
Reproductive Health Care Strategy- A Gender Sensitive Approach to Family Welfare

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This essay advocates a reproductive health care strategy, to revitalize the country's family welfare program. A major shift in focus is needed in the population policy and programs in order to incorporate a gender-sensitive approach. This should have the potential to enable attainment of a better health status for women and girl-children, hitherto suffering from institutionalized neglect.

The United Nations International conference For Population and Development (ICDP '94) helped produce a cogent rationale for the change of population and development policies. This placed women's empowerment, gender equality and equity in the center for a meaningful policy-scenario for a humane and sustainable development paradigm.

Reproductive Health Care

The Chapter VII of the Program of Action (POA) of ICPD '94 sets the tone for this new approach to family welfare, namely, in the context of 'Reproductive Rights and Reproductive Health'. It starts with the WHO definition of reproductive health as 'complete physical, mental and social well being' (not merely the absence of disease), and the ability to exercise one's sexuality without health risks. It may further be described as "the constellation of methods, techniques and services that contribute to reproductive health and well-being by preventing and solving reproductive health problems".

This concept includes sexual health and sexual health care, the purpose of which is the enhancement of life and personal relations, and not merely counseling/care related to reproduction and actually transmitted diseases. The essence of sexual and reproductive health is the recognition of all individual’s and couple’s basic human right to make informed choices freely and responsibly, without any coercion, the number, spacing and timing of their children.

POA document urges all countries to strive to make accessible through the primary health care system, reproductive health to all the individuals of all ages, as soon as possible, but not later than the year 2015 A.D.
Reproductive Health in Practice

Key players in the international health, population, and family-planning fields are adopting the language of ‘reproductive health’. While the term is used often, it is rarely understood well. Many existing programs do not provide the services that would make reproductive health care a reality.

• In order to meet the basic reproductive health needs of women and men, Reproductive Health Care include the following services:

• Counseling about sexuality, contraception, abortion, infertility, infection and disease.

• Education on sexuality and healthy gender relations for promoting meaningful social relationships.

• Screening and treatment for reproductive tract infections, sexually transmitted diseases and logical problems.

• Prevention and treatment of infertility and when incurable, counseling for alternatives for attaining parenthood.

• A counseling approach to facilitate informed choices of contraceptive methods.

• Safe abortion service as it is a serious public health issue and a major cause for the preventable high maternal mortality rates.

• Pre-natal care, supervised delivery and post-partum care especially ensuring outreach of services to women in case of rural, tribal and urban slums.

• Services for infants and children, including immunization, growth monitoring, supplementary nutrition, health check-ups and referrals and personal hygiene, health and population education as well as gender sensitivity orientations from first standard onwards; to be integrated in primary education curricula itself. The idea is to catch them young for cultivating healthy positive humane values that endure through their lifetimes.
Quality of Care in Reproductive Health Quality of care is ensured by:

- Maintaining high standards of technical competence, in terms of ensuring, at least minimal hygienic/aseptic clinical conditions and overcoming the hazard of any cases backfiring on account of medical negligence or incompetence.

- Treating clients with respect and compassion and ensuring confidentiality as well as privacy of client-information.

- Providing regular follow-up services in order to establish credibility of health care systems.

Reproductive Health Care enables women to manage their own fertility safely and effectively and to conceive as and when they want to, terminating unwanted pregnancies, and carrying wanted pregnancies to term successfully. They should experience a healthy sexual life, free from disease, violence, disability, fear, pain, or death from causes associated with reproduction and sexuality. Ultimately, women will be empowered to bear and raise healthy children as and when they desire to do so.

Reproductive Health Care can be translated into action by consolidating the existing family planning and health programs. This is possible by:

- Providing reproductive health services in addition to contraception.

- Revising the content and processes of training of health service providers by including skills for handling the full spectrum of reproductive health services.

- Intensifying staff supervision and modifying the system to reward good quality care.

- Building on available resources through collaboration among existing Health and Family Welfare and Women and Child Development Program functionaries and organizing joint training programs.

- Public education and advocacy to obtain political support for a holistic health care approach as envisaged by Reproductive Health Care.

- Seeking greater support from donor agencies for enhancing the necessary infrastructure for operationalising the reproductive health care approach.
Gender Equality as Human Right

Reducing gender gaps in the gains of development is a sure means for achieving 'Health for All'. Gender equality in education, health care, livelihood, and family planning, is the best investment a country can make to improve the quality of human resources. It needs to be emphasized that, investing in the development of women is a basic human right as they are half the human resources. It needs to be emphasized that, investing in the development of women is a basic human right issue as they are half the human resources on this planet.

Any systematic neglect of women is bound to defeat all out developmental efforts. The strategies of the demographers, health professionals, and international donor agencies advocating primary level schooling for women to achieving their hidden agenda of reduced fertility levels are bound to prove abortive and self-defeating. Women's literacy is not an end in itself but is a basic right of theirs. Women are again used as passive pawns for keeping a sustainable level of population on the planet. Such a particular patriarchal mode of decision making, on population and development issues, is bound to prove counterproductive. The essence of the argument is therefore, for investing in women to unleash the latent energy of a vastly untapped, neglected human resource and making them equal in population and develop decision making. It should begin with focus on democratizing the family unit for eliminating gender bias and discrimination against girls and women.

Empowering Women

The Women power from solidarity groups, collectives, coalitions etc, is a validated experience. Examples of such women-empowerment initiatives are plenty like the women development Program of Rajasthan and the Mahila Samakhya Program in five other states and the women networks in India and the world over. Indeed, the challenge before the collective power of women's groups/networks everywhere is to carve out there owns political niche, as a constituency to reckon with. Women's groups have to be energized to get transformed into the comprehensive service delivery approach of reproductive health care. And further, measures needs to be effected to judiciously place them as part of the comprehensive human development framework, which strives to promote the well-being of all human beings.

Echoes of women power are perceivable from our interaction with grassroots women in India, as well.
In women’s development program (WDP) – areas, the refrain is ‘we want properties, not copper-Ts from transformed women. In a recent state-IDARA conducted post-Cairo Experience sharing workshop, the verdict of women’s groups resounded loud and clear: "Let us shift the focus of population and development programs from the present mis-match; let women be the priority focus group to be out reached by development programs and let population and family planning programs access men on priority".

With one-third political reservations granted to women in the local self-government institutions in India, we have certainly heralded in a new era. There is a hope for greater gender-justice in the benefits of population and development programs reaching all. We keep hoping that the "trickle-down effect" of the benefits of the development, flowing from the male-head of the household to the entire family on a gender-equal sharing, will happen naturally. It is not well realized that what is expected to flow naturally is obstructed by the socio-cultural religious constructs of patriarchal patterns.

**Paradigmatic shifts**

Therefore, it is imperative to reframe the population policy for integrating women’s health care needs, holistically. Such an approach would include safe motherhood and child survival services for effectively containing morbidity due mainly to malnutrition and sex bias against girl children which is evidenced by the continually declining sex-ratio. It should contain proper counseling for planned and responsible parenthood, development of user friendly IEC, mechanism to address the physical, social, mental/psychological well-being of all human beings. Hence, the essence of empowering women and the community at large for better health care is to regulate their lifestyles with responsibility for safer health, reproductive health and safe sex behaviors. Thus, this paradigmatic shift in population and family planning policy would be a critical step forward in integrating women’s needs and rights into the global development strategies. The charter and vision of the new reproductive health framework, which seeks re-framing of the development objectives, demand that:

- Both reproductive health and development framework should cater to meeting a ‘basic needs’ agenda.

- Identify the public health system as a key mediator between individual women, households, social structures and the state.

- Increase public investment and donor agency support to reach the poorest to empower them to exercise their reproductive rights through rational choices.
• Start social development policies with concern for the priorities of women: viz. redistribution of the resources for greater gender justice; restoration of basic services eroded by structural adjustment program (SAP); strengthening of women’s participation in political and policy making processes.

Reproductive rights are human rights which are inalienable and inseparable from basic human rights such as the right to food, shelter, health, security, dignity of person, livelihood, education, political and legal empowerment and freedom from violence and coercion. Women are entitled to dignity and bodily integrity. Violence against women and harmful traditional practices such as female genital mutilation, sex determination tests, female foeticide, female infanticide, child marriages etc, must be recognized as major reproductive rights and health issues. The health service providers must be sensitized to provide medical treatment and counseling and the social rehabilitation of the victims. Government should be held accountable for not taking serious measures to combat and eliminate such derogatory and condemnable acts of atrocities against women. Government should enact proper legislations to this effect and implement them effectively.

India is a signatory to the international convention on the elimination of all forms of discrimination against women (ratified in 1922), and the Vienna declaration and program of action on Human Rights, to promote women’s rights and gender equity.

Government and non-governmental organizations (NGOs) must focus their much needed attention to investing in the development of women and girl children and give priority to their education, skill development; ensuring sustained self development opportunities; access and control over property resources, credit support systems and their legal and economic rights. Only this can ensure equality of women and thereby paving the way for a futuristic scenario of hope and thereby paving the way for a futuristic scenario of hope and the sustainable development of human-kind on earth.