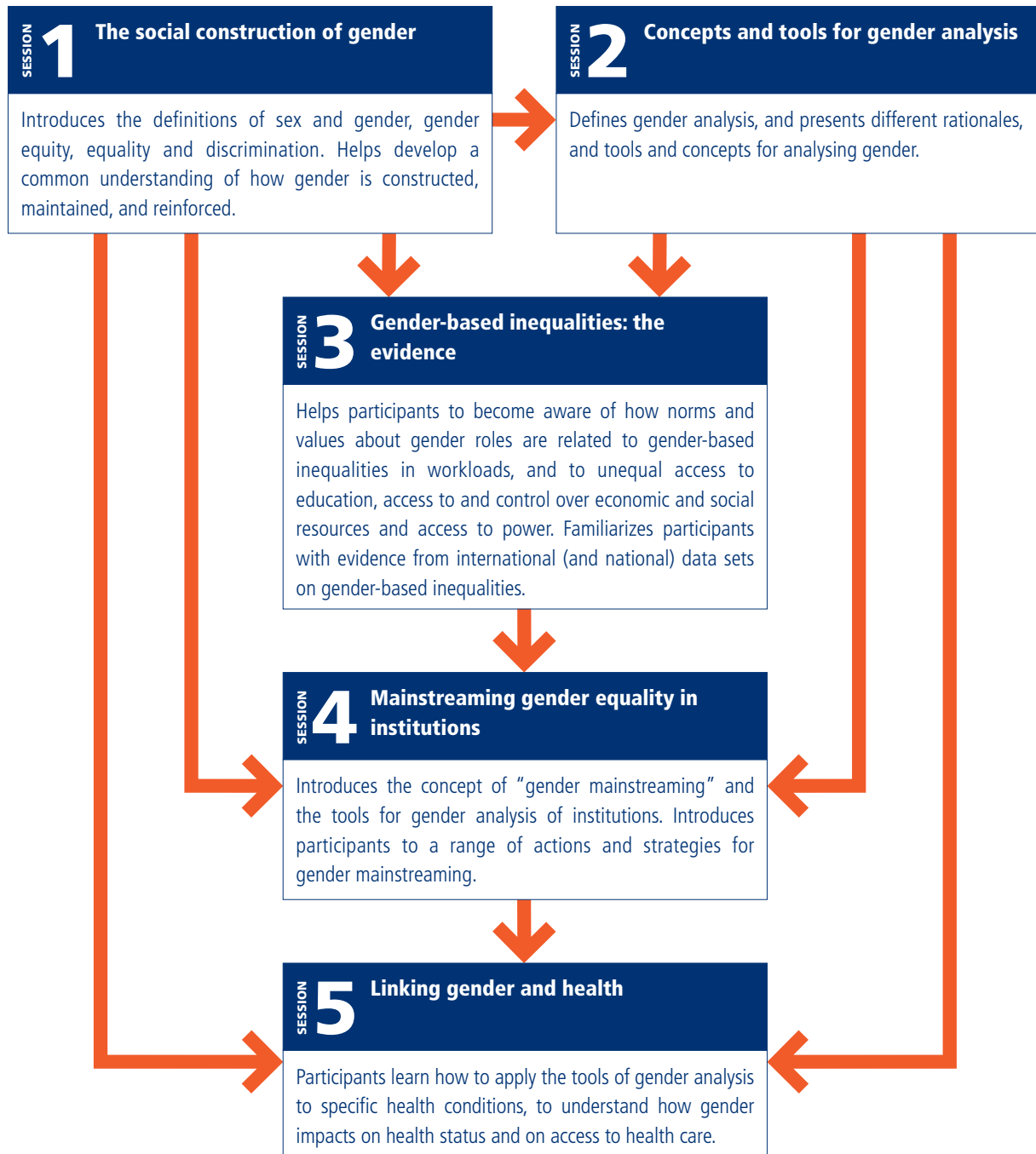


Module 1: **Gender**



Structure of the Gender Module



MODULE 1

Module brief

What participants should get out of the Gender Module

Participants will:

- be familiar with the conceptual differences between sex and gender, and develop a common understanding about how gender is constructed, maintained, and reinforced
- become aware of the common areas and the variations in the construction of gender in different social and cultural contexts
- understand and apply concepts and tools for gender analysis, including tools for gender mainstreaming
- become aware of how norms and values about gender roles are related to gender-based inequalities in workloads and to unequal access to education, access to and control over economic and social resources, and access to power
- examine and interpret evidence from international (and national) data sets on gender-based inequalities in education, and in economic, social, and political status
- learn how to apply the tools of gender analysis to specific health conditions and understand how gender impacts on health.

The thinking behind the module

Gender as a social construct

Starting with participants' own life experiences, this module introduces them to the concept of gender as a social construct. The module looks at how gender as a social construct attributes different roles and responsibilities to females and males, and gives them unequal access to resources and power. You introduce tools to help participants understand the mechanisms that underlie and contribute to gender-based differences, and apply these tools to health issues to see how gender impacts on health. The Gender Module lays the basis for understanding the themes of the three application modules: how gender issues permeate health information; evidence used for making decisions in the health sector; health policies; and planning and implementing health programmes.

Session 1 helps participants develop an understanding about how gender is constructed, maintained and reinforced. It also clarifies terms like gender equality, gender equity and gender-based discrimination. The session starts from participants' life experiences of how they have been socialized into playing gender roles. You then lead

them to discover that the gendered roles they play as adults are a result of messages they have learned and internalized since childhood. Further, they begin to see the roles that the family, school, religious institutions, work organizations, media and other social institutions play in constructing what men and women do in society. By reflecting on their own experiences, they begin to understand that the social construction of gender can also be determined by race, class, caste, age, marital status and so on.

(We suggest that you schedule the first session of the Gender Module for the opening day of the course, following on from the Opening Module. The other gender sessions will take another full day.)

In Session 2, participants revisit the concepts of gender and sex and do an exercise to clarify the differences between the two concepts. Gender differences are sometimes confused with biology: for example when we assume that women are better suited for the caring professions such as nursing and child-minding, because they are naturally made that way. This session also introduces some basic concepts and tools for analysing gender: the gender-based division of labour; gender roles and norms; access to and control over resources; and access to decision making and power.

Session 3 illustrates how the gender-based division of labour is far from a simple sharing of responsibilities, and is at the root of women being under-valued and their low status in society. You introduce participants to international (and/or national) data sets that show how gender differences are transformed into gender-based inequalities in the way resources and power are distributed. Participants then apply the gender concepts they have learnt in the previous sessions to interpret these data sets.

Session 4 introduces the concept of gender mainstreaming. Gender inequality is imbedded in many institutions in society, including health institutions. If society does not value women's input, social institutions are unlikely to do so either. If society does not give women access to decision-making, social institutions will not either. Likewise, if society does not value women's health, health institutions probably won't either. It is also important to analyse whether and how health institutions reinforce gender inequalities actively and explicitly, or more passively, by omission.

This session aims to help participants become sensitive to how the skills, information and tools that you have introduced them to during the course can help them in gender mainstreaming their own health institutions, as well as the health programmes they run, fund or use.

Session 5 helps make the links between gender and health. Using the case study of a health condition affecting both women and men, participants unravel the differentials between males and females in health status, health seeking behaviour and health outcomes arising from biological and gender differences.

Module outline

		Objectives Participants will:	Format of activities	Time: 9.5 hours
Introductory session	Introduction to the Gender Module	<ul style="list-style-type: none"> ● be acquainted with module structure, objectives and content 	Input	15 mins
SESSION 1	The social construction of gender	<ul style="list-style-type: none"> ● be introduced to the definitions of sex and gender ● develop a common understanding of how gender is constructed, maintained, and reinforced; and of the meanings of gender equity, gender equality and gender discrimination ● become aware of the common areas and differences in the construction of gender in different social and cultural contexts 	Individual work	15 mins
			Work in pairs	15 mins
			Whole group discussion	1 hr 30 mins
SESSION 2	Concepts and tools for gender analysis	<ul style="list-style-type: none"> ● internalize the conceptual differences between sex and gender ● learn tools and concepts for gender analysis 	Individual work	10 mins
			Whole group discussion and summary	1 hr
			Input and discussion	30 mins
SESSION 3	Gender-based inequalities: the evidence	<ul style="list-style-type: none"> ● become aware of the ways in which norms and values about gender roles are related to gender-based inequalities in workloads and to inequalities in access to education, access to and control over economic and social resources and access to power ● learn to examine and interpret evidence from international (and national) data sets on gender-based inequalities in education, economic and political status 	Group activity	1 hr
			Whole group discussion	1 hr 15 mins
SESSION 4	Mainstreaming gender equality in institutions	<ul style="list-style-type: none"> ● be introduced to the concept of gender mainstreaming ● become aware of the steps and changes required for achieving gender equality within their organizations 	Input	1 hr 30 mins
SESSION 5	Linking gender and health	<ul style="list-style-type: none"> ● learn to apply the tools of gender analysis to specific health conditions, and to understand how gender impacts on health status 	Input	20 mins
			Group work	30 mins
			Whole group discussion and summary	50 mins
Concluding session	Module summary	<ul style="list-style-type: none"> ● have a consolidated overview of tools and concepts introduced in the module, and the links between them 	Input	10 mins

Introduction to the Gender Module

What participants should get out of the session



You will introduce participants to the module's structure, contents and objectives.

15 minutes

How to run the session

This is an input session.



Introduce the module using **overheads** of:

- "What participants should get out of the Gender Module"
- "Structure of the Gender Module"
- "Module outline".

SESSION

1

The social construction of gender

What participants should get out of the session

Participants will:

- understand the definitions of sex and gender
- develop a common understanding of how gender is constructed, maintained and reinforced, and understand the meanings of gender equity, gender equality and gender discrimination
- become aware of the common areas and differences in the construction of gender in different social and cultural contexts.



2 hrs

about 2 hours

Materials

- marker pens
- at least 3 flip charts divided into 5 columns labelled like this:

Age	People involved	Place	What the incident was about	Feelings associated with the incident
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- overhead or flip chart: "Sex and gender", on p.43
- overhead or flip chart: "Gender equality, gender equity and gender discrimination", on p.43

Readings for the facilitator

1. Oakley A. *Sex, gender and society*, reprint. Bath, Pitman Press, 1982.
2. United Nations Division for the Advancement of Women/ Office of the High Commissioner for Human Rights/United Nations Development Fund for Women. Background paper prepared for the DAW/ OHCHR/UNIFEM Expert Group Meeting on Gender and Racial Discrimination (Zagreb, 21- 24 November 2000). New York, United Nations, 2000.
3. United Nations Division for the Advancement of Women/ Office of the High Commissioner for Human Rights/United Nations Development Fund for Women. Report of the Expert Group Meeting on Gender and Racial Discrimination, Zagreb, Croatia. Available online at: www.un.org/womenwatch/daw/csw/genrac/report.htm (Date accessed: February 2001).

How to run the session

This session consists of two activities. In the first, each participant writes down her or his first experience of realizing that he or she was different from members of the opposite sex. Participants then share these experiences in pairs. The second activity is a discussion with the whole group and an input from the facilitator.



Activity 1: Going back to childhood



Step 1: Individual work

Ask participants to think as far back as possible in their lives and to write down their first experience of realizing that they were different from members of the opposite sex and/or expected to behave differently and treated differently from members of the opposite sex.

In one or two paragraphs they should try to record:

- how old they were
- who was involved
- where the incident took place
- what the incident was about
- how they felt about it
- how other aspects of their identity (race, religious identity, nationality, ethnicity, caste) came into play in this incident.



Step 2: Sharing in pairs

Participants then share their stories in pairs.



Activity 2: Exploring sex, gender and socialization



Step 1: Report-backs to the group

Put up the flip charts you have made. Ask one of the pairs to volunteer to report on each others' stories to the whole group. Write the essential details under the specific columns.

There may not be enough time for all pairs to report back. Ask for examples that involve different actors and different places. For example, if the first pair reported about something that happened at home and involved family members, ask for volunteers who have a school-based incident to describe, and so on.

When participants have stories about physical/biological differences, for example when they mention the differences in genitalia and menstruation, encourage them to also give other examples that are not about physical features but about expected behaviour.



Step 2:
Your input:
introducing sex
and gender

This is an appropriate moment to introduce the definitions of sex and gender. Draw participants' attention to the fact that differences between boys and girls are not just those related to their anatomy and physiology. Boys and girls are taught to dress differently, behave differently, carry out different tasks, and so on.

Put up an already prepared flip chart or **overhead** transparency with these definitions of sex and gender.



Sex and gender

Sex is the biological difference between males and females.

Gender refers to the economic, social and cultural attributes and opportunities associated with being male or female in a particular social setting at a particular point in time.

Following this, introduce the terms gender equality, gender equity and gender discrimination on more flip charts or **overheads**. This is to help participants develop a common vocabulary for describing the various elements of gender-based differences.



Gender equality, gender equity and gender discrimination

- **Gender equality** means equal treatment of women and men in laws and policies, and equal access to resources and services within families, communities and society at large.
- **Gender equity** means fairness and justice in the distribution of benefits and responsibilities between women and men. It often requires women-specific programmes and policies to end existing inequalities.
- **Gender discrimination** refers to any distinction, exclusion or restriction made on the basis of socially constructed gender roles and norms which prevents a person from enjoying full human rights.



Step 3:
Group discussion:
personal
experiences

Go through each column in the flip chart you have filled in, and start a discussion.

What to cover in
the discussion

Age

The youngest age is usually interesting to note as it highlights how early socialization begins. The usual range is 5 to 10 years.

The people involved

Family members, peers, teachers and people in educational and religious institutions are usually the first to introduce a child to appropriate codes of gendered behaviour.

Place

This often corresponds with the kinds of people involved. The home or family for example, at play, in school or in church for peers and teachers and adults in general.

What the incident was about

Usually this includes:

- **Division of labour:** the kind of household chores that girls are expected to do compared to boys; girls work inside the home and boys outside; girls work for others in the home, for example cooking, washing dishes, cleaning the house and washing clothes; boys are sent out on errands; girls do things for boys like serving food, cleaning up after them and doing their washing; boys in some cultures are asked to escort girls in public.
- **Dress codes:** across cultures, girls and boys are expected to be dressed differently right from the moment they are born. These differences may vary across cultures and societies.
- **Physical segregation of boys and girls:** in many cultures, especially in Asia, physical segregation starts at an early age. Common experiences often include being told not to play with members of the opposite sex, or not to get involved in any activity that will bring one into physical contact with people of the opposite sex.
- **The kinds of games girls and boys play:** girls are not encouraged to play games like football, which involve vigorous physical activity and physical contact with each other; boys are often not allowed to play with dolls or play as homemakers. Boys who do not engage in rough physical games are thought to be "sissies".
- **Emotional responses:** girls and boys are expected to respond differently to the same stimulus; while it is acceptable for girls to cry, it is seen as a weakness in boys.
- **Intellectual responses:** there is an expectation that girls are not to talk back or express their opinions. This is often mentioned in relation to school and how teachers pay more attention to boys because they expect more of boys. In one training programme, a participant from Japan told the story of how, when she obtained the highest marks in class, her teacher called her and asked her to agree that instead he would give the highest marks to the boy who was really second. He explained that it would not be good for the boy to come second and the boys would not treat the girl well if she did better than them.

Class, caste, ethnic and other differences

Explore how differences across class, caste, ethnicity and nationality affect how girls and boys are expected to behave. For example, the physical segregation of boys and girls may not be as strict in other parts

of the world as it is in some countries of South and West Asia. There may be differences in the division of tasks by sex across different classes: girls from poorer social backgrounds are usually expected to shoulder many household responsibilities, and boys are expected to earn money; while girls and boys from richer households may have a very protected upbringing without responsibilities.

Women and men's different responses to the activity

This activity may cause stress and tears among some women in the group who are reminded of very painful experiences. They may feel angry that they did not have their eyes open about what was really happening to them. Some women have taken this opportunity to give examples of how they themselves have been perpetuating the oppression and abuse of women, and they get upset when they discover how trapped they have been.

In some groups, women express negative feelings about the specific incident: feelings of resentment, anger, disappointment, frustration, confusion, rejection, isolation, and loneliness and inferiority.

Men, on the other hand, have often expressed positive feelings: feeling superior, feeling like a man, feeling powerful and respected. Some men however may express that they feel burdened by the fact that they are expected to be the breadwinners in their households, or by the expectation that they should be strong and never break down in adverse circumstances.

Men can also feel insecure or defensive especially if they are a minority in the group. A lot depends also on the tone of the facilitator. Stereotyping all males as a problem, or blaming men for the problems faced by women is unfair and counter-productive.

Wrapping up

Ask participants how they felt doing the exercise, and deal sensitively with the emotions that may come out.

A common question that arises during this discussion is: why do women oppress other women? Or: isn't it women who are mainly responsible for oppressing other women?

Do not avoid the question, but make comparisons with other forms of oppression like racism, and caste and class discrimination. Explain that it is common for some individuals within the oppressed groups to deal with their frustrations of being oppressed and discriminated against by reinforcing the views of the oppressor group.

Women often do not themselves have resources and power. They derive their power through their relationship with men, which places women who are dependent on the same men (for example, mother-in-law and daughter-in-law) in competition with each other.

Note that caste, class, race, ethnicity and gender-based discrimination can often work together to oppress women of various groups.

Explain that what is under discussion is a world view, an ideology that views men as inherently superior to women. This ideology, called "patriarchy", can be upheld and perpetuated by both women and men. Give examples of workers oppressing other workers and ask the group to come up with other examples.



Step 4:
Group discussion:
institutions of
gender
socialization

Move the discussion beyond personal childhood experiences and individual incidents to institutional norms, practices, structures and resource allocation patterns.

Encourage a discussion by asking the following questions:

- To which institutions did the people who introduced you to or reinforced gender norms belong? What are the norms and practices of these institutions? Who do these norms and practices privilege?
- Were you given reasons about why you were supposed to behave in a particular manner?
- Did you challenge that? Do you know others who challenged it? If yes, what happened? If not, why not?

What to cover in
the discussion

The social institutions which introduce and reinforce gender norms

Behind the people who introduce and reinforce gender norms are a range of social institutions: the family, religious institutions, communities, schools, the media, and the state. Of these, the family, the media and religion play a major role from very early on in a person's life.

The rules and practices of these institutions are perceived to be unchangeable. In many instances girls and boys receive no explanations about why they ought to behave in a particular way. If reasons are given at all, they generally include cultural and religious motivations.

Some participants may say that the reason they did not challenge certain ideas was because they accepted that culture and religion could not be questioned. If this happens in your group it is important to point out that culture changes all the time, that it is defined by people and redefined constantly. Give relevant examples or ask the group to give examples.

When children have challenged certain ideas they have been discouraged, scolded and sometimes punished. Later in life those who dare to do things differently often get labelled, isolated and constantly reminded of how different they are.

The circular reasoning behind gender role stereotyping

Point out also the circular reasoning involved in gender role stereotyping. Boys and girls are systematically taught to do or not do certain things, or not behave in certain ways, and then we assert that "Men are not good at managing the household or taking care of babies," or that "Women cannot handle crises." It seems unreasonable that after prescribing that girls/women and boys/men perform different roles, society perceives females as less valuable than males.

The difficulty in challenging society's gender norms and practices

The threat of socially condoned aggression and even violence hangs over those who dare to challenge accepted norms and codes of behaviour – for example, women who go out alone at nights; or gay people. In some cultures, women do not have the support of the families they were born into to help them get away from the violence they may face in their marital homes. Point out how this violence or aggression may also be amplified or affected by race, ethnicity, national

status, etc., so even if in general women are oppressed by gender roles, particular women will have different abilities to seek remedies.

It is easier for women and men to conform to socially prescribed gender roles than deal with the consequences of non-conformity. The repercussions are either too difficult to deal with or do not seem to be worth the social costs involved.

A country's laws and policies may formalize gender norms

Gender norms have often been formalized in law and policy. For example, laws of inheritance often favour males, and marriage and divorce laws in many countries treat women as subordinate to men. Most countries do not have or do not enforce existing laws that could address domestic violence, and rape within marriage is rarely identified as a crime. Encourage participants to share examples from their own countries. Note the important difference between policies that could be used to undo gender-based inequality but are not used, and the actual lack of laws to provide remedies, or laws that serve to perpetuate gender inequality.

Main points for closing this session

Gender roles are learnt

Gender roles are not natural roles: boys and girls are systematically taught to be different from each other. Socialization into gender roles begins early in life. This includes learning to be different in terms of, for example:

- appearance and dress
- activities and pastimes
- behaviour
- emotions that we show
- responsibilities
- intellectual pursuits.

Gender roles are learnt and therefore can be unlearnt. They are not unchangeable.

The role of the family, other social institutions and women themselves

Gender roles are taught and reinforced by various social institutions: the family, the school, religious institutions, the workplace, society as represented by peers and neighbours, to mention a few. Women play a significant role as men in socializing girls and boys into their gender roles.

Society generally values women less than men

Society prescribes specific roles for girls and boys, women and men, but values them differently. In almost all societies girls and women are valued less than boys and men. This unequal value is the source of discrimination and oppression for women and accounts for the inferior status given to women in society.

It is difficult to put pressure on the family to change

The family is one of the most important social institutions which upholds and reinforces gender-based inequalities. And yet, the fact that the family belongs to the private sphere (compared to public sphere institutions like the workplace, schools and state institutions) has helped to keep what happens inside the family isolated from the forces of change and policy pressure towards gender equality.

Sticking to gender roles is ensured through a spectrum of controlling behaviour. This may range from simple approval/disapproval to social ostracism and socially condoned aggression and even violence (like the honour killing of women who marry against the family's wishes in some societies). Others' non-interference in what happens within a household, giving absolute power to a household's male head, is one of the most powerful tools for maintaining gender inequalities.

Gender-based inequality is often written in laws and policies

Gender-based inequality is systematically legitimized and institutionalized through laws and policies. This makes the task of challenging and breaking out of gender roles extremely difficult.

Men are also constrained by the construction of masculinity

While gender-based differences disadvantage women much more than men, men are also constrained by the construction of masculinity. There may thus be men, too, who are concerned with redefining gender roles and relations.

Fighting gender inequality is about challenging an ideology

The issue of gender inequality is far more complex than men being against women or women having to fight men. It is about challenging the ideology which rates men as superior to women (an ideology which women as well as men may help perpetuate) and vests in them greater power. And it is about challenging the institutions which uphold these values.

Session developed by Makhosazana Xaba.

SESSION
2**Concepts and tools for gender analysis****What participants should get out of the session****Participants will:**

- internalize the conceptual differences between sex and gender
- learn tools and concepts for gender analysis.

**1 hour and 40 minutes****Materials**

- Handout 1: "Statements on sex and gender"
- Handout 2: "Concepts and tools for gender analysis"
- overhead: "The social construction of sexuality", on p.51
- overhead: "Summary of sex and gender", on p.52
- overhead of Handout 2
- overhead: "Access to and control over resources" on p.53

Readings for the facilitator

1. Canadian International Development Agency. *A handbook for social/gender analysis*. Ottawa, Coady International Institute, and CIDA, 1989.
2. Moffat L, Geadah Y and Stuart R. *Two halves make a whole: balancing gender relations in development*. Ottawa, Canadian Council for International Co-operation, MATCH International and Association Québécoise des Organismes de Coopération Internationale, 1991.

How to run the session

This session consists of two activities. In the first, each participant is given statements which they have to label as sex or gender. Then the whole group discusses participants' responses, and you provide a summary of the differences between sex and gender. By looking closely at some of the statements, you can also use this discussion to lead into concepts like the gender-based division of labour, and gender roles and norms. The second activity is an input on commonly used concepts and tools for gender analysis.



Activity 1: Sex or gender?



Step 1: Individual work

Each participant is given Handout 1 containing statements that refer to the differences between men and women, some the result of sex and others the result of gender. Ask participants to write the letter G next to those they think refer to gender and the letter S to those they think refer to sex.



Step 2: Whole group discussion

Call out each statement from Handout 1 and ask participants to say whether the statement refers to a biological difference: sex, or a socially constructed difference: gender.

The statements that refer to gender differences offer a lot of possibilities for discussion that could lead on to the concepts for gender analysis. Call out statements in sub-groups, starting with all those that refer to sex. These are statements number 1, 4 and 7. Then go over the gender statements as follows:

Statements 2, 6 and 8 introduce the concept of the gender-based division of labour

- The gender-based division of labour is socially constructed; it varies across societies and cultures; it has also varied over time.
- Today, women's household and reproductive work is not being counted in the calculation of their contribution to the economy (Statement 2).

Statement 3 is about gender roles and norms

This statement is about a child brought up as girl and then doing better at school when he learns he is a boy. It leads to discussions on gender roles and norms, and social expectations about what girls are supposed to do compared to boys. Refer to the previous session, and reiterate the powerful influence expectations have on the roles that women and men adhere to.

Statement 5 is about sexuality and sexual behaviour

Statement 5 introduces for the first time socially constructed norms about sexuality and sexual behaviour. This statement should be used to start a discussion about the accepted norms of sexual behaviour. You may note that the relationship between gender and sexuality is strong, but much current work is finding that they are not identical systems of control. Some of the examples that follow combine gender and sexuality. One way to begin to disentangle this is to note the many different ways that people in sexual relationships do not conform to dominant identities associated with gender and sexuality, such as "feminine lesbians".

You may ask participants to identify other such beliefs about women's and men's sexuality --for example, that men's sexual drive is strong, and that when they are aroused they cannot control their behaviour. (You may want to challenge participants to think about how this functions in relation to gay men, or men who have sex with men, who may act in ways that otherwise wholly conform to masculine

stereotypes.) Let them explore the idea that women have to be restrained, therefore, and not act in ways that could sexually provoke men, like being alone with a man or dressing in a certain way.

Put up an **overhead** of the box below to introduce the idea that sexuality is composed of many elements, not just physiological ones.



The social construction of sexuality

Source: Extracted from Dixon-Mueller R. The sexuality connection in reproductive health. In: Zeidestein S, Moore K, eds. *Learning about sexuality: a practical beginning*. New York, The Population Council and International Women's Health Coalition, 1995.

The social construction of sexuality refers to the process by which sexual thoughts, behaviours, and conditions (for instance, virginity) are interpreted and given cultural meaning. [1, 2]

It incorporates collective and individual beliefs about the nature of the body, about what is considered erotic or offensive, and about what and with whom it is appropriate or inappropriate for men and women (according to their age and other characteristics) to do or to say about sexuality.

In some cultures, ideologies of sexuality stress female resistance, male aggression, and mutual antagonism in the sex act; in others, they stress reciprocity and mutual pleasure. [3]

The social construction of sexuality recognizes that women's and men's bodies play a key role in their sexuality, but also looks carefully at the specific historical and cultural contexts to gain an understanding of how specific meanings and beliefs about sexuality are generated, adopted, and adapted.

References

1. Ortner SB, Whitehead H, ed. *Sexual meanings: the cultural construction of gender and sexuality*. Cambridge, Cambridge University Press, 1981.
2. Vance C S. Anthropology rediscovers sexuality: a theoretical comment. *Social Science and Medicine*, 1991; **33(8)**:875-884.
3. Standing H, Kisekka MN. *Sexual behaviour in sub-Saharan Africa: a review and annotated bibliography*. London, Overseas Development Administration, 1989.

Statements 9 and 10: Elements of both sex and gender

Participants may have divided responses to Statement 9 about violence as natural male behaviour. Some may mark it as sex and others as gender. Some may argue that males are biologically prone to aggressive behaviour, while others could maintain that aggressive and violent behaviour is learnt. While biology may have some role to play in male aggression and risk-taking, the socialization of boys and the condoning of male violence plays a major role.



15 mins



Step 3: Summary

Summarize the following points about sex and gender on an **overhead**.

Encourage male participants to share experiences of how they may have been taught to be aggressive. Female participants may also want to share incidents where they saw boys being encouraged to be aggressive.

Statement 10 has both sex and gender as underlying causes. Women are more vulnerable to sexually transmitted diseases because of their biology but also because the social construction of male sexuality condones irresponsible sexual behaviour on the part of males, a gender factor. (For further help with this discussion, refer to Handout 1 “But why?” in Session 3 of the Health Systems Module.)

Summary of sex and gender

- Gender identifies the socially constructed characteristics that have come to define male and female ways of being and behaviour within specific historical and cultural contexts. Gender also refers to the web of cultural symbols, norms, institutional structures and internalized self-images, which through a process of social construction defines what is meant by "masculine" and "feminine".
- Gender role socialization also prescribes what are appropriate masculine and feminine sexual roles and behaviours. In many cultures, female resistance, male aggression, and mutual antagonism in the sex act is viewed as the norm.
- Gender is a context-specific concept: gender relations vary according to ethnic group, class, culture and so on. This underlines the need to incorporate diversity when we analyse gender.
- Gender relations have changed over time, because they are nurtured by factors that change over time. This means that current gender relations are not necessarily fixed, and can be modified through interventions.
- Gender relationships are personal as well as political. Personal, because the gender roles that we have taken on define who we are, what we do and how we think of ourselves. Political, because gender roles and norms are maintained and promoted by social institutions. Challenging these means challenging the way society is currently organized.
- People's understanding of sexuality is culturally conditioned and changes over time. The relationships between the constructs of gender and sexuality are strong, but many theorists believe that they are connected but not identical systems of meaning.



Activity 2: Tools and concepts for analysing gender



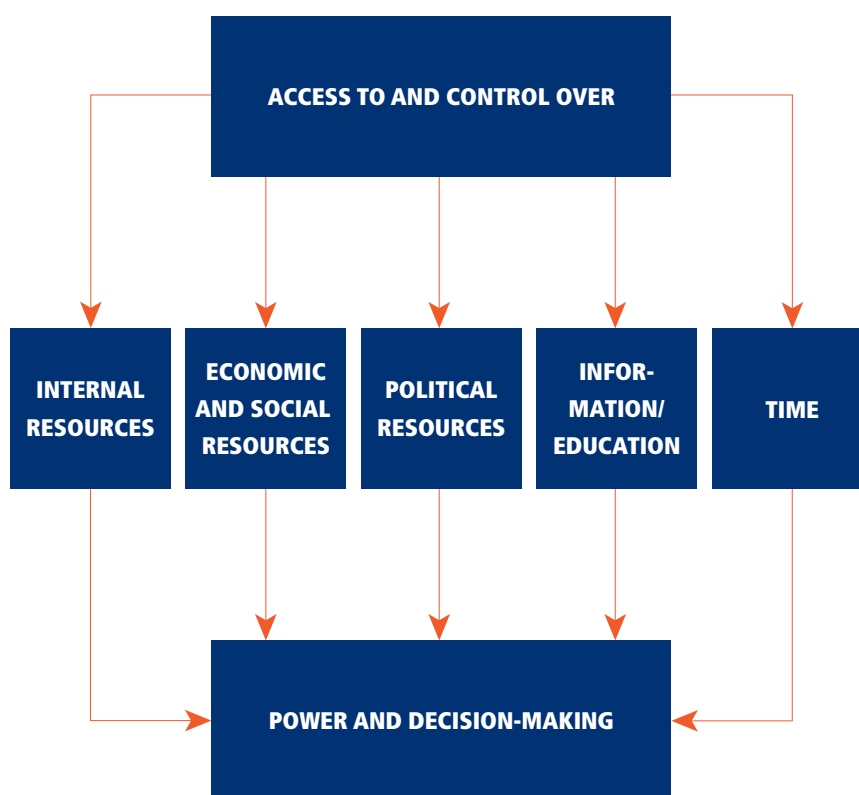
Step 1: Definitions

Distribute Handout 2 to participants and allow them about 10 minutes to read it individually. It contains definitions of commonly used gender concepts: the gender-based division of labour, gender roles and norms, access to and control over resources, and power.



Step 2: Clarifying some concepts

Put up **overhead** transparencies of Handout 2 a few at a time, and see if participants have any questions. For example, you may have to clarify the difference between access and control by using more than one illustrative example. You may also put up an overhead of the diagram below.



Many of these concepts have already been introduced earlier in this session and in Session 1. The purpose of this activity is to highlight major gender concepts, which will be used throughout the course, and to ensure that participants have a common understanding of these.

Session developed by Makhosazana Xaba and Adelina Mwau

**Handout****1****Statements on sex and gender**

Source: adapted from William S, Seed J, Mwau A. *Oxfam gender training manual*. Oxford, Oxfam UK and Ireland, 1994.

Read the following statements. Write the letter S next to statements that refer to sex differences and the letter G next to statements that refer to gender differences.

1. Women give birth to babies, men do not.
2. According to United Nations statistics, women do 67 per cent of the world's work, yet their earnings for it amount to only 10 per cent of the world's income.
3. In one case, when a child brought up as a girl learned that he was actually a boy, his school marks improved dramatically.
4. Women suffer from pre-menstrual tension, men do not.
5. Sex is not as important for women as it is for men.
6. In ancient Egypt, men stayed at home and did weaving. Women handled family business. Women inherited property and men did not.
7. Men's voices break at puberty, women's don't.
8. In a study of 224 cultures, there were 5 in which men did all the cooking and 36 in which women did all the house building.
9. Men are naturally prone to violent behaviour.
10. Women are more vulnerable to STDs than men.



Handout

2

Concepts and tools for gender analysis

1. The gender-based division of labour

In almost all societies, women and men perform different activities, although the nature and range of these activities vary across classes and across communities. They have also changed over time. Women are typically responsible for childcare and household work, but they also engage in producing goods for household consumption or for the market. Men are typically responsible for meeting the household's needs for food and resources.

2. Gender roles and norms

In all societies, males and females are expected to behave in ways that are very different. They are socialized from early childhood to conform to masculine and feminine roles and norms. They have to dress differently, play different kinds of games, be interested in different issues and subjects and have different emotional responses to situations. There is a tacit perception that what males do is better and more valuable than what females do.

The impact of socially constructed gender roles is felt significantly in the area of sexuality and sexual behaviour. Women are expected to make themselves attractive to men, but be more passive, guarding their virginity, never initiating sexual activity, and taking care to protect themselves from the uncontrolled sexual desires of men. In some societies this is because women are held to have lesser sexual drive than men. In other societies the ways women are controlled are based on the idea that women have uncontrollable sexual desires. Men are often expected to be virile and have sexual desires that are uncontrollable once aroused, to take the initiative in sexual activity, and to be, by nature, incapable of being monogamous.

3. Access to and control over resources

Women and men have unequal access to and control over resources. This inequality disadvantages women. Gender-based inequalities in relation to access to and control over resources exist within social classes, races or castes. However, women and men of different races, classes and castes may be differently unequal. For example, women from one social class could have more power than men from a lower social class.

- Access is the ability to use a resource.
- Control is the ability to define and make decisions about the use of a resource.

For example, women may have access to health services, but no control over what services are available and when. Another common example is women having access to an income or owning property, but having no control over how the income is spent or how the property is used.

There are many different types of resources which women have less access to, and less control over. These include:

Economic resources

- work
- food
- credit
- money
- social security, health
- insurance
- child care facilities
- housing
- facilities to carry out domestic tasks
- transport
- equipment
- health services
- technology and scientific developments.

Political resources

- positions of leadership and access to decision-makers
- opportunities for communication, negotiation and consensus building
- resources that help vindicate rights, such as legal resources.

Social resources

- community resources
- social networks
- membership in social organizations.

Information/education

- inputs to be able to make decisions to modify or change a situation
- formal education
- non-formal education
- opportunities to exchange information and opinions.

Time

- hours of the day available to use as they choose
- flexible paid work hours.

Internal resources

- self esteem
- self confidence
- ability to express one's own interests.

4. Power and decision-making

Having greater access to and control over resources usually makes men more powerful than women in any social group. This may be the power of physical force, of knowledge and skills, of wealth and income, or the power to make decisions because they are in a position of authority. Men often have greater decision-making power over reproduction and sexuality.

Male power and control over resources and decisions is institutionalized through the laws and policies of the state, and through the rules and regulations of formal social institutions. Laws in many countries of the world give men greater control over wealth and greater rights in marriage and over children. For centuries religious institutions have denied women the right to priesthood, and schools often insist that it is the father of the child who is her or his legal guardian, not the mother.

SESSION 3

Gender-based inequalities – the evidence

What participants should get out of the session

Participants will:

- become aware of the ways in which norms and values about gender roles are related to gender-based inequalities in workloads and to inequalities in access to education, access to and control over economic and social resources, and access to power
- learn to examine and interpret evidence from international (and national) data sets on gender-based inequalities in education, economic and political status.



2 hours and 15 minutes

Materials

- Handout 1: "Data about women, education and politics"
- Handout 2: "Data about the economic value of activities and time"
- overhead: "Women and girls are Kenya's breadwinners", on p.60
- overhead: "Women do 56 per cent of the work in Venezuela", on p.60
- overhead: "More paid work doesn't reduce unpaid work", on p.61

Readings for the facilitator

1. Mosse JC. *Half the world, half a chance: an introduction to gender and development*. Oxford, Oxfam, 1993.
2. United Nations Development Programme. *Human development report 1995*. New York, Oxford University Press, 1996:29–115. Available online at: www.undp.org/hdro/highlights/past.htm
3. World Bank. *Engendering development through gender equality in rights, resources, and voice*. New York, Oxford University Press, 2001.

Readings for the participants

Reading 2.

How to run the session

There are two activities in this session. The first is a small group activity. You give participants a set of interrelated data tables on women's status in relation to the status of men. There are some questions which they have to answer in order to interpret these tables. Each group prepares a group report. The second activity is a session with the whole group, where each group presents its report. This is followed by a discussion and input from you about how gender differences become structurally entrenched and then transformed into gender-based inequalities.



Activity 1: Looking at the evidence



Step 1: Handouts 1 and 2

Divide participants into four groups. Give two groups Handout 1, which contains a set of tables with gender-specific data from selected developing and industrialized countries. The tables show women's and men's participation in economic activities and contribution to the gross domestic product (GDP). Give the remaining two groups Handout 2, containing a set of tables which present gender-specific data on school enrolment and political participation for different regions of the world.

You may choose to replace these data sets with national data sets on the same subjects: economic participation and contribution to the GDP and/or relative incomes of women and men, educational attainment and political participation. If you do use the data sets from these handouts, we advise you to update them.



Step 2: Looking at the tables

Go over the tables in each of the handouts and explain what the columns and rows represent. You will find explanations at the bottom of each table.



Step 3: Group work with the tables

Participants work in their small groups in this session. One person from the group will report back to the big group.



Activity 2: Analysing structural gender gaps



Step 1: Group presentations

Each of the four groups gives a seven minute presentation of their responses to the questions on the data sets they were given. The two groups presenting on educational enrolment and political participation should go first so that we begin with relatively simpler concepts, examining the progress made in closing the gender gap in education and contrasting this with the lack of progress in women's political participation.

The groups presenting on work and economic contribution should go next. This will allow us to look at how, despite educational



Step 2: Whole group discussion

What to cover in the discussion

attainment, the gender-based division of labour has led to women being excluded from economic and political decision-making. After all the presentations are finished, you can raise some issues for discussion.

Draw on the participants' presentations to highlight the following points.

The gender gap in education

In developing countries, in relation to educational enrolment, the gender gap in school enrolment has been halved between 1970 and 1990. In developing countries as a whole, female enrolment in primary and secondary schools has been growing faster than male enrolment. The latest figures from UNDP's *Human development report 1999* show female primary enrolment to be 94 per cent of male rates, and secondary enrolment to be 83 per cent of male rates.

Gaps in enrolment are smaller than those in adult literacy rates. This indicates a changing trend: among the older generation, far fewer women than men were educated, while among the younger generation, the proportion of girls enrolled in schools is relatively higher.

At the same time, it needs to be acknowledged that women are still at a disadvantage in the area of education.

The gender gap in politics

Women are almost totally absent from the world's political arena. Women, who constitute almost half the electorate, hold only 12 per cent of the world's parliamentary seats and less than 6 per cent of the seats in ministerial cabinets.

Women's involvement in market and non-market activities

In many societies women contribute much more to the total labour output of a household than men.

Even in the few places where they contribute equally, women's contribution to non-market activities is far greater than their contribution to market activities, while the converse is true for men.

Many of the activities that consume women's time, like cooking, child care and cleaning, are not considered to be work because they do not involve earning an income. Women's time is therefore considered less valuable than men's because men usually earn cash.

When women are involved in earning income for the family, they generally continue to have all the additional responsibilities within the home.

At this point you can bring in examples from different settings, using **overheads** of the boxes below. You need to make the point that irrespective of the nature of the economy – rural or urban, traditional or modern, agrarian or industrial – women end up working a double shift, and spend a significant proportion of their work time in non-market activities.



Women and girls are Kenya's breadwinners

Source: United Nations Development Programme. *Human development report 1995*. New York, Oxford University Press, 1996:92, Box 4.1.

Women in rural Kenya work on average about 56 hours a week, and men only about 42 hours. Children between the ages of 8 and 16 also work many hours. If time spent for education is counted, girls spend about 41 hours a week in economic activity, and boys 35 hours.

Women shoulder the heaviest burden in household work, including firewood and water collection: 10 times the hours of men. This carries over to girls, whose household work takes about 3.7 times the hours of boys.

Women in households that farm such cash crops as tea and coffee work the most of any rural women – 62 total hours a week. As Kenya's farming becomes more cash-oriented, women tend to shoulder more work, not less.



Women do 56 per cent of the work in Venezuela

Source: United Nations Development Programme. *Human development report 1995*. New York, Oxford University Press, 1996:93, Box 4.2.

In Venezuela, women are a minority in the labour force, but they work more total hours than men, according to a study of urban time use by the central bank. Time is divided into five categories: income-earning activities, household activities, personal care, studying, and social activities and leisure.

Men have a distinct advantage over women in income earning activities: 6 hours a day compared with only 2.25 for women. But women's time in household work is a striking 11.5 multiple of men's time. Men's overall advantage shows up in the 10 per cent more time they enjoy in social activities and leisure.

In 1988, women and men spent 12.3 billion hours in work that is counted to be of economic value: men 8.9 billion hours and women, 3.4 billion. But if all working hours are counted, women contribute 12.9 billion hours and men, 9.7 billion. So women do 56 per cent of Venezuela's work.



More paid work doesn't reduce unpaid work

Source: United Nations Development Programme. *Human development report 1999*. New York, Oxford University Press, 1999:81, Box 3.3.

In OECD (Organization for Economic Cooperation and Development) countries men's contribution to unpaid work has been increasing. But a woman who works full time still does a lot of unpaid work. Once she has a child, she can expect to devote 3.3 more hours a day in unpaid household work. Married women who are employed and have children under 15 carry the heaviest work burden – almost 11 hours a day.

Bangladesh had one of the largest increases in the share of women's participation in the labour force – from 5 per cent in 1965 to 42 per cent in 1995. This has been important for export growth, with women as the main workers in the garment industry. But women still spend many hours in unpaid work. A survey of men and women in formal urban manufacturing activities shows that women put in on an average 31 hours a week in unpaid work – cooking, looking after children, collecting fuel, food and water. They spend 56 hours in paid employment. Men spend an average of 14 hours a week on unpaid activities such as house repair, and 53 hours on paid employment. Thus women in formal sector employment work an average of 87 hours a week, compared to men's 67 hours a week.

Women do a disproportionate amount of non-market activities

This is the most significant point to grasp about the gender-based division of labour – that it is unfair that women are engaged disproportionately more in non-market activities. Why does this make a difference?

- Women who are engaged in non-market activities do not have a cash income, which becomes a serious limitation especially in a market economy where goods and services have to be bought for cash. As a result, women become dependent on men for economic resources and all other resources that have to be paid for.
- There is a gender-based division of labour also in the workplace, with some kinds of jobs thought to be more suitable for men, and others for women. For example, nurses and pre-school teachers are usually women, and miners are all men.
- Among women who work, not many women make it to senior decision-making positions. This may be attributable to a combination of factors: fewer women may have access to higher education and training; even those who do may be constrained by their reproductive role and responsibilities for household work; there may be gender biases in the selection of persons to top positions, where women are seen as not suitable for positions that require extensive travelling or long hours of work.

- Because only work with exchange value is recognised in economic terms, women's work becomes invisible. This is evident in the fact that the per capita GDP for women is much lower than the per capita GDP for men.

Main points for closing this session

Much of women's work is invisible

The invisibility of women's work leads to the designing of development policies and programmes based on the stereotype of the male breadwinner and the woman homemaker. For example, income-generation activities for women supplement the family income rather than increasing women's employment opportunities, which would help them earn a livelihood.

Women have less access to money and productive assets

Women's access to credit is limited when they do not have a cash income, and this, in turn, limits their ability to invest in productive assets that will produce more income. Women are not usually the owners of property such as a house or farmland bought by a household through the combined contribution of women's and men's labour, women working within, and men, outside the home.

- The gender-based division of labour is more than that – it is an important factor underlying women's unequal access to and control over resources.

Women lack political power and are not sufficiently represented in parliaments

Women's lack of political power contributes further to the persistence of policies that do not take into account gender-based inequalities, or further consolidate them. (This is discussed in greater detail in the Policy Module.)

Comparing gender differences in educational attainment with gender differences in access to economic and political power, the gaps in economic and political participation appear to be far more resistant to change. It is clear, however, that “the limited numbers of educated and capable women” can no longer be cited as a major barrier to women's representation in economic and political decision-making.

Values and norms are at the core of persisting gender inequalities

Values and norms about male and female roles, the fact that women look after children or that there are inadequate childcare facilities, and the lack of recognition of women's economic role may lie at the core of persisting gender inequalities in access to economic and political power.

Session developed by TK Sundari Ravindran and Jane Cottingham



Handout

1 Data about women, education and politics

You have been given two tables. The first presents female literacy, primary enrolment ratio and secondary enrolment ratio as a percentage of male rates for three time points – 1970, 1990 and 1997 – for different regions of the world. The second table presents gender-specific data on the number of seats in parliament held by women as a proportion of the total for the years 1994 and 1999, and women's share at the ministerial level, for 1994.

Step 1: Trends in literacy and education

- Summarize the trends observable across the different regions in the bridging of the gender gap in literacy, and in primary and secondary enrolment. (For example: in which region has the gap narrowed most, and in which region least? How does the progress in literacy rates compare with that in primary and secondary education?)
- What, in your opinion, are the factors underlying gender gaps in primary and secondary school enrolment? Why are the gaps wider for secondary enrolment compared to primary enrolment? And for literacy rates compared to primary and secondary enrolment?
- What do you think are the consequences for women's status? And men's status?

Step 2: Trends in political participation

- Summarize the trends observable across the different regions over the two time points.
- What are the factors underlying women's low level of political participation? What are the consequences for women and men?

Step 3: The differences between the two

What are the major differences you can see between the progress made in closing the gender gap in education compared to political participation? Why are the trends in these two sectors so different?

Table 1: Trends in gender gaps in educational status

	Female adult literacy as percentage of male rate			Female primary net enrolment as percentage of male ratio			Female secondary net enrolment as percentage of male ratio		
	1970	1992	1997	1970	1992	1997	1970	1990	1997
All developing countries	n.a.*	73	79	79	88	94	68	78	83
Least developed countries	n.a.	57	65	61	84	83	43	67	66
Sub-Saharan Africa	n.a.	66	75	72	85	85	60	72	76
Arab states	38	61	66	63	92	91	47	77	85
East Asia (including China)	n.a.	80	83	87	96	100	76	79	88

chart continues

	Female adult literacy as percentage of male rate			Female primary net enrolment as percentage of male ratio			Female secondary net enrolment as percentage of male ratio		
	1970	1992	1997	1970	1992	1997	1970	1990	1997
South-East Asia and the Pacific	72	90	91	90	97	99	74	95	95
South Asia (including India)	40	55	59	60	75	86	43	60	70
Latin America and the Caribbean	91	97	98	101	98	98	91	98	101
Industrialized countries	n.a.	n.a.	100	n.a.	n.a.	100	n.a.	n.a.	100
World	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.

* n.a. = not available

Sources: Data for 1970, 1990 and 1992: United Nations Development Programme. *Human development report 1995*. New York, Oxford University Press, 1996:68, Table A2.6. Data for 1997: United Nations Development Programme. *Human development report 1999*. New York, Oxford University Press, 1999:232, Table 25.

Some definitions

Female adult literacy as percentage of the male rate: The number of females who are literate for every 100 males who are literate.

Female primary/secondary net enrolment as percentage of the male ratio: The number of girl children of primary/secondary schooling age (usually 6–10 years for primary and 11–14 years for secondary schooling) who are enrolled in primary/secondary schools for every 100 boys of primary/secondary schooling age enrolled in school.

Table 2: Trends in women's political participation

	Seats in parliament held by women (as percentage of total)		Ministerial seats held by women (as percentage of total)
	1994	1999	1994
All developing countries	10	10	5
Least developed countries	6	9	5
Sub-Saharan Africa	8	11	6
Arab states	4	4	1
East Asia (including China)	19	5	6
South-East Asia and the Pacific	9	12	3
South Asia (including India)	5	6	3
Latin America and the Caribbean	10	15	8
Industrialized countries	12	19	8
World	10	12	6

Sources: Data for 1994: United Nations Development Programme. *Human development report 1995*. New York, Oxford University Press, 1996:62, Table A 2.4., Data for 1999: United Nations Development Programme. *Human development report 1999*. New York, Oxford University Press, 1999:145, Table 3.

Some definitions

Seats held in parliament as percentage of total: Of every 100 parliamentarians, the number who are women.

Ministerial seats held by women as percentage of total: Of every 100 ministers, the number who are women.



Handout

2 Data about the economic value of activities and time

You have been given three tables. The first presents gender-specific data on the number of minutes of work per day. The second is about time allocated for activities which have an economic value, for the purpose of calculating GDP. The third table shows male and female representation in administrative and managerial positions and GDP per capita.

Step 1: Summarize the gender differences observable across countries and across rural and urban areas (where applicable) in:
The gender differences

- number of hours of work
- time allocation
- representation in senior decision-making jobs.

What, in your opinion, are the factors underlying each of these differences?

Step 2: What are some of the consequences of these differences for women's and men's lives?
The consequences for women

Step 3: What are some of the reasons why women's GDP per capita is lower than that of men's in all countries? What do you think are the consequences for women's and men's status in society?
The consequences of women's lower GDP per capita

Table 1: Work time in minutes per day

	Year	Females	Males	Females as percentage of males
SELECTED DEVELOPING COUNTRIES				
Urban				
Colombia	1983	399	356	112
Indonesia	1992	398	366	109
Kenya	1986	590	572	103
Nepal	1978	579	554	105
Venezuela	1983	440	416	106
Rural				
Bangladesh	1990	545	496	110
Guatemala	1977	678	579	117

chart continues

	Year	Females	Males	Females as percentage of males
Kenya	1988	676	500	135
Nepal:	1978	641	547	117
Highlands	1978	692	586	118
Mountains	1978	649	534	122
Rural hills	1978	583	520	112
Philippines	1975–77	546	452	121
National				
Korea, Republic of	1990	488	480	102
SELECTED INDUSTRIALIZED COUNTRIES				
National				
Australia	1992	443	443	100
Austria	1992	438	393	111
Canada	1992	429	430	100
Denmark	1987	449	458	98
Finland	1987/88	430	410	105
France	1985/86	429	388	111
Germany	1991/92	440	441	100
Israel	1991/92	375	377	99
Italy	1988/89	470	367	128
Netherlands	1987	377	345	109
Norway	1990/91	445	412	108
United Kingdom	1985	413	411	100
USA	1985	453	428	106

Source: United Nations Development Programme. *Human development report 1999*. New York, Oxford University Press, 1999:237, Table 27.

Some definitions (Table 1)

Work time: Time spent in carrying out all types of work within and outside the house, remunerated or unremunerated.

Female work time as percentage of male: For every 100 minutes of work time spent by men, the number of minutes of work time spent by women.

Table 2: Percentage of total work time spent in market and non-market activities

	Year	Percentage of total work time spent in market activities		Percentage of total work time spent in non-market activities	
		Females	Males	Females	Males
SELECTED DEVELOPING COUNTRIES					
Urban					
Colombia	1983	24	77	76	23
Indonesia	1992	35	86	65	14
Kenya	1986	41	79	59	21
Nepal	1978	25	67	75	33
Venezuela	1983	30	87	70	13
Rural					
Bangladesh	1990	35	70	65	30
Guatemala	1977	37	84	63	16
Kenya	1988	42	76	58	24
Nepal:	1978	46	67	54	33
Highlands	1978	52	66	48	34
Mountains	1978	48	65	52	35
Rural hills	1978	37	70	63	30
Philippines	1975–77	29	84	71	16
National					
Korea, Republic of	1990	34	56	66	44
SELECTED INDUSTRIALIZED COUNTRIES					
National					
Australia	1992	28	61	72	39
Austria	1992	31	71	69	29
Canada	1992	39	65	61	35
Denmark	1987	58	79	42	21
Finland	1987/88	39	64	61	36
France	1985/86	30	62	70	38
Germany	1991/92	30	61	70	39
Israel	1991/92	29	74	71	26
Italy	1988/89	22	77	78	23
Netherlands	1987	19	52	81	48
Norway	1990/91	38	64	62	36
United Kingdom	1985	37	68	63	32
USA	1985	37	63	63	37

Source: United Nations Development Programme. *Human development report 1999*. New York, Oxford University Press, 1999:237, Table 27.

Some definitions (Table 2)

Market activities: Market activities are defined as activities leading to the production of goods and services for the market, as well as in household production of goods for the household's own consumption. However, the production of services for household consumption – cooking, fetching water and fuel, child care, care of the sick and elderly – are considered to be non-market activities for the purposes of measuring economic output.

The percentage of total work time spent in market/non-market activities: Of 100 minutes of total work time spent by a person, the number of minutes spent in market activities/non-market activities.

Table 3: Women's participation in economic decision-making and women's real GDP per capita in PPP\$, 1997, selected countries

	Female administrators and managers as percentage of total	Female GDP as a percentage of male GDP per capita in PPP\$
SELECTED DEVELOPING COUNTRIES		
Bangladesh	4.9	58.11
Colombia	38.8	52.82
Guatemala	32.4	29.54
Indonesia	6.6	50.99
Kenya	n.a.*	74.16
Korea, Republic of	4.2	44.84
Nepal	n.a.	54.15
Philippines	34.8	55.62
Venezuela	22.9	39.54
SELECTED INDUSTRIALIZED COUNTRIES		
Australia	43.3	69.02
Austria	21.8	46.47
Canada	42.2	62.05
Denmark	20.0	71.13
Finland	26.6	58.95
France	9.4	63.30
Germany	26.6	64.63
Israel	19.2	51.60
Italy	53.8	44.47
Netherlands	16.8	51.95
Norway	30.6	74.29
United Kingdom	33.0	60.72
USA	44.3	67.96

* n.a. = not available

Sources: Female administrators as a percentage of total: United Nations Development Programme. *Human development report 1999*. New York, Oxford University Press, 1999:142, Table 3.
Female GDP as a percentage of male GDP per capita in PPP \$: United Nations Development Programme. *Human development report 1999*. New York, Oxford University Press, 1999:139, Table 2.

Some definitions (Table 3)

GDP or gross domestic product: The total output of goods and services for final use that are produced by an economy by both residents and non-residents, regardless of the allocation to domestic and foreign claims. It does not include deductions for depreciation of physical capital or depreciation and degradation of natural resources. Non-market activities – which include cooking, processing food for own consumption, fetching water and fuel, child care, care of the sick and elderly – are not included as services in the calculation of GDP.

PPP\$ or Purchasing Power Parity dollar: The number of units of a country's currency required to purchase the same representative basket of goods and services (or a similar basket of goods and services) that a United States dollar would buy in the United States. When we use the PPP\$ to measure a country's GDP, we do not apply the dollar exchange rate applicable in the market, but an exchange rate that measures how much of a country's currency is required to buy the same goods and services as one US\$ in the US. This makes GDPs across countries comparable to each other.

Female administrators and managers as percentage of total: Of 100 administrators and managers, the number who are women.

Female GDP as percentage of male GDP in PPP\$: The number of dollars contributed to the GDP by the female population of a country for every 100 PPP\$ contributed by its male population.

SESSION

4

Mainstreaming gender equality in institutions

What participants should get out of the session

Participants will:

- understand the concept of gender mainstreaming
- become aware of the steps and changes required for achieving gender equality within their organizations.



1 hour and 30 minutes

Materials

- Lecture notes for the facilitator: "Mainstreaming gender equality in organizations"
- Handout 1: "Questions that will help you do a gender analysis of your organization"
- Handout 2: "Ideas for actions for mainstreaming gender equality in your organization".
- overhead: main points of Part 1 of the lectures notes
- overhead: "Two important aspects of gender mainstreaming", on p.71
- overhead: "How gender sensitive are an organization's programmes?", on p.72
- overhead: Handout 2
- blank overhead transparencies

Readings for the facilitator

1. Hadjipateras A. Putting gender policy into practice: lessons from ACORD. *Bridge, Issue 5: approaches to institutionalising gender*. Available online at: www.ids.ac.uk/bridge/dgb5.htm. (Date accessed: 2000).

2. Swedish International Development Cooperation Agency. *Handbook for mainstreaming a gender perspective in the health sector*. Stockholm, Department for Democracy and Social Development, Health Division, Swedish International Development Cooperation Agency, 1997.

Readings for the participants

Reading 2.

How to run the session

From: AIDOS and the Women's Health Project. *Reproductive health for all: taking account of the power dynamics between men and women*. Johannesburg, University of the Witwatersrand, 2000.

This is an input session on the concept of gender mainstreaming, and on the actions that an organization may take in order to mainstream gender equality into its structures and programmes.



Activity 1: Exploring gender mainstreaming



Step 1: Your input and a group discussion

Start with an introduction saying that the previous sessions showed how gender inequality is embedded in society's norms and values, rules and systems. For this reason, it is also likely to be embedded within our organizations and institutions.

Then ask participants where and in what contexts they have heard the term "gender mainstreaming", and what they understand it to mean.



After listening to the various responses, put up **overheads** containing the main points outlined in Part 1 of the "Lecture notes for the facilitator". These include:

- defining the concept of gender mainstreaming
- two aspects of the mainstreaming strategy
- gender mainstreaming in relation to women-specific programmes: does one preclude the other?

Clarify that mainstreaming gender is not a once-off task, but an ongoing process. After talking about the two aspects of the gender mainstreaming strategy, put up an **overhead** of the text below, or hand it out on a piece of paper, and give participants a few minutes to read through it.



Two important aspects of mainstreaming gender equality

Gender mainstreaming is a strategy for gender equality. It requires:

- equitable distribution by sex of the resources, opportunities and benefits of the mainstream development process,
- including the interests, needs, experiences and visions of women as well as men in defining development approaches, policies and programmes and in determining the overall development agenda.

A gender mainstreaming initiative does not preclude initiatives specifically directed towards women. Such positive initiatives are necessary and complementary to a gender mainstreaming strategy.



Step 2:
**Examining the
gender
sensitivity of
organizations'
programmes**

After you have presented the rest of the overheads of Part 1 of the lecture notes, ask participants to discuss how much they think gender issues have been taken into account in their organizations' programmes and activities. Get them to talk about the extent to which their organizational structures pay attention to addressing gender inequalities. Let them reflect on the realities of their workplaces in relation to the two aspects of gender mainstreaming.

Overhead. How can an organization ensure gender mainstreaming in the content of its programmes and interventions? This list of questions offers a tool for examining programme content to evaluate its gender sensitivity.

How gender-sensitive are an organization's programmes?

- Does the programme design and planning take into account the different roles and responsibilities of women and men, and their differential access to and control over resources? The differentials in their access to power and decision-making?
- Does the design and implementation strategy of the programme try to challenge existing gender and social relations?
- Have the potentially different impacts of this programme on women and men (and on different groups of women and men) been considered?
- Has it been ensured that any part of the intervention will not contribute to worsening the position of women (or of poorer women in relation to wealthier women?)
- Have gender specific indicators been identified and included into the monitoring system for programme performance?

Get participants to give examples of programmes that have and have not taken account of these issues. Some examples of not taking gender roles into consideration or reinforcing traditional roles when designing health programmes include: not scheduling services at times that are convenient to women; treating women as having the sole responsibility for childcare and thus targeting all child health related messages exclusively at them; assuming women's time is expendable and requiring them to volunteer their time.

Participants may wonder how health programmes could help to challenge gender norms, which are socially and culturally constructed. Some ways health providers could try to do this include: not requiring women to have their spouse's agreement before providing contraceptive services; and involving men accompanying their wives in discussions about child health, maternal health and contraception.

Help participants think through programme designs that may worsen the positions of women in relation to men, or of poorer women in relation to women who are better off. Get them to think of ways of preventing this from happening.



Step 3:
**Mainstreaming
gender equality
in an
organization's
structure and
functions**

Move on to the second aspect of gender mainstreaming: mainstreaming gender in the structure and functioning of an organization. Explain that very often, in trying to mainstream gender equality in its programmes, an organization may come up against obstacles and barriers within its own structure. An organization's decision-making structures and processes and the distribution of power and authority within organizations need to change in ways that make it possible for gender sensitive programmes to be supported and adequately resourced.



Distribute Handout 1 and put up an **overhead** you have made from it.

Ask participants to volunteer to respond to these questions as an illustration of how to use them. Some may want to carry out a gender analysis of their organization when they get back to work, using the questions in Handout 1. It can be useful to have a discussion about how best to do this: individually, or through specially constituted teams, or through organizing a special workshop with interested colleagues and/or decision-makers.



Step 4:
**Action and
barriers**

Distribute Handout 2 to participants and give them about five minutes to read through it and think through what needs to be done to mainstream gender equality in their organizations.



Then brainstorm action-ideas on how participants can go about mainstreaming gender equality in their organization's structure as well as its programmes. Write these up on **overheads** or a flip chart and display them. You may want to add the points made in Part 2 of the lecture notes.

Discuss issues like the potential barriers to mainstreaming gender equality in organizations, and give examples of some successful interventions.

Main points for closing this session

Gender inequality is embedded in social institutions

Gender inequality is embedded in many institutions in society. This is the result of two factors. First, most institutions are controlled by men, usually by particular groups of men (wealthy, educated, those who inherit leadership, and so on). Over time, the institutional goals, management styles, interpersonal relationships and so on become consolidated. Whether women are in leadership positions or not, the way of doing business has already been set.

Social institutions are a mirror of society

Second, institutions are microcosmic representations of the society in which they are located, and reflect gender (and other) norms

inherent therein. If society does not value women's input, social institutions are unlikely to do so. If society does not give women access to decision-making, social institutions will not do so either. Likewise, if society does not value women's health, health institutions are unlikely to.

The role of health institutions in reinforcing gender inequalities

It is important to analyse whether and how health institutions reinforce gender inequalities by acts of commission or omission. Once a gender analysis of any health institution has been carried out, it will be possible to plan for action to mainstream gender equality in that institution. Analyses should include the barriers to mainstreaming, and a commitment to working with allies. (When we talk about health institutions we mean all institutions concerned with planning, implementing and evaluating health services, training health staff and so on.)

Session developed by Barbara Klugman



Lecture
notes for
the
facilitator:

Mainstreaming gender equality in organizations

Session

4

Mainstreaming gender equality in institutions

MODULE

1

GENDER

Part 1: Concepts and definitions

What gender mainstreaming is short for

The term “gender mainstreaming” is a short-hand way of referring to the strategies and processes that can change the way that institutions operate in relation to the power and privilege that is associated with things done by and for men and women. We use the word “mainstream” to indicate that issues of gender inequality should be dealt with in every aspect of organizational structure and programming, rather than as a separate, add-on activity. In other words, gender inequality should be addressed in the mainstream of organization and programming. The full phrase should be: “mainstreaming attention to gender equalities in institutional structures and their programming”.

Gender activities are often an afterthought

The need to mainstream gender is a reaction to what often happens in organizations. In general, organizations have tended to carry on with business as usual, and then address gender by adding on a few additional activities that target women. In the gender mainstreaming approach, the organization has to consider how the following aspects of an organization may impact negatively on women, fail to address women, or may not promote gender equality at all:

- overall goals
- rules for running the organization
- the entire range of programmes and policies
- allocation of resources
- organizational structures, job description and staffing
- monitoring and evaluation systems.

Two important aspects of mainstreaming gender equality

Two aspects of a mainstreaming strategy were emphasised in the *Platform for Action* of the United Nations Fourth World Conference on Women in Beijing. These are captured in Handout 1.

- First, for the content of development programmes, mainstreaming gender requires that the resources, opportunities and benefits of the development process be distributed equitably (to men and women). This requires the integration of equality concerns into the analysis and formulation of policies, programmes and projects, to ensure that these have a positive impact on women and reduce gender inequalities. (This aspect of gender mainstreaming will be dealt with in some detail in the context of health policies and programmes in the fifth and sixth modules.)

- Second, for how an institution or organization works, the process needs to ensure that women's interests, needs, experiences and visions contribute to defining the approaches, policies and programmes and to determining the overall development agenda. This means that institutional strategies and mechanisms need to be devised which will enable women to formulate and express their views and participate in decision-making at all levels.

Does gender mainstreaming imply that there should not be separate programmes that target only women?

No. Given the depth of inequality facing women, it is sometimes necessary to target women specifically to ensure a level playing field for women and men over a period of time. For example, special educational, training or health programmes may be necessary for women to overcome the negative impact of gender inequality. Initiatives which specifically target women are complementary to mainstreaming initiatives.

Part 2: Action ideas for mainstreaming gender equality in an organization

How can an organization go about mainstreaming gender equality in its structure as well as its programmes and activities? This may require diverse actions, including:

- **A formal gender analysis:** in order to identify all the processes which need to be addressed.
- **Developing a policy on mainstreaming gender equality in the organization:** to specify the goals of the policy, which activities will be undertaken in particular to address strategic gender interests of staff and constituencies, by when, who is responsible, what resources will be allocated, and how the implementation of the policy will be monitored.
- **Staff education processes:** to build staff's understanding that gender inequality can result in violations of women's human rights, and has a negative impact not only on women staff members, but on the organization and its work overall.
- **Ensuring that female staff do not bear all the institutional responsibility for mainstreaming gender equality:** or only junior staff, but staff at all levels and men and women equally.
- **Changing specific policies:** hiring procedures which may discriminate against married or unmarried women; policies which do not allow for maternity leave for women or paternity leave for men; promotion policies which assume that women may not be able to deal with certain types of jobs or challenges (for example, those that require extensive travelling).
- **Mainstreaming gender equality and equity in job allocation, job descriptions and performance evaluation systems:** so that there is no gender stereotyping.
- **Evolving gender specific indicators:** for monitoring all programmes and organizational functioning.
- **Enforcing existing policies:** such as policies on sexual harassment in the workplace.

- **Changing procedures/practices where appropriate:** such as the times at which meetings are held; the expectation that staff members put in hours of work after the working day is over. These not only make it difficult for women to participate effectively, but may also label women as not committed to the same extent as men. Such practices also make it impossible for men to share in domestic responsibilities when they wish to. Conscious inclusion of women in interview committees and appraisal committees even if they are not in leadership positions would be examples of this kind of affirmative action.
- **Establishing a committee to manage the entire process:** comprising of all department heads and the chief functionary of the organization.
- **Allocating resources to support the entire process.**



Handout

1 Questions that will help you do a gender analysis of your organization

- Identify all the different positions in your organization's organogram. Which of these positions do men fill? Which do women fill?
- What is the proportional representation of women in decision-making positions?
- What are the rules and systems for decision-making processes? Are these top-down or participatory?
- Are there opportunities for non-management staff to take the initiative and to contribute to key decisions?
- Who has access to the organization's resources: for example, transport? computers? telephones? contacts with political leaders and key social figures? contacts with the media?
- Who makes decisions about which people have access to resources?
- Does the organization have mechanisms to actively encourage women's participation at all levels?
- Are there strategies to increase women's participation at decision-making levels?
- Does the organization have mechanisms to build staff capacity across the organization for women and men to do a gender analysis at the policy, programme and institutional levels? Is this capacity rewarded formally?
- Does the organization have staff who will be able to design and carry out programming that supports gender equality?
- Are gender related responsibilities mainstreamed into job descriptions for all staff? Is the performance evaluation system of staff gender sensitive?



Handout

2 Ideas for actions for mainstreaming gender equality in your organization

You may find the following key points from the “Beijing +5” [1] document and the ICPD Programme of Action [2] useful in deciding on possible actions for mainstreaming gender equality in your organization.

“Political will and commitment at all levels are crucial to ensure mainstreaming of a gender perspective in the adoption and implementation of comprehensive and action-oriented policies in all areas. Policy commitments are essential for further developing the necessary framework, which ensures women's equal access to, and control over economic and financial resources, training, services and institutions as well as their participation in decision-making and management. Policy making processes require the partnership of women and men at all levels. Men and boys should also be actively involved and encouraged in all efforts to achieve the goals of the Platform for Action and its implementation.” [1:49]

“Programme support to enhance women's opportunities, potential and activities need to have a dual focus: on the one hand, programmes aimed at meeting the basic as well as the specific needs of women for capacity building, organizational development and empowerment; and on the other, gender mainstreaming in all programme formulation and implementation activities. It is particularly important to expand into new areas of programming to advance gender equality in response to current challenges.” [1:53]

“Develop and use frameworks, guidelines and other practical tools and indicators to accelerate gender mainstreaming, including gender-based research, analytical tools and methodologies, training, case studies, statistics and information.” [1: 116a]

“Promote and protect the rights of women workers and take action to remove structural and legal barriers as well as stereotypical attitudes to gender equality at work, addressing inter alia: gender bias in recruitment; working conditions; occupational segregation and harassment; discrimination in social protection benefits; women's occupational health and safety; unequal career opportunities and inadequate sharing, by men, of family responsibilities.” [1:118b]

“Governments and employers are urged to eliminate gender discrimination in hiring, wages, benefits, training and job security with a view to eliminating gender-based disparities in income.” [2:4.7]

“Government, international organizations and non-governmental organizations should ensure that their personnel policies and practices comply with the principle of equitable representation of both sexes, especially at the managerial and policy-making levels ...” [2:4.8]

References

- [1]** United Nations. Further actions and initiatives to implement the Beijing Declaration and the Platform for Action. Unedited final outcome document as adopted by the plenary of the twenty-third special session of the General Assembly on 10 June 2000. New York, UN, 2000.
Available online at: <http://wcd.nic.in/bej5plus.htm>
- [2]** United Nations Population Fund. Programme of Action of the International Conference on Population and Development. Cairo, 5–13 September 1994. New York, United Nations, 1996.

SESSION
5**Linking gender and health****What participants should get out of the session**

Participants will learn to apply the tools of gender analysis to specific health conditions, and understand how gender impacts on health status.

1 hr
40 mins**1 hour and 40 minutes****The materials you will need**

- Handout: “Sex, gender and tuberculosis”
- overhead: “The links between gender and health”, on p. 82

Readings for the facilitator

1. United Nations Population Fund. *The state of world population 2000*. New York, UNFPA, 2000.
2. World Health Organization. *Gender and health*. Technical Paper. Geneva, WHO, 1998.

Readings for the participants

Reading 2.

How to run the session

There are three activities. The first is your input on the links between gender and health. In the second activity, participants work in small groups to examine how gender impacts on health, using the case of a specific health condition common to women and men. This is followed by report-backs to the big group and a general discussion.



20 mins

Activity 1: The links between gender and health



Introduce the session with a brief input, using an **overhead** of the box below.

The links between gender and health

- Women and men differ in relation to the physical spaces they occupy, the tasks and activities they perform and the people they interact with.
- In almost all cultures and settings around the world, and across social groups, women have less access to and control over resources than most men, and are denied equal access to facilities like education and training. However, what it is to be a man or a woman varies across cultures, races and classes. It is important to unpack the concepts "women" and "men" and be clear about which groups of women and men we are referring to.
- Gender-based differences in access to and control over resources, in power and decision-making, and in roles and responsibilities, have implications for women's and men's health status. They result in: differential risks and vulnerabilities to infections and health conditions; different perceptions of health needs and appropriate forms of treatment; differential access to health services; different consequences or outcomes from disease; and differing social consequences as a result of ill health.
- Gender may influence health status in the following ways:
 - exposure, risk or vulnerability
 - nature, severity and frequency of health problems
 - ways in which symptoms are perceived
 - health seeking behaviour
 - access to health services
 - ability to follow advised treatment
 - long term social and health consequences.

Ask participants to think of some examples of how gender influences each of the aspects listed on the overhead.



Activity 2: Sex, gender and tuberculosis



Step 1: Reading individually

Divide the group into four or five small groups. Give each participant a copy of the handout. Each member of the group reads individually. The handout included here looks at gender issues in tuberculosis. You may choose to use another example of a health condition which is common to both sexes but which affects them differently.



Step 2: Group discussions

Each small group then discusses its responses to the questions, and one person records these for reporting back to the big group.



Activity 3: Report-backs and discussion



Step 1: Report-backs

Each group reports back to the big group (six or seven minutes per group). Allow questions when all the presentations have been made, not after each one. Note down any substantive issue or question raised, and bring this up in the big group discussion in Step 2.



Step 2: Discussion

Facilitate a discussion with the whole group and end the activity by drawing out the main points.

What to cover in the discussion

Keep the focus on gender

It is likely that a number of questions will be related to the specific health condition referred to in the handout. It would be best to avoid going into details about these, and keep the focus on gender.

Interrogate the evidence

Go through each of the discussion questions and summarize the ways in which sex and gender play a role in it. For example: what does the evidence tell us about women's and men's vulnerability to tuberculosis? That tuberculosis is found to be more prevalent among men, especially in the adult age groups. However, this may not mean that women are less vulnerable. The diagnostic tests used, the nature of the data on prevalence – all these may result in under-reporting of women. The evidence is inconclusive.

Health seeking behaviour

Do we expect differences in health seeking behaviour between men and women? Why? How does gender play a role in this? And so on.

Referring back to Session 2: How do the concepts impact differently on male and female health?

It may be useful now to refer back to the gender concepts introduced in Session 2: the gender-based division of labour, gender roles and norms, access to and control over resources, and power. Go over each of these and elicit responses about how they may impact differentially on the health of males and females. You may start with tuberculosis for

discussion, but this is the time to broaden the discussion to a more general level and consider how the differences in women and men's health are not merely the result of their biological differences but also because of socially constructed gender differences.

Poor women working with firewood stoves are, for example, at a higher risk of respiratory problems because of the gender-based division of labour which makes cooking women's responsibility. It is men rather than women whose jobs involve driving, including long-distance hauling with sleep deprivation and so on, making men more vulnerable to traffic accidents. Women's limited access to information may mean that they are not able to recognize symptoms which indicate an infection or health problem. Women may not have the time, because of their double work day, to seek timely care for health problems. On the other hand, men's full time jobs outside the home may make it difficult for them to take leave for a clinical consultation.

Main points for closing this session

Gender factors and biological differences impact on women's and men's health status

Gender factors interact with biological differences between women and men to impact on their health status.

Women and men may be exposed to differential risks of contracting a health problem because of gender-based division of labour, or because of gender roles and norms.

Women and men may also have varying perceptions of what represents ill health, and what needs to be done about it.

Access to resources

Women often have more limited access to resources than men, which are necessary for good health.

Even when they have adequate access, women may have no authority to make decisions. This contributes to further ill health or their inability to adequately treat their conditions.

The health sector upholds society's gender rules and norms

The health sector mirrors society in its views and expectations of women and men. For instance, health education messages are mostly addressed to women, because they are seen as responsible for the health of family members. Women are supposed to be accepting of authority and not question the health provider's views and decisions. In many settings, the health sector assumes that all men and women are heterosexual, married and monogamous, and anyone who does not conform to this pattern is viewed with disapproval. The health sector, in other words, is another social institution which upholds gender roles and norms.

A gender analysis of health institutions is necessary

A gender analysis of health institutions is not only necessary to identify actions for mainstreaming gender equality within an institution, but is also a pre-condition for eliminating gender-based inequalities resulting from health programmes.

Session developed by Makhosazana Xaba and TK Sundari Ravindran



Handout

1

Sex, gender and tuberculosis

Read the following extract carefully and then discuss with members of your group responses to the questions given below.

From: World Health Organization. *Gender and tuberculosis. An information sheet.* Geneva, WHO, 2001.

Gender and tuberculosis

Globally, 8.4 million people are estimated to develop tuberculosis (TB) each year, and nearly 2 million deaths result from the disease. Overall, one-third of the world's population is currently infected with the tuberculosis bacillus, over 90 per cent of them in developing countries.

It is the poorest people from the poorest countries who are most affected by tuberculosis. Not only are they more vulnerable to the disease because of their living and working conditions, they are also plunged deeper into poverty as a consequence of tuberculosis. A person with TB loses, on average, 20-30 per cent of annual household income due to illness.

The situation warrants urgent action to curb the epidemic. Examining the gender dimensions of TB is important for overcoming barriers to effective prevention, coverage and treatment of tuberculosis.

Tuberculosis incidence and prevalence is higher in adult males than in adult females. In most settings, tuberculosis incidence rates are higher for males at all ages except in childhood, when they are higher in females. Studies have reported that sex differentials in prevalence rates begin to appear between 10 and 16 years of age, and remain higher for males than females thereafter. The reasons for the higher male prevalence and incidence are poorly understood, and need further research to identify associated risk factors.

Reported incidence rates for tuberculosis may under-represent females

Standard screening norms may cause more women than men with tuberculosis to be missed. Women appear to be less likely than men to present with symptoms of cough or sputum production, or test positive for tubercle bacilli on sputum microscopy.

Lower rates of notification may also be a consequence of a smaller proportion of women than men with tuberculosis visiting a health facility and/or submitting sputum specimens for testing.

There are sex differences in the development and outcome of tuberculosis

Once infected with TB, women of reproductive age are more susceptible to fall sick than men of the same age, and also to die from it. Evidence on the contribution of pregnancy to these differences is inconclusive.

HIV is contributing to sex differentials in risk of tuberculosis in young people

HIV weakens the immune system, and a person who is HIV positive and infected with TB is much more likely to develop active disease than a person similarly infected but HIV negative. Since young women are at a greater risk of HIV infection than men in the same age group, in parts of Africa where incidence of HIV is high, there are more young women notified with TB than young men.

Tuberculosis in pregnancy enhances the risk of a poor pregnancy outcome

Case-control studies from Mexico and India report that pulmonary tuberculosis in the mother increases risk of prematurity and low birth weight in neonates two-fold, and the risk of perinatal deaths between three and six-fold.

In pregnant women with a late diagnosis of pulmonary tuberculosis, obstetric morbidity is increased four-fold, according to a recent review on tuberculosis and pregnancy. The review also reported enhanced risk of miscarriage, toxemia and intrapartum complications.

Genital tuberculosis frequently leads to infertility in women

Tuberculosis of the genitourinary tract is often difficult to diagnose in both women and men. It is however, a rare condition in men. On the other hand, one in eight women with pulmonary tuberculosis may also have genital tuberculosis, as suggested by studies from India and Turkey. Genital tuberculosis is an important cause of infertility in many developing countries, with far-reaching consequences to their lives and their wellbeing. In India, genital TB was the cause of tubal damage in nearly 40% of women experiencing tubal infertility.

Social and economic consequences of tuberculosis varies by gender

Because of gender differences in the division of labour and in roles and responsibilities, tuberculosis affects women and men differently. In one study, women patients reported inability to spend time on childcare, and difficulty in carrying out household chores because of the deterioration in their physical condition. Male patients reported distress because of loss of income and inability to contribute adequately to household expenditure.

Social isolation because of stigma associated with tuberculosis affects both sexes. But the consequences may be harsher for women and girls. Women patients from Pakistan were at risk of divorce or marital breakdown, while in India, women with tuberculosis were concerned about rejection by husbands and harassment by in-laws and reduced chances of marriage, if single, while male patients were concerned principally with loss of income and economic hardship.

Despite early care-seeking, women have a longer period of delay before diagnosis

Studies to-date report either no gender differences, or a greater delay for men in the time lapse between onset of symptoms and the patient's first contact with a health care provider. However, women had a longer delay before tuberculosis was diagnosed because

- They often sought care from a private practitioner or a less qualified professional, and waited for the treatment to take effect before going to the hospital

- They did not go to the hospitals where TB treatment was available, because of the distances to be covered and restrictions on their physical mobility
- Fewer women presenting with chest symptoms were referred for sputum examination by doctors
- It took the doctors longer to diagnose women with tuberculosis than men, perhaps because they did not present with what is considered 'typical' symptoms: prolonged cough with expectoration.

Men are more likely not to complete treatment

Studies report that while men are better able to access TB treatment from a DOTS facility, the need to earn a livelihood also acts as a barrier to completing treatment. Women, on the other hand, have greater difficulty reaching an appropriate facility, but those that do, usually complete treatment.

Questions for discussion in small groups

Your response may be based on the reading above, but need not be restricted to it. Feel free to draw on your experiences and previous knowledge of these issues when answering the following questions.

- Are there different risk factors for women and men?
- Do the roles that society prescribes for women and men account for differences in the risk factors?
- What are the barriers/obstacles to obtaining treatment for the condition? Are the barriers different for women and men?
- Are there differences for women and men in the severity of consequences? What do you think accounts for these differences?
- Are there different responses from the health sector?
- Are there different responses from society at large?

What participants should get out of the session



Participants will have a consolidated overview of the tools and concepts introduced in the Gender Module, and of the links between them.

10 minutes

How to run the session

This is a one activity input session.

What your input should cover



Review the main points made in the Module brief and put up your **overhead**: “Structure of the module”.

Highlight the tools and concepts

- the distinction between sex and gender
- the gender-based division of labour, tasks and activities
- roles and norms concerning masculinity and femininity
- access to and control over resources
- power and decision-making
- gender mainstreaming.

Applying the tools and concepts

Remind participants that they used these concepts to carry out a gender analysis of their organizations and to identify actions needed for promoting gender equality at the organizational level. Remind them that this is an exercise that needs to be done in all health institutions – those directly delivering health services, those training health personnel, institutions responsible for planning, policy making and resource allocation, institutions involved in producing drugs and equipment, and so on. The tools and concepts for gender analysis were then applied to a specific health issue to analyse how gender impacts on various dimensions of health.

Introduce the next two modules

The next two modules will provide further analytical concepts and tools, related to determinants of health, and rights. The concepts introduced in these three foundation modules will be revisited throughout the course to examine how to address gender issues in health information,

health policies and programmes. For example, while the concept of gender mainstreaming was introduced in the first module, the information and skills necessary to initiate action for gender mainstreaming will be provided in the application modules on evidence, policy and health systems.