Gender Generation Dialogue

GENDER AND GENERATION DIALOGUE

Amongst the challenges Yemen is facing in the field of reproductive health, there is the lack of dialogue and communication concerning important decisions like marriage and family planning. The Gender and Generation Dialogue (GGD) is a community-based methodology enabling communities to create a dialogue platform, where young people and their elders can address important issues in a safe and respectful manner. It aims at raising awareness, promoting mutual understanding between generations and between men and women. As a result, common agreements and pledges for positive change are expected.

OUR APPROACH

Therefore the GGD was introduced in Yemen in 2008 as a pilot project in the governorate of Ibb with two non-governmental organizations (NGO): the Productive Family Organization and the local branch of the Yemeni Women's Union. The GGD is implemented in close collaboration with the Ministry of Public Health and Population at central and governorate level, the Ministry of Religious Affairs, and Local Authorities at governorate and district level.

The methodological tools of GGD have been adapted such as to fit into the cultural context of Yemeni communities and to be in line with Islamic spirit. The GGD in Ibb is implemented by local NGO trainers and facilitators under the supervision of master trainers from the Yemeni-German Reproductive Health Programme (YG-RHP). The team uses local language and drawings to make it easy for the participating villagers to comprehend and use the methodology for community development.

ONE GGD CYCLE CONSISTS OF SEVEN STEPS:

1. Preparatory talks: Introduction of the approach to community leaders, asking for their permission for the implementation.
2. Community consultation 1: Focus group discussions with community members to get their perspectives on reproductive health issues as baseline information; selection of the participants for GGD sessions.
3. GGD sessions: Eight weekly sessions with one male and one female group representing different generations to work on dialogue practices and start dialoguing. After half of the sessions, an intensive exchange between male and female facilitators and trainers takes place. Then the team summarizes the experience of the first four sessions for partners and stakeholders. Thereafter, they continue with the remaining sessions.
4. First public meeting: Presentation of the outcomes of the GGD sessions to the rest of the community and authorities and agreements on pledges and requests.
5. Follow-up meetings: One meeting every month for a period of four months between the NGO team and a follow-up team from the community to monitor the achievements and challenges concerning the initiatives agreed upon in the public meeting.

6. Community consultation 2: Focus group discussions with community members to get their perspectives on the current status of reproductive health issues in the community and changes promoted by the GGD activities.

7. Final Public Meeting to review the development of the community concerning reproductive health in the last six months and agree upon further steps in the community and with the authorities.

RESULTS TO DATE

The communities have become aware of the importance of dialogue. Some people started applying their newly acquired communication skills in day-to-day life. e.g. some mothers who had problems with their daughters have come to a better understanding with them after participating in the GGD sessions. Some young men reported that the GGD helped them to improve their communication with their parents and grandparents. Most importantly, in the second pilot community men underlined that the change objectives agreed upon through the dialogues can only be achieved by a joint effort of men and women.

Concerning the critical issue of early marriage, both pilot communities issued memorandums signed by all inhabitants defining the suitable marriage age as no less than 17 or 18 years. Moreover, they limited the dowry to 250,000 Yemeni Rial, equal to around 1,250 USD which is still quite high for a country with a per capita income of 2,335 USD per year in 2009.

The follow-up team of the second village now traces the number of couples using family planning methods. Women who knew about family planning methods but were reluctant to use them now started to use them and are persuading others to do so.

Six ladies who participated in the GGD sessions voluntarily held educational sessions for interested community members on reproductive health matters using the six question and answer booklets on reproductive health topics developed by the YG-RHP for and with young people, rooms for these sessions are made available in the communities.

Furthermore, after the GGD cycle the first community has become more aware of the importance of female education and is preparing literacy classes for girls and women.

Extensive documentation of the pilot implementation is available at the YG-RHP and the NGOs.

PARTNERS

GTZ, Ministry of Public Health and Population, Ministry of Religious Affairs, Local Authorities, Productive Family Organization, Yemeni Women’s Union

COVERAGE

Governorate of Ibb, 2 village compounds

RESULTS TO DATE

Exchange and understanding between the generations have improved significantly. As a result of increasing reproductive health awareness, a minimum marriage age and a limitation of the dowry have been agreed upon. The YG-RHP-supported Community-based Reproductive Health Promotion (CBRHP) program has been introduced to the villages, providing them with information on reproductive health services and access to family planning through volunteers. Thanks to the good relations between the NGOs and the Governorate Education Office, conditions for female literacy classes are currently being drawn up.