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WOMEN'S REHABILITATION CENTRE

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Cover Photo: : **WOREC Udayapur Branch Office, community meeting with leaders of women groups at Simtang, Nuwakot and women's rally for women's rights at Tharmare, Salyan**

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FOREWORD

WOREC is a registered non-governmental social organisation. It has been working in the field of women's and child right, women's empowerment against violence, trafficking and discriminations, women's health, local human resource development and sustainable community development. The mission of WOREC is to empower and mobilise community based social organisations to conduct various integrated programmes based on local resources, needs and experiences to bring about positive change in the human and democratic rights, particularly those of women and children, the social justice system, the women's health status, and for the environmentally sound, economically productive equitable and sustainable development of the society.

At present WOREC has its branch offices in Udayapur, Nuwakot, Salyan and Baitadi districts and in near future we are going to extend our programme in Mustang district. WOREC has been strengthening and mobilizing hundreds of local women groups and youth clubs with above 3000 members. Major emphasis is now given on community level advocacy for awareness raising on civil rights, women's and child rights, women's reproductive and sexual rights, right of farming communities on their seeds, land and plant genetic resources. Moreover, the centre has also been conducting various other programmes to meet its goal.

It is hoped that the experience gained by WOREC in the field of women's empowerment and integrated community development by mobilizing the community members, particularly women, will be better shared through this publication.

On behalf of WOREC, I would like to express sincere thanks to Caritas Nepal; the Asia Foundation, Nepal; the Ford Foundation, USA; the MISEREOR, Germany; Caritas, Switzerland; ILO/IPEC, Nepal; Ministry of Local Development, HMG; Department of Small & Cottage Industry, HMG/Nepal, GAATW International and other INGOs and agencies for providing support to WOREC towards meeting its goal.

Gaurighat, Kathmandu
November, 1998

Dr. Renu Rajbhandari
President

1. INTRODUCTION

VISION, MISSION, STRATEGIC DIRECTIONS, OBJECTIVES AND THRUST AREAS OF WOREC

Nepal is a country rich in geo-ecological diversity, ethno-cultural diversity and bio-diversity. Inspite of this richness, it has been one of the least developed countries of the world. The overwhelming majority of Nepali people are living in utter degradation. Illiteracy, malnutrition, common diseases, unemployment and social injustice as well as degeneracy of commitments made by the political parties and the government are some of the major factors responsible for this situation.

Inequities in the access and ownership to resources and rights, the discrimination and exploitation based on ethnic origin, caste, age, sex, gender, religion and class are not only responsible for increasing the gap between rich and poor persistently and various women's health problems but also for forced migration of the resource poor and marginalized families into towns and cities to earn their livelihood. Such migrant people are involved in various occupations in the cities and towns. At Kathmandu they are found keeping road - side mobile shops, running the retail shops in the Exhibition Park popularly known as Hong Kong Bazar, and working in various carpet factories; garments and construction sites as labourer. These are the formal sectors they have been involved in. The migrant women and children are also involved in informal sectors which are usually invisible. These sectors include domestic labour and underground sex trade within tourism, hotels, massage parlours, etc. The migrant adolescent girls, women and children have been physically, sexually and economically exploited. Considerable number of women and children has even been trafficked and sold in the international sex industry.

The ever increasing rate and the trend of migration of rural youth from their native villages, the prevailing social injustice, the degradation of environment, depletion of productivity of the crop lands and pasture, unemployment and the social crimes including trafficking in women and

children have become a serious multi-dimensional problem in this Himalayan country. The globalization of open market economic policy and the profit based model of development are basically responsible for increasing the discriminations and social injustice, widening the gap between rich and poor elevating the poverty. As a result, the quality of life of people including the social and individual security has been persistently degrading in an international scale.

WOREC was established in 1991 as a non-governmental social organisation to address the above mentioned socio-economic and human rights problems and contribute in building the nation based on social justice and equitable access to resources, rights and opportunities for all.

VISION

WOREC envisages a healthy Nepali society which is economically productive, equitable and sustainable; environmentally sound and socially just with equal human rights and opportunities.

MISSION

The mission of WOREC is to organize, empower and mobilize community based organizations to conduct various integrated programmes based on local resources and needs to effect positive changes in the human and democratic rights, particularly of the women and children, the social justice system; and for the environmentally sound, economically productive, equitable and sustainable development of the society.

STRATEGIC DIRECTIONS

WOREC has been working in the following strategic directions:

i) Advocacy on human and democratic rights of women and children for creating a society based on social justice;

ii) Empowerment and mobilization of local community based organizations for broader and conscious participation of people in community development and social awareness movement ;

iii) Endeavours for local human resource development, sustainable community health and environmentally sound sustainable bio-intensive farming, and other optional micro-enterprise promotion activities.

OBJECTIVES:

The objectives of the centre within the frame of various strategic directions are as follows:

STRATEGIC DIRECTION - I

- To make the people, particularly the women and children, aware of their human and democratic rights:
- To launch movement for preventing trafficking in women and children;
- To launch community based reintegration/rehabilitation programs for socially rejected and discriminated layer of resource poor and marginalized rural women including those affected by trafficking and HIV/AIDS;
- To safeguard and strengthen women's and children's rights in close co-operation with the national and international oranizations.

STRATEGIC DIRECTION - II

- To animate/empower, mobilize and strengthen the local women groups/community based organizations for implementing development programmes;
- To improve the organizational and leadership qualities of local community based organizations, groups and leaders;
- To implement an integrated non-formal education and advocacy on STDs/AIDS, reproductive health and legal aspects in community level.

STRATEGIC DIRECTION - III

- To improve the technical and managerial skills of local population groups, women leaders and the staff members of WOREC;

- To improve the nutritional and health status of rural women, children and disadvantaged population groups and make it sustainable by mobilizing the local resources and networking the local women's organizations and local GOs;
- To bring about substantial changes in the skill and house-hold income of the rural community through sustainable bio-intensive farming programme;
- To facilitate explore opportunities for extra household income through skill training and mobilization of women groups, youth clubs and male groups.

THRUST AREAS OF WOREC

WOREC has been conducting various programmes which can be broadly grouped into the following thrust areas:

- Advocacy of women and child rights and against social injustice and crimes including trafficking in women and children as well as servitude like practices.
- Animation, empowerment, non-formal education and mobilization of local women groups and other CBOs.
- Local human resource development and capacity building of CBOs.
- Community health education and service with special focus on women's reproductive health and HIV/AIDS prevention;
- Sustainable bio-intensive farming and micro-enterprise development ;
- Research/studies in relevant fields for identifying, analysing, improving or developing community based initiatives, potentials and/or programmes.
- Publication, documentation and dissemination of IEC materials on above mentioned areas.

COMMAND AREAS OF WOREC

WOREC has been implementing various community based programme in the following districts, VDCs/municipalities:

Development Region	District	VDC/Municipality
Eastern:	Udayapur	Triyuga municipality (Bhumrasuwa, Deuri)
		VDCs: Rauta, Murkuchi, Saune Khabu, Jalpa-Chilaune, Jogidaha
Central:	Kathmandu	Kathmandu Metropolitan City (ward # 4, 5, 7, 9)
	Nuwakot	VDCs: Sikharbeshi, Ghyangphedi, Ralukadevi, Rautbeshi,
Mid-western:	Salyan	VDCs: Khalanga, Sejwal Takura, Tharmare, Pipalneta, Triveni
Far-western:	Baitadi	VDCs: Patan, Silanga

LOCATIONS OF WOREC OFFICES:

The **Central office** of WOREC is located at Gaurighat, Kathmandu-8.

The **Branch offices** are located at the following places:

Udayapur: Triyuga Municipality, Rajabas village.

Nuwakot: Sikharbeshi VDC, ward # 6, Sikharbeshi Village

Salyan: Khalanga VDC, ward # 6, Salyan Bazar,

Baitadi: Patan VDC, Patan Bazar.

Map 1. Districts covered by WOREC programme.

2. PROGRAMMES OF WOREC

1. WOMEN'S AND CHILD RIGHTS AND SOCIAL JUSTICE

Keeping its vision and mission in mind WOREC has been advocating for the following civil rights:

> *Right of health including women's reproductive health and sexual rights; right of education; right of personhood or self-determination; right of employment; right of equitable access to resources and opportunities; right of freedom of choice of occupation..*

All of these elements of human (social) rights constitute the components of development of a society and nation. Therefore we recognize development as a human right. Each citizen irrespective of ethnic origin, caste, age, sex, gender and class should have equal opportunity to participate in development and equitable share of the progress. A society without having these characteristics can not be claimed to be a democratic one. Being guided by this concept WOREC has been placing major focus on abolition of servitude and exploitation, particularly of the women, children and resource poor, which are prevalent in various forms in Nepal. Trafficking in women and children, bonded labour, child domestic work and forced prostitution are some of these forms.

Traffick in women and children and other servitude like practices have become a serious problem in Nepal. The center recognizes trafficking in women and children as a serious violation of human rights. In fact, it is a multi -dimensional international problem. It has been estimated that a considerable number of women and children is trafficked from Nepal into sex industry and servitude like labour exploitation in India and other countries. It has been estimated that each year thousands of the girls from rural areas of Nepal are trafficked into sex industry in India alone. Around 20% of the trafficked girls are reported to be children.

The children from rural areas are trafficked to the towns and cities to work as domestic workers and auto-rikshaw labourers. The women and children are also trafficked into carpet and garment factories, hotels, shops and massage parlours. They are further trafficked into sex trade or labour servitude in other countries like India, Thailand, Hong Kong, United States, Saudi Arabia, etc.

The centre has identified that trafficking of rural girls has been caused primarily by social unconsciousness, patriarchy, illiteracy, ignorance, poverty and unemployment. The unskilled and unemployed women are mostly exploited, humiliated and discriminated in the rural society. Owing to patriarchal socio-religious structure the women have subordinate status in a family and society. Girl children and women have also been exploited and discriminated based on sex, caste, ethnicity, gender and class. Besides, trafficking in women is also an output of the open market economic policy and its globalization. Globalization has increased the gap between rich and poor and elevated the poverty. Owing to open market policy the existence of small and medium size industries are now under threat of closure in most of the least-developed and developing countries. This has created additional problem of unemployment. Globalization has resulted in the decline in employment opportunities with higher payments and increase in low-paying jobs in industrially developed countries. Rural youth, particularly women, are therefore, migrated from the least developed countries like Nepal to work in these low-paying jobs without any security. Various kinds of violence against women and children are reported increasing in the factories, shops, massage parlours etc. in the industrialized countries. This has now become a global phenomenon and not a single international effort has shown any indications of positive change in favour of social justice. It is, therefore, imperative to make the rural women at-risk to trafficking and affected by trafficking aware of the socio-economic environment they have been operating in and the tradition of exploitation they have to break-up in favour of the social justice and development of the community. In other words, these layers of women need awareness/advocacy, empowerment and community based programmes. The child domestic workers are forced to earn livelihood for their old parents being victims of servitude in a "palace" of physical, psychological and sexual abuse and exploitation. They have been deprived of education, proper clothing, average nutrition, and health care, their basic civil rights. There is no meaning of legitimate justice for them. The awareness, education, empowerment and skill development supports to them are therefore imperative.

Keeping these facts and the very complex situation in mind WOREC has been conducting advocacy and other support programmes to address the issues of civil rights, particularly women and child rights, and social justice.

The components of WOREC's programme on women and child rights and social justice include:

- Advocacy for awareness raising;
- Strengthening of CBOs/local bodies;
- Networking with NGOs/CBOs/INGOs;
- Reintegration/Rehabilitation.

ADVOCACY FOR AWARENESS RAISING:

Advocacy activities address the issues of basic civil rights, women and child rights, and the elements of social injustice prevalent in Nepal. WOREC has been conducting this activity since its establishment in 1991. This activity is conducted in the community level (VDC and district level) and central level. The community level advocacy of women's rights has been conducted at Udayapur, Nuwakot, Kathmandu, Salyan and Baitadi districts.

The community based advocacy has been conducted to make the people aware of the facts and the situations in relation to violence against women and children, trafficking in women and children and servitude like practices as well as the legitimate or constitutional civil rights and provisions for social justice. In 1997 WOREC emphasised on making the population groups, leaders of VDCs/municipalities/DDCs, women leaders, members of women groups and youth clubs as well as the social workers conceptually clear on the above mentioned issues.

The central level advocacy is aimed at making the policy level bodies/ authorities, national figures in politics (political parties, parliament) and leaders of social/human rights movement conceptually clear seeking their contribution in appropriate policy formulation.

Various means of advocacy employed by WOREC include Training, Workshop, Community Meeting, Rally, Street Drama, Video Film show and distribution of IEC materials. WOREC has also been publishing and distributing journals against trafficking to make both the community level and central level advocacy more effective.

STRENGTHENING OF CBOs/ LOCAL BODIES:

The advocacy activity can not be effective and productive without empowering and mobilizing the community based organizations and local bodies (VDC/DDC). WOREC has therefore been placing special emphasis on strengthening the CBOs and local bodies for making the community based advocacy more effective.

Activities conducted for strengthening of CBOs/WGs and local bodies in 1997 included:

- group formation/identification of CBOs/WGs;
- conceptual clarity on trafficking and rights of children and women (CBOs/WGs/VDCs/DDCs);
- programme design/implementation (WGs/youth clubs); and
- programme monitoring and evaluation (WGs/youth clubs).

In 1997 the centre conducted these activities in Udayapur, Nuwakot, Salyan and Baitadi districts mobilizing the local CBOs/WGs and youth clubs. The local youth clubs were provided with assistance in conducting street drama on trafficking and women/child rights issues. Street drama has been found to be an effective means of communication and advocacy in rural communities. The Sikhar Youth Club of Udayapur, Simtang Youth Club of Nuwakot and Youth Club of Salyan along with other youth clubs in those districts had cooperated with WOREC in raising the peoples' awareness. Many women's groups at Udayapur, Nuwakot, Salyan and Baitadi districts actively participated in organizing various national and international days (women's day, children day, day against women's violence, women's health day, AIDS day, children rally) utilizing them for mass awareness against trafficking and violence against women and children, women and child rights and for social justice. DDC, Nuwakot had worked out plan of action for preventing trafficking and VDC leaders at Sikharbeshi, Nuwakot; leaders of Khalanga and Sejwal Takura VDCs at Salyan; and Patan VDC at Baitadi had expressed commitments to contribute in preventing women's trafficking, child labour exploitation and violence, and attain certain level of awareness at the end of this year through their active participation and resource allocation (for formal schooling of the CDWs or children of resource poor family). This should be taken as an good output of the strengthening (capacity building) process of CBOs/local bodies.

NETWORKING WITH NGOs/CBOs/INGOs:

Networking with other NGOs/CBOs/INGOs/GOs is an important activity of WOREC. Violation of women/child rights and various social crimes like trafficking, sexual and physical exploitation and servitude like practices imposed to women and children are the problems of international scale. It is therefore imperative to work jointly by various CBOs/NGOs/INGOs and GOs for preventing the crimes and brining about anticipated socio-economic and legitimate changes. Being guided by this concept WOREC along with other NGOs took initiative to form a network against trafficking. As a result, an "Alliance Against Trafficking in Women & Children in Nepal" (AATWIN) was formed on 25 June 1997. This alliance conducted a workshop on conceptual clarity on trafficking and worked out its strategic plan of action for 1998. The workshop was organized during 20-24 December 1997. It was facilitated by Dr. Jyoti Sanghera of GAATW, Canada. Ms. Lin Lap Chew of GAATW, International also participated in that workshop as an observer.

The workshop worked out the definition of trafficking which is as follows:

All acts involved in the recruitment and/or transportation of a woman or child within and across the national borders for work or services by means of violence or threat of violence, abuse of authority or dominant position, debt bondage, deception or other forms of coercion.

AATWIN has been regularly conducting " People in Black " activity aimed at creating mass awareness against trafficking in women and children. This activity is conducted at Ratna Park, Kathmandu on the last Friday of each month.

REINTEGRATION REHABILITATION:

The components of community reintegration of the girls affected by or at risk to trafficking and/or HIV/AIDS included: animation and literacy; housing, medical and counselling support; skill training and income generation activities; identification of their family members' where abouts, family reunion and follow-up.

The girls who returned from India were animated and provided with non-formal education along with special education on personal and environmental health, STDs/AIDS, women's rights, and women's grassroot organizations. These activities were conducted daily following a routine. The

motto of non- formal education is to make the targeted girls/women literate as well as aware of the situation (patriarchy, subordinate status of women and lack of legitimate support to women) and the environment they have been operating in.

The targeted girls were provided with housing, food and other support at WOREC rehabilitation centre at Gaurighat, Kathmandu. These women were also provided with regular health check up, treatment as well as emotional and psychological supports. In 1997 the women under rehabilitation included two HIV positive girls, two girls rescued en-route into trafficking in

Chart - 1: Ethnic Composition of Girls at WOREC.

Chart - 2: The Number of Girls supported at WOREC during 1992-97

India and 20 girls at risk to trafficking or who were affected by trafficking into sex slavery in India. Ethnic composition of the girls supported at WOREC was as presented in chart- 1. The number of girls supported during 1992 to 1997 was as presented in chart- 2.

The resident girls were provided with skill training in tailoring and knitting besides NFE. These activities were conducted as sole daily routine works. They were then provided with income generation opportunities, i.e., to produce and sell their goods (sweaters, cloths, gloves, shocks, etc.) through WOREC. One girl was provided with support to undergo computer operator's training, five girls were provided with support to undergo Community Health Worker Training. There girls are employed at WOREC now. The skill training and income generation opportunities or employment were provided to the targeted girls as an equipment against trafficking. It has helped to build up their self confidence that they can sustain themselves and their family by making use of their hidden talents and skills. This is one of the most important aspects of the psychological bases for community based reintegration of the resource poor women affected by trafficking and other forms of violence.

Chart - 3: Total number of women participants involved in animation/NFE during 1992-97.

2. ANIMATION/EMPOWERMENT AND NON-FORMAL EDUCATION

The literacy rate in Nepal, particularly in rural hilly areas, is very low. It is very nominal among the female population in the hills. Due to lower economic status, lower social consciousness and unemployment even the women and children are forced to migrate from their native villages to the towns. The migration of active labor force from hills to the towns and even to Indian cities does not look likely to decline in forth coming years rather it is increasing each year. Because the gap between the rich and poor is widening and the employment opportunities in rural areas are not increasing at par with the population growth.

The servitude the women and children are forced to face calls for immediate action for creating awareness among the migrants about their needs, problems and resources and necessity of utilizing their potential for the development of their native villages. They, at the same time, need to be made aware of the environment they work within, their sanitary and nutritional problems, social welfare and health hazards and also about the potential income generation options that can be initiated in their native villages. And top of all these it is imperative to make them aware of their basic human rights, and the violations they have been experiencing each day. They need to be empowered to face these challenges.

Keeping these situations in mind WOREC has been conducting animation/ empowerment and NFE programme in various locations at Kathmandu, Udayapur, Nuwakot, Salyan and Baitadi districts among the women groups, and children from resource poor households, migrant labourers in carpet factories and CDWs at Kathmandu. The NFE package of WOREC also includes awareness and education on human rights of women and children, legal education, moral education, health education and empowerment activities.

The animation/NFE activities at Udayapur, Nuwakot, Salyan and Baitadi districts were conducted integrating with other community based programmes. The number of beneficiaries of the animation/NFE programme during 1992-1997 was as presented in chart 3. During the period of last six years a total of 696 CDWs and 600 female workers of carpet factories were made literate and aware of their basic rights (Chart - 4).

Chart - 4: Number of Beneficiaries of NFE Programme of WOREC CDWs and Female Workers of Carpect Factories.

Goat production is an important household income generation activity of women groups at Udayapur

3. STRENGTHENING OF LOCAL WOMEN GROUPS

Enhancing women's social, economic and political status is critical for sustainable development of any country. Any community development endeavour may not be successful and sustainable without active and conscious participation of all population groups. In Nepal women have been the passive beneficiaries of economic growth and socio-political development. Sustainability of any programme is basically a concern of beneficiary people. Special efforts are, therefore, imperative for capacity building, strengthening and mobilization of local WGs which would ensure broader participation of local women in development endeavour. Governed by this concept WOREC has launched special programme to facilitate local rural women in its command areas to strengthen their groups or organizations and mobilize them. Strengthening of WGs is taken by WOREC as the second step of empowerment of women after their group formation and animation.

WOREC has been facilitating formation of local women groups at Nuwakot, Udayapur, Salyan and Baitadi districts, and has mobilized them to implement various community based programmes in their native villages. At present there are 92, 30, 29 and 19 women groups (WGs) in Udayapur, Nuwakot, Salyan and Baitadi districts, respectively. Above 3,000 rural women are organised to form their groups. The women groups are at different stages of growth and development and therefore need different types of support to increase their capacity.

WOREC has been providing technical assistance and training to the leaders and members of women groups as well as youth clubs to enhance their capacity to play a leadership role in community based advocacy, planning and managing their activities for achieving sustainability of community based programmes over a reasonable period of time. The elements of capacity building of WGs included:

- animation/sharing
- planning and goal setting
- identification and mobilization of resources
- resource management
- conflict management

- documentation and communication
- linkages with other local CBOs and GOs
- monitoring and evaluation.

The women groups and youth clubs have been involved in implementing such community programmes as saving and credit scheme, advocacy against trafficking as well as on women and child rights, awareness on STD/ AIDS education, mobile health camps, women's health resource centres, income generation activities, integrated kitchen gardening, bio-intensive farming, social awareness against liquor consumption, gambling & conservation of environment, etc.

Some women groups have even formed cooperatives. These include shops and veterinary service centres, goat raising, swine raising, etc. WOREC has been assisting the women groups to obtain external funding as well as to utilize their own funds. The women groups, their enterprises and funding sources are as shown in table - 1.

Table - 1: Women Groups' Cooperatives, Addresses and Financial Resources

Women Groups Co-operatives	Address	Financial Resource provided by
Ram Janaki Co-operative Shop	Jogidaha, Udayapur	TEWA + WG Fund
Chaukidahi WG Co-operative Shop	Rajabas, Udayapur	TEWA + WG Fund
Debane Phedi Women Groups Swine Production Co-operative	Debane, Rauta, Udayapur	TEWA + WG Fund
Kopche Women groups Swine Production Co-operative	Rauta-8, Udayapur	TEWA + WG Fund
Himal Women Group's Goat Farming	Sikharbeshi, Nuwakot	TEWA + WG Fund
Bolung Women Group's Goat Farming	Sikharbeshi VDC, Nuwakot	TEWA + WG Fund
Nava Jyoti Women Group's Goat Farming	Ghyangphedi VDC, Nuwakot	WOREC + WG Fund

4. HUMAN RESOURCE DEVELOPMENT

Skilled human resource is the first prerequisite for implementing any development programme successfully. WOREC has therefore placing special focus in developing local human resources in the community itself. Besides, WOREC has also been conducting special training programmes for the field workers and staff members of NGOs. Keeping the need of a community based training institution to serve the purpose WOREC has established Women's Training Institute (WTI) at Rajabas, Udayapur. The WTI has all physical facilities with an accommodation capacity of 50 trainees at a time. The WTI has been offering training courses on the following subjects:

- Animation and leadership development
- Leadership Development and Management
- Empowerment and Financial Management of WGs
- Women's Health (TOT and for community leaders)
- Gender and Development
- NFE (Facilitator's Training)
- Women's Reproductive and Sexual Rights
- Family Planning and Community Based Delivery System
- Community Based Distribution System and FP Counselling
- COFP
- STD Case Management
- Community Based HIV/AIDS Prevention
- Traditional Birth Attendees Training
- Community Health Worker's Training
- Community Based Counselling on HIV/AIDS
- Paramedical Clinical Training
- Women's Health Counsellor's Training
- Sustainable Bio-Intensive Farming
- Organic Kitchen Gardening

- Knitting: Promising Micro-enterprise for Rural Women
- Tailoring: Optional Income Generation Enterprise
- Community Based Mediation

In 1997 trainings on different subjects were provided to 2,242 members/ leaders of women groups, 111 field workers/paramedicals of NGOs, 30 members of youth clubs. Altogether 100 staff members of WOREC underwent training on various field relevant to their field of work. Field workers, supervisors and paramedical staff of the following NGOs underwent training at WTI: BASE, Dang; NCDC, Jhapa; CWS, Bara; HSA; SIDS; WDA, Ilam; WWESC.

Skill Trainng Programme organised by WOREC.

Mobile Health Camp at Tharmare, Salyan was the most beneficial activity groups deprived of health facilities and services

5. COMMUNITY BASED HEALTH EDUCATION AND SERVICE

In the rural areas, where more than 90 % of the population reside, the health facilities and / or service providers are lacking. Moreover, the community people have very little knowledge about the causes and preventive measures of various health problems, the religious- cultural traditions limiting women's access to nutritional food items and health services. Only the traditional healers and herbs are accessible to women in most of the rural areas. The women's reproductive health issues remain almost unaddressed in Nepal. The women and children have been facing a lot of health problems owing to social discriminations and religious-cultural traditions. These facts indicate that health education and service should be promptly and locally available to the rural population. It is imperative to pay more emphasis on making the primary health service available and sustainable at the community level as per Almata declaration. There is no scope for imposed FP contraceptives to rural communities in Nepal. It is evident from the fact that inspite of the governments continuous effort to have control over population growth through fertility regulation of women a substantial change could not be achieved in that respect rather it caused negative impacts on women's health.

Keeping these situations in mind WOREC has been conducting community health education and service programme at Udayapur and Nuwakot since 1992 and women's health programme at Salyan and Baitadi district since 1997. Women's health programme is conducted also at Udayapur and Nuwakot districts. WOREC has been conducting HIV/AIDS prevention activities in the targeted districts by integrating it with other programmes. At Kathmandu HIV/AIDS prevention programme was conducted at carpet factories and schools.

COMMUNITY BASED HEALTH SERVICE:

WOREC has established community based comprehensive health clinics at Rajabas of Udayapur and Shikharbeshi of Nuwakot district. The paramedical staff, site supervisor and field workers stationed in the field based offices provide service and counselling both in the static clinics and mobile out reach clinics in the district command areas.

An attempt was made to assess the frequency of health problems among the patients attending the static clinic at Udayapur and Nuwakot during

1997. The findings revealed that most of the patients suffered from minor cuts/wounds, worms and dysentery followed by throat and chest infections (chart- 6). Minor cuts/wounds are common for farming communities while the other problems should be interpreted as a result of unsafe drinking water, poor personal hygiene, & sanitation, and houses without proper outlet for smoke released from the traditional fire wood stove. These are the factors which can be eliminated by primary health care programme intervention and education. It should be noted that the incidences of worm infestation and dysentery were higher in the targeted VDCs prior to WOREC's community health programme.

Nearly 1/3 of the targeted population groups were provided with general health check-up and FP/ MCH education, counselling and services through out reach-clinics. The out reach clinics were found to be effective for immunization as well. The static clinic provided ANC/PNC to about 90% of the targeted children at Udayapur.

Chart- 5. a: Percentage Distribution of Beneficiaries of Static & out-reach Clinic by the type of diseases Udayapur. 5. b Nuwakot (1997).

The mobile health camps (general and gynaecological) were also organized by WOREC in the targeted VDCs of Udayapur and Nuwakot during 1997. Both the female and male members of the community were benefited from the mobile camps. During mobile camps WOREC provides advocacy and counselling on personal hygiene, women's reproductive health and family planing as well as service (free health check-up and medicine). That is why WOREC's mobile camps are quite popular in its targeted areas.

The number of female and male participants benefited from static and out-reach clinics at Nuwakot during 1997 was as presented in chart- 6. The number of patients benefited from free health check-up and medicine ranged from 170 (Ghyangphedi VDC) to 495 (Ralukadevi VDC). The number of female patients was higher in the mobile camps at Sikharbeshi and Ralukadevi VDCs (Chart - 7).

Chart- 6: Number of female and male patients attending static and out-reach clinics at Nuwakot, 1997.

Frequency of patients by age groups served in static clinic at Nuwakot is presented in chart - 8. It is evident from the chart that a majority of the population groups benefited by static clinic belonged to age group 15-45 years. The percentage distribution of patients of different age groups revealed variation in the type of diseases with seasons (Chart - 9). Most of the patients of age groups 6-14 and 15-45 years fell sick during April-June. Assessment of frequency of the patients by age groups attending mobile health camps in Nuwakot during 1997 revealed that above 40% of the total patients belonged to age group 15-45 years. It might be interpreted as a

result of the health concerns of households adhered to active age group members who have direct impact on household activities such as collecting fire wood and fodder, fetching water, preparing food, working in the farm land, taking care of cattles, off-farm employment, etc.

Chart - 7: Number of Female and Male Patients benefited by Mobile Health Camps (Nuwakot, 1997)

Chart - 8: Distribution of Patients by Age Group Attending Static Clinic at Nuwakot

Chart - 9: Frequency of Patients by Age Group static clinic, Shikharbeshi, Nuwakot

The targeted population groups in the command areas are provided with education and counselling on personal hygiene, environmental health, reproductive health including use of contraceptives and health services. Moreover, the local youth clubs also organize street drama on these issues during mobile camps, women's day, children day, etc.

Keeping the need of medical supplies to the targeted population community based medical stores are established at Udayapur and Nuwakot. The medical store is owned and managed by the community people through local management board. The management board consists of representatives from local women groups, local bodies (VDC/municipality), school, political parties and youth clubs. WOREC had provided revolving fund for the drug stores.

COMMUNITY BASED STDs/AIDS PREVENTION

HIV/AIDS has been a serious threat to mankind. It has been estimated that if STD/AIDS is spread in the present rate more than 1.5 million Asian people could be infected with HIV by the millennium. It means that HIV could double in Asia by the year 2000. In the southeast and south Asia this syndrome is reported to be spreading very rapidly. The situation is much more alarming in such countries like Thailand, India and Myanmar. In Nepal also the number of people with HIV/AIDS is reported to be increasing very rapidly.

In this Himalayan country HIV/AIDS is reported to be most prevalent among the people involved in commercial sex trade, people visiting the brothels

or people with STDs. Incidence of STDs is considered to be a key contributor to HIV transmission. This fact indicates that one strategy towards effective prevention of HIV/AIDS in Nepal would be to stop sexual transmission of the STDs/AIDS. This strategy relies primarily on dissemination of health and STDs/AIDS related information and education to change the sexual behavior of the population groups of reproductive age. WOREC has been working to prevent STDs/AIDS in rural communities being guided by this strategy. The concept behind the community based STDs/AIDS education programme is that the only effective means of preventing STD/HIV transmission is integration of relevant education and information with the adult non-formal education and health education to the school students which are implemented in the communities through community members or groups (peer educators). Such programme is found cost effective and more productive because it is conducted in an integrated way by the members of the community (local Teachers, local social workers or local peer educators) in the local dialect.

With the above mentioned concept and approach WOREC has been conducting STDs/AIDS education programme among the following population groups :

- students of high schools at Kathmandu, Nuwakot and Udyapur;
- migrant workers in various carpet factories at Kathmandu; and
- rural communities in targeted districts and VDCs.

Improvement in the curriculum of school education, particularly that of higher classes, to include sex and STDs/AIDS education as a compulsory subject has been widely felt. The First National Conference on STDs/AIDS organized by WOREC at Kathmandu during 11-12 December, 1994 had also suggested to include sex education and STDs/AIDS education in the curriculum of school and college. But such improvement has not so far been made by the concerned ministry.

WOMEN'S HEALTH PROGRAMME

WOREC has been implementing women's health programme with research, training, advocacy/counselling and service components. WOREC research has revealed that various socio-economic factors, religious-cultural traditions, and patriarchal subordination of females are primarily responsible for many reproductive health problems of women. Nepali women lack the right of self-determination and bodily integrity, lack accessibility to health

services. Besides, there exist inequities among women of different class, ethnic origin, caste, age and marital status. The rich women of so called elite or higher caste have better access to service and they are better treated by the health service providers and policy makers. There are differences among the women in terms of values, culture, religion, family background and medical conditions, etc. These differences should not be the cause of discrimination and humiliation. Moreover, effective health facilities are not available in most of the areas of the country. In such situation it is quite natural that women's health aspect remains neglected in Nepal. WOREC is advocating for conceptual clarity in regard to women's health or women's reproductive and sexual rights. The concept of women's reproductive and sexual right, we favour, consists of four ethical principles, viz. bodily integrity, womanhood, equality and diversity. As mentioned above, a woman to be healthy should have control over her body, and should have right-to self determination for example in relation to having pregnancy, child bearing, abortion, use of contraception and consumption of food items as per choice. Besides there are two other factors which influence the women's health. These include inequalities among women of different socio-economic background or status and lack of respect to diversity, i.e. differences among women in values, culture, etc. These inequities and lack of respect should be mitigated for healthy womanhood.

Without access to high quality health services and supplies and financing to all women who need them there is no meaning of the laws and mere commitments of the government guaranteeing the freedom of all women to use whatever methods they choose. It is imperative that social, economic and/or political changes should be there to create such conditions. It is not only a matter of development but also an issue of human right-women's reproductive and sexual rights. As mentioned earlier in this report development is an issue of human right and women's reproductive and sexual rights are inseparable from development if it is for social justice, for equitable access to resources and opportunities with freedom of self-determination. The democratic government of any country should translate these principles of democracy into reality. It is thus obvious that without empowerment the rural women would not be able to understand the causes, magnitude and measures of treatment of their health problems. Major cause of women's health problems is within the society deeply rooted in its structure and mentality which is supported by religious-cultural traditions.

Keeping the above mentioned facts and situation in mind and being guided by the concept mentioned above WOREC has been conducting women's health programme with multi-pronged intervention for attaining the healthy womanhood. The strategic directions of this programme include: community based advocacy and empowerment, research/study, training from women's perspective, establishment and strengthening of community based resource and counselling centres, and promotion of use of locally available herbs. WOREC is so-far the only institution implementing women's health programme employing holistic system approach in Nepal.

During 1997, WOREC accomplished community based research at Udayapur, Nuwakot, Salyan and Baitadi districts. The report has already been published which contains original and new information in regard to women's health status in rural Nepal. The summary and conclusion of that research are presented in this report under research/studies section.

Under this programme series of training on women's health were accomplished, both TOT and for the health workers and community members. The TOT was facilitated by Sabala & Kranti (India) who are the well experienced trainers in this field.

WOREC has established women's health resource and counselling centres at Udayapur, Nuwakot and Salyan districts. The number and locations of resource and counselling centres in these districts are as follows:

Udayapur	(4)	Bhumrasuwa (Jhilke Tole), Rauta, Murkuchi, Jogidaha
Nuwakot	(1)	Simtang
Salyan	(5)	Sejwal Takura, Triveni, Phalabang, Tharmare, Pipalneta

The herbs have been found quite effective to cure such common women's health problems like gastritis, trichomoniasis, candidiasis, joint pain, white discharge, menstrual disorders and the first and second degree of uterine prolapse. WOREC has planned to published books on herbal treatment of women's health problems keeping the question of sustainability in mind.

6. SUSTAINABLE AGRICULTURE AND MICRO-ENTERPRISE

Nepal is a least development country where overwhelming majority of people earn their livelihood from farming. The Government's agricultural development policy which has been based on the use of petro-chemicals has proved to be a failure. Analysis of the HMG's statistics covering the year 1982 to 1992 has revealed that the investment on chemical fertilizers was increased by nearly four times while the production of wheat decreased by 13% and the production of rice increased only by 50%. In Nepal the chemical fertilizers are primarily used in these crops. Moreover, the soil fertility is degrading and indigenous varieties of major food crops like rice, wheat and maize have been almost lost. As a result, the economic base of the rural households has been ruined leaving nearly no employment opportunities for the increasing population. Keeping the fragile agro-ecological conditions, the persistently eroding economic base of the rural households and the locally available human and natural resources in mind WOREC has started implementation of an environmentally sound bio-intensive farming programme. This pilot programme has been implemented at Nuwakot.

The micro-enterprise development is the key factor that needs immediate attention if community development is to be achieved through optimum utilization of existing local resources, latent potentials (human resources) and eco-friendly traditional technology and experience. Such activities include appropriate technical skill training, empowerment of local women for developing entrepreneurship and marketing management of the product. The centre has been implementing micro-enterprise development projects at Kathmandu, Nuwakot and Udayapur districts since last six years.

ORGANIC KITCHEN GARDENING

Keeping the locally available resources, skills and experiences of the rural population and poor nutritional status of women and children WOREC has placed focus on promotion of kitchen garden in each household. Owing to devastating effects of chemical fertilisers and pesticides in the human health, animal health, soil fertility and environment WOREC is advocating for organic kitchen gardening. Kitchen gardening is suggested as an extra income generating activity for the resource poor households.

This activity is conducted at Udayapur and Salyan districts through the local women groups. WOREC provides technical assistance, training and

improved seeds of vegetables to the members of the women groups. Animation and empowerment is integrated with this activity. Empowerment is meant for making the local women able to understand the advantages and disadvantages of chemical fertilisers and organic manures, to understand the need of vegetable consumption daily, to explore the opportunities of extra income generation from vegetables, though small, and to manage the marketing of vegetables in local market.

SUSTAINABLE BIO-INTENSIVE FARMING

It has now become clear that petro-chemical farming is neither useful for our health nor friendly to our environment. As mentioned above it has caused devastating effect on the environment, soil fertility and has posed great threat to human health and animal health. The experiences accumulate during hundreds of thousands of years and the local skills have been lost. Our promising indigenous cultivars of food crops like rice, maize and wheat are already lost. Nepal was once a food sufficient country now it has become dependent on other countries. These are the major impacts of petro-chemical farming in Nepal. We have come to realize it after three decades. However the government of Nepal and the policy making bodies are not taking it seriously. It is very disappointing that Nepal is following the path of destruction. The petro-chemical farming will convert our crop lands into deserts in the course of next century. We will leave not fertile crop lands but fragmented parcels of deserted land for the future generation. This is one aspect of modern agriculture. Another aspect is concerned with the loss of plant genetic resources and monopoly control of food system in the world.

Now the world food system is controlled by monopolist like transnational corporates (TNCs) and multinational corporates (MNCs). They are minimizing the rights of farming communities on their seed and plant genetic resources and displacing the areas of food crops by more profitable and genetically manipulated modern varieties of cash crops. The farmers are given incentives for cultivating those varieties replacing their indigenous ones. In the case of crop failure they are providing food support. The TNCs/MNCs are cultivating the culture or nature of greed among the farming communities. The TNCs are gaining 'patent rights depriving the farmers of their rights on their seeds and plant species. Farmer's right in the context of monopoly control of the food system by TNCs and MNCs become thus relevant not just for farming communities but also for the consumers, all

citizens. Farmer's rights are necessary not only for the survival of the citizens but also of the nation. Without sovereign rights of farming communities to their seed, plant genetic resources and land there can be no sovereignty of the country. Farmer's rights are therefore an ecological, economic, cultural and political imperative.

In these complex situations WOREC has designed and implemented sustainable bio-intensive farming programme. This programme is implemented as a pilot programme at Nuwakot covering three VDCs viz. Sikharbeshi, Ghyangphedi and Ralukadevi.

The bio-intensive farming programme has been conducted to empower the farming communities, to help them build their capacity to utilise their resources (indigenous seed, plant species / cultivars human resources, environment, water, pasture, livestock, manure and frost) rationally for the sustainable development of the community without causing any harm to environment, human health and animal health but revitalising or improving the fertility of crop lands. It is a complex system approach but differs from the farming system approach in the sense that chemical fertilizers, pesticides, insecticides, herbicides, and hormones are not used in this system. It is based completely on the indigenous experience and technology of Nepali farmers, i.e. organic farming with optimum economic return from a land per unit time. Bio-intensive farming favours the concept of "food for development or work". The concept of bio-intensive farming opposes the concept of so-called farming system, modern petro-chemical farming, green revolution (in the historical background), integrate pest management or integrated farming. It is against the philosophy of "food for Aid". All of these concepts are destructive to nature and human civilization because they tend to convert farming community into dependent and weak sector of population who have no rights on their land, on their seeds and on the food they need to survive. On the other hand bio-intensive farming is a human approach which is based on the concept of empowerment and mobilization of farming communities to conserve nature, soil, water, indigenous knowledge, experience and technology, plant genetic resources in situ and produce food for development

Under this programme the targeted farmers were facilitated to form their groups/informal associations and provided with animation / empowerment and leadership training. They were then facilitated to make their work plan for one year. They were provided with technical training and orientations

on the concept of bio-intensive farming and various issues of this technology relevant to local needs. The farmers groups or individuals are empowered to manage a demonstration plot on their own field, utilizing their own labour (human and animal), organic manure and seeds. There are now altogether 18 demonstration farms in three VDCs of Nuwakot, viz. Shikharbeshi, Ghyangphedi and Ralukadevi. The demonstration farms are serving as field laboratory of the farmers, scholars and leader farmers of women groups. These farms are found very effective for extension of technology through farmer-to-farmer communication. The technical personnel of WOREC play the role of facilitator.

MICRO-ENTERPRISE PROMOTION

Knitting , tailoring, dhaka weaving are the activities which are promoted by WOREC as micro-enterprise for the resource poor rural women and the girls affected by trafficking. The number of girls who underwent knitting and tailoring training and have adopted these enterprises as optional household income generation options is presented in chart-10. The centre has also started "dhaka" weaving enterprise for the resource poor women at Udayapur. This endeavour was accomplished in cooperation with the district cottage industry development committee, Udayapur. The DCIDC provided Master trainer for conducting skill training on Dhaka weaving.

Chart - 10: Number of women provided with Skill Training during 1997-98

Previously micro-enterprise projects included bamboo crafting, sikki-based enterprise and kitchen gardening. For the last five years basic focus is placed on knitting activities. Keeping the availability of natural resources (bamboo), skill and experience of Tamang people in bamboo crafting and the lower economic status of the targeted population groups in Nuwakot the bamboo based enterprise was first implemented by the centre in financial assistance of the UNDP. But after one year this program was continued by WOREC utilizing its own resources. In 1995/96 it was again continued by WOREC utilizing its own resources. For the period of 1996/97 to 1998/99 this activity has been conducted as a component of income generation program for rural women which is supported by MISEREOR, Germany. In 1997 twenty girls from resource poor households and those at risk to trafficking were selected for the bamboo craft training. Those girls were also provided with animation and non-formal education This profession is adopted by some of the trained women as optional income generation activity

Photo: Dhaka weaving has been one of the attractive micro-enterprise for local women at Udayapur.

Shiva Mahila Samuha of Deuri, Udayapur has adopted organic Kitchen gardening as an income generation activity for the last 3 years

Rally of Children and Women for raising mass awareness on women & child rights.

7. RESEARCH/STUDIES

WOREC conducted a research on women's reproductive health in 1997. That research covered Udayapur, Nuwakot, Salyan and Baitadi districts. The research was carried out to gather both qualitative and quantitative information on reproductive health aspects. The summary, conclusion and suggestion of the research are presented below.

SUMMARY

Nepal is a country with ethnic and cultural diversity and many religious- cultural traditions. But a number of social norms which are based on the religious-cultural traditions are found partially responsible for health problems of women. Specifically the social norms, values and traditions in relation to pregnancy, reproduction including son-bearing, miscarriage/abortion and the use of contraceptives have been the major factors of reproductive health problems of women in Nepal.

In rural Nepal, the key role of a woman is bearing of children, particularly sons. The women are compelled to have more children due to higher child mortality rates. Early and excessive childbearing weakens women, many of whom die or are chronically disabled from complications of pregnancy. Pregnancy is taken as a natural process and God's gift for which medical care is regarded as unnecessary.

In Nepalese society, particularly in rural areas, girls are married at very young ages to much older men. Adolescent pregnancy possesses grave health risks to the young mother. Relatively high proportion of teenage pregnancies has been reported to end in fetal loss, spontaneous abortion or infant death as well as other harmful consequences to the mother. Son preference, reflected in discrimination against female children in allocation of food and utilization of health services in a household can be taken as an explanation for excess female mortality in childhood. Reasons given for families preferring son to daughters include that sons maintain and extend the lineage, inherit property, provide support to parents in old age and farm the family land. Daughters on the other hand are regarded as a liability because they are married and go away. Therefore any investment on them for education, skill development etc. is thought to be a liability to the family. This concept which is more prevalent in rural societies has resulted in gender inequality in general and in the health care of girl children in particular.

This research was conducted to analyse the status of women's reproductive health in rural areas of Nepal for making effective strategic intervention planning.

This research covered four districts, viz. Udayapur, Nuwakot, Salyan and Baitadi. These districts were selected owing to their diverse ethnic structure, availability of health service and administrative and geographical reasons. WOREC has also been implementing various programmes in these districts. This research gathered qualitative and quantitative information employing standard methods of focus group discussion (FGD), in-depth interviews and survey. The summary of findings are presented below.

The primary causes of maternal mortality as reported by the respondents are sepsis, severe and chronic anaemia, hypertensive disorders and haemorrhage.

Owing to legal restriction to abortion, the women in rural areas use to perform abortion by untrained personnel in unsterile condition or even by inserting some objects into the uterus. Induced abortion or miscarriage has been reported to be extremely dangerous from the perspective of health and social consequences. Various factors that caused spontaneous abortion included hard labour too soon after delivery, malnutrition during pregnancy as well as very young age of the pregnant girls. These perceptions were basically reported by women who belonged to such ethnic groups like Magar, Danuwar and Bishwakarma in targeted districts.

Many respondents agreed that contraception to space birth is important one. The husband's approval is reported to be critical for family planning acceptance. However, acceptance to family planning contraceptions varied among various ethnic groups. In some ethnic groups like Bishwakarma and Magar in Salyan district, vasectomy is found to be prohibited in religious ground. The justification given for this is that the vasectomised male can not worship the God and can not give "Pinda" to his ancestors etc. Most of the participants of FGDs reported that the FP contraceptives are not available in their villages. Most of the female participants reported that contraceptives like Dipo- provera and pills are bad for health. They therefore suggested that it is better to use the FP measures by the husbands; on the contrary Tamang women suggested that it is better to use the contraceptives by females. Because their husbands have to carry on heavy loads and vasectomy may have bad impacts on their health.

Various health problems as reported by the respondents included infertility (10%), miscarriage (18%), uterine prolapse (24%), urinary problems (40%) and white discharge (52%).

Most of the respondents reported that the women with various health problems, e.g. miscarriage, hemorrhage, infertility etc. use to go to the local traditional healers (Dhami / Jhankri) because they are available in the community and provide service cheaper in the sense that they accept rice, chicken etc. which a woman can afford. Few women told that in few cases even their family members do not allow them to go to the traditional healers because the family head or husband regards it as useless and wastage of money. Only a few respondents reported that they were taken to the hospital. However, the male members of the family argued that women themselves do not want to go to the hospital and in that case the male members can not do any thing. While probing on this issue it was found that women do not want to go to the hospital because of various reasons: firstly, there are no female health workers at these places; secondly, the health workers are not regular and punctual; thirdly, the health facilities are quite far and practically inaccessible; and lastly medical care is costly and beyond the reach of common poor.

The subordinate status of women in Nepalese society has been found to limit the women's autonomy in decision making. It had limited their mobility and led to discrimination in health care utilisation. Lack of property right to women also led towards non-use of health services which results in high maternal mortality rates and to suffering of women from reproductive, gynecological and other health problems. More than four fifth of the women who had spontaneous or induced abortion did not get any treatment after the incidence.

CONCLUSIONS:

This research was carried out to reflect the prevalence of women's reproductive health problems in rural Nepal in response to the dire need. Four districts of Nepal from the Eastern, Central, Mid Western and Far Western regions were included in the study, representing a cross section of the society. The findings which reflected the reproductive health status of women in rural Nepal led to make the following conclusions:

- A majority of the menarche (first menstruation) was attained at the age of 14-16 years. 85% of the women had menarche by the age of 16.
- Menstruation was not clearly known to the women before puberty. The nature and implications of menstruation was known to the women only after they attained it.
- About a third (30%) of the women stated that they had irregular menstrual cycle.

- An overwhelming majority of the women stated that they had some or other symptoms (like backache, lower abdominal pain, blood clots etc.) encountered during menstruation.
- An overwhelming majority (84%) of the women stated that they had experienced death of their children after normal delivery. Half of the respondents (52%) had experienced death of two or more children.
- About one fifth (18%) of women had experienced miscarriage or undergone abortion during their life time. More than 75% had undergone abortion / miscarriage of less than 6 months foetus.
- Of those, who had abortion / miscarriage, majority (83%) did not want to have miscarriage/ abortion. However, a few wanted that the fetus be expelled.
- 86 % of the miscarriage/ abortion occurred at home in the village without any care taker to look after. Only a sixth (17%) got some treatment after miscarriage/ abortion.
- About a sixth (16%) of the women stated that they were using contraceptives through health workers and NGO.
- More than a half (59%) of the women expressed symptoms related with anaemia.
- "Balanced diet" was consumed by only 2%, 21% of the respondents had poor quality food, and 77% of the women consumed carbohydrate rich food. This fact indicated that most of the population in rural Nepal use to have unbalanced meal.
- 10% of women had the problem of infertility. But only 21% of those women had attended for medical examination.
- About a fourth (24%) of the women had the problem of prolapse of uterus. Prolapse of uterus was reported even after birth of the first child. Two third of the women did not seek medical help for their uterine prolapse. Heavy physical work too soon after delivery and multiple pregnancies were reported to be the common reasons for uterine prolapse.
- About 40% of the women had urinary problems with pus like discharge and burning sensation during urination. However, only a fourth of them (28%) sought medical treatment.

- More than a half (52%) of the women had vaginal discharge. The qualitative variation of vaginal discharge revealed higher percentage of vaginal infection prevalent among the respondents.
- Out of the total respondents 33% had lower abdominal pain and 40% had pus like urethral discharge. These findings provide basis for suspecting high prevalence of sexually transmitted diseases among the women.
- Utilization of health services by the women was found to be very limited and affected by many factors such as availability, distance, costs, quality of care, social structure and health beliefs. Many of these factors were found interrelated with gender inquality and discriminations reflected in women's subordinate status in society and lack of respect to diversity among women.

SUGGESTIONS:

This research clearly shows the low reproductive health status of rural women of the Nepal. Many reproductive problems are not considered seriously or are overlooked. Issues like abortion/miscarriage, uterine prolapse, vaginal discharge are not given proper attention. In this light, the following suggestion are made.

The reproductive health issues should be addressed adequately to all the women, which could be done through appropriate information, education and communication strategies.

Women should be encouraged to seek medical help whenever they have some problems. Priority should be given to the reproductive health issues in each and every health institution providing feasible and appropriate treatment.

More research is needed to compare the community based data with the clinic based data. The high prevalence of RH problems among rural women requires more detailed study to identify avenues to address them adequately.

Activities to ensure empowerment of the women and involvement of men in this respect should be carried out.

8. PUBLICATION, DOCUMENTATION AND DISSEMINATION OF IEC MATERIALS

Publication, documentation and dissemination of resource materials for strengthening information, education and communication activities have been one of the major activities of WOREC.

WOREC has published and disseminated books, posters, flip charts, leaflets, journals and reports on non-formal education, reproductive health and nutrition, women's health, trafficking in women and children, bio-intensive farming, optional micro-enterprises, etc. The major publications of WOREC are as follows:

TRAFFICKING IN WOMEN & CHILDREN:

- Girl Trafficking: The Hidden Grief in Himalayas - Book (1997)
- Girl Trafficking: Legal Aspects - Book (1997)
- Girl Trafficking: Problem & Solution - Flip chart (Nepali & English)
- "Cheliko Byatha": Quarterly Magazine (Nepali and English)
- "Kiran": Quarterly journal against trafficking (Nepali)

HEALTH & NUTRITION :

- Family Planning & Nutrition - Book (1994)
- Good Nutrition Good Health - Book (1997)
- AIDS Education - Book (1993)
- Pandemic AIDS : An introduction - Book (1994)
- Pictorial Book - 1 (AIDS) (1994)
- Pictorial Book - 2 (STDs) (1994)
- STD Diagnosis & Prevention - Flip Chart (Chart) (1993)
- HIV/AIDS Education: Trainer's Manual - Book (1997)
- "Sayapatri" - Quarterly Journal on Women's Health (Nepali)

COMMUNITY MEDIATION:

- Manual for Community Mediator - Book (1995)
- Chetana (Pictorial Book) (1995)

NON-FORMAL EDUCATION:

- Diyo Part - 1 (Book)
- Diyo Part - 2 (Book)

Poster, wall chart and other regular publications are not included in this list. WOREC publishes Newsletters "Batika" and "Jagaran" and Annual Report which are distributed free of cost.

The documentation section has a small collection of books and reports on the following disciplines: Women and development; health and nutrition; law; trafficking; STDs/AIDS; agriculture; human rights, etc.

In 1997 the centre has established documentation units as resource centres at Udayapur, Nuwakot and Salyan branch offices. These resource centres will be strenghtened in future as nodal points where information & education on women's health, women's empowerment, women & development sustainable agriculture and rural development, etc. will be available.

Documentation Section of WOREC, Kathmandu

3. FINANCIAL REVIEW

FINANCIAL STATEMENT OF THE F.Y. 1996/97:

S.N.	Programmes and Activities		Expenditure NRs.
A.	Management and Support		831,250.00
B.	Programmes:		
	1.	Women's Rehabilitation Programme	489,517.00
	2.	STD/AIDS Education Program for school students and youth working in carpet industries	279,121.00
	3.	STD/AIDS prevention programme	363,642.00
	4.	Non formal education for CDW	495,432.00
	5.	Integrated Animation and Bio-Intensive Farming	221.060.00
	6.	Community Mediation Project	476,186.00
	7.	Women's Training Institute	363,532.00
	8.	Comprehensive Health Clinic	431,336.00
	9.	Women's Health Program	527,798.00
	10.	Non formal education, Nuwakot	49,017.00
	11.	Integrated Animation and Kitchen Gardening	224,242.00
	12.	Publication on Trafficking	213,998.00
	13.	Animation and Women Health Programme	435,941.00
	14.	Integrated Animation and Income Generation Programme	300,000.00
Total			57,02,072.00

PROGRAMMES OF WOREC AND FUNDING AGENCIES

S.N.	Program	Funding Agencies
1.	Women's Rehabilitation Programme	Misereor, Germany/WOREC
2.	STD/AIDS Education Programme for school students and youth working in carpet industries	Caritas, Switzerland
3.	STD/AIDS prevention programme	SCF (US)/HBU/WOREC
4.	Non formal education for CDW	ILO/IPEC
5.	Integrated Animation and Bio-Intensive Farming	Misereor, Germany
6.	Community Mediation Project	TAF/Nepal
7.	Women's Training Institute	TAF/Nepal
8.	Comprehensive Health Clinic	TAF/Nepal
9.	Women's Health Programme	Ford Foundation
10.	Non Formal Education, Nuwakot	SCF (US)
11.	Integrated Animation and Kitchen Gardening	Caritas/WOREC
12.	Publication on Trafficking	Broedrlijk Delen
13.	Animation and Women Health Program	Caritas/WOREC
14.	Integrated Animation and Income Generation Programme, Baitadi	Ministry of Local Development, HMG/Nepal

THE COLLECTIVE OF WOREC

CENTRAL OFFICE, KATHMANDU:

Dr. Binayak Rajbhandari	Advisor (Planning/Research/Publication)
Dr. Renu Rajbhandari	Executive Director
Mr. Navin Raut	Management/Account Officer
Mrs. Bina Pokherel	MIS Assistant/Office Secretary
Mrs. Jwala Kolakshypati	Junior Account/Mgmt. Officer
Mrs. Ishwori Poudel	Store Incharge
Mrs. Bhabisara Gurung	Women and Development Officer
Mrs. Menu Pokharel	Trainer (Knitting)
Ms. Seema Acharya	Trafficking Programme Incharge
Ms. Bindu Gurung	Animation/NFE Programme Incharge
Ms. Bindu Gautam	Computer Assistant
Ms. Puja Mizar	Computer Operator
Ms. Asha Lama	Warden/Rehabilitation Centre
Mr. Bir Bahadur Chaudhari	Messenger

STAFF IN THE BRANCH OFFICES :

UDAYAPUR

Mr. Navaraj Raut	Dist. Co-ordinator
Ms. Laxmi Tamang	Incharge (WTI)
Ms. Seela Thapalia	Programme Officer
Ms. Sakuntala Chaudhari	ANM
Ms. Kalpana Bista	ANM
Ms. Sarada Danuwar	Accountant
Ms. Bijaya Tamrakar	Computer Asst./Office Secretary
Mr. Ganesh Thapa	VDC Co-ordinator

Ms. Puspalata Rai	Junior Training Officer
Ms. Aruna Chaudhari	VDC Co-ordinator
Ms. Jhukimaya Danuwar	VDC Co-ordinator
Ms. Mandira Danuwar	Warden
Mr. Chet Raj Shrestha	Supervisor (NFE)
Ms. Ganga Rana	CHW
Ms. Tara Danuwar	CHW
Ms. Meena Adhikari	Clinic Asst.
Ms. Rambati Danuwar	Cook
Ms. Budhamaya Danuwar	Cook
Mr. Amrit Bahadur Danuwar	Guard
Ms. Hunde Maya Danuwar	Helper
Mr. Harka B. Danuwar	Messenger

NUWAKOT:

Mr. Babu Ram Gautam	District Coordinator
Mr. Bala Ram Dawadi	Legal Advisor
Ms Devi Chaulagain	ANM
Ms. Tara Sharma	ANM
Mr. Ain Kumar Shrestha	JTA
Mr. Kedar Neupane	JTA
Mr. Govinda	JTA
Ms. Parbati Khadka	Account /Management Assistant
Ms. Durga Sitaula	Motivator
Ms. Chhayamendo Tamang	Entrepreneur
Ms. Sabita Tamang	Entrepreneur
Ms. Binita Tamang	Entrepreneur
Ms. Risang Tamang	Motivator
Ms. Dolma Sherpa	VDC Coordinator
Ms. Makuri Tamang	VDC Coordinator

Mr. Lal Badhur Tamang	Supervisor
Ms. Indira Pandit	Office Assistant
Mr. Rajan Budhathoki	Supervisor
Mr. Man Bahadur Tamang	Facilitator (NFE)
Mr. Mohan Bahadur K.C.	Facilitator (NFE)

SALYAN

Mr. Khusi Ram Dhauniya	District Co-ordinator
Ms. Sadiksha Maharjan	Account/Mgmt. Officer
Mr. Mausam Das Shrestha	Supervisor
Mrs.Chandra D.C.	Supervisor
Mrs. Damabar D.C.	Women's Health worker
Mrs. Bindu Shrestha	Women's Health worker
Mr. Balaram K.C.	Field worker
Ms.Laxmi shrestha	Field worker
Mr.Narayan K.C.	Field worker
Ms. Susila Bhandari	Field worker
Mrs. Parbati Nepali	Field worker
Mr. Mahendra Gurung	Field worker
Mr. Bir Bahadur Bista	Field worker
Mr. Sudin Rajbhandari	Male Health worker
Ms. Januka Battarai	Women's Health Counseller
Mrs. Resama D.C	Women's Health Counseller
Mrs. Kanti oli	Women's Health Counseller
Mrs. Yamuna Adhikari	Women's Health Counseller
Mrs. Sita Basnet	Women's Health Counseller
Mrs. Punam Kunwar	Assistant cook
Mrs. Deba Kumari D.C.	Facilitator (NFE)
Ms. Ishwari Basnet	Facilitator (NFE)
Mr. Lokman Nepali	Facilitator (NFE)
Mrs. Sushila Bhandari	Facilitator (NFE)

Mr. Lil Bahadur Nepali	Facilitator (NFE)
Mr. Dabbal D.C	Facilitator (NFE)
Ms. Chandra Bhandari	Facilitator (NFE)
Mr. Lokendra Nepali	Facilitator (NFE)
Mr. Rudra Kumar Bohara	Facilitator (NFE)
Ms. Romati Bhandari	Facilitator (NFE)
Mr. Resam Nepali	Facilitator (NFE)

BAITADI

Mr. Gyaneshwar K.C.	District Co-ordinator
Ms. Gyanu Chand	Supervisor
Ms. Bindu Bhandari	Supervisor
Ms. Sarita Bista	Health Worker
Mr. Padam Singh Bista	Assistant
Mr. Raju Chand	Facilitator (NFE)
Mrs. Nirmala Pant	Facilitator (NFE)
Mrs. Punam Pant	Facilitator (NFE)
Mrs. Draupadi Bista	Facilitator (NFE)
Mrs. Keshari Air	Facilitator (NFE)
Mrs. Bishna Pant	Facilitator (NFE)
Mrs. Maheshwari Air	Facilitator (NFE)
Mrs. Chandra Air	Facilitator (NFE)
Mrs. Dilabati Pant	Facilitator (NFE)
Ms. Sarita Bista	Facilitator (NFE)

WOREC PUBLICATION

			Price NRs.
1.	**Girl Trafficking**		
A.	Flip Chart "Chelibeti Deha Byapar"	–	2500.00
B.	VIDEO Film "Bedana Ra Mukti"	–	1200.00
C.	Book "Girl Trafficking"	–	100.00
D.	Present Status of Nepalese Prostitutes at Bombay	–	15.00
E.	Journal "Cheliko Byatha"	–	30.00
2.	**STDs/AIDS and Family Planning/Nutrition**		
A.	Leaflet on STDs	–	25.00
B.	Wall Chart on STDs	–	6.00
C.	Wall Chart on AIDS (Suraksha Kawach)	–	7.00
D.	Poster on AIDS	–	7.00
E.	Poster on AIDS (New)	–	9.00
F.	Book "AIDS Education"	–	24.00
G.	Leaflet on AIDS	–	3.00
H.	Pictorial Book (AIDS)	–	20.00
I.	Book "Introduction to AIDS"	–	20.00
J.	Book on "Family Planning and Nutrition"	–	20.00
K.	AIDS Manual	–	15.00
L.	Flip Chart on STDs	–	300.00
3.	**Community Mediation**		
A.	Guide Book for Mediation	–	30.00
B.	Pictorial book "Chetana"	–	25.00
C.	Girl Trafficking : Legal Aspect	–	25.00
D.	Newsletter on Mediation	–	6.00
4.	**Non–Formal Education**		
A.	Diyo- 1	–	25.00
B.	Diyo- 2	–	35.00