

NOTRE CORPS, NOTRE SANTE LA SANTE ET LA SEXUALITE DES FEMMES EN AFRIQUE SUBSAHARIENNE

(Our body, Our Health, Sub-Saharan Women's Health and sexuality)

The book:

Notre Corps, Notre Sante is not an adaptation of *Our Bodies, Ourselves*, it is an original work. It needs to be said that the authors were inspired by OBOS, and from the beginning they received support from the Boston Collective, that sent a representative to the first workshop aiming at outlining the book. The group still continues to get support from the Boston Collective

The main objective of the book is to bring African women knowledge that will enable them to appropriate their body, take care of it and like it. In addition, the economic, political and cultural context within which African women live, having a huge impact on women's health, the authors put emphasis on it. Hence an important part of the book is about the representations men and women have about women's bodies, health and sexuality, about the way women's bodies are used, taken care of, dressed, and/or violated.

The content of the book:

It's made of 28 chapters that are as follows:

1. Socio-Economic Context of health in Africa, (2) the Girl Child, (3) the Adolescent, (4) Woman's bodies (5) Menstruation, (6) Sexuality, (7) Pregnancy, (8) Delivery and post-partum, (9) Abortion, (10) Sterility, (11) Family Planning, (12) Sexually transmitted disease and infection, (13) HIV/AIDS, (14) Women's cancers, (15) Menopause, (16) Most frequent illnesses in Africa, (17) Traditional Medicine, (18) Mental Health, (19) Nutrition, (20) How to take care of oneself, (21) Women in Society, (22) Prostitution, (23) Violence against women, (24) Female Genital Mutilations, (25) Women living with a Handicap, (26) Health and Environment, (27) Social Perceptions about our body, (28) General Conclusion

Processes :

In the beginning, the book was managed by the Réseau de Recherche en Santé de la Reproduction en Afrique (RESAR) that was an initiative funded by the Population Council in 1990. The members of the network are specialists coming from various areas of the field of population studies. Some women members of Resar who have a more feminist perspective about women's health and who work in a women's group located in Dakar, Senegal (Groupe de Recherche sur les Femmes et les Lois) took over to get the book finished. The women's group received support from the Boston Collective for getting the book illustrated and printed.

Coordination:

In the beginning the book was coordinated by a Program Officer appointed by the Population Council, but since GREFELS took over it has been coordinated by members of the the group, who also are members of RESAR. For example the President of GREFELS is a board member in RESAR.

A consultant was appointed by the Population Council with the task of writing a concept paper that was discussed and amended. From the concept paper, the number and content of the chapters of the book were decided. According to their area, the members of RESAR were requested to write one chapter. Decision making never became a problem because a scientific committee was set up from the beginning to make collective decisions.

When the book was completed the scientific committee had a week long retreat to look at the whole content of the book, recommend corrections or improvements.

Problems:

Aside from getting funds, the main problem encountered was the heterogeneity of the team involved in editing the book. It included men and women from very different backgrounds, visions, and countries: some are medical doctors, others sociologists, others biologists, others historians, and others journalists. Some came from West Africa and some from Central Africa. Despite this variety of background that is enriching, the difference in perspective (some members of the team being radical feminists, others very conservative and who wanted the book to be similar to the medical books used at the faculty of medicine) still was a big problem.

Another minor problem was to have a homogeneous content written in clear and accessible language because some authors are high level medical doctors and professors of medicine and used to write in a “jargon “ that is not accessible to anyone. It was the task of the editor to rewrite “problematic” chapters. But she was requested to submit the corrected version to the author for him/her to agree to the new content.

Many chapters were also written by the coordinator.

Translation issues:

Since the book is meant for a Francophone audience and the articles are written in French by Francophone authors, there is no translation problem. But due to the high level of illiteracy the language is still a problem, because the large majority of women do not speak French. Because of the large number of African languages in the region, the fact that these languages are not written and are still oral, and because French is the working language in West and Central Africa, the book is in French. To try to overcome the issue of language, the authors are looking at other possibilities such as translating some useful chapters into local languages, but for this we need funding. Another solution is to put a large number of pictures and illustrations and “comics”, in French it is called “bandes dessinées”

Reception of the book:

The book is not yet distributed. The evaluation will not concern only one country; it will concern all French-speaking countries in West and Central Africa as well as African migrant women in Europe and the US.

Due to the language problem, the intention of the RESAR and GREFELS is to get the book used by paralegal, health care providers and leaders in grass-roots associations who are literate. Those people will be sent questionnaires that will help in the evaluation of the book.

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SUR LES FEMMES ET LES LOIS,
SENEGAL**