

BEYOND PURDAH

Neighborhood women pioneered rural health and women's rights

by David Taylor

Thirty years ago, community agents braved ostracism and physical danger when they went door-to-door offering family planning advice. They were women who pioneered the voluntary reproductive health movement in Bangladesh. They knew the risk, but were responding to an emergency. Coming out of a bloody war in which they split from Pakistan in 1971, Bangladesh was one of the poorest and most densely populated countries in the world.

In the 1970s, when women in other countries were being stoned for riding mopeds, the community agents of Bangladesh were delivering a message and the methods of birth control to the women of their own neighborhoods. It was a critical and unmet need, yet there was no other way to reach the women who desperately needed their services: under the Muslim rules of purdah, women rarely left the home.

"Door-to-door distribution throughout Bangladesh, using volunteers and workers, played a key role in increasing contraceptive use," says Dr. Fadia Sultana, a Dhaka-based physician who works with Save the Children.

The workers knew that it would provoke challenges for the depot holders, says Mary Beth Powers, senior reproductive health advisor for Save the Children. "When it started, it had to be door to door," Power says. Each community agent was a local resident. Her home, or "depot" held several months supply of contraceptives and she was responsible for house-to-house distribution of those contraceptives within her own neighborhood. She was their reliable source of supplies and of family-planning information. Most

were married and had just five or six years of school.

The initial wave of some 3,000 depot holders received training in how to present family planning options: to explain the importance of spacing births, talk about the options available, and advise where to find related needed services.

Following the efforts of the early depot holders, Bangladesh has come to accept family planning and recognize that women play an important role in the country's development. The government recognized the critical role played by these women when health officials expanded education on contraceptive use nationwide. The public response turned from hostility to general acceptance.

Family planning is now the norm, says Powers. "We got past the tipping point."

The results are that over half of all married Bangladeshi women of childbearing age use contraception, compared with 7 percent in 1975 when community-based distribution began. In 20 years, the country's total fertility rate declined from 6.3 to 3.4.

Other changes were far-reaching. "There's been a huge increase in mobility for women," says Powers. "And girls' education is growing by leaps and bounds." Freedom of movement for all women forced depot holders to change their methods. They evolved from being roving agents of uncertain standing to gaining recognition as acknowledged pillars of their communities. Powers credits that shift to the women themselves. "It has to do with the respect accorded to the agents then, who were also keen to learn more about children's health."

Their roles have changed, as well.

Under Service Delivery Project, a local program managed by Pathfinder International and funded by USAID, Save the Children has trained depot holders in basic procedures for identifying childhood illnesses. They have learned how to count respirations per minute, for example, to determine if a child may have a respiratory infection. They are also able to dispense a basic antibiotic such as cotrimoxisol. Powers says these women have become independent health resources for their communities.

Depot holders now hold most of their gatherings in clearings or in a local merchant's compound. On outpost day, women come from nearby villages to have their children tested for basic health problems, learn about measures they can take at home, and simply talk with other women about shared concerns. Powers and Sultana drove four hours outside of Dhaka one day last year to hear a depot holder make a presentation at her weekly health outpost session. The site that day was hot and crowded. "I was surprised they just hung around the health outpost," Powers says, but Sultana reminded her that for the women, the outpost was a rare chance to visit with peers and get relief from household chores that dominate their days starting at 5 a.m.

Powers believes that in the field of family planning, Bangladesh has been inspiring. She compares it to Pakistan UNICEF statistics make her case. Coming from similar conditions in the early 1970s, contraceptive prevalence in Bangladesh is now 59 percent. In Pakistan, contraceptive prevalence is 28 percent. Maternal and infant mortality rates tell much the same story: for every 1,000 live births, 56 die in Bangladesh and 80 die in Pakistan; for every 100,000 births, 380 mothers die in Bangladesh and 500 die in Pakistan.

"Access to voluntary contraception is an important component of working your way out of these sad statistics," Powers says.

David Taylor served as a Peace Corps volunteer in Mauritania from 1983 to 1985.