A Provider Self-Assessment Tool to Measure Gender Competency for Family Planning Services

Module B: Promoting Individual Agency
Overview

This document contains one of six modules (A–F), each of which are related to one domain of gender competency. In each module, providers respond to statements that represent knowledge, attitudes, and skills in the domain. For each statement, providers indicate if they “Strongly Agree, Agree, Disagree, or Strongly Disagree” with the statement. Select modules can be administered on their own, or as part of a holistic assessment. The background and development of the provider self-assessment tool is described in detail in the parent document.

The tool includes three sections for each module as follows:

- The first section is the **Statement and Response Form**. This is the form used by providers to document their responses to each statement. The form includes the statements that relate to the domain, and the response options (strongly agree–strongly disagree). Providers review the statement and select one response for each statement.

- The second section is the **Answer Key**, which shows the ideal response for each statement and a point value for each response. Providers write the point value for their response in the “Your Score” column of the answer key and sum their score for the module.

- The third section is a **Discussion Guide**, which provides a brief explanation about why certain responses demonstrate gender competency. It also summarizes main points about the domains and includes self-reflection and group discussion questions.

Statement and Response Form

Consider each statement and whether you strongly agree, agree, disagree, or strongly disagree with it. Write a check in the box next to your response in the column to the right.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Check the box with your response here</th>
</tr>
</thead>
<tbody>
<tr>
<td>B1. I should ask about family planning goals before making assumptions about a client's family planning desires.</td>
<td>□ Strongly agree □ Agree □ Disagree □ Strongly disagree</td>
</tr>
<tr>
<td>B2. I can effectively counsel a female client on types of contraception she can use without her partner knowing about it.</td>
<td>□ Strongly agree □ Agree □ Disagree □ Strongly disagree</td>
</tr>
<tr>
<td>B3. Helping a client make an informed choice includes explaining contraceptive methods that satisfy the client's needs which may vary by age, gender, and relationship status.</td>
<td>□ Strongly agree □ Agree □ Disagree □ Strongly disagree</td>
</tr>
<tr>
<td>B4. Women and men face different barriers to getting their preferred family planning method because of their gender.</td>
<td>□ Strongly agree □ Agree □ Disagree □ Strongly disagree</td>
</tr>
<tr>
<td>B5. When counseling clients, I must account for the social pressure experienced by women, men, girls, and boys because of their gender.</td>
<td>□ Strongly agree □ Agree □ Disagree □ Strongly disagree</td>
</tr>
<tr>
<td>B6. I can help clients express their needs and wants with their sexual partners so that they make decisions together and feel safe.</td>
<td>□ Strongly agree □ Agree □ Disagree □ Strongly disagree</td>
</tr>
<tr>
<td>B7. Talking to a client about family planning pressures they face because of social, cultural, or religious beliefs is a necessary part of counseling.</td>
<td>□ Strongly agree □ Agree □ Disagree □ Strongly disagree</td>
</tr>
<tr>
<td>B8. A couple's decision about the number of children to have should be left up to the man.</td>
<td>□ Strongly agree □ Agree □ Disagree □ Strongly disagree</td>
</tr>
<tr>
<td>B9. Through my counseling, I can guide clients, so they are not forced into a family planning decision they do not want.</td>
<td>□ Strongly agree □ Agree □ Disagree □ Strongly disagree</td>
</tr>
<tr>
<td>B10. I help clients consider if they can obtain a contraceptive method as needed when making a contraceptive choice.</td>
<td>□ Strongly agree □ Agree □ Disagree □ Strongly disagree</td>
</tr>
<tr>
<td>B11. I help clients consider if they can use a method with their partner (like condoms) when making a contraceptive choice.</td>
<td>□ Strongly agree □ Agree □ Disagree □ Strongly disagree</td>
</tr>
<tr>
<td></td>
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<tr>
<td>---</td>
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</tr>
<tr>
<td><strong>B12.</strong> I should make sure a client is freely making the decision they want when they make a choice about family planning.</td>
<td>□</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>B13.</strong> When counseling clients, I explain that it is their choice, not what I think that matters, as long as the method is medically indicated.</td>
<td>□</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>B14.</strong> A client should be able to change their mind about their family planning decision.</td>
<td>□</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>B15.</strong> It is difficult for me to put aside my own personal or religious values when I help a client make a family planning decision.</td>
<td>□</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Answer Key

**Step 1:** Use your responses from the “statement and response form” to match your response with a point value. Then write your point value for the statement in the “your score” column.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Points</th>
<th>Your score</th>
</tr>
</thead>
</table>
| B1. I should ask about family planning goals before making assumptions about a client’s family planning desires. | □ Strongly agree = 4  
 □ Agree = 3  
 □ Disagree = 2  
 □ Strongly disagree = 1 |            |
| B2. I can effectively counsel a female client on types of contraception she can use without her partner knowing about it. | □ Strongly agree = 4  
 □ Agree = 3  
 □ Disagree = 2  
 □ Strongly disagree = 1 |            |
| B3. Helping a client make an informed choice includes explaining contraceptive methods that satisfy the client’s needs which may vary by age, gender, and relationship status. | □ Strongly agree = 4  
 □ Agree = 3  
 □ Disagree = 2  
 □ Strongly disagree = 1 |            |
| B4. Women and men face different barriers to getting their preferred family planning method because of their gender. | □ Strongly agree = 4  
 □ Agree = 3  
 □ Disagree = 2  
 □ Strongly disagree = 1 |            |
| 5. When counseling clients, I must account for the social pressure experienced by women, men, girls, and boys because of their gender. | □ Strongly agree = 4  
 □ Agree = 3  
 □ Disagree = 2  
 □ Strongly disagree = 1 |            |
| B6. I can help clients express their needs and wants with their sexual partners so that they make decisions together and feel safe. | □ Strongly agree = 4  
 □ Agree = 3  
 □ Disagree = 2  
 □ Strongly disagree = 1 |            |
| B7. Talking to a client about family planning pressures they face because of social, cultural, or religious beliefs is a necessary part of counseling. | □ Strongly agree = 4  
 □ Agree = 3  
 □ Disagree = 2  
 □ Strongly disagree = 1 |            |
| B8. A couple’s decision about the number of children to have should be left up to the man. | □ Strongly agree = 1  
 □ Agree = 2  
 □ Disagree = 3  
 □ Strongly disagree = 4 |            |
| B9. Through my counseling, I can guide clients, so they are not forced into a family planning decision they do not want. | □ Strongly agree = 4  
 □ Agree = 3  
 □ Disagree = 2  
 □ Strongly disagree = 1 |            |
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 □ Disagree = 2  
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| B12. I should make sure a client is freely making the decision they want when they make a choice about family planning. | □ Strongly agree = 4  
 □ Agree = 3  
 □ Disagree = 2  
 □ Strongly disagree = 1 |            |
| B13. When counseling clients, I explain that it is their choice, not what I think that matters, as long as the method is medically indicated. | □ Strongly agree = 4  
□ Agree = 3  
□ Disagree = 2  
□ Strongly disagree = 1 |
|---|---|
| B14. A client should be able to change their mind about their family planning decision. | □ Strongly agree = 4  
□ Agree = 3  
□ Disagree = 2  
□ Strongly disagree = 1 |
| B15. It is difficult for me to put aside my own personal or religious values when I help a client make a family planning decision. | □ Strongly agree = 1  
□ Agree = 2  
□ Disagree = 3  
□ Strongly disagree = 4 |

**Total score**

**Step 2:** Add the values for each statement to find your total score (sum points from statements 1–15). Be sure to note that for the statements highlighted in blue, the point values are higher for “disagree” and “strongly disagree” (3 and 4 respectively). For all other statements, the highest point values are for “strongly agree” and “agree.”

**Step 3:** Compare your total score to the values in the table below to see if you have high, medium, or low gender competency in this domain.

**Step 4:** Review the discussion guide which explains the ideal response for each statement. To strengthen competency in this area, complete the eLearning course [https://chemonics.com/resource/defining-and-advancing-gender-competent-family-planning-service-providers/](https://chemonics.com/resource/defining-and-advancing-gender-competent-family-planning-service-providers/)

<table>
<thead>
<tr>
<th>Module</th>
<th>Maximum possible score</th>
<th>High gender competency</th>
<th>Medium gender competency</th>
<th>Low gender competency</th>
</tr>
</thead>
<tbody>
<tr>
<td>B. Promoting Individual Agency</td>
<td>60</td>
<td>54–60</td>
<td>48–53</td>
<td>Equal to or less than 47</td>
</tr>
</tbody>
</table>
Discussion Guide
This guide will help you reflect on your experience responding to statements about promoting individual agency among your family planning clients. First, please consider the following personal reflection questions.

- What statements were confusing to you? Why?
- What statements did you answer and then second-guess your response? Why?
- What statements touched on practices that you already do when providing family planning services?

The statements in this module assess your ability to support an individual client’s free and informed decisions about whether, when, and how often to reproduce, without pressure to conform to gender and cultural norms. This includes helping clients freely make decisions about whether to use a contraceptive method, and which contraceptive methods fit their needs based on their power within their sexual relationships, their family, and their community.

Three Key Takeaways from this Module are:

1. A client’s “agency” is their ability to make their own free and informed decision. Agency can be compromised by pressure a client experiences from other people (for example their partner, peers, or in-laws). It can also be influenced by cultural expectations about what women, men, girls, and boys, should and shouldn’t do because of their gender. Agency can be reduced when clients have limited resources they need to act on their choices (e.g., money to pay fees for services, access to transportation to the clinic). A gender-competent provider is one that helps clients navigate these different influences so that they are empowered to make the family planning decision they truly want.

2. To promote a client’s agency, a provider must first understand the gender norms that can limit their client’s ability to act on their own choices. For example, providers may help clients consider long-acting methods of contraception if gender norms do not allow them to go to the clinic or pharmacy on their own. Providers can also help clients understand discrete contraceptive methods not detectable by others (parents, their partner) who do not approve of their choice to limit or space pregnancy by using contraception.

3. A gender-competent provider should not require consent from others (partner, spouse, family member), particularly when supporting a client to make their own free choice about contraceptive use (consistent with national family planning or reproductive health policy). The provider should be able to help clients plan how to talk to their partner about sexual activity and family planning decisions when they want to.

You can promote individual agency by helping clients make free and informed decisions about family planning, regardless of power differences and gender expectations, and free from your own personal bias.

Below are the answers and explanations for the statements in this module. More information can be found by taking the online Gender Competency for Family Planning Providers eLearning course.
B1. I should ask about family planning goals before making assumptions about a client’s family planning desires.

Good answers for this statement include “strongly agree” and “agree.”

<table>
<thead>
<tr>
<th>Strongly agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
</table>

Before introducing information about contraceptive methods, it is important for a provider to understand the needs of a client including whether, when, and how many children they want. A provider should ask about reproductive health goals. Having a holistic view of a client’s vision for their family in the short and long term gives the provider information they need to fully discuss the important aspects of different contraceptive methods. These conversations can also help a provider understand if there are differences in goals between a client and their partner that can be addressed during counseling. A gender-competent provider also understands that reproductive health goals change over time, recognizing that clients have the right and freedom to change their mind about family planning and contraceptive use.

B2. I can effectively counsel a female client on types of contraception she can use without her partner knowing.

Good answers for this statement include “strongly agree” and “agree.”

<table>
<thead>
<tr>
<th>Strongly agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
</table>

It is important for a gender-competent provider to be able to effectively counsel their clients on what the best method of contraceptive is to meet the client’s goals. If the client does not want to disclose to their partner that they are using a contraceptive method, the provider should be able to offer the contraceptive options and support the client in making their own decision. It is important for a provider to know which methods are most appropriate, so their client’s partner will not know the client is using a contraceptive method.

B3. Helping a client make an informed choice includes explaining contraceptive methods that satisfy the client’s needs, which may depend on age, gender, cost, side effects and relationship status.

Good answers for this statement include “strongly agree” and “agree.”

<table>
<thead>
<tr>
<th>Strongly agree</th>
<th>Agree</th>
<th>Disagree</th>
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</tr>
</thead>
</table>

Providers should ask clients about which factors are important to them when choosing a contraceptive method. This will help the provider understand how age, gender, relationship status or other characteristics influence a client’s contraceptive choice. By understanding client priorities, the provider can explain options provided by different contraceptive methods so that they can make an informed choice for their situation. For example, a young girl may explain that she does not want to get pregnant but feels pressured to do so by an older partner. The provider can explain long-acting methods of contraception that do not require frequent visits to the clinic.
B4. Women and men face different barriers to getting their preferred family planning method because of their gender.

Good answers for this statement include “strongly agree” and “agree.”

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<th>Disagree</th>
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</table>

Gender norms, which are cultural and social expectations about how men and women should act, may influence the different obstacles men and women face in decisions about family planning. There are differences in power between men and women, and different pressures that they face from people in their family and community with regard to family planning. A gender-competent provider is knowledgeable about the different pressures men and women experience related to having children and using contraception and can discuss these issues with their clients. Through this counseling they can help clients make the choice they prefer despite outside pressures.

B5. When counseling clients, I must account for the social pressure experienced by women, men, girls, and boys because of their gender.

Good answers for this statement include “strongly agree” and “agree.”

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The ability to open a conversation with clients about pressures they may experience from other people because of their gender (e.g., partners, mothers-in-law, peers) is an important skill for providers. By understanding these influences, and how they might differ based on the gender, age, and marital status of the client, the provider can highlight pertinent information that relates to contraception. Providers may not be able to change the social pressures that their clients experience, whether male or female. However, by being aware of their client’s situation they can help clients navigate these issues and make a family planning choice that fits their circumstance.
B6. I can help clients express their needs and wants with their sexual partners so that they make decisions together and feel safe.

Good answers for this statement include “strongly agree” and “agree.”

<table>
<thead>
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<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
</table>

As a provider, it is important to be able to help your client feel comfortable and confident in expressing their wants and needs effectively with their partner so that there is no miscommunication. You can help both parties express their desires in an open and productive way without one party pressuring another into something they are not comfortable with.

B7. Talking to a client about family planning pressures they face because of social, cultural, or religious beliefs is a necessary part of counseling.

Good answers for this statement include “strongly agree” and “agree.”

<table>
<thead>
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<th>Strongly agree</th>
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<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
</table>

A gender-competent provider encourages all clients to make their own informed and voluntary choices about family planning regardless of gender, age, relationship status, or approval from others. Beliefs about what family planning decision an individual should make based on these factors can depend on cultural and religious factors and differ based on the client’s social status. For example, social and cultural norms may deter a man from getting a vasectomy even if he does not want to father children in the future. He may feel that he is no longer a “real man” if he cannot conceive children. In some religions, breakthrough bleeding (or “spotting”) as a side effect to contraceptive use may prevent women from praying and practicing other religious activities. Knowing which methods have bleeding or spotting as a side effect can help women choose methods that better accommodates their religious beliefs. Understanding how such factors influence a client can help a provider counsel their clients about contraception more effectively.

B8. A couple’s decision about the number of children to have should be left up to the man.

Good answers for this statement are “strongly disagree” and “disagree.”

<table>
<thead>
<tr>
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</table>

Couples should discuss their reproductive desires, but the women should make final decisions about whether, when, and how many children to have, as she is the one who will experience pregnancy and delivery. Female clients should be provided an opportunity to share their own desires, even if they are not the same as their partners’ desires. They should not be forced into decisions about childbearing nor contraceptive use. A gender-competent provider should ensure the client’s privacy so that they can freely obtain the method they want regardless of other people’s opinions. The provider should be aware of the power balance existing between the couple and
should emphasize the role of the man in supporting the wife’s decision for the betterment of the family.

**B9. Through my counseling, I can guide clients, so they are not forced into a family planning decision they do not want.**

Good answers for this statement include “strongly agree” and “agree.”

<table>
<thead>
<tr>
<th>Strongly agree</th>
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<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
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</table>

By providing family planning services free from judgment and emphasizing that family planning decisions should be made free from coercion, providers can help clients make and implement their own choices. Clients may also feel a different level of comfort with a provider that is not their same gender. Matching clients with providers of the same gender and emphasizing that the individual client has the right to make the final decision about their own contraceptive use, is an important part of counseling. A gender-competent provider can support their clients to plan for how to implement their family planning choice, and how to discuss family planning with their partner and others when appropriate so that the client’s rights are respected.

**B10. I help clients consider if they can obtain a contraceptive method as prescribed when making a contraceptive choice.**

Good answers for this statement include “strongly agree” and “agree.”

<table>
<thead>
<tr>
<th>Strongly agree</th>
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<th>Disagree</th>
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</table>

As a provider, one should be knowledgeable on where and how to obtain the different contraceptive methods in their community. By discussing availability and feasibility of getting the contraception on a regular basis (including ability to travel to a facility), you can help your client make the best choice since all methods may not be an option depending on cost and which methods are available nearby. It is important to support the client’s individual choice while also only providing options that can be obtained. The provider should also be cautious about suggesting methods which are popularly used by other clients at that particular facility.

**B11. I help clients consider if they can use a method with their partner (like condoms) when making a contraceptive choice.**

Good answers for this statement include “strongly agree” and “agree.”

<table>
<thead>
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The ability to use certain types of contraception (like the Standard Days Method) require that both partners participate in its use. For example, both the partners must be willing to abstain from sexual intercourse or use condoms on fertile days for the Standard Days Method. A woman would need to rely on her male partner to use a condom during intercourse. When providers explain contraceptive options with clients, they should communicate which can be used by the client.
themselves, which require both partners to use the method, and which ones can only be used by their partner. They should help clients consider the ability to use the methods with their partner and support their client in discussing these options with their partner when appropriate.

**B12. I should make sure a client is freely making the decision they want when they make a choice about family planning.**

Good answers for this statement include “strongly agree” and “agree.”

<table>
<thead>
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Acknowledging that the client has the right to make the final decision about whether and which contraceptive method to use is an important part of family planning service provision. The skills and time spent counseling to understand the client’s desires, concerns, and needs related to family planning and contraception can ensure that a client has the ability to make their own informed choice.

**B13. When counseling clients, I explain that it is their choice, not what I think that matters, as long as the method is medically indicated.**

Good answers for this statement include “strongly agree” and “agree.”

<table>
<thead>
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Providers should not make decisions for their clients about contraceptive use. Rather, they should make sure that clients understand their options, and the advantages and disadvantages of contraceptive methods given the client’s specific situation. Providers are seen as experts, and they may carry a higher social status because of this. Clients may think that their decision should be made by the provider because of their expertise and status. Providers should help their clients make their own decision about whether to use contraception and which method to use among those that are medically indicated. This decision can include factors like how long the contraception lasts, if they can obtain it regularly, and side effects, among others.

**B14. A client should be able to change their mind about their family planning decision.**

Good answers for this statement include “strongly agree” and “agree.”

<table>
<thead>
<tr>
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A client’s reproductive goals may change over time based on personal desires or changes to a client’s circumstances. A gender-competent provider should revisit their client’s reproductive health goals over time, and help a client make changes to their contraceptive method choices when appropriate. This can include removal of long-acting methods without any judgment, hesitation, or pressure being placed on the client.
B15. It is difficult for me to put aside my own personal or religious values when I help a client make a family planning decision.

Good answers for this statement are “strongly disagree” and “disagree.”

<table>
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A gender-competent provider can counsel clients in a way that is free from bias and judgment related to the provider’s own personal beliefs and assumptions. They should be able to review all the options available to support a client’s family planning desires, and those that fit the client’s needs medically. They should also be able to help the client achieve their family planning goals despite the influence of the social, cultural, and religious factors that influence the client. Through their counseling, the provider should provide the information necessary for the client to make an informed choice, while reinforcing that it is the client’s choice, not what the provider thinks, that is most important.
Group Discussion/Reflection:

After reviewing the statements on promoting individual agency, it is important to reflect and plan for how best to support clients so that they make their own free and informed choice about family planning including contraceptive use. Below are some questions to discuss as a group regarding promoting individual agency.

- What phrases can you use to open a discussion with clients about their reproductive health goals, and gender-related factors that can influence method choice?
- What are the common social, cultural, and religious factors that influence your client’s decision about family planning? How is this different for men and women?
  - How can these factors be considered so that clients make the family planning choice that works best for them?
- How can you help support clients discuss sexual activity and family planning with their partners?

The second module of the online Gender Competencies for Family Planning Providers e-Learning Course is dedicated to promoting individual agency. The following objectives are addressed in this module:

- Define promoting individual agency;
- Explain the importance of promoting individual agency;
- Identify the competencies of the “Promoting Individual Agency” domain; and
- Apply the competencies to your work.

Taking this online training will help you develop your understanding of how to promote individual agency among clients as a gender-competent provider and offer more insight into the statements included in this tool.