes

Welcome

 5 minutes

1. Welcome the group to the workshop. Explain that the IGWG is committed to providing training and information critical to understanding how gender affects our work in reproductive health. Say that the focus of this workshop will be introducing a process for integrating gender into reproductive health and HIV programs.
2. Introduce yourself and explain your role in the workshop. Invite any other facilitators to introduce themselves as well and explain their roles.

Introductions

 35 minutes

1. Divide the group into pairs and ask them to find out the following about each other. Post the questions below on a flipchart and allow participants 10 minutes for discussion.




Introduction Questions

- What is your name?
- Where do you work?
- For which programs/projects are you responsible?
- What is your experience with gender in development?
- Relate one expectation you have for this workshop.

2. After 10 minutes, ask the pairs to introduce each other **briefly** to the larger group. Record their expectations on newsprint for use during the agenda/objectives review. As participants introduce themselves, note any similar or unique experiences.

Session I: Welcome, Introductions, Review of Objectives and Agenda

Activity 2: Review of Workshop Objectives and Agenda

 20 minutes


1. Review the workshop objectives and agenda, referring to prepared flipchart. Direct participants to follow along with their own copy in their folder. Compare participant expectations mentioned in the introductions to the pre-defined objectives and activities. As you discover expectations that fall beyond the scope of the workshop, record them on a flipchart marked “Parking Lot.” Explain that you will consult IGWG staff about expectations mentioned here, and where the participant may find information on the topic.
2. Ask participants if they have any questions about the workshop’s objectives and agenda.

Transition to “Vote With Your Feet”

Explain to the participants that the next exercise will get them up and moving around.

Session II: Vote With Your Feet

Activity 1: Vote With Your Feet

 45 minutes

1. Ask the group to stand in the center of the room. Explain that you are going to call out a statement. (A complete list of suggested statements is available on the next page). Tell the participants to step to the right if they agree with the statement, or step to the left if they disagree.
2. Call out the first statement. Repeat it to ensure that everyone heard it. After everyone indicates whether they agree or not, ask 2 or 3 participants from each side to explain why they voted the way they did.
3. Facilitate a brief discussion about their reasons. Read up to 5 statements.
4. Debrief the activity by explaining the following:
 - Even though we may be familiar with gender and the importance of gender-sensitive programming, some questions are still difficult for us to work with.
 - Our own experience with and beliefs on gender can have an impact on how we view and understand our projects/programs.
 - We need to keep this in mind as we ask staff and project beneficiaries to address gender issues.

Break 15 minutes

Transition to “Defining Gender and Related Terms”

Tell participants that next we are going to explore how we define gender and related terms.

Session II: Vote With Your Feet

Statements on Gender Roles and Sexuality

- A woman's place is in the home.
- The most important thing a woman can do is have babies.
- A man is only valued for his ability to make money and provide for his family.
- A man is more of a "man" once he has fathered a child.
- Women are naturally better parents than men.
- A woman should have sex only with someone she loves.
- A man should have sex only with someone he loves.
- Sex is more important to men than to women.
- A woman should be a virgin at the time of marriage.
- It is okay for a man to have sex outside of marriage if his wife does not know about it.

Statements on Men and Reproductive Health


- Increasing men's participation in family planning and reproductive health programs will only further increase men's power over women.
- Family planning will always be a more important issue to a woman than to a man because she is the one who can get pregnant.
- Men are more concerned about STDs than women are.
- Clinics should concentrate on serving older, married men because adolescent males are highly unlikely to seek clinical services.
- Men are uncomfortable going to a female-oriented health facility or being treated by a female clinician.

Additional Statements on Gender

- Men will feel threatened if too many women are in leadership roles.
- For women to succeed in the workplace, special benefits and dispensations must be made available to them.
- The burden of accommodating women's needs in the workplace is too costly.
- Gender equitable relationships should not be the goal of an FP/RH program.
- Female-controlled contraceptive methods perpetuate gender inequality in sexual relationships (because responsibility for contraceptive protection remains on women).
- It is unfair and inappropriate to expect service providers to mitigate power dynamics between the couple seeking services.

Session III: Defining Gender and Related Terms

Activity 1: Defining Gender and Related Terms

 45 minutes

Materials

Printed flipcharts: Gender Definitions and Terms
Handout: Gender Definitions and Terms

1. Divide the group into pairs. Assign each group one of the following terms:

- sex
- gender
- gender equity
- gender equality
- homophobia
- gender integration
- gender mainstreaming
- women's empowerment
- constructive men's engagement
- heterosexism

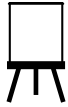
Tell the pairs to take 5 minutes and define the term. When they are done, ask them to write the definition on a flip chart and tape it up on the wall.

2. Have the group assemble around each term, have the pairs read the definition, and ask the larger group for their thoughts on how it was defined. Clear up any incorrect information if necessary.
3. Display the newsprint with the IGWG's definition of each gender term (see next page). Explain to the group that gender is defined in many ways, as displayed by their words, but for our purposes today, we are going to use the IGWG definitions. Continue through each IGWG definition.

Facilitation Alternative: If desired, the facilitator can use slides 2–8 and the accompanying speaker's notes from the "Gender 101 Master Presentation." These PowerPoint slides present the definitions of the standard 10 terms included in this exercise.

Session III: Defining Gender and Related Terms

Continued:



Sex refers to the biological differences between males and females. Sex differences are concerned with male and female physiology.

Gender refers to the economic, social, political, and cultural attributes and constraints and opportunities associated with being a woman or a man. The social definitions of what it means to be a woman or a man vary among cultures and change over time. Gender is a sociocultural expression of particular characteristics and roles that are associated with certain groups of people with reference to their sex and sexuality.

Gender Equity is the process of being fair to women and men. To ensure fairness, measures must be taken to compensate for historical and social disadvantages that prevent women and men from operating on a level playing field.

Gender Equality is the state or condition that affords women and men equal enjoyment of human rights, socially valued goods, opportunities, and resources.

Gender Integration refers to strategies applied in program assessment, design, implementation, and evaluation to take gender norms into account and to compensate for gender-based inequalities.

Gender Mainstreaming is the process of incorporating a gender perspective into policies, strategies, programs, project activities, and administrative functions, *as well as into the institutional culture of an organization.*

Women's Empowerment means improving the status of women to enhance their decision-making capacity at all levels, especially as it relates to their sexuality and reproductive health.

Constructive Men's Engagement promotes gender equity with regard to reproductive health; increases men's support for women's reproductive health and children's well-being; and advances the reproductive health of both men and women.

Homophobia is the irrational fear of, aversion to, or discrimination against homosexuals or homosexual behavior or cultures. Homophobia also refers to the self-loathing by homosexuals as well as the fear of men who do not live up to society's standards of what it is to be a "true man."

Heterosexism is the presumption that everyone is heterosexual and/or the belief that heterosexual people are naturally superior to homosexual and bisexual people.

4. Ask the group if it has any further questions and/or comments.

Transition to "Gender in USAID's Automated Directives System (ADS)"

Session IV: Gender in USAID's Automated Directive System (ADS)

Activity 1: Gender in USAID's Automated Directives System (ADS)

 45 minutes

Materials

PowerPoint Slides –26 from the
“Gender 101 Master Presentation”

1. Tell the group that USAID has collected mounting evidence illustrating that by addressing gender, we can achieve more sustainable program objectives. The USAID policy guidance (directives) also tell us that that we must do a better job addressing gender in all of our projects. It's rather like a “carrot and stick” approach: we need to follow the ADS guidance (stick), but doing so will make our work more sustainable (carrot). Similarly, there are laws (e.g., the PEPFAR legislation) and regulations that govern other USG programs and apply both to USG personnel and to contractors.
2. Deliver the PowerPoint presentation, using the talking points provided in the speaker's notes. The presentation should be interactive in nature, where possible. Stop periodically and ask if there are any questions, especially when presenting complex or challenging concepts.

Facilitator Note: It is **essential** that you familiarize yourself with the ADS and PEPFAR legislation before presenting this piece. This section usually generates many questions, and the facilitator needs to be able to answer them in order for the participants to understand how important this topic is. Any of the IGWG core training team members can provide assistance.

3. Ask if there are any final questions or need for clarification.


Lunch **1 hour**

Facilitation Alternative: If you are doing a shorter version of this module for an audience that requires less in-depth coverage of the USAID ADS, you can skip the following slides and adjust your comments and timing accordingly: slides 13-15, 21-26.

Transition to “IGWG Gender Integration Continuum”

Tell the participants that they will learn about the IGWG gender integration continuum and learn how to categorize project examples by using the continuum.

Activity 1: Gender Integration Continuum

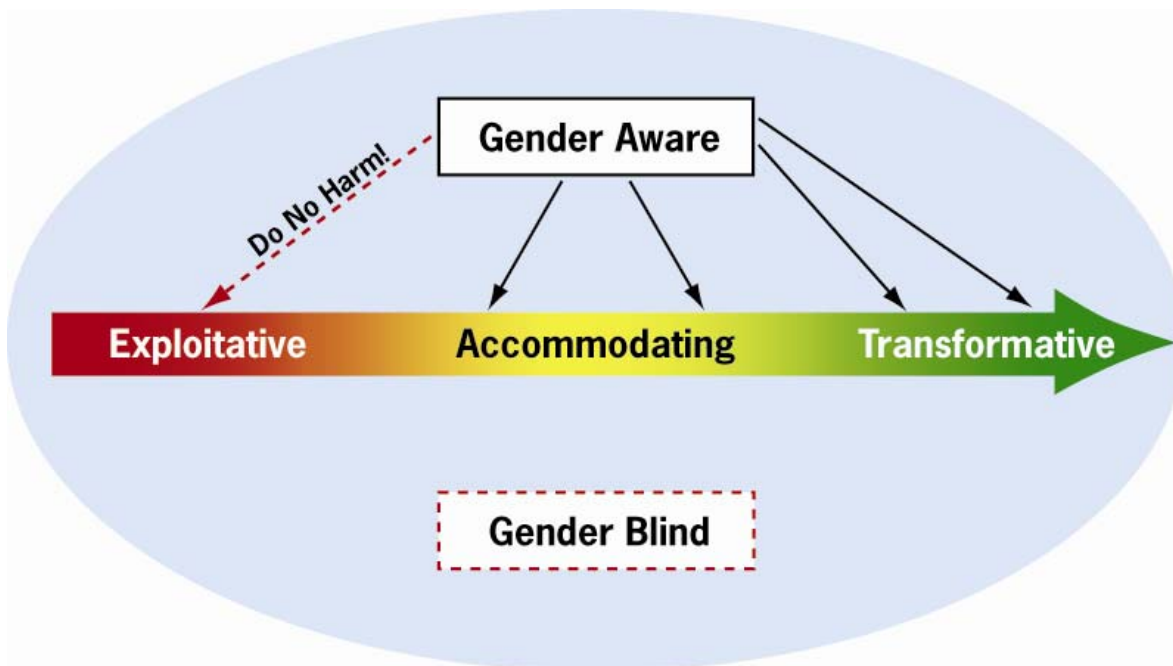
 60 minutes

Materials

Printed Flipcharts:
 IGWG Gender Integration Continuum Graphic
 Gender Integration Continuum Group Task
 Continuum Case Studies—color-coded

Explain that we have been exploring the importance of understanding how gender can affect our project outcomes. To guide various projects on how to integrate gender, the IGWG has developed a conceptual framework known as the Gender Integration Continuum. This framework categorizes approaches by how they treat gender norms and inequities in the design, implementation, and evaluation of program/policy.¹

The term “**gender blind**” refers to the absence of any proactive consideration of the larger gender environment and specific gender roles affecting program/policy beneficiaries. Gender blind programs/policies would give no prior consideration for how gender norms and unequal power relations affect the achievement of objectives, or how objectives impact on gender. In contrast, “**gender aware**” programs/policies deliberately examine and address the anticipated gender-related outcomes during both design and implementation. An important prerequisite for all gender-integrated interventions is to be gender aware.



¹ This framework draws from a range of efforts that have used a continuum of approaches to understanding gender, especially as they relate to HIV/AIDS. See Geeta Rao Gupta, “Gender, Sexuality and HIV/AIDS: The What, The Why and The How” (Plenary Address at the XIII International AIDS Conference), Durban, South Africa: 2000; Geeta Rao Gupta, Daniel Whelan, and Keera Allendorf, “Integrating Gender into HIV/AIDS Programs: Review Paper for Expert Consultation, 3–5 June 2002,” Geneva: World Health Organization 2002; and WHO/ICRW, “Guidelines for Integrating Gender into HIV/AIDS Programmes,” forthcoming.

Session V: IGWG Gender Integration Continuum

Talking points to introduce the gender integration continuum:

In the continuum graphic, the circle depicts a specific program environment. Since programs are expected to take gender into consideration, the term “gender aware” is enclosed in an unbroken line, while the “gender blind” box is defined by a dotted, weak line. Awareness of the gender context is often a result of a pre-program/policy gender analysis. “Gender aware” contexts allow program staff to consciously address gender constraints and opportunities, and plan their gender objectives.

The gender integration continuum is a tool for designers and implementers to use in planning how to integrate gender into their programs/policies. Under no circumstances should programs take advantage of existing gender inequalities in pursuit of health outcomes (“do no harm!”), which is why, when printed in color, the area surrounding “gender exploitative” is red, and the arrow is dotted.

Gender aware programs/policies are expected to be designed with gender accommodating or transformative intentions, or at other points along that end of the continuum. Programs/policies may have multiple components that fall at various points along the continuum, which is why multiple arrows exist. The ultimate goal of development programs/policies is to achieve health outcomes while transforming gender norms toward greater equality; therefore, the area around “gender transformative” is green (‘proceed forward’), and the arrow extends indefinitely toward greater equality.

Gender exploitative approaches, on the left of the continuum, take advantage of rigid gender norms and existing imbalances in power to achieve the health program objectives. While using a gender exploitative approach may seem expeditious in the short run, it is unlikely to be sustainable and can, in the long run, result in harmful consequences and undermine the program’s intended objective. It is an unacceptable approach for integrating gender.

Gender accommodating approaches, in the middle of the continuum, acknowledge the role of gender norms and inequities and seek to develop actions that adjust to and often compensate for them. While such projects do not actively seek to change the norms and inequities, they strive to limit any harmful impact on gender relations. A gender accommodating approach may be considered a missed opportunity because it does not deliberately contribute to increased gender equity, nor does it address the underlying structures and norms that perpetuate gender inequities. However, in situations where gender inequities are deeply entrenched and pervasive in a society, gender accommodating approaches often provide a sensible first step to gender integration. As unequal power dynamics and rigid gender norms are recognized and addressed through programs, a gradual shift toward challenging such inequities may take place.

Session V: IGWG Integration Gender Continuum

Gender transformative approaches, at the right end of the continuum, actively strive to examine, question, and change rigid gender norms and imbalance of power as a means of reaching health as well as gender equity objectives. Gender transformative approaches encourage critical awareness among men and women of gender roles and norms; promote the position of women; challenge the distribution of resources and allocation of duties between men and women; and/or address the power relationships between women and others in the community, such as service providers and traditional leaders.


Program/policy planners should keep in mind that a particular project may not fall neatly under one type of approach, and may include, for example, both accommodating and transformative elements. It is also important to note that while the continuum focuses on gender integration goals in the design/planning phase, it can also be used to monitor and evaluate gender and health outcomes, with the understanding that sometimes programs result in unintended consequences. For instance, an accommodating approach may contribute to a transformative outcome, even if that was not the explicit objective. Conversely, a transformative approach may produce a reaction that, at least temporarily, exacerbates gender inequities. Monitoring and evaluating gender outcomes against the continuum allows for revision of interventions where needed.

Most importantly, program/policy planners and managers should follow two gender integration principles:

- First, **under no circumstances should programs/policies adopt an exploitative approach** since one of the fundamental principles of development is to “do no harm.”
- Second, **the overall objective of gender integration is to move toward gender transformative programs/policies**, thus gradually challenging existing gender inequities and promoting positive changes in gender roles, norms, and power dynamics.

Session V: IGWG Gender Continuum

Activity 2: Applying the IGWG Gender Continuum (Small Group Work)

 30 minutes

1. Ask the group to count off by five to create five small groups of three people. The ideal size for the small groups is three people each to enable in-depth discussion.
2. Explain that you will distribute two project examples to each small group and ask them to complete the following task (printed on flipchart). Give them 15 minutes to work on the task.



Continuum Group Task:

Read your assigned project/activity examples and determine as a group where you would locate the project approach along the gender continuum: **exploitative**, **accommodating**, or **transformative**. Paste the project example accordingly on the wall under the category titles.

If you feel that the project was designed without taking gender into account whatsoever, place the example near “gender blind.”

Focus on the intention or design of the project rather than outcomes, as outcomes are influenced by many factors outside the control of the project team.

Facilitator Note: You will need to provide at least one project description for each of the three categories—**exploitative**, **accommodating** and **transformative**. When distributing examples to small groups, ensure that each group works with examples of two different categories.

Facilitation Alternative: Some trainers prefer to give a common project example to two groups and find that sometimes the groups classify the examples differently. This can result in an interesting debate.

After the small groups have placed their project description cards along the continuum, ask a representative from each group to come forward, read the project description, and explain the group’s reasoning. Entertain reactions or questions from the other groups.

IGWG trainers note that the richness of this exercise comes in the processing. The IGWG has classified the various project examples according to continuum category. That category appears on the project description template as a reference for the facilitator. The IGWG’s advice to the facilitator is to foster an in-depth debate and provide the “IGWG answer” only if it’s helpful to the group. The point of the exercise is to foster discussion about how a project’s design reflects choices vis-à-

Session V: IGWG Gender Continuum

In most cases, there is no “correct” answer for these examples, as participants will have alternate contexts or scenarios that influence their interpretation of the project’s intention or design and therefore place the example in different locations on the continuum. Encourage diversity in this exercise, letting people explain their placements and any assumptions they made to arrive at their decision.

4. Debrief the activity by highlighting the following points:


- For the examples categorized as **gender blind, exploitative, and/or accommodating**, ask participants what steps can be taken to move those project designs toward the **transformative** end of the continuum.
- At a minimum, health and development projects should strive to “do no harm” in terms of gender norms and relations. From the IGWG’s perspective, there is no viable rationale for designing a project that deliberately exploits gender inequality (gender exploitative projects). All USAID-supported projects are required to avoid doing harm from a gender standpoint.
- When a project team fails to look at gender issues in a project design, they are missing an opportunity. In the case of some gender **accommodating** examples, project managers have opted to conform to existing gender norms in order to enhance programmatic/health outcomes. Other times, a project may accommodate gender norms as an interim step in response to an identified gender issue. Gender accommodating strategies can be a reasonable way to “buy time” while the project figures out how to best address a gender issue in a way that transforms gender relations and promotes gender equity. The IGWG’s position is that transforming gender relations in favor of equity provides a “win-win” situation in terms of health outcomes, addressing both short-term project objectives and long-term sustainability.
- The IGWG’s goal is to challenge project managers to promote projects/activities that transform gender relations. In some cases, a project will be based on a **transformative** intention, but the outcomes fall short. Usually, this calls for re-design work.
- Ask the group to consider their existing projects and activities and how they would classify them along the gender continuum. (In an extended workshop, participants will have the chance to apply the gender continuum directly to their own projects.)

Transition to “Introduction to Gender Analysis and Integration”

Tell participants that you will lead them through a gender analysis that they can apply to their own programs.

Session VI: Introduction to Gender Analysis and Integration

Activity 1: Introduction to Gender Analysis and Integration (PowerPoint presentation)

 30 minutes


Materials

PowerPoint Slides 27–44 from the “Gender 101 Master Presentation”

1. Deliver the lecture on gender analysis and integration (slides 27–44 in the “Gender 101 Master Presentation”). Use the speaker’s notes included in the presentation. Encourage discussion and questions to ensure you do not lose the attention of the participants during the lecture.
2. For a list of common obstacles faced by women within RH programs, see Yinger, N. et al. 2002. “A Framework to Identify Gender Indicators for Reproductive Health and Nutrition Programming.” Washington, DC: USAID IGWG Subcommittee on Research and Indicators. This and other resources are available at www.igwg.org.

Session VI: Introduction to Gender Analysis and Integration

Activity 2: Applying Gender Analysis to Health Programs

 90 minutes

Materials

PowerPoint Slides 45–47 from the “Gender 101 Master Presentation”
Handouts: Tables 1 and 2, Integrating Gender into the Program Cycle

1. Explain that to give participants a chance to practice integrating gender into health programs, we have developed two worksheets to help guide this process. Hand out copies of Tables 1 and 2.
2. First, walk participants through Table 1, identifying the various components. Then ask participants to consider a concrete example (a case study that the facilitator has prepared in advance, a scenario from the movie, or their own project context).
3. Supply the participants with a sample overall program goal or health objective, written on a prepared flipchart).

For example, in the case of a safe motherhood (SM) program, a sample program objective could be “To ensure timely access to high-quality emergency obstetric care for all pregnant women.”

For this example, ask the participants to identify the following items, as per the columns in Table 1:

1st column—Key *gender* relations in each of the 4 domains +power that can be identified from the case study or other specific context being considered. Probe to be sure that women and men are considered and then that different levels are considered. (Record key highlights on a flipchart that looks like column A.)

2nd column—Having identified key information from the case study, ask participants to identify any additional/missing information that might help the program understand the gender barriers or constraints to safe motherhood. (Record a couple on a flipchart that looks like column B.)

3rd column—Gender-based constraints . . . for the women, for the men. Based on the gender relations identified, ask participants to identify which are *key gender constraints for the SM program (or the specific project being considered)*. Ensure that participants look across different domains and consider a few different levels. (Record a couple on a flipchart that looks like column C.)
(continued on next page)

Session VI: Introduction to Gender Analysis and Integration

(continued from page 17)

4th column—Gender-based opportunities for the woman, her spouse. Based on the gender relations identified, ask participants to identify any that could *be key gender opportunities for the SM program (or the specific project being considered)*. Ensure that participants look across different domains, and consider a few different levels. (Record a couple on a flipchart that looks like column D.)

4. Direct participants to Table 2, explaining that based on the gender analysis in Table 1, we can now consider specific sub-objectives, activities, and indicators. Walk participants through the use of Table 2, identifying the various components (and noting their tie to steps 2, 3, 4, and 5 of the program cycle).
5. Then ask participants to continue with the program example they have been using. Ask participants to choose one *priority gender-based constraint to the SM program (or other program being considered)* identified in Table 1. Related to this constraint, ask participants to identify:

1st column—A specific sub-objective related to a change they would like to see in this gender constraint. (Record on a flipchart that looks like the 1st column, Table 2.)

2nd column—1–2 sample activities that could help achieve this objective. (Record on a flipchart that looks like the 2nd column, Table 2.)

3rd column—A sample indicator that would indicate a decrease in, or removal of, this gender barrier. (Record a couple on a flipchart, record on a flipchart that looks like the 3rd column, Table 2.)

Question—Finally, ask the group to consider where on the IGWG Gender Integration Continuum they would place their brainstormed activities.

6. Ask participants if they have any questions or comments about Table 2 or the overall suggested process of using Tables 1 and 2.
7. Review the instructions for the exercise (Slide 47 of the presentation and on the next page of this guide). Explain that groups will have 60 minutes to complete both Tables 1 and 2 and that each group should complete both tables for its case study (although each group only needs to prepare flipcharts and present on one of the two tables, as assigned per the instructions on the presentation slide).

Session VI: Introduction to Gender Analysis and Integration

(continued from page 18)



Instructions for Exercise

1. Read your assigned case study
 - Groups 1A and 1B—Case study 1 (fill in)
 - Groups 2A and 2B—Case study 2 (fill in)
2. Complete Table 1, identifying gender-based opportunities, constraints, and missing information
3. Complete Table 2, identifying gender sub-objectives, activities, and indicators
4. Record highlights of your responses on flipchart paper
 - Groups 1A and 2A—Table 1
 - Groups 1B and 2B—Table 2

5. Debrief the activity by asking the following questions:
 - What did you think of this framework and exercise?
 - How will/can you apply this framework to your current project work?
 - Ask for final questions.

Facilitation Alternative: Depending on the workshop’s objective(s), the facilitator may prefer to structure this exercise so that groups work directly on their own real project examples rather than sample objectives from other sources. In this case, the facilitator should determine ahead of time 3–4 relevant project examples with clear objectives and assign one to each working group.


Transition to “Close and Evaluations”

Tell participants that you will be wrapping-up the workshop by discussing strategies for their programs to better integrate gender.

Session VII: Close and Evaluations

Materials

Participant Evaluation Form

 15 minutes

Where Do We Go from Here?

1. Facilitate a discussion on the following points. Record salient points and any decision made.
 - What has your project done regarding gender and the roles of men and women?
 - What gaps do you see in your project vis-à-vis gender?
 - By being women-focused, does it mean a project is excluding men?
 - Where do we go from here?
 - What language do we have at our disposal to talk about gender and health? Are we using that language to capture and report on our gender work?

Refer to Slide 48 of the Master PowerPoint Presentation: “Resources at USAID”

- Encourage participants to visit the IGWG website (www.igwg.org) and to join the IGWG listserv.

Close/Evaluation

1. Distribute evaluation.
2. Thank the group for their hard work and participation.

Optional Exercise: Problem Trees and Gender Analysis

Note: This exercise can be inserted between Sessions V and VI if considered useful and time allows.

Activity 1: Problem Tree Exercise



2 hours

Materials

Prepared Newsprint: Example Problem Tree,
facilitator's topic of choice

Draw an example of a problem tree based on the description given below. The problem tree should depict at least one primary and secondary cause of the problem you are illustrating and at least one primary and secondary consequence of this problem.

Instructions:

1. Explain to the group that before we even think about how to program for integrating gender in projects and programs, we need to do a gender analysis. Explain to the participants that this exercise will help them explore the underlying gender-related issues that can contribute to different health problems.
2. Divide the participants into groups of three. Ask each group to pick one person who can report back to all the participants at the end of the session.
3. Explain to the groups that they will use a tool called a problem tree in this activity. Each group will focus on a different health problem: Group 1 will focus on obstetric fistula; Group 2 will focus on the lack of male involvement in family planning; and Group 3 will focus on early childbearing.
4. Provide a flipchart and a few markers to each group. Ask one person in each group to draw a large tree trunk and to write the assigned problem on the trunk. For example, Group 1 would write obstetric fistula on the trunk. Explain to the participants that this picture represents a “problem tree,” and it will graphically help to illustrate the different causes and consequences of their assigned problem.
5. Ask the groups to brainstorm some of the causes of their assigned problem. This can be as broad or as narrow as the group desires. On the problem tree, each cause should be depicted as one of the roots of the tree. After mentioning each cause, the group should think about what else can contribute to that initial cause. For example, if one of the causes is “lack of education among women,” then the group should think about what causes lack of education among women. One of the causes could be “social norms”—this would then be depicted as a subroot of the original cause—“lack of education among women.” Use the problem tree that you prepared earlier as an example for participants. Give the groups 15 minutes to do this exercise.

Optional Exercise: Problem Trees and Gender Analysis

(continued from page 21)

6. Explain to the participants that now they will focus on identifying the different consequences of their assigned problem. In their picture of a problem tree, the consequences will be depicted as the branches of the tree. As they did with the causes, the groups should brainstorm and identify the primary and the secondary consequences of their assigned problem. Again, use the problem tree that you prepared earlier as an example for participants. Give the groups 15 minutes to complete the exercise.
7. Once they are done, ask them to use a different colored marker and circle the causes and consequences of their assigned problem that are in any way related to gender.

Transition to Session VI, Activity One: Lecture on “Gender Analysis and Integration”

After the presentation has ended, ask the participants if they have any questions.

1. Ask participants to return to the problem trees and decide under which domain or domains each root problem and consequence falls.
2. Bring all the groups together again and ask one person from each group to summarize the results of their problem tree. After each summary, ask the group to include any additional causes or consequences that had not been included so far. Next, ask the participants to consider if they agree with the causes and consequences that were identified as being gender-related. Ask the group to identify which domain they believe that cause belongs to. Discuss these and identify any additional gender-related issues with the group. Continue this methodology with all three problem trees.
3. Conclude this activity by discussing the following questions with participants:
 - How many of the causes and/or consequences were gender-related? Was this surprising to the participants? Why or why not?
 - What were the common gender-related causes identified by all the groups? Was this surprising to the participants? Why or why not?
 - What were the common gender-related consequences identified by all the groups? Was this surprising to the participants? Why or why not?
 - As an organization, what gender-related causes could you address? What gender-related consequences?