**About the organization**

YoSHAN (Youth led Sexual and reproductive Health Rights Advocacy Nepal) is a young feminist led youth advocacy network of Asia Safe Abortion Partnership in Nepal. We are a group of Youth Champions committed to protect, promote and advance the sexual and reproductive health rights movement in Nepal with primary focus on safe abortion rights. We challenge the discriminatory norms and amplify our feminist actions through collective efforts.

**Background**

There is a growing need for young champions to take on the role of promoting, protecting and expanding the sexual and reproductive rights in Nepal. The most challenging component among the issues is the right to access safe abortion services. Young people need to be able to challenge conservative interpretations that permit the cultural practices restricting the rights of young people, especially young girls and women.

Understanding the gender and human rights dimensions of this struggle are important in building the capacity and to be able to hold governments accountable for fulfilling the rights of their citizens is very crucial. Building alliances with communities and key stakeholders is only possible through the use of social networking platforms as well as offline activities.

**About Youth Advocacy Institute (YAI)**

Youth Advocacy Institute (YAI) is an intensive workshop on safe abortion advocacy designed for passionate youths from diverse background. With the support from Asia Safe Abortion Partnership (ASAP), YoSHAN organized its first Youth Advocacy Institute (YAI) on safe abortion rights advocacy. It was held in Godavari Village Resort, Kathmandu from 16-18 September 2019.

A total of 21 youths from diverse backgrounds came together for three days workshop. The participants were all from health background. Some of the participants were already working in fields as a health worker. Therefore, the workshop was focused mostly on technical, social and legal aspects of safe abortion enhanced by interactive sessions of

*Figure 1 Group picture of the participants and the facilitators*
group discussion and experience sharing. YAI focused on safe abortion along with other cross-cutting issues affecting access to safe abortion such as sex and gender, patriarchy, safe abortion stigma and taboos, national and global scenario of abortion related laws, etc. All the participants of YAI completed the three days’ workshop and became youth champions of YoSHAN and Asia Safe Abortion Partnership (ASAP) and were motivated to advocate for safe abortion in various platforms.

**Sessions covered throughout the workshop**
Following were the topics covered during the three-day workshop:
1. Gender and Patriarchy by Manisha Gupte
2. Gender and Sexism in Mass media by Durga Sapkota and Pushpa Joshi
3. Heteronormative and non-normative sexuality, patriarchy and control on human sexuality by Manisha Gupte
4. Safe abortion, it’s types and demonstration of vaccum manual aspiration method by Suchitra Davie
5. Abortion laws - history, national and global context by Suchitra Dalvee and Durga Sapkota
6. Social media advocacy and content writing by Bonita Sharma and Pushpa Joshi
7. Coordination and communication by Prabina Sujakhu
8. Gender and sexuality by Rukshana Kapali

**About the facilitators:**
The main facilitators of the workshop were Dr. Suchitra Dalvie and Manisha Gupte. Some of the sessions were also facilitated by the senior youth champions.

**Dr. Suchitra Dalvie** is the coordinator at Asia Safe Abortion partnership and also a feminist activist with long experience in the field of women’s health and safe abortion rights advocacy.

**Manisha Gupte** has been one of the leading women’s rights campaigners in India since the mid-1970s. She is the founder of the organization MASUM, which works for the end of child marriage and domestic violence (Source: Swissaid).

**Day 1:**
Youth Champion Durga Sapkota welcomed all the Youth champions in the workshop and also thanked the participants for their interest and time. She further encouraged all the participants for the enthusiastic participation in the workshop. It was followed by a short introduction of all the people in the hall. The participants were also welcomed with a short welcome video where there was photo and an introduction of all the participants.
**Ground rules:**
Youth Champion Akanshya Dahal facilitated the participants to set a ground rule that would enhance the quality of the workshop. The participants contributed to set the ground rule. Some of the principals agreed by all the participants to follow were as follows:

**Principle of Participation**
The participants agreed to participate actively during the workshop and also promised that equal opportunity shall be given to all for the participation.

**Principle of confidentiality**
The issues of the workshop being sensitive in the society we live in, the participants agreed to maintain confidentiality throughout the workshop. If some participants share their personal experience, the participants would respect their right to confidentiality.

**Principle of consent**
The participants also agreed that they will take consent while taking pictures and while uploading the photo/video or any other digital contents on social media with the people in their content.

**Principle of respect**
Since the participants were from various socio-economic and cultural background, it was agreed that everyone would respect everyone in terms of their background and opinion. It was agreed to have a healthy discussion throughout the workshop.

The participants were also given photo/video consent form to fill in.
This was followed by the sessions on the main topics of the YAI as below:

**Session 1: Gender and patriarchy by Manisha Gupte**
The first session of day 1 revolved around gender and patriarchy. Facilitator Manisha Gupte discussed about gender and sexuality and how strong rooted patriarchy affects a person’s gender and sexuality.

The discussion started with biological sex and how the sex is also socially constructed. The facilitator gave example: As soon as we hear about childbirth, the first thing we ask is whether the child is a girl or a boy. We determine the child’s gender and sexuality as soon as it is born. A newborn is categorized into male or female based on their genitals. The most common stereotype is the use of pink theme for girl and blue for boy. It is because of this stereotype, that intersex babies are either rejected right after their birth or taken for numerous surgeries without their consent. It is the violation of their human rights. Manisha added that we have to change
the society, not mutilate the body. She further stressed that as a health service provider, we should be well aware about intersex.

When asked about Transgender, one of the participants said that “Transgender is when you do not recognize your gender as the way society wants you to recognize”

Manisha Gupte further elaborated with examples: When a child is born, people determine the gender and sexuality of the child without their consent. They name the child, treat them and dress them according to what they think the child’s sexuality should be. Years later, when the child grows up and opens up about their preferences, the child is called a freak. They think the child is not normal; Manisha questions the participants how “normal” is “normal”? A lot of violence gets justified because of the term “normal”. People do not like men doing fragile thing like writing poetry unless they are men of high class, rich family or are celebrities. With lots of many examples, the facilitator well defined the terminologies gender and sexuality and how stereotypes had led to human rights violation and lots of problems.

The facilitator also asked about the terminology heteronormativity. The participants said, If a girl is attracted to a boy or vice-versa, it is called heterosexuality. When one is attracted to the same sex, it is called homosexuality. The normalization of heterosexuality as the only sexual orientation is called heteronormativity. The facilitator stressed the double standard practices with examples: We do not go down the road and call out saying “OH! Look there is a heterosexual”; “We never label “normal” people.

The facilitator added, generally people defend heterosexuality by calling it “Natural” but when we analyze our daily life, most of the things we do are not natural for example, Contraception is artificial, umbrella, putting braces, going through abortion are all completely not natural. She explained, Biological sex does not discriminate; It creates a male body, female body or an
intersex. People who are born without eyesight is not discrimination but what we do to them is a discrimination. It is a silly question to say whether the family will reproduce patriarchy or not because of course it will. If a family is not based on decent, inheritance, cast or religion and marriage, it could be non-patriarchal. This was followed by few more discussions and examples.

Session 2: Gender and Sexism in Mass media by youth champions Durga Sapkota and Pushpa Joshi

The main objectives of the session were to make the participants think critically about the portrayal of women and other marginalized community in the mainstream media so that they become able to analyze and challenge them. Durga and Pushpa started the session by showing few slides of pictures and advertisements which were sexist, racist and misogynistic. The facilitators asked the participants about what they saw and how they felt about the pictures and advertisements. Facilitators explained about how mass media also has a great influence on people and how sexism is spreading through insensitive use of mass media.

For example: there is always a woman washing clothes in detergent advertisement. When this is seen by a child, they will definitely think that it is only their mother's job to wash and clean the clothes. Likewise, some of the hit Nepali movies like “Chhakka Panja” has lots of contents that supports gender-based violence and reflects control on women’s sexuality. Since public loved the movie, there is a great chance that they took violence and oppression of women’s sexuality as a normal thing.

One of the most common advertisements of a fairness cream i.e. Fair and Lovely has been over the internet for years. It promotes capitalism, body shaming and promotes the stereotypical definition that fairness is beautiful. Few more similar pictures and advertisements were discussed likewise.

According to facilitators, it’s high time we start being sensible about what we post over internet.
Posting insensitive posts that support colorism, racism, hegemony and hate will only strengthen the stereotypes and patriarchal roots as a whole. Thus, mass media sensitization is necessary to fight patriarchy.

**Session 3: Human Rights and SRHR by Manisha Gupte**

The facilitator Manisha Gupte started the session by asking participants their understanding about human rights. She said that all the rights that we should get as soon as we are born into this world are called as human rights. Some of the attributes of human rights as explained by the facilitator are as follows:

a. **Universal**: This means human rights is applicable to all human beings in the world irrespective of the place they were born.

b. **Intrinsic**: This means, no human beings should be made to prove their citizenship in any country to enjoy their human rights. This includes refugees, illegal immigrants or displaced people.

c. **Inalienable**: This means human rights cannot be taken away from any human beings or the violation of the human rights is not justified at any cost.

d. **Indivisible**: This means all human are same and equal and all the human rights are applicable to all at all times.

e. **Inter-dependent and Inter-related**: This means all the human rights are inter-related to each other. If one human right is compromised or violated, another human right of the same person can get violated.

f. **Non-hierarchical**: This means all the human rights are equal and cannot be prioritized. For example, we cannot prioritize right to food over right to education.

According to Manisha, SRHR, gender and sexuality fall under human rights. People have two kinds of rights: fundamental rights and human rights. Fundamental rights are the rights provided by a country which may differ from one country to another. It is bounded and limited according to a country’s constitution while human rights are inevitable. Human rights are the basic rights that are not limited within a country’s border. It is followed and respected worldwide. Discussion also took place on difference between need-based approach and rights-based approach which are as follows:
### Needs based approach

- May or may not be met
- May fluctuate, can be arbitrarily decided or withdrawn
- Rights based approach
- Identified by provider – a client/patron relationship is established
- May be reduced
- Sense of benevolence
- No consequences to the provider if not met
- Non-fulfillment becomes crucial only when needs of a large section of society are affected (e.g., Many deaths due to malnutrition, destruction of a huge number of homes due to earthquake)

### Rights based approach

- Enforceable by law
- Not arbitrary but according to established principles and standards
- Are negotiated and the bearer of rights has a say. (E.g.: Doctor must understand their incompetence, and should refer to a more competent health professional)
- Dynamic and open to expansion (not regression)
- Fulfilled because there is a right
- Consequences in terms of accountability to mechanisms and remedies for claiming rights
- Violation of a single individual’s rights is a wrong (single woman sent back without an abortion is a wrong)

---

**Session 4: Value Clarification**

The session value clarification is one of the interesting sessions of the YAI where the participants challenge their values and have productive discussions on some of the difficult questions within the issue of abortion and sexuality. In the session, few sentences are displayed on the slides and the participants have to either agree or disagree with the statement; they also have to provide their opinion about the statement and a reason behind why they agree or disagree with that particular statement. Some of the sentences that were discussed thoroughly during the session are as follows:

- a) A woman should stay with her husband even if he beats her, if he truly loves her.
b) A sex worker cannot be raped

c) Women who have HIV/AIDS should not have babies.

d) Women who have an abortion are ending a life.

e) Making abortions too easy will lead to more irresponsible sexual behaviour.

f) A woman should be able to have an abortion even if her husband wants her to continue the pregnancy.

g) Choosing the sex of one’s child is a reproductive right

Facilitators Dr. Suchitra Dalvie and Manisha Gupte actively involved the participants into the discussion by throwing questions and explaining the issues with examples.

In this way, the session of value clarification was very helpful for the participants to become clear on the concepts of sexuality and abortion rights.

**Evaluation of Day 1 by the participants:**

When asked about the most important topic that you liked about day 1, the participants answered:

- The way Manisha Gupte made us realize that all the things we were made to believe normal, is somehow not normal; especially relating it to be patriarchy and the norms.
- Linking gender with patriarchy
- How the society makes us believe things to maintain the power of superiority
- I learnt about heteronormativity, link of human rights and SRHR.
- Need and right based approach
- What I liked about the session is involving groups towards gender, reproductive rights and letting to view in broad way about gender, difference in the rights and needs
- The session has questioned my understanding in different topics and made me curious and interested to understand different terms and system on a deeper level. It has broadened my horizon of understanding and perceiving ability to patriarchy.
- Hegemony and heteronormativity
- As a new thing today, I got a chance to get introduced with the casual advertisements and media through gender and feminist lens.
- The session changed our way of looking at gender and mass media.

At the evening of Day 1, the participants watched the movie called **Dirty Dancing**. The participants were asked to watch the movie from the perspectives of gender, patriarchy and sexuality that they learnt throughout the day.

**Day 2**
The sessions of Day 2 mainly focused on the technical knowledge about the SRHR such as anatomy, contraception and abortion. Discussion on safe abortion through human rights lens and laws on abortion in Nepal also took place.

**Session 1: Discussion on the movie Dirty dancing**
Day 2 started with discussion on the movie Dirty Dancing that the participants had watched the earlier night.

Discussion on movie led by Suchitra:
Reflections of the movie as shared by the participants and added by Dr. Suchitra are as follows:

a. Penny, a woman character in the movie was trying to abort through unsafe method with no anesthesia, because she had no other choice as abortion seems to be illegal at the place in the movie.

b. Despite being a doctor, the father of Baby (The main female character of the movie) was furious that his money was spent on abortion by her daughter who was trying to help Penny.

c. Class differences

d. Male Sex work

e. Social stigma

f. The main character of the movie was exploring her sexuality

g. Sexiest comment

h. Negligible conversation on contraception

**Session 2: Overview on contraception and abortion by Suchitra Dalvie**
In this session, the participants were informed about the contraceptive devices available to prevent pregnancy and to enjoy the sexual rights with very minimum risk of getting pregnant. Since all the participants were from health background, a very brief discussion took place on this topic.

Some of the methods of contraception as discussed during the session are as follows:

**Abstinence:** Not really contraceptive. It is the act of refraining from sex.

**Calendar method:** The method in which, the time of ovulation is calculated on the basis of the menstruation. It is not applicable to all and depends on compliance of woman and regularity of the menstruation cycle.

**Coitus interruptus:** It’s not very much practical and not very easy to control. Because sperms are present in pre-ejaculation phase too. Similarly, it does not address women’s pleasure.
**Modern methods:**
The modern methods of contraceptives as discussed during the session are as follows:

**Female condoms:** Not easily available, difficult to use and costly. They were invented for couples where men have latex allergy and who could not have satisfaction or who had fear of breakage or leakage of condoms. Other modern contraceptive devices include, male condom, Implant, Intra uterine contraceptive device (IUCD) also known as Copper-T, and so on. The issue of concern in case of contraception and contraceptives is that not enough investment has been made in male contraception because of the responsibility imposed on women to prevent pregnancies. It also reflects the patriarchal influences in contraception.

**Session 2: Abortion and abortion related laws**
The session was facilitated by Dr. Suchitra Dalvie, who explained about abortion as a medical procedure, various methods of safe abortion and also busted some of the prominent myths around safe abortion.

One of the myths that was discussed was, ‘Abortion is dangerous for women’. Challenging this myth, Dr. Dalvies explained, “Medical abortion is very safe. It is much safer than the unsafe alternatives women seek due to the lack of access to medical abortion. The solution is not stopping the abortion but providing women with the safe abortion service on time. Rajasthan tribal women, when they understood what medical abortion is, they started seeking safe abortion and choosing medical abortion over surgical. In some cases, women have to go back to work, so there should always be an option that a woman can choose according to her comfort.

In Brazil, Misoprostol is available but not as a drug for abortion but when the women of brazil figured out that misoprostol causes abortion, they started taking it as abortion pills despite knowing that, it may cause fetal abnormalities if the abortion is failed. It alone is 80% effective. However, in countries where Mifepristone is available, Mifepristone and Misoprostol is used in combination and it is 96-97% effective.”

**Activity: Learning the working mechanism of Manual vacuum aspiration**
This activity was important to make the participants understand the working mechanism of Manual Vacuum Aspiration (MVA). In the activity, the participants who have been working as the safe abortion providers, demonstrated the correct use of MVA. Few participants also practiced the correct use of MVA and learned its working mechanism.

**Session 2.1: What does it mean to be prochoice?**
Dr. Suchitra Dalvie began the session by asking the participants about their understanding on the term “Pro-choice”. The participants answered, “The choice we take over our body, the choice related to pregnancy”. Dr. Dalvie emphasized that Pro-choice means respecting the women’s right to choose. But if you are a pro-choice only for the choice that you think is right, you are not a true pro-choice. For example, if you are telling a woman that she is discriminatory for choosing male fetus over female, because she has no other option as she will have to face difficulties if she gives birth to a girl child, then you have to question your ideology. She also talked about the limited option women are given to choose. For example, some male partners of women are very violent and controlling that they do not let their partner use any contraception and refuses to use condom by himself; she never has the privacy to visit doctors too. The only option she is left with is keep taking emergency contraceptive pills. Hence, we should never judge the person without knowing where they are coming from.

Dr. Dalvie introduced the book named “may you be the mother of hundred sons”. She reminded a sanskrit phrase “sada suhagan bhava” which means, may your husband be always alive which also means, may you die before your husband.

After this little background, Dr. Dalvie asked the participants the process of sex selection. The participants answered, “The fusion of only desired chromosomes i.e. fusion of X chromosome from female and Y chromosome from Male to have male fetus through In vitro fertilization, which is also called as pre-conception method”. Participants also mentioned some traditional holy people who could predict the sex of the fetus. Dr. Dalvie tried to differentiate the terminologies “Sex selection” and “Abortion” by saying that if women go for sex determination, does not mean that they will have abortion. For example, if a woman wants to have son and she goes for sex determination of the fetus, if she finds out that there is a male fetus, she will not terminate her pregnancy. Hence, all sex selection does not end with abortion; it also ends with not having an abortion. The facilitator also talked about antenatal and post-natal sex selection. The participants gave some examples of Post-natal sex selection as female infanticide, abandonment, massive and conscious neglect of girl child (no nutrition, no health care, no immunization) (the death rate of girl child is massively
This is also sex selection. The discussion also took place on myths around sex selection, people going for sex determination of their fetus to some holy people and some norm that people follow to have the desired fetus in their womb.

She further asked the reason behind abortion after the sex determination being very problematic. The participants’ answered few points:

- If abortion on the basis of sex determination is allowed, there will be more boys and the sex ration will be unequal.
- This unequal sex ration will lead to violence, rape, abduction, common marriage and there will be fewer girls for boys to marry.
- Women will be treated as sex slaves.

Dr. Dalvie asked the participants to swap the cases i.e. assuming a greater number of girls than boys and asked will the same case happen if there were more women than men.

Dr. Dalvie also indicated that even though we distribute the population into the equal ratio by assuming that one man will marry one woman, we will still have violence, rape, abduction and other criminal activities within the marriage and outside of the marriage. The session also discussed about the debate over natural and unnatural. She said that it is not necessary for everything to be natural for example, vaccination is not natural, contraception is not natural. We do so many things which are unnatural, then why do we need to have natural sex ratio by forcing a woman to have a girl child that she does not want? People might say that aborting a female fetus is discriminatory towards girls; but why do they want to have a girl child? So that they can have brides for the boys. It does not sound empowering to women. The patriarchy wants girls to get married. People do not want girls because they are girls, they want girls as brides for the boys.

Dr. Dalvie further added that the above argument of desiring equal sex ratio of males and females is very hetero-normative. By assuming that equal sex ratio of males and females is natural and perfect, we are excluding the population with diverse sexual orientation. Similarly, we are also assuming that everyone will marry, which might not be true. It is very problematic to use numbers to solve social problems. Dr. Dalvie emphasized that the problem is very deeply rooted to the patriarchy and the numbers will not solve the problem. She used the story of Birbal to clarify it. As per the story, the king Birbal searches for his lost ring under the lamp. One person also accompanies him and helps him the search the ring. They both become unable to find the ring and the person asks the Birbal whether he has lost his ring at the same place they have been searching. Birbal replies that he had lost his ring in some other place but it was too dark there so he searched for the ring under the lamp instead. Like this story, people are targeting the sex
selective abortion because it is the easier one. Government does not want to control the social structure that encourages gender inequality but they want to control the women’s body because the later one is easier. The root problem is patriarchy and gender inequality which are in shadows and people do not want to talk about it because they cannot challenge it. She encouraged the participants to question everything and think from the different perspective.

The discussion was followed by interesting discussion on the myths and misconceptions that people follow blindly for the process of sex determination. The facilitator also showed some pictures of the campaigns and advertisement which was emphasizing the notion of saving girl child, which was very hypocritical. Some of the posters were personifying the fetus, which was very problematic. Dr. Dalvie also gave example from India on how the sex selection has threatened the whole safe abortion issue and has moved attention away from gender discrimination issues and social cultural patriarchal norms which are so much more difficult to change or control.

In this way, the session provided a space for the participants for starting the conversation on the issues that has been in shadows for ages. The session facilitated the discourse on sex selection and abortion and convinced the participation that abortion cannot be viewed in isolation.

**Session 2.2: Abortion in Nepal**

The discussion on safe abortion in Nepal was led by Dr. Suchitra Dalvie. She pointed out and also asked related facts to the participants. She explained, It has been 17 years since legalization of abortion in Nepal, only 41% of women of reproductive age are aware about the legal status of abortion in Nepal. At this time, unsafe abortion is still practiced and is one of the major causes of maternal mortality in Nepal. Contraception may not be available at all the places, even if available it may not be easily accessible or affordable for all people because of various socio-economic and cultural aspects. Along with that, there are many cases where pregnancy results from violence, rape or incest. Lack of access to safe abortion can lead to severe consequences in the overall life of women.

The concentration of health service providers in urban settings or in the cities also leads to lack of access. The doctor patient ratio also highly influences the availability of safe abortion. There is a huge imbalance in ratio of gynecologists providing safe abortion services to the total number of populations they serve. She also encouraged the participants and the network to conduct research and study about the situation of safe abortion service and rights in the country which can guide the ongoing advocacy.

**Activity: Fertility Dance**

To energize the participants and to make them understand about contraception and abortion
well, a fun filled activity was conducted. The name of this activity was “Fertility dance”. In the activity, an outline of internal female reproductive organ was drawn on the floor and the participants were provided with cheats with the name of various parts of reproductive system, contraceptive devices and abortion pills such as ovum, Sperm, penis, condom, IUCD, Implant, Depo, Oral contraceptive pills, Mifepristone, Misoprostol and so on. Participants were allowed to choose one cheat each and were asked to act as one in their cheat. The process of pregnancy, working mechanism of contraceptives, and medical abortion was demonstrated through the activity. The participants enjoyed the activity very well when they learnt about the topic through fun.

**Activity: Individual study and Group discussion on Articles**

All the participants were given one-page article each to study. The participants were provided with different articles to study individually. After 20 minutes of study time, a group discussion was conducted where the participants shared about the article that they study. A discussion with feminist analysis on most of the articles took place afterward.

**Activity: Case study of women seeking abortion service**

In this activity, the participants were divided into four group and each group was provided with five short case studies of women in different situation and life circumstances who are seeking for safe abortion service. After distributing the case studies to the participants, Dr. Dalvie explained to the participants that the participants are now the advisors of the president of Nepal who is saying that the government will allow safe abortion service to only one woman among the five cases. Now the participants had to prioritize the cases in such a way that the neediest woman among the five cases gets the safe abortion. The participants were given 15 minutes of time to discuss and rank the cases. After the discussion, each group presented on who among the five women should get the safe abortion service and also explained their discussion process and how did they come into the conclusion.

At the end, Dr. Dalvie reminded the participants that it’s the human right of all the five women in the case study to get safe abortion service irrespective of their situation or life circumstances. If we start to prioritize the women on the basis of the need, then we are not advocating for the safe abortion through human rights approach. Hence as a safe abortion rights and human rights activists, we should always advocate for all women’s right to have safe abortion without any condition.

The session was eye opener for many of the participants and also reminded them of the session on need based approach vs. rights based approached that they learnt the previous day.
**Session 3: Abortion laws in Nepal**

Ms Durga started the session with a statement: Ignorance of law is not accepted. She insisted participants to be aware of the law of the country that they live in because once they perform any activity which are regarded as crime, even though unknowingly, law is not going to excuse us. Also, she insisted, being SRHR advocate it is very important to know every aspect and detail of law which will help to exercise the rights guaranteed by state and also help us to be voice of voiceless.

Again, she threw a question, 17 years down the legalization of abortion, research (done by CREPHA) still shows that only 41% of girls and Women of reproductive age group are aware about legal status of abortion and out of total abortion, still 58% are practicing the unsafe method, WHY? She insisted to read and review the documents/research article related to safe abortion and get the answer.

Brief description was given on how abortion was legalized and what major steps and activities happened after legalization. She explained it as: Prior to 2002, Nepal had strict anti-abortion laws which ensured not only the imprisonment of the pregnant women who seek abortion but also their family members. In fact, about 20% of women prisoners were imprisoned for abortion-related choices. Nepal legalized abortion in March 2002, under the 11th Amendment to the Civil Code. The legal services were successfully implemented on December, 2003. The high maternal mortality rates in Nepal lead to the government legalizing it. After legalization, there was law in paper but implementation part was still weak. Safe abortion law was not regarded as rights. Mean time a writ of Laxmi Dhit was filled in Supreme court. Just because she was not able to pay money for safe abortion, she was forced to continue her unwanted pregnancy. This case led to the precedent that, no one should be forced to continue the unwanted pregnancy just because they cannot afford it. On basis of this decision, provision was made to provide safe abortion services free of cost from 2015 in all the government health facilities.
Then Ms. Sapkota explained about her experience in drafting the Safe Motherhood and Reproductive Health Rights Bill. The House of Representatives has unanimously passed the Safe Motherhood and Reproductive Health Rights Bill, 2075 BS Friday. Safe abortion has been included in this act. She asked to the participants on what are the major differences between previous safe abortion law and the one recently passed one? Majority of the participants were unknown and few responded regarding week of gestation which was extended to 28th weeks from 18th week in previous law. Participants were Very surprised to know, why it has been confined to the 28th week even though SRHR has been regarded as fundamental rights? Also some put their queries as, how it is feasible/ possible to confined to 28th week when most of the women don’t have access to primary health care facilities and what is to be done if women first time reach the health facility after 28th week and identify that the fetus is malformed and want to terminate? Ms. Durga encouraged participants to do more research and critically think in this provision, either this is ethically and practically correct or not. Also Ms. Durga explained Safe Motherhood and Reproductive Act 2075 has failed in addressing rights of women by defining miscarriage and abortion by single definition due to which even spontaneous abortion/miscarriage also has been criminalized after 28 weeks. She ended her session by encouraging everyone to be aware of law and law is not ultimate standard and we must be able to criticize it if does not protect and address the need and rights of people.

**Activity: Privilege walk**

The activity was led by youth champions Pushpa Joshi and Durga Sapkota. The main Objectives of this activity was to make the participants understand how a variety of social, cultural, and gender values both limit and enhance our life opportunities and outcomes and to make the participants realize on how it feels to stand in the shoes of someone whose life circumstances are very different from their own and to make them recognize that young people are not a homogenous population/group.

The participants were asked to stand shoulder to shoulder in a straight line. The participants were provided with small slip of papers, enough for all the participants. They had to read
the cheat by themselves only. They had to follow the instruction as provided by the facilitator. The participants were asked not to tell anyone else what is written on their slip of paper. The participants were told that for this activity they will become the person who is described on the slip of paper they hold. After that, the facilitator read a series of instructions, and that the participants had to follow instructions according to the new identity on their slips and whether the instructions apply to them.

The facilitator read a series of statements and told the participants that if the answer to the statements are yes, take a step forward and if its no, take a step backward. The statements are as follows:

- Has anyone ever told you about sex?
- Do you have any information about sex?
- Do you have any information on contraception?
- Do you know where to get any contraception?
- Can you buy any method of contraception?
- Can you insist on the use of condoms or any method of contraception?
- Can you use any method without the other person knowing?
- Can you say no to sex?
- Do you know what to do with an unwanted pregnancy?
- Do you know where to get a safe abortion?
- Can you go and get a safe abortion?

After all statements have been read, the participants were told to look around them and notice where they are standing in relation to others. The facilitator asked the participants following questions:

- *You all started in the same place. How does it feel to be standing where you are?*
- *How do you feel about where you are standing, in relation to others?*
- *How do you feel about where others are standing, in relation to you?*
• What are some of the factors that caused these differences? What role does gender play?

Some participants shared their experience as a person as written in the slip of paper. The participants who shared their experience also revealed their identity to the other participants. Later, all the participants revealed their identity.

While participants were remained in their locations, the facilitator pointed out that although they all started in the same place on the line, and although we may be taught to believe that all people are created equal, many factors influence the opportunities, successes, problems, and outcomes we experience in our lives. Because of social structures, including class and gender structures, some of us enjoy privileges that others do not enjoy. Life experiences and opportunities or disadvantages create huge disparities among various youth populations in terms of needs and desires, and interventions that are relevant to their circumstances.

Day 3
The session of Day 3 of the YAI revolved around building movement through effective communication and campaigns. The participants also prepared action plans to be implemented after the YAI and discussed the way forward. At the end, the three day workshop was well celebrated among the youth champions.

Session 1: Interpersonal Communication by youth champion Prabina Sujakhu
The session was facilitated by the youth champion Prabina Sujakhu. The main objective of the session was to enhance the interpersonal communication of the youth champions so that they can be good advocates of SRHR.

As per the facilitator, interpersonal communication is any communication between two individuals. This may include phone calls, face to face communication. Common mode for communication could be verbal or non-verbal i.e. through messages, email, phone calls, letters or face to face.

Elements of interpersonal communication includes following:

• People
• Message
• Channel
• Noise
• Feedback
• Context
• Effect
**Activity: Chinese Whisper**

The participants were made engaged with the activity called “Chinese Whisper” to make them understand about how the interpersonal communication works and the elements of interpersonal communication. In the activity, the participants were asked to sit in the shape of ‘U’. The facilitator whispered a sentence to one of participants ear and the person had to pass the sentence to the other participant next to them through whisper. At the end, the participant who received the message last had to speak loud about when they heard. Usually the last receiver says the sentence which is completely different than the one heard from the first receiver. Through this fun exercise, the participants made aware about how the messages could be manipulated with few hurdles. The facilitator also related the exercise with the advocacy on SRHR and stressed that the message should be short and simple.

**Session 2: Gender and sexuality by Rukshana Kapali**

Rukshana Kapali is a young Transgender woman activist who has been actively engaged with the advocacy on queer rights in Nepal and also very outspoken on the issues of human rights, SRHR and sexuality. The main objectives of the session were to make the participants well informed about various terminologies related to sexual orientation, gender identities and queer rights so that the participants can become very sensitive about the issue and inclusive in terms of the language they use as advocates.

Rukshana talked about terminologies related to sex, sexual orientation and gender identities such as cis gender, Transgender, variations of intersex, queer, Pan sexual, Trans vestige, Gender non-confirming, Heterosexual, Homosexual, Bisexual, Asexual and so on. She also introduced these terminologies in Nepali. Rukshana also shared about the barriers the queer young people face when seeking services related to sexual and reproductive health. She also added that many structural hurdles such as judgmental attitude of the health service providers, health service providers not being informed about different sexual orientations and gender identities leads to the discrimination against queer people.
**Session 3: Social Media for advocacy**

The session was facilitated by the youth champions Pushpa Joshi and Bonita Sharma. In the session, the facilitators shared about social media can be effectively used for the purpose of advocacy. The facilitator also gave few examples of social media campaigns such as MeToo Movement, Arab spring and so on which had created a buzz all around the world. Few tools and techniques such as Canva, video editing tools were also demonstrated during the session. Similarly, discussion also took place on how we as youth advocates initiate social media campaigns to promote the cause that we are passionate about. Few examples of the previous social media campaigns initiated by Asia Safe Abortion Partnership and YoSHAN were shown through the slides. In addition, the participants were also made informed about the threats one can get while advocating in the online space and how to tackle such problems with various techniques and strategies.

**Action Plan and Way Forward:**

At the end of the workshop, all the participants were provided with a form to write down their plan of action that they would implement within a duration of a month. The action plan was to provide an opportunity for all the participants to share and implement their knowledge and skills among the community people.

**Overall reflection / feedback**

The feedbacks from the participants about the overall workshop as per their own words are as follows:

- The workshop helped me to understand my role in this journey, it gave me positive energy to help underprivileged community.
- History and the laws of safe abortion in Nepal was well explained by the facilitators. The sessions were full of interaction. Fertility dance was completely new concept to me and I felt that it was really effective way to explain about the contraceptives. The sessions effectively oriented us about the global situation of abortion and SRHR.
- I got equipped with good understanding of conception, contraception in very practical way. Through the fertility dance, we could openly discuss about the reproductive health.
- Fertility dancing is one of the most powerful ways to make people understand about contraceptives, pregnancy and abortion methods.
- Some of the interesting topics for me were, abortion laws in Nepal where I also learned about policy making process and few case studies. Other sessions that I like the most are about hegemony & power.
- Interesting topics and sessions were, subversion, hegemony and resistance and Fertility Dance.
- A perfect fairy tale ending: they lived happily ever after? But it is really happy or is it really
an ending Cinderella snow white sleeping beauty and all the Disney princess which we look up to as a child in fact just the beginning of bigger picture, harsh reality, women are supposed to look pretty and without strong, masculinity she has no value of her own. Is this really what we want our children to believe and later as they grow up contribute to the patriarchy? I guess not. We deserve better and the HUMANITY deserves better!

- Review of the articles and literature from all around the world shows how important it is to change the norms and values that drives patriarchy which is reflected in the laws that desires even the basic fundamental rights of women. One of the effective ways of creating awareness through practical demonstration was fertility dance. Abortion and access to safe abortion is a right of every person. The days were filled with fun facts and real-life stories that will be useful to us in sensitizing the community in this type of themes. Again, the movie was an eye opener in various perspectives be it health, innovation, or standing out from the rest of the community.

- My learning from the YAI 2019 is, if we cannot do something in progressive direction then we should at least resist the change in retrospective approach.

- Examples from around the world clarified the concept of hegemony and patriarchy. The sessions on Importance of right based approach for the safe abortion issues, Legislation and amendment of laws in Nepal regarding SRHR and safe abortion issues and the difference between miscarriage and abortion were very informative.

**Closing Ceremony**
At the end of the workshop, all the participants were felicitated with certificate of completion by one of the core team members of YoSHAN. The core team of YoSHAN congratulated and formally welcomed all in the team as Youth champions.

**Outcomes**
Some of the main outcomes of the YAI are as follows:

- A group of young people from health background with knowledge and skills on safe abortion advocacy was formed.
- At the end of the workshop, the participants made an action plan to reach out to more young people to further give momentum to the ongoing SRHR advocacy.
- The network YoSHAN further strengthened with the addition of new youth champions equipped with skills, knowledge to advocate for safe abortion rights.

**Conclusion**
The three-day workshop was accomplished successfully by the team of YoSHAN with support and mentorship from Asia Safe Abortion Partnership. The enriching youth advocacy institute helped to build next generation of advocates in the field of safe abortion rights in Nepal. All the Participant who were from health background learned about safe abortion through various dimensions including sexuality, patriarchy, capitalism, economy, feminism and others through productive discussions, demonstrations, films and media. Hence, at the end, 21 new youth champions with immense knowledge on the issue were welcomed in the pro-choice movement by the team of YoSHAN and ASAP.