

Village Women in North India Learn Creative Ways of Expressing Their Sexuality

by Janet Price

The work presented here is the cumulation of three years involvement with a small non-governmental women's organisation, based in the foothills of the Himalayas in India. SUTRA was started about twelve years ago by an Indian social worker from Maharashtra, Subhash Mendhapurkar. Moving from a service-based approach to development, SUTRA's work underwent a major shift in direction in the early 1980s, adopting a participatory approach, with a clear focus on working with local village women. The organisation has grown to the point where it has a strong base in women's groups within the surrounding villages, and links with more recently established sister organisations in neighbouring districts.

Staff members of the organisation are people from the local area, in the early days predominantly men, but of recent years a major effort has been put into employing and training local women staff. There were many barriers to break down before this was possible. Many of the problems experienced initially were due to rules and regulations laid down by the organisations, such as the need to be literate, rather than any reluctance on the part of women.

Over the years the women have become involved not only in campaigning and working for local development initiatives, such as village water supplies, but also in organising state-wide campaigns around issues such as deforestation and liquor.

With the growing number of women becoming involved in SUTRA's work as staff members, and at a village level in women's groups,

there was a growing demand from the women for access to skills and information that would empower them to address local issues more effectively. It was from this basis that we developed a series of workshops addressing issues of concern. One central focus of these was women's control over their bodies and health.

Workshops on women's health

The aims of the workshops were to offer women the opportunity to gain a greater understanding and control of their lives.

Sessions were based on personal experience and on local beliefs and ideologies, using these as a foundation for further exploration and analysis of women's roles in society.

The workshops functioned on a number of different levels - intellectual and analytical,

emotional and physical - and the combination of these was vital to their success, as were the opportunities offered for self-expression, and for the gathering of new information.

We aimed to create an atmosphere of trust and openness in a women-only space in which women could live, work and sleep together over a number of days.

The following discussion will focus on the work carried out exploring women's experiences of their bodies, health and sexuality.

Storytelling

This was based on women's experiences of personal events, such as menstruation, childbirth, marriage. All members of the group would share their own story. The trust and support offered by other women often resulted in women feeling able to tell their stories in great detail or to talk of painful and distressing events in their past.

These sessions provided a wealth of information about women's life experiences and were important in relieving the fear and isolation many felt, particularly about issues such as menstrual taboos, infertility, violence and rape, most of which are not discussed with any ease or openness.

Role play

These often built on women's personal stories, providing the group with the opportunity to explore how a particular issue e.g. first menstruation, affected a woman and those around her. In acting out these situations, the women portrayed emotions, traditions and practices that had often not been touched upon during their stories and discussions. The role plays were usually videotaped and played back to the group, stimulating further analysis of women's societal roles and how they are changing.

Pictures

Images played an important role in a number of ways. For practical explanations of women's anatomy and discussion of menstruation, child birth, infertility, and vaginal discharges, simple line drawings and pictures were used. Sessions using these diagrams sparked discussions about women's understanding of their own anatomy and physiology. However, it was clear that this type of representation of the human body was at times confusing and for some, deeply embarrassing.

The physical freedom offered through dance also played a vital role in reducing inhibitions and enabled women to feel more at ease with many of the more personal discussions.

In an attempt to understand and help women express their own perceptions of their bodies more clearly, and subsequently to find ways of sharing information about women's anatomy and physiology more effectively, we asked women to draw their bodies and internal anatomy. This was then shared with the group and generated a wealth of new ideas and a clearer understanding of the concepts women had about how their bodies work, events such as menstruation and conception, and of the action of contraceptives. It also stimulated discussion about relationships with men and how women perceived and experienced them.

Dancing and body work

Mime, movement and dancing, frequently with music and song, were a vital part of all the workshops, not only to offer much needed relaxation. Traditional songs and dances, often a part of marriage ceremonies, offered a further source of material for analysis - often carried out by women through satirical reworking of the originals. The physical freedom offered through dance also played a vital role in reducing inhibitions and enabled women to feel more at ease with many of the more personal discussions.

Myths and history

A vital element of the workshops as they developed was the emphasis laid on myth and images and stories of the past. This began with many of the women using local tales to explain complex or deeply-held beliefs about women's roles and sexuality.

It expanded when Giti Thadani, an independent researcher from Delhi was able to join us. She has been working on the ancient Indian texts and temple architecture and sculpture, recording and interpreting its meaning for women. Using stories from the texts and photographs of sculptures from temples, she was able to tap a much deeper vein of experience in women's lives. Women's identification with many of the ancient stories and images was very powerful, and led to a rich exploration of women's sexuality, fertility and creativity, in exploratory, explanatory and reflective ways.

Self-examination

Reaching the point at which women felt able to deal with the idea of self examination had taken time and the building of trust, the courage to surmount the many taboos that prevent it. It offered women new insights and understanding about their bodies, and led again to further explorations of women's experience, in this case particularly at the

hands of the medical profession. It also served as a further occasion on which women were able to explore in detail their concerns about gynaecological problems, their understanding of them, and their need for reassurance or for support to seek medical advice.

Conclusion

The approaches used in the workshops, as described above, gave women many opportunities to talk about their lives and experiences, to explore emotions, to be heard with empathy and to receive support when discussing issues that raised painful and distressing memories. Within such a situation it is vital that the workshops are seen not as an end in themselves but as part of an ongoing process, a process in which continuing support and space to talk must be available to women taking part. If this is not the case, past experiences that have stirred up deep emotions may become a source of deep and continuing pain and distress.

The process may also serve to open new doors and create new avenues for talking about subjects that are regarded as shameful or taboo. For example, a woman who has been severely beaten by her husband, after sharing her story within a smaller group, felt confident enough to talk about the experience at village meetings with other women. This led to an increasing recognition of the extent of marital violence against women within the area, to women losing their sense of shame at talking about the beatings and ultimately to women organising more effectively at a community level to introduce sanctions against those men who beat their wives.

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Source: *GADU Newssack No. 14, Oxfam, United Kingdom*