



# Gender inequality in Southern Sudan

In June 2007, Thekla Bosschaart went to Mundri, a small village in Southern Sudan. Together with eight other Dutch students and a supervisor she started the health education project *Mpower! Your body, your responsibility*. They trained 62 young Sudanese people to give workshops about Hygiene & Sanitation, Nutrition or Sexual & Reproductive Health (SRH). Thekla focused on the latter.

## Thekla Bosschaart

Catherine is a woman somewhere in her thirties (in Mundri no one knows his or her exact age). Catherine is strong, empowered, independent and educated, she runs her own business. She undoubtedly has the potential to be a role model for other women in her community. Catherine was married to James, but unfortunately they remained without children even after several years of marriage. Due to this reason, James was advised by his family to marry another wife: *This one is no*

*good*. Catherine was blamed for their failure to conceive and was insulted and harassed by her in-laws to such an extent that she finally packed her bags and returned to her own family. James will find no problems in marrying another, Catherine will.

Establishing a family in Mundri is very important, as in many other (East) African countries. Catherine felt very pressured by her family, her husband's family and the rest

of the community to have children. Catherine: *A big family is your security for the future and it gives great respect* (especially to the father of the child). Beliefs about the causes of infertility in Mundri are very different from Western beliefs. Infertility is always seen as the woman's fault. People believe that dowry, witchcraft, eating the wrong kind of food and parental discontent with the chosen partner of their daughter can make a woman infertile.



Southern Sudan



10-20 million  
inhabitants



< 750  
income per year



~ 35 yrs  
life expectancy



no data on %  
of GDP for health



unknown number of  
doctors/1000 people

Catherine: *Dowry is paid to the woman's family when she marries. Most of the dowry will be given to her uncles. If they think it is not enough, her uncles will become angry and annoyed. They start speaking evil of their niece, which in turn causes her to become infertile. To change her fortunes, extra payment is needed. The effect of too little dowry can even skip a generation. When the dowry paid for my mother was not enough, this can cause me to become infertile. Also my parents can influence my fertility. If I would marry a man against the will of my parents, they will make sure I will not receive.* So how come teenage girls who have sex against the will of their parents become pregnant? *That is because their parents did not know about them having sex.*

Another cause of infertility in Mundri is eating men's food or visiting places not suitable for women. For example, the blacksmiths' is perceived as a place where only men can come. It is believed that women can become infertile when visiting this place.

Culture can help explaining things that happen in one's life, things that we do not understand, that we cannot see with the naked eye, like infertility. The main problem here is not so much that people in Mundri are con-

**“When the dowry paid for my mother was not enough, this can cause me to become infertile.”**



vinced that dowry, witchcraft or eating the wrong food can cause infertility (who are we to say that this is not true?). It is the inequality between men and women in these beliefs that is worrisome. Men are not even considered to have a role in the failure to conceive. At the same time, women like Catherine are cast out by the community; they are looked down upon and stigmatized. Their strengths are completely ignored.

Achieving more equality between men and women would not only be beneficial for women. The pressure on men to produce children and divorce when faced with reproduction problems might decrease as well. Gender equality can also have positive effects on a community. It can incite economic progress and growth, and reduce child mortality. Gender inequality affects the access to and use of health services, treatments and



## Mpower! Your body, your responsibility

*Mpower! Your body, your responsibility* is a joint project of IFMSA-NL and the Mundri Relief & Development Association (MRDA) from Southern Sudan. Nine Dutch students worked together with Sudanese youth in a Training of Trainers programme that took place in 2007. Over a six month period, 62 Sudanese young leaders were trained in *Nutrition, Sexual & Reproductive Health and Hygiene & Sanitation*. Through interactive workshops and small group projects, self confidence and teamwork among the participants was promoted.

The Sexual & Reproductive Health sessions focused on, among other, gender

differences & similarities, infertility, pregnancy & labour, sexual transmitted diseases and safe sex.

The Mpower! project aims to increase knowledge about the abovementioned themes and to boost independency and enterprise among the participants. Mpower! was succeeded by Mpower!kids, a Training of Trainers programme focussing on child health, nutrition, hygiene, children's rights and education. Mundri, Southern Sudan, now owns a Youth Friendly Centre and a Mother & Child centre.

**For more information on the Mpower! project visit [www.ifmsa.nl/mpower](http://www.ifmsa.nl/mpower)**

“

**Mohamed Abdelsadg**

**medical student in Khartoum, Northern Sudan**

I found the article really interesting. I think it could be true, especially if we are talking about a village that is not well known even among Sudanese. To be honest I have not heard about this village before, though I am not saying it's not there!

”

decreases the incidence of sexual violence. Development cannot be seen separately from cultural beliefs on gender matters.

Catherine was a volunteer in the Mpower! project. During the SRH workshops, we attempted to change the unfortunate situation of women like her. First we tried to add – what Western science sees as – the real causes of infertility to their traditional beliefs. Through role-plays and discussions, we tried to take the blame off women. Culture and traditional beliefs however, can be a hard thing to change.

Eventually though, I got the feeling that most of our participants took the roles of both women and men into consideration when discussing infertility. Hopefully, this is a first step towards better gender equality in Mundri.

---

### Further reading:

- Gender equity and socioeconomic inequality: a framework for the patterning of women's health; Nancy E. Moss; Center for AIDS Prevention Studies, University of California San Francisco
- Gender, Sexuality and HIV/AIDS: the What, the Why and the How; G.R. Gupta; XIIIth International AIDS Conference, Durban, Southern Africa; July 2000