A WOMAN'S PLACE

introduction

In every country and culture, women play vital roles in society, but often the only role that they are recognized for is their reproductive one. Women around the world have made great progress in improving their status and lives, but they still face many inequities in political representation, economic well-being, health, and human rights. These inequities do not only affect individuals but also entire societies, as there is an increasing amount of evidence that improving the status of women is key to improving the health and well-being of families and stabilizing fertility rates globally.

Vocabulary: fertility rates

materials

Part 1

- Article: "What if your mother-in-law decided when you got pregnant?" (provided)
- Student Worksheet

Part 2

- Article: "An Indian activist fights in court to help child brides and grooms win their lives back"
- Pennies

Part 3

• None

Part 1: Who Makes the Decision?

procedure

- 1. Distribute the article, "What if your mother-in-law decided when you got pregnant?" and the Student Worksheet, one of each per student. Explain to the students that the reading is a true account of a woman who lives in Pakistan, but her experience is shared by women all over the world.
- 2. After the students have finished the Student Reading, divide the class into small groups of 4-6 students to answer the questions on the Worksheet.



concept

The status of women influences fertility rates and the rate of population growth of a region.

objectives

Students will be able to:

- Read and respond to comprehension questions from an article on the status of women in Pakistan.
- Consider probability, age, and personal preferences to hypothesize the size and make-up of their own projected family size.
- Conduct and present research on the status of women in different countries.

subjects

AP Human Geography, Geography, English Language Arts

skills

Reading and listening comprehension, collaborating, calculating averages and probability, researching, synthesizing research, analyzing data, public speaking, visually communicating research

method

Through an article, video, simulation game, and small group research, students explore factors that influence women's fertility decisions in countries around the world.

3. After all groups have finished, discuss the final question as a class: "What would you do if you were Fatima?" Structure student responses by having them first state their opinion and then defend it with supporting information from the text and discussion.

alternate procedure

Have each group do a role play of what Fatima and her husband might do in this situation. The main characters would be Fatima, her husband, and her mother-in-law; other students could play the roles of Zaib Dahar (maternal health advisor), Rukhsana Jamil (local health worker), the local teacher, a relative, a concerned neighbor, and the narrator.

Part 2: It's a Toss-up

procedure

- 1. Distribute a copy of the article "An Indian activist fights in court to help child brides and grooms win their lives back" to each student and allow them time to read it. You may warn students that the first paragraph of this story contains a description of sexual assault and intimate partner abuse.
- 2. Ask students the following questions:
 - a. How old was Pinki Kumari when her marriage was decided? What made her want to leave her husband?
 - b. Why did Pinki have trouble finding help before she spoke to Dr. Bharti?
 - c. Why do many girls and women view annulment as preferable to divorce?
 - d. What are some reasons that so many Indian women are married before they are 18?
- 3. Tell students, "Girls who marry before age 18 have many more children over their lifetimes even if they would prefer smaller families." Explain that the following exercise simulates the kind of situations people face while planning their families.
- 4. Distribute a penny to each student.
- 5. Have each student take out a piece of scratch paper and write down the number of children they would like to have.
- 6. Ask students to imagine that they are now part of a couple that can have biological children and that they are ready to start a family. Both partners in the couple are 28 years old. Tell students to write down ages between 28 and 44 with intervals of 2 years between each number (28, 30, 32, etc.). At each 2-year age interval, the couple has a chance to try for a child. If they try for a child, they will flip a coin to decide whether an attempt results in a child: heads for yes, tails for no. They should record the outcome on scratch paper. If they decide to not try for a child, they mark an X for that age. Students may stop trying altogether whenever they choose.
- 7. Each student totals how many children they have (the number of heads) at the end of the simulation. As a class, calculate the average number of children per couple. Keep in mind that each student represents one couple.

- 8. Now repeat the exercise, but this time, imagine that they are part of a couple with a 14-year-old girl and 24-year-old man. Again decide how many children they would like to have. Tell students to write down ages between 14 and 44 with intervals of 2 years between each number. This time, students must try for a child at each 2-year age interval and repeat the coin-flipping process from above (heads results in a child; tails results in no child) and record the outcome on scratch paper. Students should stop flipping the coin when they have reached age 44 or when they have eight children, whichever comes first.
- 9. Each student totals how many children they have (the number of heads) this time. As a class, calculate the average number of children per couple.
- 10. Compare the average number of children found when students are acting from their own wants to the average when they were imagining a child marriage.

discussion questions

1. Were you able to "have" the number of children you originally said you wanted in the first scenario? In the second? Why?

Answers will vary.

2. What factors, besides income, determine how many children people have?

Answers may include: cultural and religious traditions and values, family traditions, career choices, lifestyle, and use of family planning.

3. China and India collectively have 70 million more men than women. In India, the gap between males and females is widest in people under 20 years old. What are some reasons for this disparity in the sexes? What might be some consequences?

Families may have a preference for male children, as men have more opportunities for employment. Men also stay a part of the family unit after marriage, which keeps their economic benefits flowing to their parents. Women, on the other hand, become a part of their in-laws' family and transfer any economic benefits to them. Men also do not have to pay dowries and are the beneficiaries of dowries upon marriage. The gap has widened as technological advances have made it easier for parents to determine a fetus's sex before birth. Sex-selective abortion, though illegal in both China and India, is widespread.

As the gap between the sexes widens, there are far more men of marriageable age than there are women. Women can afford to be choosier in who they marry, and men of low social status find it more difficult to wed. This in turn has spurred problems including a rise in sexual assault and street harassment in India as well as human trafficking to bring women to remote regions where there are very few marriageable women available. On the other hand, dowries have become much less expensive for the families of brides and men are becoming more capable in domestic skills traditionally relegated to "women's work."

4. Why would a girl in a child marriage not be able to decide whether to try for children?

Girls married as children have less power within their family units and often must follow the desires of their husbands or in-laws regarding the number of children to have. Their education and literacy rates are also much lower, which makes attaining and effectively using family planning methods more difficult. They are also more likely to be living in poverty, and more children may offer economic benefits such as the ability to work or receive dowries.

5. What difference does a tradition of large families versus a tradition of small families have on a society's population size?

In a society where most people have many children, the population grows quickly.

6. How do personal family size decisions affect other members of a society? How do they affect the natural environment?

One person's decisions may not seem significant in a large society. However, each person's decisions multiplied by everyone in the society add up to a lot. If lots of people choose large families, this increases stress on the natural environment for living spaces, fields for food, areas to dispose of waste, wildlife habitats, etc.

Part 3: Researching a Woman's Place

procedure

- 1. Divide the class into groups of four and assign each group one of the following countries to research (if the class has fewer than 40 students, eliminate countries from the list):
 - Australia
 Brazil
 China
 Jamaica
 Kenya
 Mexico
 Nigeria
 Poland
 Saudi Arabia
 South Korea
- 2. Each student in the group will research one specific area related to the status of women in his or her group's assigned country. The areas to study are the following:
 - education of women (includes literacy rate, average years of schooling)
 - **employment of women** (includes employment rate, types of employment, average wages, employment in the home)
 - health of women (includes life expectancy, vulnerability to disease, nutrition, fertility)
 - legal and political status of women (includes women's rights, laws relating to women's status, representation in government)

For each category, students should determine how women's situations compare to those of men. You may want to share a couple U.S. statistics from the table below as an example. Students can also use this information as a means of comparison between the U.S. and the country they were assigned.

Suggested Resources:

<u>United Nations Population Fund</u> <u>UNICEF</u> <u>UN Women</u>

U.S. Gender Statistics (2021)				
Categories	Women	Men		
Population	168 million	164 million		
Literacy Rate	99%	99%		
High School Graduate or Higher	91%	90%		
Bachelor's Degree or Higher	37%	35%		
Percent of Full-time Workforce	44%	56%		
Percent of Part-time Workforce	63%	37%		
Fortune 500 CEOs	37 (7%)	463 (93%)		
Full Time Average Earnings	\$42,692	\$52,364		
Below the Poverty Level	13%	11%		
Life Expectancy	81 years	76 years		
Fertility Rate	1.7 children born/woman	N/A		
Legal and Political Rights	Constitution-based federal republic; strong democratic tradition; women equal to men	Constitution-based federal republic; strong democratic tradition; women equal to men		
U.S. Senators	24	76		
U.S. House Representatives	119 (27%)	316 (73%)		

Sources: U.S. Central Intelligence Agency World Fact Book (2021), U.S. Census, U.S. Bureau of Labor Statistics, U.S. Department of Labor, Library of Congress.

- 3. After completing their research, students should meet in their groups and share information on their findings. Together, group members will create a brief oral presentation on the status of women in their assigned country. The presentation must include visual aids, such as a poster or a skit, and must be presented by all four group members. Encourage group members to ask each other follow-up questions when sharing information to make sure that they each fully understand the status of women as it relates to all four areas that were researched.
- 4. If time allows, have all groups present their findings to the class.
- 5. After all groups have presented their findings, lead a discussion on the similarities and differences in the reports. In which countries is women's status closest to that of men? In which countries do women have the lowest status? How is the fertility rate in each country related to the status of women? How is the status of women related to population growth? To environmental quality?

assessment

Monitor participation in class discussions and evaluate students' presentations on accuracy and thoroughness of research as well as clarity of communication.

follow-up activity

The status of women both within the U.S. and abroad is constantly evolving, as is women's access to reliable, safe contraception and the right to freely plan their reproductive futures. Reproductive rights have been codified in a number of United Nations Declarations over the past half century. At the International Conference on Human Rights held in Iran in 1968, world leaders adopted a proclamation stating that "Parents have a basic human right to determine freely and responsibly the number and the spacing of their children." Later UN proclamations expanded on this by adding that individuals, as well as couples, also have the rights to the means to plan their families, including education and contraceptives, and that governments should ensure that people have the means to exercise these rights.

Working in the same groups as in Part 3, students can research and discuss whether and to what extent the country they researched has abided by these international agreements to provide individuals and couples with reproductive rights and services. Once students have gathered this information, they should share it with the rest of the class. Students can compare and contrast the reproductive rights available to women in different countries with those of women in the United States. In small groups, students can also discuss what societal, familial, or cultural aspects might need to be addressed in the country they researched to further expand reproductive rights for women there.

¹United Nations, Final Act of the International Conference on Human Rights. Resolution XVIII: Human Rights Aspects of Family Planning. Doc. A/CONF. 32/41, p. 15.

What if your mother-in-law decided when you got pregnant?

By Sonia Narang, PRI's World on April 28, 2014

Fatima is often exhausted raising her ten month old son and a three month old niece who has been left in her care. Now she is pregnant again. And she is frustrated.

"Sometimes, I get fed up with being pregnant," she says. "I cry because I feel weak or when my son is bothering me. I start crying because I got stuck in all of this."

Fatima did not want to get pregnant again so quickly after her son was born last June. In fact, a neighbor who serves as a health worker offered to provide Fatima with free birth control pills, injections and condoms.

The health worker, Rukhsana Jamil, advises many women in the neighborhood about family planning. "[I] give them the contraceptives and ask them to please keep a gap of two years between their first baby and second baby," she says. Spacing births is good for the health of mothers and children.

Fatima says she trusted Rukhsana, who is like a second mother to her. (Rukhsana had arranged Fatima's marriage.) But Fatima did not feel she could take Rukhsana's advice.

Like many married women in Pakistan, Fatima is deeply embedded in her husband's family. She and her nuclear family live with her husband's parents and brothers. Soon after her son's birth, Fatima's in-laws told her to try to conceive again.

"My mother-in law and others in my husband's family told me, 'Please don't wait too long to have another baby," she recalls. (They were concerned about her ability to have another child because she had a history of miscarriages.) Fatima felt she had no choice but to avoid contraception.

Fatima's situation is common in Pakistan, says Zaib Dahar, a maternal health advisor at Jhpiego, a nonprofit health organization affiliated with Johns Hopkins University. "[The wife] cannot decide herself, alone," Dahar says. "She has to seek willingness from her husband, mother-in-law and father-in-law."

A 2010 study by Population Services International documented this dynamic. Researchers conducted surveys across Pakistan and found that, for a typical woman, "the perception that her in-laws support family planning use was the strongest determinant of her intentions to use contraceptive methods."

And if a woman wants to undergo permanent sterilization (e.g. tubal ligation surgery), she has even less say in the matter. Hospitals will generally require that she provide her husband's written consent before performing the operation.

Zaib Dahar of Jhpiego says because women in Pakistan do not make birth control decisions alone, community health workers need to speak to entire families — including husbands and in-laws — and counsel them all on the benefits of family planning.

As for Fatima Haroon — who found herself quickly pregnant again after giving birth to her son last year — she says that after her second baby is born, in July, she does not want any more children. But when I ask her what she will do if her husband's family pressures her to have another baby, it becomes clear that her plan is more of a wish. "I don't think anyone will tell me [to get pregnant again]," she says. Then she adds: "God willing."

A WOMAN'S PLACE | student worksheet

Na	nme: Date:	
	What are Fatima's problems? What is she concerned about?	
2.	What role does Rukhsana Jamil play in Fatima's community? What is her advice to Fatima? Does Fit? Why or why not?	atima take
3.	Why do you think Fatima's mother-in-law wants her to have more children?	
4.	Do you think Fatima and her husband will decide to start practicing family planning? Why or why r	ıot?
5.	How might it benefit Fatima and her family if she waits longer between future pregnancies?	
6.	How might it benefit Fatima and her family if she does not have more children? And if she does?	
7.	What are some things that the government or other groups could do to help women like Fatima?	
8.	Do you think family members should have a say in a woman's reproductive decisions? Why or why	not?
9.	What would you do if you were Fatima?	