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Acronyms

| AIDS ANM BIF CBIDM CBOs ECDC CEDAW CG CHP CIDO CMC CRAW CRC CSC DDC DTF ENWWR FFS FG GOS | Acquired Immuno-Deficiency Syndrome Assistant Nurse Midwife Bio-intensive Farming Community-based Information Dissemination Mechanism Community-based Organizations Early Childhood Development Centre Convention on Elimination of all Forms of Discrimination Against Women Community Group Community Health Programme Community Health Programme Community Mediation Committee Child Rights Awareness Group Child Rights Convention Civil Society Committees (for Peace) District Development Committee District Task Force Elected and Nominated Women Ward Representative Farmer's Field School Farmer's Group Governmental Organizations |
|---------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| HIV HRN | : Human Immuno-Deficiency Virus : Human Rights Network |
| HMG | : His Majesty's Government |
| ICPD | : International Convention for Population Development |
| IEC | : Information Education and Communication |
| LTC | : Lisnu Training Centre |
| MDF MWCSW | : Model Demonstration Farm : Ministry of Women, Children & Social Welfare |
| NGO | : Non-Governmental Organization |
| NTF | : National Task Force |
| PLWHA | : People Living with HIV/AIDS |
| SAN | : Sustainable Agriculture Network |
| SARD | : Sustainable Agriculture and Rural Development |
| SD | : Strategic Direcation |
| STD | : Sexually Transmitted Diseases |
| TOT | : Training of Trainers |
| UNDHR | : United Nation's Declaration on Human Right : Village Development Committee |
| VDC VTF | : Village Task Force |
| WG | : Women's Group |
| WHC | : Women's Health Counselor |
| WHN | : Women's Health Network |
| WHRCC | : Women's Health Resource & Counseling Centre |
| WHRD | : Women Human Rights Defender |
| WOREC | : Women's Rehabilitation Centre |
| WTI | : Women's Training Institute |
| YG | : Youth Group |
| | |

Introduction

The inequities in the access and ownership of productive resources and basic human rights, and the discrimination and exploitation based on ethnicity, caste, age, sex, gender, religion and class have been depriving Nepali people of their rights. These factors plus the armed conflict that has engulfed the whole country are also responsible for the forced migration of resource-poor and marginalized people from rural areas into towns and cities or other countries to earn their livelihood. The socio-cultural and economic injustice, the discriminatory patriarchal socio-political structure and the armed conflict have led to increasing unemployment, displacement, and violence against women, children and marginalized indigenous people. Migration of rural youth away from their native villages; the depletion of productivity of natural resources like croplands, forests, and pastures; and socio-economic crimes like traffic in and violence against women and children have thus emerged as an intricate socio-economic, cultural, and political phenomena in this Himalayan kingdom. To address these issues Women's Rehabilitation Centre (WOREC), a non-governmental organization, was established on April 1, 1991; and has been working in partnership with grassroots people and organisations in order to resolve the major socio-economic, cultural and human rights problems prevalent in the communities and for the attainment of social justice and protection of human rights at the community level.

This report presents a glimpse of the center's programmes and the achievements made in 2005.

Mission

Contribute for creating equitable Nepali society based on social justice and human rights.

Vision

In order to achieve its mission in sustainable way, WOREC would play the role of an active national NGO engaged in the prevention of trafficking in women and promotion of women's rights.

Strategy

WOREC programmes focus on the following three broad strategic directions:

- I. Collective empowerment and social mobilization;
- II. Advocacy for human rights, social justice, peace and development; and
- III. Sustainable resources management and livelihoods.

Objectives

The objectives of the centre within the framework of its strategic directions (SD) are as follows:

SD I. Collective Empowerment and Social Mobilization

- Animate, empower, mobilize and strengthen the local community groups (CGs), community-based organizations (CBOs) and population groups for planning, implementing and monitoring local development programmes;
- Improve and consolidate the organizational structures and leadership qualities of local community-based independent democratic organizations (CIDOs) and leaders;
- Implement integrated programme of development education and advocacy on the issues of traffic in and violence against women and children, women's health, women's human rights and social justice.

SD II. Advocacy for Human Rights, Social Justice, Peace and Development

- Make grassroots people, particularly women, children and marginalised groups, aware of their human rights:
- Contribute to the prevention of traffic in and violence against women and children;
- Contribute in the rehabilitation or reintegration of socially rejected, discriminated, and marginalized rural women, including the survivors of trafficking, violence or HIV/ AIDS;
- Strengthen functional networking on human rights particularly women and child rights at various levels;
- Strengthen community-based mediation committees, and facilitate in resolving local disputes at local levels;
- Improve the health status of women, children and other members of the communities; and promote relevant traditional knowledge and technology;
- Facilitate and promote peace-building initiatives of the grassroots people at local and district levels;
- Rehabilitate/reintegrate woman/girl victims of armed conflict in cooperation with other relevant organisations; and
- Launch national campaign for women human rights defender's (WHRD) protection, and restoration of peace and democracy.

SD III. Sustainable Resources Management and Livelihoods

- Improve the technical skills and competency of the members of local CGs/CIDOs and the staff members of WOREC.
- Improve the nutritional and livelihood security of rural women, children and disadvantaged population groups; and make it sustainable by networking with and mobilizing local women's groups (WGs), farmer's groups (FGs), CIDOs, other civil society groups and local governance bodies.



- Make the local farmers and women aware of the issues of farmer's rights and relevant national and international legal provisions that need to be changed.
- Bring about substantial changes in the skill, household income and livelihood options of rural communities through small farmer-centered bio-intensive farming system programme.
- Facilitate the exploration of location-specific off-farm income generation opportunities, and promote viable micro-enterprises at local level.

Targeted Districts and municipalities/VDCs

WOREC has been implementing various community-based programmes in the nine districts and 95 municipalities/VDCs (Table 1&2). Other information about the targeted districts is presented in annex (Table 2 to 5).

Table 1. Targeted districts and municipalities/VDCs

| Development Region | Districts | Municipalities/VDCs |
|-----------------------|-----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Eastern | Morang | Letang, Urlabari, Sanischare, Rajghat, Pathari, Aamgachi, Rangeli, Dainiya, Buddhanagar, Bhatigach, Sijuwa, Jhurkiya, Mahadeva, Kadmaha, Nocha, Dadarbairiya, Sorabhag, Sisbani Jahada, Majhare, Pokhariya, Darbesha, Takuwa, Amahi Bariyati, Govindapur, Hasandaha, Amardaha, Babiabirta, Bardanga, Itahara |
| | Sunsari | Jhumka, Amahibela, Ramganj, Debanganj, Chittaha, Purba Kushaha, Chimdi, Ramjung Sinwari, Gautampur, Jalpapur, Satterjhora, Madheharsahi, Bhaluwa, Babiya, Waurabani, Tanmuna, Simariya and Hariganga |
| | Udayapur | Triyuga Municipality, Rauta, Jogidaha, Jalpa-Chilaune, Triveni, Bhalayadanda, Saune, Khanbu, Handiya, Risku, Katari, Panchawati, Sundarpur, Beltar, |
| | Siraha | Govindpur, Padariya, Bastipur |
| Central | Dhanusha | Labtoli, Goddar, Yagyabhumi, Dhalkebar, Bharatpur, Naktajhis, Hariharpur, Puspalpur, Mahendranagar, Dhanushadham, Bengadar, Shantipur, Bateshwor, Laxminiwas, Tulsi |
| | Kathmandu | Kathmandu Municipality |
| Western | | |
| | Mustang | Lete, Kobang, Kunjo |
| Mid- Western | Dang | Tarigaun, Urahari, Manpur, Hikuli, Shreegaun, |







Overview of Programmes

Human trafficking is the worst form of slavery persistently increasing in Nepal. Prevention and abolition of this kind of slavery requires multiple interventions with right-based integrated and participatory approach. WOREC has been working particularly to curb traffic in women and children. The centre has launched various programmes to address the issues of and the factors responsible for traffic in women and children.

In the course of its participatory intervention in the rural areas, WOREC has facilitated formation and strengthening of new social democratic institutions aimed at alleviating discrimination, violence, and injustice through collective empowerment and social mobilization. These institutions include various community groups (CGs), community-based child development centers (CDCs), community mediation committees (CMCs), community health clinics, women's health resource & counseling centres (WHRCCs), women's health networks (WHNs), model demonstration farms (MDFs), caucus of elected and nominated women ward representatives (ENWWRs) and women's cooperatives for the promotion of micro-enterprise. Mobilization of these institutions is broadly directed towards protecting the human rights of women, children and marginalized groups as well as promoting the production technologies simultaneously preventing degradation of natural resources like land, water and biodiversity. Social mobilization is directed towards mitigating the external economic and technological shocks and gaining self-reliance in basic resources and technologies required for the attainment of sustainable livelihoods.

Local institutions are the fundamental components of the innovations of WOREC for ensuring human rights for all and sustainable livelihoods at the local levels. The local institution has two primary and inter-related components: the organization as such; and a set of links between the people's organizations and its environment. The important features of the organizations engaged in various stages of programme development and implementation include their leadership quality and strength, their resources, their activities and the internal structures including the patterns of authority, communication and control or in short, the level of democratization. Higher the level of democratization and commitments, higher is the effectiveness of an organization. We have observed it in Udayapur district, where WOREC has been working in partnership with the CBOs for the last fourteen years. Our efforts are directed towards achieving and/or strengthening peace, human rights and equitable access to productive resources assuming that these are the three interrelated most essential elements for sustainable development and social justice. It is against such a perspective that the local organizations and the members, both female and male, elected to the local governance bodies are strengthened through appropriate training, orientation, and workshops. These democratic infrastructures are gaining recognition and support from the local population and the local governments like VDCs and DDCs. These institutions have been actively engaged in bringing about anticipated change in the discriminatory socio-cultural tradition, and gender-based discriminatory norms and values. Furthermore, these institutions are also engaged in the identification, conservation, and sustainable management of local natural resources for anticipated change in the rural household economy and local environment.

Collective Empowerment and Social Mobilization

Animation and Development Education

The Nepali women, children, and the marginalized population have to face subordination, exploitation, and discrimination each day. This situation calls for immediate action to make them aware of their basic human rights. First, they need to be animated to realize and analyze their basic needs, major problems, and available resources; and then they need to be empowered to analyze and utilize their latent potentials and available resources and opportunities for the development of their own personality, household economy and native villages. They, at the same time, also need to be aware of the social environment they live and work in. Moreover, they need to be empowered to cope with all these challenges. They need to be able to question themselves about the worsening livelihood conditions, and to realize that these discriminatory conditions cannot be accepted for long and have to change. The marginalized population groups and the civil society groups committed for social justice should and can bring about a change in these inhuman situations and the discriminatory socio-political norms and values. Being guided by this concept, WOREC has been conducting animation and development education programme in its targeted districts in partnership with the CBOs and local government bodies.

The unequal access and ownership to natural productive resources, the socio-economic discrimination and exploitation are not only responsible for subordinate status of women leading to various women's health and nutritional problems, but have also forced the marginalized families to migrate into towns and cities to earn their livelihoods. The armed struggle has further aggravated the situation-overburdening women. Such migrant people are engaged in various occupations in the cities and towns. Various studies have revealed that the adolescent girls, women and children who are "employed" in various informal sectors have been physically, sexually and economically exploited and abused. Some of them are even trafficked into the international sex industry or labour market. The ever-increasing rate and the trend of migration of rural youth, the prevailing social injustice, degradation of both the environment and fertility of croplands, unemployment and the social crimes including trafficking in women and children have thus become a serious problem. The globalization, open market economic policy and exotic model of development based on discriminations and social injustice are responsible for increasing the gap between rich and poor. Thus, WOREC envisages animation and development education as a comprehensive and continuous process of instilling into the marginalized populace a scientific outlook to understand and analyze their problems and the causes of their subordination and discrimination. This process has enabled them to identify the socio-economic, political, and cultural barriers to their development, and has empowered them to find out the ways and means to change these situations from the perspective of social justice.

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Sustainability of any development programme is a concern of all stakeholders. As women occupy half of the total population in Nepal, enhancing women's social, economic, and political status is critical for the sustainable development. On-going armed conflict has disrupted development activities in the country. Special efforts are therefore imperative for animation, capacity building, strengthening, and mobilization of the local CBO's peace building initiatives and activities. This would result in women's and women leaders' increased participation in decision-making, and peace building endeavors at the grassroots level. The community-based organizations (CBOs) are the potential change agents and peace building social force, and therefore need to be paid due consideration by both the governmental and non-governmental organizations. With this understanding, WOREC has been facilitating capacity building of CBOs like women's groups, youth groups, adolescent girl's groups, child groups, and farmer's groups in all of its targeted areas. These groups are provided with conceptual and socio-economic and technical knowhow, and mobilized to plan and implement various projects/programmes in their native villages. WOREC has been facilitating CBOs to organize community meetings or workshops, and providing training and technical assistance to the leaders and members of the CBOs.

Various activities of animation and development education included:

- Group formation, strengthening and mobilization
- Animation and leadership training
- Development education and skill/technical training
- Organizational planning
- Micro-enterprise promotion and
- Management of local resources.

Accomplishments

- In 2005, the total number of women groups and women federations in all districts has reached to 978 (Table 6) and 122 respectively (Table 7). The numbers of various CGs functioning in targeted districts reached 18947 by the end of 2005 (Table 8). In 2005, WOREC continued working with all groups and federations of women, youth, farmers and children in all targeted districts.
- In 2005, training and orientation on various topics like animation, group mobilization, leadership development, group management, capacity building, conceptual clarity, and technical skills were provided to the members of community groups in all targeted districts for strengthening their capacity and conceptual clarity.
- In 2005, WOREC facilitated formation and strengthening of 74 and 71 groups of marginalized community in Udayapur and Siraha districts, respectively. Those groups were provided with orientation/training on "Dalit" rights as well.

- In 2005, WOREC organised 3-month long training on animation for Social Mobilizers. Altogether 23 people selected from the marginalized community of Siraha and Udayapur participated in that training. Various subjects like health, gender, law, the governmental policy about "*Dalit*" were included in the contents of the training.
- After undergoing training, the Social Mobilizers provided 3-month training to marginalised people at their own community with the objectives of making them aware of protecting their human rights; register their personal vital statistics; to get their citizenship certificates from VDCs. With the help of Social Mobilizers, 4 women and 10 men became able to get their citizenship certificates. In Siraha, altogether 805 cases were registered that included registration of birth, marriage, and death.
- WOREC has been conducting development education sessions in all targeted VDCs of Udayapur and Siraha. In 2005, altogether 889 (755 female and 134 male) community members of both districts benefited from that programme.

- Animation, collective empowerment and social mobilization are the essential components of community-based programmes aimed at bringing about social, economic and political change at the grassroots level.
- Once the grassroots people learn about group formation and management in their interest, the wheel of change goes on rolling sweeping away the traditional discriminatory norms and values.

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Human Resource Development

Realizing human resource as the first prerequisite for implementing any development programme successfully, WOREC has been placing a special focus on capacity building of local human resource in the targeted communities. The center enisages human resource development as a process of liberation of a person from her/his subhuman existence and sense of alienation, simultaneously developing her/his personality, dignity, creativity, and technical skills. Accordingly, WOREC has been conducting special training programmes for the local NGOs/CBOs as well as the local field workers and its staff members. More than 90 percent of its staffs are local youths, particularly women/girls in the targeted districts. Keeping in mind the need of a community-based training institution to serve the purpose of local human resource development, WOREC had established a Women's Training Institute (WTI) at Rajabas, Udayapur in 1993. WTI has training units in Biratnagar, Rajabas and Janakpur. In 2004, WOREC had also established Lisnu Training Centre (LTC) at Kathmandu towards meeting its above-mentioned objectives.

The WTI and LTC have been offering short-term training courses on the following topics:

- Animation and People's Organization
- Leadership Development and Management
- Women's Health and Gender
- Women's Reproductive/Sexual Rights and Social Justice
- Management of Women's Health Resource & Counseling Centre
- Trafficking and Safe Migration
- Advocacy
- Community-Based HIV/AIDS Prevention
- Traditional Healer's Training
- Paramedical Clinical Training
- Women's Health Counselor's Training
- Food Security and Sustainable Livelihoods
- Bio-Intensive Farming System and Livelihoods
- Organic vegetable production
 and Livelihoods
- Community-Based Mediation for Conflict Management
- Micro-Enterprise Skill Training



Participants of Community-Based Mediation Training, Biratnagar



Participants of Peer Education training

Accomplishments

• In 2005, WOREC conducted a number of short-term training (4190 beneficiaries) and orientation (8668 beneficiaries) courses. During this period, a total of 4190 members and leaders of local women's groups, farmer's groups, child groups, field workers and WOREC staffs, members of NGOs and DDC/VDC benefited from those training courses (Table 9-17).

• In 2005, different training on leadership and institutional development and group management, strategic planning and animation for capacity

building and empowerment of the NGOs, community people, local CBOs were organized (Table 9). Altogether 1450 participants benefited from these short-term training courses.

- In 2005, different training on youth empowerment were organized (Table 10). Altogether 162 participants benefited from those short-term training courses.
- In 2005, different short-term training courses on child development were organized (Table 11). Altogether 591 participants benefited from these short-term training courses.
- In 2005, different short-term training courses on community mediation were organized (Table 12). Altogether 213 participants benefited from those training courses.
- In 2005, different short-term training courses on safe-migration and trafficking prevention were organized (Table 13). Altogether 692 participants benefited from those training courses.
- In 2005, different short-term training courses on community health and HIV/AIDS prevention were organized (Table 14). Altogether 204 participants benefited from those training courses.
- In 2005, different short-term training courses on women's and reproductive health were organized (Table 15). Altogether 229 participants benefited from those training courses.
- In 2005, different short-term training courses on women's human rights, conflict management, advocacy, peace and development were organized (Table 16). Altogether 194 participants benefited from those training.
- Different short-term training courses on bio-intensive farming system and sustainable livelihoods were organized in 2005 (Table 17). Altogether 455 participants benefited from those training courses.

- Training/orientation as per need of the grassroots people's organizations to address their immediate needs is the most appropriate and effective intervention for addressing the issues of their rights, food security and livelihoods.
- Development of local trainers on various issues of local people/entrepreneur's needs is the effective strategy and practice of making people-centered programmes sustainable.

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Advocacy for Human Rights, Social Justice, Peace and Developmant

Advocacy

Women's right to health, education, nutrition, self-determination, employment, and equitable access to resources and opportunities are the elements of basic human rights. Ensurance and protection of these rights are imperative for sustainable development of a society and nation. That is why development is an issue of human rights. Each citizen, irrespective of ethnic origin, caste, age, gender, religion, and class should have an equal opportunity to participate in the developmental process. Being guided by this concept. WOREC has been advocating for the abolition of servitude-like practices and all kinds of discriminations and exploitation. The centre has been addressing the issues of discrimination, violence and exploitation of the people, particularly women, children, and the economically poor and marginalized population groups. Traffic in women and children, bonded labour, domestic child work, and forced commercial sex works are some of the forms of such exploitation, servitude, and violation of human rights. The patriarchal socio-political structure and social values prevalent in Nepal are the major factors responsible for the existing discrimination and violence against women, children and marginalized communities. Such structure and values must be transformed to socially just structures and values for uprooting the gender- or caste-based discriminations and exploitation. United effort of the grassroots people and civil society groups is the only force that can uproot such disparities and exploitations. Advocacy and capacity building activities may play significant role in bringing about necessary policy and legislative change. Advocacy programme should go beyond public policy to the larger sphere of influencing societal attitudes and practices in order to transform the oppressive patriarchal value system into a more just and humane one. Issues of deprivation, violence, injustice, and violation of rights precede the process of advocacy. So advocacy activities can not be effective and sustainable without empowering and mobilizing the local civil society groups to influence the local governance. Advocacy is just like a coin with ideological and political sides. WOREC has therefore been placing special emphasis on capacity building and mobilization of the grassroots civil society groups and local governance bodies as well as political organizations.

Advocacy activities of WOREC address the issues of basic civil rights, women's human rights, child rights and women's rights to property and resources. These activities also address the issues of social injustice prevalent in Nepal. WOREC, in cooperation with various international and national organizations, has been conducting these activities at the community and the central levels. WOREC's central level advocacy has been targeted

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A rally organized against violence on women

to the parliamentarians, political leaders, ministry officials, and intellectuals for relevant changes in the governmental policies, programmes and legislation.

WOREC uses various means of advocacy like training, workshop, community meetings, rallies, signature campaign, street dramas, video film shows, and distribution of IEC materials. It has been publishing and distributing journals against trafficking and on women's health

to make both the community level and central level organizations and civil society groups more aware of the issues of trafficking and migration, human rights and social justice, food security and livelihoods.

Accomplishments

WOREC

- In 2005, WOREC celebrated "16- day of activism against gender violence" programme with different activities in various districts. The purpose of that programme was to raise awareness against gender-based violence as human rights abuse, and to call for the elimination of all forms of violence against women.
- WOREC and the Department of Women/ MWCSW jointly organised a 2-day national consultative workshop entitled "Review of the Progress of the District Task Force against Trafficking and Planning" on August 17- 18, 2005 in Lalitpur. Altogether 90 participants including 26 representatives of District Task Force reviewed the progress made in different districts, discussed on the problems and constraints faced, and developed future plan of action.
- WOREC has started a community radio programme in cooperation with local Saptakoshi FM radio. A community radio programme entitled "PRAYASH" (Effort) was launched on 25th November 2005 on the occasion of Violence against Women day; and is continued with an objective to disseminate information on violence against women and its impact on women's health and reproductive rights issues. In 2005, six episodes were broadcasted; and 52 episodes will be broadcasted in 2006.
- WOREC has been facilitating Village Task Force (VTF), District Task Force (DTF) and National Task Force (NTF) to make the stakeholder sensitive towards prevention of trafficking and elimination of all forms of discrimination against women. In 2005, WOREC had conducted a "National Consultation Workshop" jointly with Department of Women, Ministry of Women, Children and Social Welfare.

- WOREC has formed district level Human Rights Networks (HRNs) in its working districts to address the ongoing conflict, violence, and for restoration of sustainable peace. The HRNs have been engaged in awareness-raising among the local people and CBOs/NGOs about establishment of people's democracy and peace building process.
- WOREC has been facilitating to form sectoral advocacy networks like Sustainable Agriculture Network (SAN), Women Health Network (WHN), Dalit Rights Network, Anti-trafficking Network, Youth Federation, Child Network and Women Federation at district and VDC levels. Those networks have been functioning as the agents of advocacy.

Successful advocacy cases

WOREC

Owing to continuous advocacy of WOREC and other NGOs and HROs the following policy changes were achieved in 2005.

- 1. Women don't require permission from their guardians for going to foreign employment (Decided by Ministry of Labour).
- 2. Supreme court has decided to provide equal right to women and men to have passport for international travel.
- 3. Supreme court has taken decision to form the Child Court.
- 4. In case of Badi women, Supreme Court has taken decision to provide citizenship rights to their children based on mother's citizenship

- Advocacy is the most effective activity to bring about anticipated changes in the discriminatory national policy, programme, and social norms and values.
- Empowerment of CBOs is essential for effective advocacy.



National Consultation Workshop, Kathmandu

Youth Empowerment

Violence against women in any form is a worse form of violation of human rights. Various forms of violence including trafficking in person are rampant in Nepal. There are ample of evidences, which suggest that there is a large number of women and children who are trafficked each year in various sectors of work. Similarly, various community level researches suggest that domestic violence against women is common in Nepal. Young women usually are the prime victims of such violence. There are different newspaper reports revealing that adult women are also severely harassed and beaten blaming them as witches. One of the very strong reasons for this is that the family, community, society and even the state are discriminating against women and girl children in different spheres of their lives. Although the government of Nepal has ratified almost all of the International Conventions including CEDAW and CRC, which protect the rights of women and children, everyday thousands of women and children are being discriminated against and exploited. This kind of discrimination and violation of their human rights leads them to forced migration making them more vulnerable to trafficking.

As mentioned earlier, the majority of people who are trafficked include youth, adolescents and children. Reason for this is that women's lives are constructed and located within the institution of marriage and social prestige of the family. Traditional and social pressure forces girls to marry at a young age and to have early pregnancies. Suffering such pressure and abuse within the family at an early age is probably the worst abuse a girl child has to face. Within the family, women take the major responsibility of agricultural production, domestic agro-based cottage industries, marketing at the village level as well as most of the domestic works. Rural women's workload is multiple, unrecognized, under-recovered and under-valued. All of these factors combine to minimize women and girl's self-esteem and self-worth. Faced with daily discrimination, lacking protection and recognition, women and girls have little experience of negotiating for better condition, and a few expectations of their rights being fulfilled.

WOREC has been addressing these situations through right-based approaches. The centre believes that in order to prevent traffick in women and girls from Nepal and to reduce the scale of violence against women, it is imperative to empower and mobilize youth at the community level. Keeping this concept in mind, WOREC has been implementing youth empowerment programme in its targeted districts.

Accomplishments

- Youth groups or federations were formed and/or strengthened in targeted districts at ward (above 350), VDC (41), and DDC (1) levels.
- Various training/orientations were provided to the youth groups for their capacity building, vocational skill development, and psycho-social counseling skill.

- Youth groups were mobilized for advocacy and awareness-raising at local level.
- Youth groups were mobilized for social justice and equity, particularly against violence, trafficking and discriminations against women prevailing in the society.

Lessons Learned

WOREC

- Youth groups are the most dyanmic change agents who can bring about change in the old traditions, discriminatory social norms and values.
- Empowerment and mobilization of youth for the prevention of social crimes/evils is the best option of moving towards peace and development.



Participants of leadership development training, Janakpur

Safe Migration and Prevention of Trafficking

As mentioned above, various discriminatory practices, norms and values, violence and armed conflict have forced rural population groups to migrate from native villages to towns and cities in search of better livelihood options. For the last few years, quite a big chunk of people, both male and female, has been migrating to other countries for better employments opportunities. In the process of migration, many women and children are trafficked into slavery-like conditions in other countries. Obviously, dissemination of information about safe migration to the migrating population groups, particularly women would be one strategy for the prevention of trafficking. WOREC has therefore been conducting safe-migration programme in Dhanusha, Udayapur, Morang and Sunsari districts.

Traffic in women/children is a serious violation of human rights of women and children. WOREC has adopted the following definition of trafficking : "*Trafficking includes all acts involved in the recruitment and/or transportation of a woman or child or person within and across the national borders for forced labour or services by means of violence or threat of violence, abuse of authority or dominant position, debt bondage, deception, or other forms of coercion*".

It has been estimated that every year thousands of girls from the rural areas of Nepal are trafficked into sex industry and labour market in India and other countries. Around 20 percent of these girls are reported to be minors. Similarly, many children are trafficked inside the country, and are forced to work under different kinds of servitude-like practices. In Nepal, people usually perceive trafficking as a synonym to sex trade or migration. In fact, trafficking is synonymous neither with sex trade nor with migration. These are only serving to be the reasons of trafficking.

The patriarchal social structure and discriminatory values, illiteracy, ignorance, lack of women's access to and control over productive resources, and employment have caused trafficking of women. Their work has neither been regarded as productive nor socioeconomically valuable. Owing to the patriarchal socio-political structures, the women have subordinate status in Nepal. Girl children and women have also been exploited and discriminated against based on sex, caste, ethnicity, gender, and class. Furthermore, open market economic policy and globalization have also increased subordination of and traffic in women and children. It is therefore imperative to make the rural women aware of the socio-economic environment they have been operating in as well as of the discriminatory social values and tradition of their exploitation. They need to be empowered to question and to mobilize themselves to abolish these discriminatory values, norms, and traditions, and change the policies that marginalize them. WOREC has therefore been conducting advocacy and other support programmes to address the issues of human rights, particularly of the women and child rights, and social justice.

Social reintegration/rehabilitation of the survivors of trafficking is a comprehensive process of animation and self-empowerment, and does not merely mean the physical reunion of

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the survivors with their families or providing them with shelter and food. The components of social reintegration of the girls affected by or at-risk for trafficking include: animation; empowerment; development education; support for housing, nutrition, health service; counseling; skill/professional training; identification of their family members, family reunion, and follow-up. WOREC's innovation concerning rehabilitation of the survivors of trafficking/violence is already a proven practice. Girls who underwent through this psychosocial process are now earning their livelihoods in an environment of social dignity. In 2005, WOREC had carried out different activities in prevention, capacity building, policy advocacy and rehabilitation/ reintegration in all of its targeted districts.

Accomplishments

- Besides training/ orientation, WOREC conducted various workshop and cross-sector meetings on the issues of trafficking and migration at different levels. One-day workshop on trafficking against women and children was conducted in each VDC of the targeted districts.
- WOREC also conducted various activities for raising awareness of the targeted population groups, the leaders of VDCs/municipalities, DDCs and, leaders and members of women's groups, teachers, students, and youth clubs as well as other civil society groups in the targeted districts. More than 10,000 community people benefited from that activity.
- In 2005, WOREC continued publishing "Cheliko Byatha", the magazine against trafficking. Moreover, it also published training manual and reference materials on trafficking and safe-migration for different target groups.
- WOREC has formed and strengthened 80 VDC-level taskforce and 4 district-level task forces in Morang (29), Sunsari (18), Udayapur (14) and Dhanusha (19) districts. All VDC- and DDC- level task forces were provided with conceptual training on trafficking and safe-migration. They were mobilized to conduct various activities at VDC and DDC levels.
- To combat trafficking of women and children, network of different NGOs against trafficking was formed. Meetings of the network were organized in a regular fashion twice a month.
- Meetings with different NGOs working against trafficking of women and children, the staffs of reporters and Nepal police were also facilitated regularly to exchange ideas and experiences.
- Meetings of DDC-level working committees were conducted. Representatives of all 79 VDCs, staff of WOREC and staff of women development branch participated in the meetings.

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WOREC's team briefing about Chhahari Programme to Ms. Nellie van der Pasch, Prog. Officer, ICCO

Chhahari Programme

For the last few years, quite a big number of population groups has been displaced or internally migrated from native villages to cities or towns owing to armed conflict and lack of livelihood options. Being deprived of resources and opportunities for livelihoods, these population groups including women/girls have been compelled to work with low payments or salary in various types of work in

the cities or towns. Among these groups, the displaced or internally migrated/trafficked women/girls have been reported working in the informal or entertainment sector such as dance restaurant/bar, clubs, massage parlor, small hotels. Besides low salary, they have to face discrimination, violence and various types of exploitation including sexual harassment and sex work in such places. In order to provide health and counseling services to these workers and other internally displaced/trafficked women, WOREC has established a drop-in centre known as *Chhahari* in Kathmandu. The drop-in centre is located at Gangabu, where a substantial number of sex-workers, and displaced or internally migrated people reside.

Accomplishments

- *Chhahari* office with health clinic and counseling unit was established at Gangabu, Kathmandu.
- Orientation/training was provided to the concerned staff members for their capacity building.
- A base-line survey to assess the situation and need of the internally migrated/trafficked women/girls was conducted.
- Counseling and health education/ services were provided to the targeted population group. One ANM is stationed in the *Chhahari* health clinic for 24-hour service. Medical Doctors provided with reproductive/sexual health checkups and service periodically. Most of the clinic visitors had more than one health problem (Table 18). Lower abdominal pain and white discharge was found the most common among the girls.
- Out-reach activities in the targeted areas were conducted regularly. *Chhahari* has been disseminating and delivering the reproductive as well as sexual health-related information through out-reach; and the IEC materials are distributed at the drop-in centre.

- Being an intricate problem, effective prevention of trafficking needs joint and coordinated efforts from all sectors of the society and government. Operational VDCand DDC-level task force against trafficking & violence might be the important and effective network against this crime at grassroots levels.
- Awareness-raising as well as advocacy activities from VDC- and DDC- level to national and regional levels are more effective in curbing the crime.

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Early Childhood Development Centre

In Nepal, the children of 0-6 year's age group are usually neglected in the development programmes of both the governmental and non-governmental organizations. There are no space and facilities to bring out their hidden talents and creativity. Thus, they are deprived of their basic human rights of having support for their overall development. Women, particularly mothers, have to take the responsibility for their care, nourishment and development; and in most cases, they take their children with them to their work places. It is obvious that this situation has negative impacts in the life of the children as well as mothers. The child is not only deprived of the right to socialization and proper health and nutritional care but s/he is also exposed to various infections or put at-risk for accidents. The mother, on the other side, is over-burdened; and the opportunity to generate extra income has been limited for her. When the children reach 2-3 years, they start cultivating the habit of roaming around; and it becomes difficult to enroll them in the formal school. In order to develop good habits among the children, and to provide them with opportunities and support for their development as well as to provide pre-school counseling, socialization and other supports, the need for a child-centered programme was strongly felt. The government and NGOs have now been running running around 15000 ECDC's in various parts of the country; and their member is expected to be 75000 by 2020.

Keeping these situations in mind, WOREC in partnership with AEI, Luxembourg and the local WGs and VDCs formed 10 early childhood development centres (ECDCs) in 1998 and 10 more centers in 2001. In 2002 and 2003, those CDCs were further strengthened and 21 ECDCs of Triyuga Municipality, Rauta, Jogidaha, Khabu, Saune and Triveni VDCs were handed over to VDC-level women groups for their operation. Likewise, five ECDCs were established each in Siraha (in 2005, in partnership with MISEREOR) and Dang (in 2005, in partnership with AEI) districts.

Accomplishments

Major activities accomplished under this programme included:

- Regular health and nutritional assessment and care;
- Imparting knowledge and behavior about personal health and hygiene;
- Socialization of the children;
- Support for the development of creativity of children;
- Capacity building of teachers and members of the management committee;



Ms. Marie Hentgen and AEI team discussing with ECDC children

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Participants of child rights training, Udayapur

 Workshop on programme sustainability;

• Pre-school education to the elder children (3-6 years) for formal schooling; and

• Support for the admission of the children to local schools.

• Regular followup monitoring of this children enrolled in formal schools.

Other accomplishments were as follows:

- In 2005, altogether 861 children (1-6 years) were enrolled in 21 child development centers established at different VDCs and municipality in Udayapur district. Likewise, in Siraha 217 children were enrolled in 4 CDs, and in Dang 196 children were enrolled in 5 CDs (Table 19). Distribution of the children enrolled by sex presented in the Table 19, which shows that quite a good ratio of male and female children is being benefited from the programme.
- Analyzing the ethnic composition of children enrolled in each ECDC it was found that majority of children enrolled in ECDCs were from "*Dalit and ethnic minorities group*" eg. Magar, Rai, Tamang, BK, Pariyar, Danuwar, Tharu. Distribution of the children at ECDC by ethnicity is presented in table 20.
- In 2005, all the teachers and supervisors were provided with refresher training on quality teaching skills and ECDC management.
- For the sustainability of child development centres, one-day workshop was held with the representatives of different organizations at Rajabas. Altogether 14 people (11 men and 3 women) participated in the workshop.
- To help in conducting the programme of child development center smoothly the team of the child development centers was provided with orientation programme twice. In 2005, 20 teachers and 20 assistants participated in both orientation programmes.
- The coordination meeting was conducted with the teachers of primary schools and Early childhood development centers. Such meeting is conducted twice a year.
- One-day meeting was conducted with VDC/DDC representatives, representatives of different organizations, members of management committees, women group's and intellectuals in all VDCs. The meeting discussed on the issue of sustainability of ECDCs. Regular fund from VDC, coordination with different organizations, conducting income generation programme, regular meeting of management committee were some of the suggestions made by the participants.

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- In 2005, altogether 300 children of ECDCs were enrolled in local primary schools. Out of them, 151 were girls and 149 boys. It is noteworthy that in 2005 altogether 1108 children, who passed through ECDC during 1999-2004, were studying in primary schools. It should be regarded as a big achievement because there were neither such spaces (ECDCs) for the younger children nor was there possibility for the children of marginalised ethnic minorities to get enrolled in formal schools. WOREC has been conducting regular follow up of the children admitted to school. In 2005, follow up of children in their schools. It was found that 96 percent were going to their schools regularly and 4 percent had left school due to various reasons particularly, the worst economic condition that forced their families to migrate. Details of children admitted to formal schools in 2005 are presented in table 21.
- WOREC is always conscious about the health of children. Therefore, WOREC conducted health check up of the children of ECDC monthly. Growth assessment and nutrition were important components of that activity. In 2005, each child was provided with medicine for de-worming. Orientation on health programme was also given to the parents, teachers and assistants. Such types of programmes were conducted twice a year.
- In 2005, 7-day refresher training on "creating teaching materials by using local resources" was provided to the teachers, assistants and supervisors of ECDCs. Altogether thirty-four persons participated; and they had prepared 200 teaching materials.
- WOREC facilitated formation of child rights awareness groups (CRAW) in its targeted VDCs. They were provided with child rights training as per the Child Rights Convention (CRC). The school students and other outsiders are the members of these groups. Altogether 330 children were benefited from that training. To enhance the capacity of children, they were provided with opportunity to participate in different programmes like essay writing competition, drawing competition, etc.

- Early Childhood Development Center is the most essential space for the growth and development of younger children.
- Learning attitude, social and health related behaviour and overall growth and development of the children enrolled in ECDCs are better as compared to those who are deprived of such an opportunity.
- Local people and CBOs may be able to run such ECDCs if they are provided with appropriate training, orientations and support for establishment of the ECDCs.

Community Mediation

In Nepal, violence against women is one of the major factors responsible for poor health of women, livelihood insecurity, and inadequate social mobilization. With an aim of restoring social justice and peace through elimination of gender-based or caste-based discrimination and violence at the grassroots level, WOREC has facilitated formation and strengthening of community mediation committees (CMC) in the targeted wards, VDCs/municipalities. It has started mobilizing local CGs, local elected governmental bodies, and local intellectuals for that purpose. In Udayapur, 86 ward-level, and eight VDC-level mediation committees are actively engaged in such participatory process.

Each ward-level mediation committee consists of seven members with four female and three male. The composition of the ward-level mediation committee is as follows:

| • | Elected and nominated women ward representative (1) | Chairperson |
|---|-----------------------------------------------------|-------------|
| • | Elected chairperson of ward (1) | Member |
| • | Representative of adolescent girls' group (1) | Member |
| • | Representatives of women's group (2) | Member |
| • | Local leaders/Teachers (2) | Member |
| | | |

The VDC-level mediation committee is a federation of the ward-level mediation committees. Some of the VDCs in Udayapur have given formal recognition to the CMCs as per Decentralization Act. Each mediation committee conducts a monthly meeting on a regular basis. The hearing of the registered cases of the disputes takes place as per need.

Accomplishments

- To impart knowledge about the importance and scope of community mediation, orientation was organised for the women and youth groups. In the course of orientation, they discussed about the meaning of mediation, its importance, advantages of community mediation to the society, and the possible role of SMC in transforming conflict.
- In 2005, only 16 persons benefited from legal counseling and its treatment. Among those cases, two cases of human rights protection could not be solved and were referred to the district court.
- In order to share the approach and activities of the community mediation programme launched in Udayapur, coordination meeting was conducted with the members of community mediation and Bar Association of Udayapur district and other formal agency of the Court.



In 2005, altogether 70 cases were registered and resolved in the ward level mediation committee in Udayapur (Table 22). Among them 51 cases (73%) were related to violence against women, 9 (13%) cases were related to disputes on property and rest (14%) was of various other types of social disputes (Chart 1). In 2004, only about 25 percent of total cases were related to violence against women. These figures clearly showed a remarkable incline (48%) in the cases of violence against women due to armed conflict going on in the country.



Chart 1. Percentage distribution of the disputes registrated in CMCs by their nature, 2005

- Community mediation is the best option of resolving local disputes with people's participation. It facilitates in bringing both parties to realize their mistakes and compromise with the common conclusion with win-win situation for both.
- Community mediation is relatively effective and faster in resolving local disputes because it does not require any fee; and it can meet immediately in the village itself.
- For substantially reducing patriarchy-based violence against women, the community mediation committee should be chaired by woman.

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Health for All

In most of the rural areas in Nepal, people have a very little knowledge about the causes and preventive measures of various health and nutritional problems. General health services are not available in most of the parts of rural Nepal. In the national health policy and programme, women's health issues remain inappropriately addressed. Further more, women and children have been facing a number of health problems owing to social discrimination and religious-cultural traditions. These facts suggest that health-related information, education and service are not within the reach of the most people. It is imperative to provide primary health care facilities to them irrespective of their gender status, and make them aware of the fact that health is their basic right. The national health system needs to be comprehensive from the perspective of the marginalised communities. Keeping this point in mind, WOREC has been implementing community based-health programme and women's health programme in Udayapur since 1992. Likewise, the centre has been implementing animation and women's health programme in Mustang and Siraha district also for the last few years.

Community Health

The community-based health programme (CHP) of WOREC consists of clinical service, health education, immunization, counseling, promotion of herbal remedies of women's health problems, training to the grassroots people. Utilization of health service is a complex behavioral process in Nepali society. Many factors such as availability, distance, costs, and quality of health care, social structure, and health beliefs have been affecting healthseeking behavior among the rural people. Many of these factors are interrelated with gender inequality reflected in women's subordinate status in the society. Most of the rural women cannot decide themselves to seek health service. Their husbands or senior male members of the household often make the decision for them. Cost and distance considerations are also interrelated with this kind of gender inequality. Ouite a large number of rural women prefare going to the traditional healers (Dhami/Jhankri) them health posts. WOREC has started providing training to the local traditional healers in Udayapur since 1998 to impart knowledge about primary health care and the importance of a referral system. After undergoing training, the traditional healers have started to refer their patients to WOREC clinic or local women's health resource and counseling centres. WOREC has also been strengthening local women's health resource and counseling centers (WHRCC) and women's health networks (WHN) simultaneously promoting referral health system (Chart 2).

Major activities of this programme include:

- Health education (community & school students);
- Health service through static and outreach clinic;

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- Immunization
- ANC/PNC check up and follow up;
- Counseling;
- Lab services; and
- Dental services.



Chart 2. Referral Health System Promoted by WOREC

Accomplishments

 WOREC has established communitybased health clinic at Rajabas of Udayapur district. The paramedical staffs, laboratory technician, site supervisors and field workers stationed in the field-based offices have been working in both the static clinic and mobile outreach clinic in the command areas.



Local traditional healers (Jhankri) participating in a primary health care training, Rajabas

- The data presented in Table 23 show that 2354 patients benefited from the service provided at the community health clinic of WOREC at Rajabas, Udayapur.
- In 2005, altogether 1132 children and women received immunization services from the WOREC clinic. Table 24 shows the number of women and children who benefited from immunization programme of the clinic.
- In 2005, altogether 281 community people were benefited from laboratory test facilities provided by the WOREC clinic. The major services provided by laboratory included stool test, urine test, sputum test, pregnancy test, blood grouping etc.
- To minimize the prevalence of tuberculosis, WOREC clinic has been providing DOTS service. Altogether eight tuberculosis patients benefited from this service.
- In 2005, static clinic also provided with dental services to community people. One-day
 dental camps were organised in Rauta, Beltar and Hadiya villages. Such types of
 mobile dental camps were conducted first time in those areas.

- Community health clinic and regular mobile health camps are useful for providing health service and counselling at the grassroots level, where people are deprived of primary health care infrastructure and facility.
- Mobilization of local people to manage CHCs for its sustainability is a challenge; and it needs more intensive social mobilization activities.

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Women's Health

In Nepal, the gender-differentiated effects of patriarchy on women's health remain to be well researched. Morbidity and mortality among the women and children are not decreasing . New occupational health hazards and risks are also evident among workers in export-oriented industries like the carpet and garment factories, informal services, entertainment industries and agriculture.

Various research and workshops conducted by WOREC have revealed that a number of socio-economic factors, religious-cultural traditions, and the patriarchal subordination of women are responsible for many health problems of women. Nepali women lack the right to self-determination (womanhood), are unaware of the fact that they are themselves the decision makers of their bodies (bodily integrity) and lack access to health services. Furthermore, there exist inequities among the women of different classes, ethnicities, castes, ages, and marital status in access to health services or treatment by health service providers. There is diversity among women in terms of values, cultures, religion, family backgrounds, and medical conditions. This diversity, however, should not be the cause of discrimination and humiliation among women.

A woman, to be healthy, first should have control over her body, and should have the right to self-determination, e.g., in relation to having pregnancy, child bearing, abortion, and the use of contraception. It is clear that economic and/or policy changes should be there to create such conditions. It is not only a matter of development but also an issue of human rights, specifically women's reproductive and sexual rights. Development is an issue of human rights. Women's reproductive and sexual rights are therefore inseparable from development if the development is for social justice, equitable access to resources and opportunities with the freedom of self-determination. We have learned that without empowerment the rural women would not be able to understand the real causes, magnitude and treatment measures for their health problems. A major cause of women's health problems lies within discriminatory socio-political structure and attitude, which is

supported by the religious-cultural traditions. WOREC, in cooperation with the Ford Foundation, has therefore been conducting women's health programme since the last eight years. The programme components include: advocacy and empowerment, participatory research and monitoring, training from women's perspective, strengthening of local women/ adolescent girl's groups, establishment and strengthening of women's health resource and counseling centres, women's health networks as well as promotion of the use of locally available medicinal plants. WOREC is



A Women's Health Counsellor disseminating information to the participants of Women's Health fair, Udayapur

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Participants of Women's Health Fair, Siraha

the only institution in Nepal that is advocating for and successfully implementing women's health programme with such a holistic approach.

Accomplishments

• In partnership with the local women's groups and VDCs, WOREC has established 12 women's health resource and counseling centres (WHRCC) and women's health networks (WHN) in the targeted VDCs in Udayapur. In 2005, one

WHRCC was established at Bastipur, Siraha as well (Table 25). These resource and counseling centres are the nodal points, where local women share their health problems and experiences and get relevant knowledge, information and counseling.

- Women's health resource and counseling centres provided with information, education, and counseling following self-help approach. In the course of the last eight years, various medicinal plants were found quite effective in curing women's common health problems. Such problems included non-specific vaginal white discharge, burning urination, menstrual disorders, the first and second degree of prolapsed uterus, non-specific vaginal infections, gastritis, joint pain etc. In 2005, altogether 1937 women visited and benefited from women health resource & counseling center (Table 26). The table shows distribution of patients visiting the WHRCCs by health problems. Most of the women visiting WHRCCs had uterus prolapsed (453) followed by menstrual disorder (188) and white discharge (170). Pregnant women also visited the centers for the ANC and PNC check up (Table 26).
- WHRCCs provided services to 1937 women/girls of all age groups and economic strata. Women of the most active reproductive age group between 20-36 years were the major beneficiaries (739) of WHRCCs in all targeted VDCs (Table 27) followed by the women of age group between 36-50 years (635). In general, the middle economic strata households were the major beneficiaries (887) of WHRCCs in all the targeted VDCs; and the second major beneficiaries were the women with low economic status (Table 28). It should be noted that women with low economic status of the household were the major beneficaries in seven locations, while with middle economic status were their major beneficaries in five locations (Table 28). The low and middle economic strata households include the households with an income from own farm to cover the food and other expenses of six months and one year, respectively. High economic strata households have adequate farm production and income to meet their annual food and other needs and above that have some savings.
- Analysing the ethnic distribution of patients visiting WHRCCs in Udayapur in 2005, it
 was found that the percentage of Danuwar, Tharu women (marginalised caste in

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Analysing the ethnic distribution of patients visiting WHRCCs in Udayapur in 2005, it was found that the percentage of Danuwar, Tharu women (marginalised caste in Terai), and Rai/Magar/Tamang women (ethnic minority groups in hills) visiting the WHRCC comprised 44 (17 & 31%) percent (Chart 3). Hill dalit like SK/BK/Pariyar and Tearai dalit (sada) women who visited WHRCC comprised 7 and 4 percent, respectively (Table 29). This indicates that marginalized ethnic minorities and Dalit communities are becoming more aware of their health problems; and have been developing health-seeking behaviour as an impact of WOREC's women health programme. Chart 3 shows the percentage of patients visiting WHRCC by ethnicity/caste during 2005.



Chart 3. Patients visiting WHRCC by ethnicity/caste, Udayapur 2005

- Under the umbrella of these resource centres, 9 community-based women's health networks (WHNs) are active in Udayapur. Altogether 172 members of local women's groups were organized in these networks. The members of WHNs have undergone training on women's health, management of WHN and treatment of health problems with herbal remedies. Members of the WHNs meet regularly on a quarterly basis.
- The WHNs have been providing information, education and training on women's health issues at the ward and VDC levels. Moreover, all the networks have their annual action plan; and are actively involved in sensitizing community people on the issues of women's health, violence and gender-based discrimination. Similarly, a district level network on women's health has been formed from the representatives of all 9 WHNs. The main purpose of this network is to enhance the coordination among WHNs, and strengthen district level advocacy campaign on women's health and rights issues.
- Under the advocacy activity on women's reproductive health and rights, various types of meetings, interaction programmes, district level and ward level workshops and rallies were organized in various targeted areas. About 3000 community people and local leaders were sensitized on reproductive health and rights issues.
- One of the focused areas of this programme is to enhance the capacity of community people to deal with the issues of women's health, gender- based violence and discriminatory practices in the society. In 2005, WOREC had provided with women's health training to 566 community women, reproductive health training to 160 male

members (husbands), and adolescent health training to 277 adolescent girls. Similarly, more than 1250 members of women and youth groups were provided with orientation on women's health and gender-based violence. Altogether 43 men participated in reproductive health training.

- WHRCCs conducted review meetings on a quarterly basis. During the last one-year period, altogether 32 review meetings were organized in the WHRCCs in Udayapur.
 WHRCCs and members of WHNs participated in those meetings and reviewed activities of the previous quarter and made/improved their future work plans.
- Women's health counselors and the members of WHNs also conducted ward-level and tole-level meetings in their targeted areas. Dissemination of information about women's health networks, impact of violence on women's health, need for sending both son and daughter to school as well as conservation and use of medicinal herbs were the common agenda of such meeting. Participants of the meetings provided with positive feedback in regard to women's health programme and interaction activities.
- Throughout the year the women health counselors regularly followed up the registered cases (including previous year's as per necessary) in each WHRCC. Altogether 1520 cases were followed up. It was found that about 21% and 51% cases followed up cases were cured and improving, respectively. Details of the followed of cases in each center is presented in Table 30.
- To create mass awareness, disseminate information and facilitate sharing on issues of women's health problems, and to provide counseling and health services, WOREC in cooperation with CBOs and local women's health networks had organized two-day women health fair/camps in 14 locations of seven VDCs and one municipality of Udayapur district. Altogether 2252 local women benefited from the service provided at the women's health camp while information about women's health issues were



Chart 4. Distribution of women visiting women health camp by their caste
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provided to 3273 women in targeted areas. Brahman/Chhetri (41%), Rai/Magar/Tamang (28%) and Tharu/Danuwar (16%) were the major casts that benefited from the health service (Chart 4). Details of the health problems found among the women's who visited women health camps are presented in Table 31. Uterus prolapsed, cervicitis, gastritis were the most common problems among the women.

- More than 300 women who were identified having problems of third degree prolapsed uterus in women health resource and counseling centres were given special attention in these camps; and were verified by medical doctors. These women were referred for surgical operation in different hospitals. As many of the women suffering from third degree prolapsed case were from very poor economic status and could not afford for operation, WOREC started support for surgical operation. First batch of 25 women underwent operation and now they are quite well. Next batch of 25 women have already been selected and are going surgical operation. Regular follow up of the cases has been conducted by the ANM of WOREC.
- In Mustang, four WHRCCs provided counseling and and other support to local women. Other activities of the WHRCCs included orientation to women groups in issues of women's health; school health education; and health camps for youth groups.
- Quarterly magazine on women's health "Sayapatri" was regularly published and wodely distributed anong the targeted population groups and participants of various training.

Lessons Learned

- Women's health resource and counselling center (WHRCC) is the most essential space to be created or strengthened to address the issues of women's health at grassroots levels. It is useful for documenting, sharing, preliminary service providing and followup of women's health problems, and revealing relationship between women's health problems and socio-economic factors.
- Women's health network is the most useful association of local women's health activistis for creating awareness on health seeking behaviour among wider population of women at the grassroots level. It is also useful for advocacy against violence at local level.

Community-Based Prevention of HIV/AIDS

HIV/AIDS poses a serious threat to human civilization and development. In southeast and south Asia, this is reported to be spreading very fast. The situation is much more alarming in countries like Thailand, India and Myanmar. In Nepal, the number of people living with HIV/AIDS (PLWAs) is also reported to be increasing each year. The National AIDS Control Programme of the HMG, Nepal has reported that around 17 thousand people have already contracted HIV but it is just a tip of the iceberg. There is no need to mention that the economically active population groups with fragile defense mechanism cannot accomplish developmental programmes effectively. Thus HIV/ AIDS has a direct impact on food security and livelihoods.

In Nepal, the HIV/AIDS is most prevalent among the people indulging in commercial sex business and the people with sexually transmitted diseases (STDs). Men visiting brothels are the major agents or carriers of HIV. The risk for HIV transmission among the housewives has therefore significantly increased. Obviously, HIV/AIDS is also a gender issue.

It has been widely accepted that one strategy towards effective prevention of HIV/AIDS in Nepal would be to minimize the sexual transmission of the virus. This strategy relies primarily on dissemination of health and STDs/AIDS related information and education among wider population groups to change their sexual behavior. Women's Rehabilitation Centre has been working to prevent STDs/AIDS in rural communities employing this strategy. The concept of community-based STDs/AIDS prevention programme is to integrate STDs/AIDS-related information and education with the development education, community/women's health programme and other activities, which are implemented with the active participation of community members or groups. This model is found cost effective and more productive because the members of community groups or the peer educators conduct it in their mother tongues along with other activities. WOREC emphasizes that STDs/AIDS education should focus not only one ethnicity or community in order to prevent stigmatization with the ethnicity or community.

Accomplishments

- From the very beginning, the centre has been conducting STDs/AIDS education and training activities targeting the population groups in its working areas. In 2005, the centre conducted STDs/AIDS education programmes in all its targeted districts in an integrated way with the health and development education programmes.
- STD/AIDS education was given to the students of high schools in the targeted areas in Udayapur, Morang, Sunsari, Dhanusha, Siraha, Rupandehi and Mustang districts.

- The youth group who were provided with trainings on Traffic in Women and Children and HIV/AIDS conducted different awareness activity like days celebration, mass meeting, role play etc targeting local youth, women and community people.
- To create awareness and to give more information on HIV/AIDS, trafficking and migration to the members of youth groups altogether 17 mobile community workshops were conducted in 5 VDCs of Dhanusha district. Altogether 369 members of the local youth groups benefited from that activity.
- Sixteen orientation programmes on trafficking and HIV/AIDS were conducted for the youth, women and local teachers. Altogether 456 members of the targeted groups benefited from that activity.
- Pictorial book on HIV/AIDs was published and widely disseminated among the targeted population groups.

Lessons Learned

- Integration of HIV/AIDS related information, education and communication (IEC) with other participatory development activities is the cost effective and sustainable option.
- Youth and school students are the best peer-educators at the grassroots level.



A rally organised to mark AIDS Day, Janakpur

Peace and Development

Owing to the prevailing disparity and discriminations in socio-economic and political sphere, armed conflict between the government force and Maoist has been going on in Nepal for the last ten years. Believing that peace, human rights and equity in the access to resources and opportunities are the three essential and interrelated elements of sustainable development and social justice, WOREC has been addressing relevant issues in an integrated way. Besides other integrated programmes, WOREC has also launched Peace and Development Programme in its targeted districts.

Accomplishments

- A one-day orientation programme on the peace project was organized at central office in Kathmandu. The major focus of the orientation was on the conceptual clarity about the Peace and Development Programme and its implementation strategies at the field level. The conceptual clarity orientation was provided to the senior staffs of Udayapur, Morang, Sunsari, Siraha, Dhanusha and Kathmandu.
- WOREC has been working with over 4000 youths and thousands of women in different districts. These groups are actively involved in different developmental activities. From those community-based groups, ten youth counseling centers in Udayapur and ten in Morang were established. These centres are known as *SAHAJ Center. SAHAJ* stands for empowerment, encouragement & awareness. In 2005, altogether 30 *SAHAJ* centres were established and strengthened.
- VDC level coordination meetings were conducted in all targeted districts. Those
 interactive meetings helped to select the area for the centers as well as understand
 local community's perception on the peace building process. Altogether 354 (186
 women and 168 men) members of the local CBOs participated in those meetings.
- The counselors were provided with orientation on the peace initiative process and services to be provided by the counseling center. Coordination meetings, orientation and workshops were organized at various VDCs of the targeted districts. Altogether 583 (332 women and 251 men) participants representing local NGOs, CBOs and VDC-level community groups benefited from the orientation meetings and community workshops.
- Ten village-level Civil Society Committees (CSC) were formed and mobilized in Udayapur.
 WOREC provided orientation on peace-building process to the selected leaders of CSCs. The CSCs organised talks on peace-building process in their respective villages.

- Youth Groups (YG) organised street drama, community workshop, and rally to promote grassroots initiative for restoration of peace in Dhanusha, Udayapur and Morang districts. Altogether 30 YGs were mobilized in such activities.
- In 2005, WOREC provided counseling and other relevant support to seven adolescent girl victims of the armed conflict. Among them three girls have already been reintegrated with their families.

Lessons Learned

- Although counselling centres have opened up a safe space for people/women to come and share their problems, it has been a challenge so far for women to speak up and share their problems basically due to fear of retribution. An environment of trust has not quite developed, which is also a result of the armed conflict.
- Field workers have to constantly justify their work in the field to both the parties in conflict. This is because both parties blame NGO workers of supporting their enemies. This constantly disrupts the NGO work, slowing it down due to which expected timely results and outcome has suffered.

Sustainable Resource Management and Livelihoods

Bio-intensive Farming System & Livelihoods

The contribution of agricultural sector in food security, livelihood employment and national economy is substantial in Nepal. It has a significant bearing on the manufacturing and export sectors as well. However, there are a number of problems that need to be addressed within the conceptual framework of sustainable agriculture and rural development (SARD). Nearly 70 percent of croplands do not have irrigation facilities in Nepal. The availability of agricultural inputs and technology, and the access of the small and marginalized farm households to food producing resources may contribute in raising agricultural productivity and attaining food security. Moreover, agricultural research and extension are not appropriately addressing the problems of small farmers, which, in fact, represent the mainstream agriculture in Nepal.

The following factors have been precipitating a deep sense of displacement among the rural communities in this country:

- The socio-economic and political processes of dispossession and disempowerment as well as concentration of resources in the hands of a few rich people and consequent erosion of the common property rights and privileges;
- loss of indigenous crop varieties and plant genetic resources;
- the persistently increasing insecurity of food and productive resources; and
- the increasing economic burdens in acquiring safe chemical inputs.

The success of modern agriculture has often masked significant externalities that affect ecosystem, services and human health, as well as agriculture itself. Bio-intensive farming system relies on agro-ecological principles and organic approaches to food production. While any farmer or farming system with access to sufficient inputs, knowledge and skills can produce large amount of food, most of the farmers in Nepal are not in such a position. The central issue WOREC is addressing is to what extent farmers can improve food production with cheap, low cost, locally available technologies and inputs without causing environmental damage. Organization and empowerment of farming community groups have thus been the most important component of the approach for increased food production, food security and sustainable livelihoods.

Guided by this concept, WOREC has been attempting to translate the sustainable livelihood strategy into practice by animating, empowering and mobilizing the local farming community. WOREC has been implementing this programme in Udayapur and Siraha districts in cooperation with ICCO, Holland and MISEREOR, Germany, respectively. Major activities of this programme included:

- Capacity building of local farmers
- Farmer's groups mobilization
- Establishment and management of Model Demonstration Farms
- Technical assistance to the selected farmers
- Support to community groups and progressive framers.

Accomplishments

- District level farmers network named Sustainable Agriculture Network (SAN) has been formally registered. Three-day workshop cum orientation on "organizational development" was provided to the members of the network after its registration. They are engaged to protect the rights of small farmers and promote sustainable agriculture.
- WOREC in collaboration with farmer's groups and Agriculture Development Office of the government had organized Agriculture Fair Competition at Gaighat bazaar and Saune and Khanbu VDCs of Udayapur district. The main objectives of the fair were to popularise organic farming and to motivate farmers to adopt it. Out of the total awards distributed, the farmers adopting BIF system won more than 60 percent.
- Thirty Model Demonstration Farms (MDF) have been established in Hadiya, Beltar, Jogidaga, Saune, Khanbu, Rauta, Bhalayadanda and Triveni VDCs and Triyuga Municipality of Udayapur, and Bastipur, Govindapur and Padariya VDCs of Siraha districts. The Progressive Farmers or the Farmer's Scholars in technical association with WOREC have managed these farms. The MDFs have been developed as the resource centers or the Farmer's Field Schools (FFS), where they can learn the practical knowledge on techniques of bio-intensive farming and livestock raising. The farmers are conducting trails on mixed cropping, field optimination and suitable IPM technologies in MDFS.
- Farmers of Udayapur and Siraha districts have been preparing organic fertilizer and botanical pesticides by using locally available resources to reduce their reliance on external chemical inputs as well as environmental degradation and health hazards.
- To prepare the local trainers who can motivate their community and extend the BIF system, 10-day training of trainers (TOT) was provided to 12 progressive farmers of Udayapur. Now they are organizing framer's field schools right in their farms.
- An interaction was conducted on the topic "Effect of conflict and violence on livelihoods". It was organized with more than 10 farmer's groups.



Mushroom grown by local farmers, Udayapur

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A farmer scholar working in his MDF

• To create the forum for writing/ collecting farmer's experience and to inform about new technology, WOREC Udayapur has started publishing a by-monthly magazine -Farmers' Voice (*Krishak Aawaj*).

• Since WOREC has been promoting the biointensive farming system, soil test are done annualy to assess the change in nutrient content level and soil organic matter In 2005, 18 samples were collected from

Model Demonstration Farms (MDF) and tested in Soil Science Division, Regional Training Center, Jhumka, Sunsari. The report has show that the nutrient content and organic matter in the soil of MDFshas been increasing gradually.

- Musahar (Sada) is the most marginalized community of southern east part of Nepal. To bring them in income generation activities 23 families were provided with swine in Jogidaha VDC and Triyuga Municipality of Udayapur district. Similarly, 7 farmer's groups, 2 youth groups and 8 women's groups were financially supported to initiate commercial organic farming and other allied income generation activities in Siraha districts.
- A number of IEC materials compost making, crops and livestock farming were published and disseminated among the targeted farmers, youth, students and participants of training. 28 Musahar households are providing with an opportunity to engage in collective organic farming employing BIF system approach. All of them were provided with appropriate trainifn, orientation and exposure.
- Model demonstration farms managed by the farmers on their own land are serving the purpose of action research and participatory extension to promote sustainable approach of bio-intensive farming system and livelihood.

Lessons Learned

- Local farmers are encouraged to adopt organic agriculture (BIFS) due to its positive impacts on soil fertility, human health and environment.
- Farmar's scholars are learning to formulate effective combination of botanicals for integrated pest management. It shows that local farmers are capable of addressing the issues of ecological degration and livelihoods, if provided with useful and effective options with necessary support.

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Micro-Enterprise Promotion

The micro-enterprise development is the key factor that needs immediate attention for community development through optimum utilization of the local resources, eco-friendly traditional technology and experience. Such activities include appropriate technical skill training and marketing management. WOREC has been implementing micro-enterprise development projects in Udayapur districts for the last ten years. Recently, the centre has started such activity in Dhanusha and Siraha districts as well. Knitting, tailoring, *Dhaka* cloth weaving, herbal garden management, production of medicinal herbs, etc. are the activities promoted by WOREC as micro-enterprise for the rural women and girls who are at-risk for and who survived trafficking

Accomplishments

- Last year the enterprise promotion activity of WOREC was handed over to the Local Women's group named Srijanshil. With the help of WOREC the group has continued *Dhaka* weaving cottage enterprize. WOREC had also provided knitting training to the members of that women's group.
- In 2005, WOREC provided with different skill development training like knitting, tailoring, weaving, file making to the members of youth groups and women's groups in Udayapur, Dhanusha and Siraha districts.
- The community groups in the targeted areas of WOREC have continued their saving and credit schemes.
- Srijanshil Women's Group has expanded the area of herbal farm, which is about 2.5 hectare. The group has already planted more than 30 species of medicinal plants in that herbal farm. The group is producing medicinal herbs for local women and other population groups. The group is thus generating some income for the its activities.

Lessons Learned

 Small enterprises like knitting and tailoring have been facing challenge due to globalization of market economy as they can not compete with the cheap and better readymade goods. Obviously, other enterprises with better income generation options should be sought for economic empowerment and livelihoods of the marginalized population groups in rural areas.



Participants of a training on herbal medicine preparation, Udayapur

Research, Publication and Documentation

Research

In 2005, WOREC accomplished program-based research on the following topics:

- 1. Women's Reproductive Health Situation in Eastern Terai Nepal by Min Basnet,
- 2. Status of the Female Migrant Workers Working in Informal Sector A Baseline Survey - by Babu Ram Gautam, Jyoti Regmi, Bimala Puri
- 3. Standing Up Against The Status Quo : Impact evaluation of the programme "Prevention of Violence against women and children through youth mobilization and empowerment" - by Madhusudan Subedi and Retika Rajbhandari.
- 4. Rapid Assessment of Pre-departure Programmes in SAARC, Indonesia and Philipines by Binayak Rajbhandari and Pramita Bhushan Dhungana.
- 5. Impact Assessment of Mobile workshop Action research by Parbati Basnet.
- 6. Impact Assessment of Community Radio Programme by Parbati Basnet.
- 7. Role of Women in Household and Societal Decision Making Process in Udayapur, An Action Research by - Sushil Thapa.
- 8. Mid-term Evaluation of Collective Empowerment and Sustainable Community Development in Siraha District by Madhusudan Sharma Subedi & Netra Bhandari, 2005
- 9. Rapid Appraisal of WOREC's Community-Based Programmes in Udayapur District by Kailash N. Pyakuryal-Ph.D.

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Publications

List of publications of WOREC in 2005 is presented below.

Table 32. WOREC's Publications 2005

| 1 | Cheli ko Byatha : a quarterly magazine against traffic in women and children ed. Dr Binayak P. Rajbhandari (in Nepali) | Quarterly |
|----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|
| 2 | Batika : a quarterly magazine against traffic in women and children ed. Dr Binayak P. Rajbhandari (in Nepali) | Quarterly |
| 3 | Sayapatri : a quarterly magazine against traffic in women and children ed. Dr Binayak P. Rajbhandari (in Nepali) | Quarterly |
| 4 | Insight : Half yearly magazine against traffic in women and children ed. Dr Binayak P. Rajbhandari (in English) | Half yearly |
| 5 | WOREC Newsletter : Half yearly newsletter ed. Dr. Binayak P. Rajbhandari (In English) | Half yearly |
| 6 | Standing up against the status quo : Impact Evaluation of program "Prevention of Violence against Women and Children through Youth Mobilization and Empowerment" : Research Report compiled by Madhusudan Subedi and Retika Rajbhandari ed. Dr. Binayak P. Rajbhandari. | Research Report |
| 7 | A catalogue of publications of WOREC (1992-2004) | Catalogue |
| 8 | Palungo ra chamsur kheti | Brochure |
| 9 | Biyabata Aalu Kheti | Brochure |
| 10 | Compost Mal : Ke, Kina ra Kasari | Brochure |
| 11 | WOREC : an introduction (in Nepali) | Brochure |
| 12 | Women's Reproductive Health Situation in Eastern- Terai Nepal : Research Report compiled by Min Bd. Basnet and ed. Dr. Binayak P. Rajbhandari. | Research Report |
| 13 | What is TRIPS ? TRIPS K Ho ? | Poster |
| 14 | Management of FFS and MDF (Krishak Pathashalaya tathaNamuna Pradarshani Farm Byabasthapan) : Written/Edited byDr. Binayak P. Rajbhandari(in Nepali) | Booklet |
| 15 | A brief manual of WHRD (Manab Adhikar Rakchhakharu ko Rachhathrya Samchhipta Nirdesika) | Booklet |
| 16 | Women Human Rights Defender's Movement (Mahila Manab Adhikar Rakchhakharu ko Abhiyaan) : Prepared by Dr. Renu Rajbhandari and ed. Dr. Binayak P. Rajbhandari (in Nepali) | Booklet |
| 17 | Goat Farming : A brief manual : Prepared by Sushil Thapa, Srijana Shrestha & Indira Poudel, ed. Dr. Binayak P. Rajbhandari (in Nepali) | Booklet |

| 18 | WHRD-National Campaign (Mahila Manab Adhikar | Booklet |
|----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|
| | Rakchakharu ko R astriya Abhiyan) : Prepared by Dr. Renu | |
| | Rajbhandari, ed. Dr. Binayak P. Rajbhandari (in Nepali) | |
| 19 | Violence Against Women Campaign of WOREC : For | Booklet |
| | Advocacy at the 62nd Session for UNCHR, | |
| 20 | Annual Report 2061/2062 (in Nepali) by Baburam Gautam | Report |
| 21 | A Manual for Group Mobilization (Samuha Parichalanka lagi Sahayogi Pustika) : Prepared by Ms. Parbati Basnet , ed. Dr. Binayak P. Rajbhandar i (in Nepali). | Booklet |
| 22 | Women's Health Situation in Nepal (Nepal ma Mahila Swasthya ko Sthiti ra Sudhar ka Chhetraharu): Prepared by Dr. Renu Rajbhandari , ed . Dr. Binayak P. Rajbhandari (in Nepali) | Booklet |
| 23 | Gender-Based Violence (Langik Bivedma Aadharit Himsa): Prepared by Dr. Renu Rajbhandari , ed . Dr. Binayak P. Rajbhandari (in Nepali) | Booklet |
| 24 | Building Partnership for Social Change and Justice : WOREC Annual Report 2004 : ed. Dr. Bi nayak Rajbhandari (in English) | Report |

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Documentation

WOREC has established documentation centres in its central and branch offices. Besides WOREC publications, the documentation centre has a collection of books, reports and magazines on health, human rights, law, agriculture, trafficking etc. (Chart 5).





Centre, Kathmandu

Financial Statement

WOREC favours transparency of any organization's activities and resources. It, has therefore been publishing information about its activities as well as financial expenditure from the very beginning. The audited financial statement of the Fiscal Year 2004/05 is presented in Table 33.

| Table 33. A | udited financia | l expenditure of | WOREC in | the FY | 2004/2005 |
|-------------|-----------------|------------------|----------|--------|-----------|
|-------------|-----------------|------------------|----------|--------|-----------|

| S.N | Programme | Expenditu | % | |
|-----|-----------------------------------------------------------------------------------------------------------------|------------|------------|-------|
| 1 | Advocacy and Youth Mobilization for Prevention of Violence against and Traffic in Women and HIV/AIDS | | 10,155,430 | 33.78 |
| а | Prevention and Intervention against Trafficking and Sexual Exploitation | 3,501,701 | | |
| b | Prevention of Violence against Women through Youth Mobilization and Empowerment | 2,665,402 | | |
| с | Prevention of Trafficking and HIV/AIDS through Empowerment and Mobilization of youth and Adolescent Girls | 2,665,402 | | 2 |
| d | Chhahari programme | 530,365 | | |
| е | Combating Trafficking of Women and Children | 2,682,730 | | |
| 2 | Collective Empowerment and Community Development programme | | 8,450,304 | 28.10 |
| a | Community Development Programme | 4,961,364 | | |
| b | Collective Empowerment and Sustainable Development | 2,257,133 | | |
| с | Strengthening Community-based Organizations | 1,231,807 | | 84.5 |
| 3 | Animation and Women's Health | | 3,100,709 | 10.31 |
| а | Community-based Women's Health Programme | 2,542,679 | | |
| b | Integrated programme for Women Empowerment and Health | 558,030 | | |
| 4 | Peace Initiative | | 1,374,335 | 4.57 |
| а | An attempt to campaign for peace rebuild the conflict affected communities | 1,374,335 | | |
| 5 | Early Childhood Development Programme | | 2,156,021 | 7.17 |
| а | Early Childhood Development Programme at Udayapur | 1,921,040 | | |
| b | Early Childhood Development Programme at Dang and Siraha | 234,981 | | |
| 6 | Management Support | 1,829,929 | 1,829,929 | 6.09 |
| 7 | Central Office Expenses | 3,000,598 | 3,000,598 | 9.98 |
| | Total (NRs.) | 30,067,326 | 30,067,326 | 10 |

List of the partner organizations that provided with financial assistance and other support to WOREC is presented below (Table 34).

Table 34. Programmes of WOREC and International/National Partner Organizations

| S N | Programme | District | Partner organization | Status |
|--------|-----------------------------------------------------------------------------------------------------------------|----------------------------------|----------------------------------------------------|-----------|
| 1 | Advocacy and Youth Mobilization | for Preventi | | ainst and |
| | Traffic in Women and HIV/AIDS | | | |
| а | Prevention and Intervention against Trafficking and Sexual Exploitation | Morang- Sunsari | PLAN, Nepai | Ongoing |
| b | Prevention of Violence against Women through Youth Mobilization and Empowerment | Udayapur, Morang- Sunsari | World Population Foundation, The Netherlands | Completed |
| с | Prevention of Trafficking and HIV/AIDS through Empowerment and Mobilization of Youth and Adolescent Girls | Dhanusha, Rupandehi | UNDP Regional Office, Sri Lanka | Completed |
| d | Chhahari programme | Kathmandu | ICCO, The Netherlands | Ongoing |
| е | Combating Trafficking of Women and Children | Dhanusha | The Asia Foundation, Nepal | Completed |
| 2 | Collective Empowerment and Comm | unity Develo | | |
| а | Community Development Programme | Udayapur | ICCO, The Netherlands | Ongoing |
| b | Collective Empowerment and Sustainable Development | Siraha | MISEREOR, Germany | Ongoing |
| 3 | Animation and Women's Health | - Oli al la | | |
| а | Community-based Women's Health Programme | Udayapur | The FORD Foundation, India | Ongoing |
| b | Integrated program for Women Empowerment and Health | Mustang | AEI, Luxembourg | Ongoing |
| 4 | Peace Initiative | 1 | | |
| | | Udayapur, Morang, Sunsari, | | Ongoing |
| a | An attempt to campaign for peace rebuild the conflict affected communities | Dhanusha & Siraha | MISEREOR, Germany | |
| a 5 | Early Childhood Development Progra | | | 1 |
| a | Early Childhood Development Programme at Udayapur | Udayapur | AEI, Luxembourg | Ongoing |
| b | Early Childhood Development Programme at Dang and Siraha | Dang,Siraha | AEI, Luxembourg | Ongoing |

Table 2. WOREC's programme coverage in targeted districts

| S.N. | Districts | No. of VDCs | No. of Municipality |
|----------|-----------|----------------|------------------------|
| 1 | Morang | . 29 | 1 |
| 2 | Sunsari | 18 | 2 |
| 3 | Udayapur | 13 | 1 |
| 4 | Siraha | 3 | 1 |
| 5 | Dhanusha | 19 | 1 |
| 6 | Mustang | 3 | - |
| 7 | Rupandehi | 5 | - |
| 8 | Dang | 5 | |
| 9 | Kathmandu | - | 1 |
| 011 20 B | Total | 95 | 7 |

Table 3. Literacy rate in targeted districts

WOREC

| S.N. | Districts | Literacy % |
|------|-----------|------------|
| 1 | Morang | 56.7 |
| 2 | Sunsari | 56.7 |
| 3 | Udayapur | 53.3 |
| 4 | Siraha | 40.3 |
| 5 | Dhanusha | 48.4 |
| 6 | Mustang | 51.8 |
| 7 | Rupandehi | 66.0 |

Table 4. Number of households and population in the targeted districts

| S.N. | Districts | No. of VDCs | No. of Municipality |
|-------------------------------------------------|-----------|----------------|------------------------|
| 1 | Morang | 29 | 1 |
| 2 | Sunsari | 18 | 2 |
| 3 | Udayapur | 13 | 1 |
| 4 | Siraha | 3 | 1 |
| 5 | Dhanusha | 19 | 1 |
| 6 | Mustang | 3 | - |
| 7 | Rupandehi | 5 | - |
| 8 | Dang | 5 | |
| 9 | Kathmandu | - | . 1 |
| 19-1 (19-19-19-19-19-19-19-19-19-19-19-19-19-1 | Total | 95 | 7 |

Table 5. List of staff stationed at different districts

| Sex | C. Office | Udp. | Morang/ Sunsari | Dhanusha | Siraha | Dang | Mustang | Total | % |
|--------|--------------|------|--------------------|----------|--------|------|---------|-------|-----|
| Female | 17 | 29 | 20 | 8 | 9 | 11 | 4 | 98 | 70 |
| Male | 6 | 11 | 13 | 4 | 8 | - | - | 42 | 30 |
| Total | 23 | 40 | 33 | 12 | 17 | 11 | 4 | 140 | 100 |

Table 6. Types of CGs in all targeted districts, 2005

| District | Women group | Youth group | Child group | Dalit Group* | Farmer's Group | Total |
|----------|----------------|----------------|----------------|-----------------|-------------------|-------|
| Morang | 227 | 89 | NF | NF | NF | 316 |
| Sunsari | 108 | 8 | NF | NF | NF | 116 |
| Udayapur | 199 | 120 | 71 | NF | 17 | 407 |
| Dhanusha | 95 | 143 | 1 | NF | NF | 239 |
| Siraha | 35* | 8 | 8 | 24 | 4 | 79 |
| Mustang | 17 | 7 | 7 | NF | NF | 31 |
| Total | 681 | 375 | 87 | 24 | 21 | 1188 |

NF= not formed

WOREC

Table 7. Types and number of federations in all targeted districts, 2005

| District | Women DDC Fed. | Women VDC Fed. | Youth DDC Fed. | Youth VDC Fed. | WHN | Farmer's DDC Fed. | Dalit DDC Network | Total |
|----------|----------------------|-------------------|----------------------|----------------------|-----|-------------------------|-------------------------|-------|
| Morang | 1 | 29 | - | 10 | - | - | | 40 |
| Sunsari | 1 | 13 | - | 2 | - | - | | 16 |
| Udayapur | 1 | 10 | 1 | 10 | 9 | 1 | 1 | 33 |
| Dhanusha | - | 10 | - | 19 | - | - | | 29 |
| Siraha | - | 3 | - | - | 1 | - | | 4 |
| | | (mixed) | | | | | | |
| Total | 3 | 65 | 1 | 41 | 10 | 1 | 1 | 122 |

Table 8. Number of members of various community groups functioning in thetargeted districts, 2005

| District | Women group | Youth group | Child group | Dalit Group | Farmer's Group | Total |
|----------|----------------|----------------|----------------|----------------|-------------------|-------|
| Morang | 3700 | 1225 | NF | NF | NF | 4925 |
| Sunsari | 3024 | 103 | NF | NF | NF | 3127 |
| Udayapur | 3188 | 1618 | 131 | NF | 213 | 5150 |
| Dhanusha | 1505 | 2177 | 17 | NF | NF | 3699 |
| Siraha | 703 | 96 | 119 | 343 | 56 | 1317 |
| Mustang | 401 | 208 | 99 | NF | NF | 708 |
| Total | 12521 | - 5427 | 366 | 343 | 269 | 18926 |

NF= not formed

Table 9. List of the training on animation and development with location andnumber of the participants, 2005

| S.N | Training (days) | Location | Participants |
|-----|---------------------------------------------------------------------------------------|-----------------------------------------------------|-----------------------------------------------------------------------------|
| 1. | Training on Advocacy (5-day) | Rajabas | 60 members from CBOs |
| 2. | Gender Training (3-day) | Rajabas | 60 (30 members each from Community forestry & Consumer's committee) |
| 3. | Refresher training on organization management and account management (3-day) | Rajabas | 20 members from 4 old CBOs |
| 4. | Training on proposal and report writing (5-day) | Rajabas | 25 members from 9 different CBOs |
| 5. | Training on women rights (Geneva Convention) 3-day | Rajabas | 25+25 members and staffs from CBOs |
| 6. | Training on leadership development and teem formation (5-day) | Rajabas | 25 members from new CBOs |
| 7. | Training on self awareness and team building (3-day) | 4 different working areas | 60 members from 15 women groups |
| 8. | Leadership development training (3-day) | 7 different working areas | 119 members from 17 women groups |
| 9. | Training on pre- cooperative education (3-day) | Bhalayadanda | 25 members of the women groups |
| 10. | Skill development training (knitting & tailoring) 6- month | Jogidaha and Chaukibari | 83 members of the women groups (20+ 22) knitting (20+21) tailoring |
| 11. | Animation training (3-day) | Siraha | 572 members of CGs (16 times) |
| 12. | Training on Development Education (10-day) | Siraha | 20 (3 F & 17 M) |
| 13. | Institutional development training for Sada network (3-day) | Rajabas | 11 members of the Sada network |
| 14. | Self-awareness training | Udayapur (municipalty-3 and 6; Jogidaha-2 and | 220 both male and female members from 11 different groups |
| 8 m | | 5; Katari-1 and 8; and Sundarpur-2 and 5) | |
| 15. | Leadership development & group management training (3-day) | | |



Table 10. List of the training on youth empowerment with location and number of the participants, 2005

| S. N | Training (days) | Location | Participants |
|---------|-----------------------------------------------------------------------------------------------|----------|---------------------------------------------------------------------------------|
| 1 | Leadership and institutional dev for youth (4-day) | Janakpur | 25 (15 F & 10 M) members of youth groups |
| 2 | Training on public advocacy (3-day) | Janakpur | 24 (12 F & 12 M) members of youth groups from 5 VDCs |
| 3 | TOT to youths (7-day) | Janakpur | 20 (6 F & 14 M) members of youth groups from 5 VDCs of Udayapur and Janakpur |
| 4 | Training on street play (5- day) | Janakpur | 34 (15 F & 19 M) members of youth groups |
| 5 | Fabric painting training (3-day) | Janakpur | 12 women |
| 6 | Training on institutional development (4-day) | Janakpur | 25 (14 F 7 11 M) members of youth federation |
| 7 | Skill development training on psychological counseling to the community people (10-day) | Janakpur | 22 members from Siraha and Janakpur |

Total number of participants = 162

Table 11. List of the training on child development with location and number of the participants, 2005

| S N | Training (days) | Location | Participants |
|--------|--------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|-------------------------------------------------------------------------------|
| 1 | Training on the management of Child Development Center (3-day) | Triveni, Triyuga, Rauta, Jogidaha & Handia | 88 members (55 F and 33 M) of the management committee |
| 2 | Training on monitoring and management of child development center (3-day) | Triveni, Jogidaha and Bhalayadanda | 54 Members of CBOs |
| 3 | Training/workshop on resource identification and mobilization (3-day) | Triyuga, Rauta, Triveni, Jogidaha, Bhalayadanda & working areas | 227 (120 F & 107 M) members of management committee and members of CBOs |
| 5 | Refresher training on Child Development (5-day) | Rajabas | 28 (20 F & 8 M) Teachers & Supervisors |
| 6 | Training on Nutrition for Midwives & health volunteers (3-day) | Saune | 34 (Saune:22; Municipality: 12 participants). |
| 7 | Advanced and refresher training in 2 phase (1st for Teachers, Supervisor and 2nd for Helpers) 5-day | Rajabas | 30 (25 F & 5 M) Teachers & Supervisors |
| 8 | Child rights training (5-day) | Rajabas | 12 Members of CBOs |
| 9 | Training on wall magazine publication (3-day) | Rauta, Jogidaha, Handia, Triveni & Triyuga | level Child groups |
| 10 | Training CDC Management for Helpers (7-day) | Siraha | 14 (10 F &4 M) |
| 11 | Training on Child Rights (3-day) | Siraha | 32 (3 F & 29 M) |

Table 12. List of the training on community mediation programme with location and number of the participants, 2005

| S.N | Training (days) | Location | Participants | | |
|-----|----------------------------------------------------|--------------|--------------------------------------------------------------|--|--|
| 1 | Refresher training on mediation (3-day) | Working area | 45 members from three ward level mediation committee | | |
| 2 | Refresher training on Mediation (5-day) | Rajabas | 56 members from 8 different VDC level mediation committee | | |
| 3 | Mediation training for the legal activists (7-day) | Rajabas | 25 legal activists/motivators | | |
| 4 | Training on mediation and Law (5-day) | Rajabas | 60 members from CBOs | | |
| 5 | Mediating skill development training (3-day) | Rajabas | 27 members of CBOs | | |

Total number of beneficiaries= 213

Table 13. List of the training on safe migration and prevention of trafficking with location and number of the participants, 2005

| S.N | Training (days) | Location | Participants |
|-----|------------------------------------------------------------------------------|------------------------------------------|---------------------------------------------------------------------------------|
| 1 | TOT on Human Trafficking (5-day) | Udayapur | 24 local teachers who had already undergone training on human trafficking |
| 2 | Training on safe migration (3-day) | Udayapur | 80 People of Sundarpur, Panchawati, Risku and Katari |
| 3 | Training on Conceptual clarity on Anti-trafficking (3-day) | Udayapur (10 VDCs) | 20 VDC task force |
| 4 | TOT on safe migration (5-day) | Biratnagar | 16 WOREC Staffs |
| 5 | Leadership development and institutional development training (3-day) | six different places in Biratnagar | 207 (201 F & 6 M) |
| 6 | Refresher training to VDC task force (3-day) | Biratnagar (Three times) | 86 (27 F & 59 M) |
| 7 | Advocacy training (5-day) | Biratnagar | 16 WOREC staffs (12 F & 4 M) |
| 8 | Trafficking and Safe Migration (3-day) | Siraha | 13 (6 F & 7 M) |
| 9 | Training on conceptual clarity on human trafficking, HIV/AIDS (3-Day). | Janakpur | 93 (56 F & 37 M) members of YGs of 5 VDCs. |
| 10 | Training on human trafficking for active women (5-day) | Janakpur | 37 local women leaders |
| 11 | Training on conceptual clarity on human trafficking (3- day) | Janakpur | 40 (8 F & 32 M) teachers from 19 VDCs |
| 12 | Peer education training. (1st phase) for youth (2- day) | Janakpur | 25 (12 F & 13 M) youth members |
| 13 | TOT on safe migration | Jhapa | 16 members of local NGOs |
| 14 | TOT on trafficking | Biratnagar | 19 members of local NGOs |

Table 14. List of the training on Community Health & HIV/AIDS with location and number of the participants, 2005

| S.N | Training (days) | Location | Participants |
|-----|----------------------------------------------------------------------------------|-------------|------------------------|
| 1 | Training Related to Norplant and IUD | NHACP, Teku | Two Health workers |
| 2 | Training for TBAs and FCHVs (3-month) | Udayapur | 30 women |
| 3 | Empowerment training on Women's Health to Dagrin of Sada community (3-day) | Siraha | 32 women |
| 4 | Training on Reproductive health to youth (3-day) | Siraha | 19 (2 F & 17 M) |
| 5 | Training on Gender & HIV/AIDS for youth groups (3-day) | Siraha | 20 (8 F & 12 M) |
| 6 | Training on Gender & HIV/AIDS for VHWs (3-day) | Siraha | 28 (14 F & 14 M) |
| 7 | Peer education training second phase (2- day) | Janakpur | 45 (23 F & 22 M) Twice |
| 8 | Child health (2-day) | Janakpur | 30 (5 F & 25 M) |

Total number of participants = 204

Table 15. List of the training on women's health with location and number of the participants, 2005

| S.N | Training (days) | Location | Participants |
|-----|----------------------------------------------------|--------------------------------------------------------------|--------------------------------------------------------------------------------|
| 1 | Training on reproductive health (5-Day) | Udayapur and Siraha | 35 (25 F & 10 M) |
| 2 | Women's Health Training (10-day) | Baranasi, India | 26 Counselors |
| 3 | Training on women's health (3-day) | Rajabas, Udayapur | 25 Sada Dagrin from Jogidaha, Triyuga municipality, Beltar and Sundarpur |
| 4 | Training on Reproductive Health (5-day) | Rajabas, Udayapur | 30 members from 10 VDC level network youth groups |
| 5 | Refresher training for traditional healers (3-day) | Triveni, Trijuga, Handia, Rauta, Saune and Jogidaha | 90 |
| 6 | Training on women's health (3-day) | Siraha | 23 (17 F & 6 M) |

Table 16. List of the training on peace and development with location and number of the participants, 2005

| S.N | Training (days) | Location | Participants |
|-----|----------------------------------------------------------|------------------------------------|------------------------------------------------------------|
| 1 | Peace and Development (7-day) | Janakpur | 11 youths from Dhanusha |
| 2 | Women's Human Rights (7-day) | Janakpur | 2 youths from Dhanusha |
| 3 | Advocacy training (3-day) | Janakpur | 25 members from network |
| 4 | Psycho-social and skill development training (10-day) | Biratnagar Udayapur Janakpur | 31 (Morang) 30 (Sunsari) 29 (Udayapur) 22 (Janakpur) |
| 5 | Training on conflict management (3-day) | Municipality and Jogidaha | 22 members of the women groups |
| 6 | Training on conflict management (7-day) | Kathmandu | 22 WOREC staffs |

Total number of participants = 194

Table 17. List of the training on bio-intensive farming and sustainable livelihoods with location and number of the participants, 2005

| SN | Training (days) | Location | Participants |
|-------------|-----------------------------------------------------------------------|---------------------------|----------------------------------------------------------------------------|
| 1 isdi | TOT on BIF-FFS (5-day) | Rajabas | 15 farmers of the working area who had undergone 5-day training. |
| 2 | Advocacy Training (5-day) | Rajabas | 25 members from the working committee of SAN and its general members |
| 3 | Group strengthening and leadership Development Training (5-day) | Rajabas | 25 members from farmer's group and working committee of SAN |
| 4 | IPM training (4-day) | Beltar and Deuri | 75 Farmers from Beltar and Deuri VDCs |
| 5 sdab | BIF and MDF Management Training (3-day) | Rajabas and Chaukibari | 15 farmers selected for MDF |
| 6 | NRM Training (5-day) | Rajabas | 25 members of the Farmer's group |
| 7 194/91 | Co-operative Training (7-day) | Saune, Rauta & Deuri | 25 farmers |
| 8 | Training on Seasonal Vegetable farming (2-day) | Rajabas | 40 members of women's groups |
| 9 | BIF training and model farm management (3-day) | Rajabas and Siraha | |
| 10 | Training on Off-season vegetable production (3- day) | Siraha anabio udda | 100 (25 F & 75M) 2 difeed chemowing grans T (veb-c) |
| 11 | Training on Compost and botanical pesticide preparation (3-day) | Siraha | 45 (14 F & 31 M) VSX = zheromeg to redmin late |
| 12 | Training on Nursery Management (3-day) | Siraha | 24 (10 F & 14 M) |

Total number of beneficiaries = 455



Table 18. Types of health problems among the visitors of *Chhahari* Clinic by age group, Kathmandu, 2005

| S | Types of health problems | A | Age groups of visitors | | | Total |
|------|---------------------------------------------------------------------|-------|------------------------|-------|-------|-------|
| N | | 15-20 | 21-25 | 26-30 | 31-35 | |
| 1 | White discharge & lower abdominal pain | 10 | 20 | 4 | 4 | 38 |
| 2 | ANC/Pregnancy checkup | 10 | 15 | 5 | 1 | 30 |
| 3 | Lower abdominal pain & over bleeding | | 6 | 3 | 1 | 10 |
| 4 | Urinary and Reproductive Tract infection, Unspecific Virginities | 2 | 5 | 1 | | 8 |
| 5 | Menstrual disordered | 3 | 2 | | 1 | 6 |
| 6 | Cutting by sharp weapons | 1 | 4 | | | 5 |
| 7 | Headache, gastritis | 2 | 2 | | | 4 |
| 8 | Uterus prolepses | 1 | | 1 | 1 | 3 |
| 9 | Miscellaneous | 1 | 3 | | | 4 |
| Tota | al | 30 | 57 | 14 | 7 | 108 |

Table 19. Distribution of children enrolled in child development centers by sex, Udayapur, Siraha and Dang districts, 2005

| S.No | Name of CDC | Location | # girls | # boys | Total |
|-------|---------------|-----------------------------------------------------------------------------------------------------------------|---------|--------|-------|
| Udaya | pur district: | | | | |
| 1 | Baireni | Triyuga Municipality 15 | 27 | 22 | 49 |
| 2 | Mathane Tole | Triyuga Municipality 16 | 17 | 14 | 31 |
| 3 | Chakalghat | Triyuga Municipality 12 | 14 | 22 | 36 |
| 4 | Kobai | Triyuga Municipality | 21 | 22 | 43 |
| 5 | Gairun | Triyuga Municipality | 22 | 21 | 43 |
| 6 | Utraitole | Triyuga Municipality 14 | 24 | 25 | 49 |
| 7 | Dhwanse | Bhalayadanda 9 | 26 | 17 | 43 |
| 8 | Naretar | Bhalayadanda 1 | 35 | 25 | 60 |
| 9 | Kolbote | Rauta 9 | 19 | 17 | 36 |
| 10 | Rauta Rajabas | Rauta 9 | 23 | 20 | 43 |
| 11 | Puware | Rauta 5 | 21 | 23 | 44 |
| 12 | Dumrithumka | Rauta 5 | 20 | 25 | 45 |
| 13 | Dhaplang | Saune 3 | 22 | 14 | 36 |
| 14 | Jante | Jalpa 1 | 20 | 13 | 33 |
| 15 | Gijantar | Khanbu | 8 | 17 | 25 |
| 16 | Sagarmatha | Triweni 6 | 13 | 23 | 36 |
| 17 | Janashakti | Triveni 8 | 19 | 19 | 38 |
| 18 | Sibalaya | Jogidaha 1 | 25 | 15 | 40 |
| 19 | Dinabhadri | Jogidaha 2 | 25 | 23 | 48 |
| 20 | Shiba Baba | Jogidaha 5 | 21 | 19 | 40 |
| 21 | Bhima | Hadiya | 24 | 19 | 43 |
| Total | | a constant of the second se | 446 | 415 | 861 |

| Siraha | Siraha district: | | | | | |
|-------------------|------------------------|----------------------------|----|-----|-----|--|
| 1 | Sahalesh Dinabhadri | Bastipur- 9 | 26 | 26 | 52 | |
| 2 | Phulbari | Padariya– 8, Bhatiyatol | 25 | 28 | 53 | |
| 3 | Gramin | Govindapur-3, Gramin | 23 | 27 | 50 | |
| 4 | Shiba | Govindapur-5, Manikdaha | 34 | 28 | 62 | |
| Total 108 109 217 | | | | | | |
| Dang | district: | | | | | |
| 1 | Sano Gaun | Tarigaon, Paddha 4 | 14 | 27 | 41 | |
| 2 | Thulo Gaun | Tarigaon, Paddha 4 | 15 | 25 | 40 | |
| 3. | Golauri | Tarigaon, Golauri 8 | 25 | 15 | 40 | |
| 4. | Lalmatiya | Tarigaon, Lalmatiya 4 | 17 | 18 | 35 | |
| 5. | Kwangi | Urahari, Kwangi 4 | 22 | 18 | 40 | |
| Total | | | 93 | 103 | 196 | |

Table 20. Distribution of the children enrolled in CDCs by Ethnicity, Udayapur,2005

| S.No | Caste | % |
|------|-------------------|-----|
| 1 | Magar/ Rai/Tamang | 36 |
| 2 | Danuwar/ Tharu | 25 |
| 3 | Brahman/Chhetri | 17 |
| 4 | B.K/SK/Pariyar | 12 |
| 5 | Sada/Mushahar | 10 |
| | Total | 100 |

Table 21. Number of children enrolled in local schools for formal education, Udayapur, 2005

| Dist. | VDC/Municipality | Number of children enrolled at CDC | | | | | | | |
|-----------|----------------------|---------------------------------------|-------|-------|--|--|--|--|--|
| | | Boys | Girls | Total | | | | | |
| Udayapur. | Triyuga municipality | 40 | 52 | 92 | | | | | |
| - * | Rauta VDC | 38 | 31 | 69 | | | | | |
| | Bhalayadanda | 9 | 11 | 20 | | | | | |
| | Jogidaha | 28 | 23 | 51 | | | | | |
| | Triveni | 14 | 8 | 22 | | | | | |
| | Hadiya | 7 | 10 | 17 | | | | | |
| | Saune | 7 | 4 | 11 | | | | | |
| | Jalpa | 1 | 6 | 7 | | | | | |
| - (Bear | Khanbu | 5 | 6 | 11 | | | | | |
| Total | | 149 | 151 | 300 | | | | | |



 Table 22. The number of cases registered to and resolved by community

 mediation committees in Udayapur, 2005

| SN | Municipality/VDCs | Registered | Resolved | Cases related to violence against women (%) |
|----|----------------------|------------|----------|------------------------------------------------|
| 1 | Triyuga Municipality | 49 | 49 | |
| 2 | Jalpachilaune | 1 | 1 | |
| 3 | Saune | 3 | 3 | |
| 4 | Triveni | 4 | 4 | |
| 5 | Jogidaha | 2 | 2 | 73 |
| 6 | Hadiya | 2 | 2 | |
| 7 | Rauta | 3 | 3 | |
| 8 | Bhalayadanda | 6 | 6 | |
| | Total | 70 | 70 | |

Table 23. Distribution of the patients by diseases, WOREC Clinic, Rajabas, Udayapur, 2005

| S. N | Health Problems | No. of Beneficiaries | % |
|------|-------------------------------------|----------------------|-----|
| 1 | Abdominal Pain | 120 | 5 |
| 2 | Gastritis | 109 | 5 |
| 3 | Diarrhoea/ Dysentery | 67 | 3 |
| 4 | Tuberculosis/ Chronic Bronchitis | 38 | 1 |
| 5 | Skin diseases | 388 | 16 |
| 6 | Anemia | 68 | 3 |
| 7 | Eye Problem | 54 | 2 |
| 8 | Ear Problem | 75 | 3 |
| 9 | Wound / injury /burns /bites | 276 | 12 |
| 10 | Worms | 98 | 4 |
| 11 | Reproductive Tract Infection (RTI) | 207 | 9 |
| 12 | Acute Respiratory Infection (ARI) | 237 | 10 |
| 13 | Urinary Tract Infection (UTI) | 21 | 1 |
| 14 | Pyrexia of unknown origin | 55 | 2 |
| 15 | Hypertension | 15 | 1 |
| 16 | Toothache and other oral complaints | 40 | 2 |
| 17 | Arthritis, Rheumatism and Gout | 14 | 1 |
| 18 | Hemorrhage : Ante partum | 22 | 1 |
| 19 | Typhoid | 23 | 1 |
| 20 | Other | 427 | 18 |
| | Total | 2354 | 100 |

Table 24. Number of children and women benefited by immunization services,Udayapur, 2002/2003

| S.N. | Types of vaccine | # beneficiaries | % |
|------|------------------|-----------------|-----|
| 1. | DPT/ Polio | 575 | 51 |
| 2. | TT . | 222 | 20 |
| 3. | Measles | 170 | 15 |
| 4. | BCG | 165 | 14 |
| | Total | 1132 | 100 |

Table 25. The locations and number of women's health resource centres, 2005

| District | Municipality / VDCs | # WHRCs |
|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|
| Udayapur | Triyuga Municipality (Jhilketole, Chuhade), and VDCs: Rauta (Murkuchi), Jogidaha, Laxmipur, Handiya, Triveni, Khanbu, Saune, Bhalaya danda. Jalpa, Beltar | 12 |
| Siraha | Bastipur | 1 |

Table 26. Distribution of the women visiting WHRCCs by health problems, Udayapur, 2005

| Health | · | | | | Loca | tion of | WHRC | s | (Second | | | · | Total |
|--------------------------------|------|------|----------------|------|-------|---------|-----------------|-----|----------|---------------|-----|-----|-------|
| Problems | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | - |
| Prolapsed | 36 | 39 | 16 | 32 | 30 | 52 | 72 | 41 | 32 | 78 | 12 | 13 | 453 |
| Uterus Menstrual | 6 | 20 | 27 | 8 | 10 | 15 | 25 | 13 | 17 | 16 | 19 | 12 | 188 |
| disorder White discharge | 11 | 23 | 8 | 14 | 9 | 21 | 23 | 13 | 15 | 9 | 10 | 14 | 170 |
| Lower abdominal pain | 13 | 10 | 13 | 9 | 7 | 13 | 21 | 11 | 17 | 10 | 8 | 4 | 136 |
| Wound in uterus | 12 | 17 | 4 | 11 | 6 | 18 | 22 | 14 | 4 | 11 | 9 | 7 | 135 |
| Anaemia | 1000 | 4 | - | 2 | 5 | 4 | 3 | 1 | 3 | - 100 T | 2 | - | 24 |
| Upper abdominal pain | 12 | 8 | 11 | 5 | 1 | 21 | 32 | - | 7 | 12 | 3 | 6 | 118 |
| Loosing Appetite | 4 | 8 | | 1 | 2 | 16 | 8 | 5 | 10 | 3 | | 3 | 60 |
| Vaginal itching | 5 | 11 | 12 | 6 | 3 | 19 | 10 | 4 | | 5 | 8 | - | 83 |
| Pain with swollen body | 6 | 9 | * <u>-</u> | 4 | 2 | 13 | 5 | 7 | 6 | | 2 | 5 | 59 |
| Feeling | 9 | 13 | 6 | 6 | 2 | 10 | 8 | - | 6 | 7 | 5 | | 72 |
| Burning urination | 6 | 11 | 4 | 2 | - | 16 | 7 | | 5 | 7 | 10 | - 7 | 75 |
| Body ache | 5 | 14 | | 4 | 2 | 13 | 5 | 4 | | 6 | 3 | 7 | 63 |
| Pregnant | 11 | 19 | | 10 | 8 | 12 | 6 | 5 | 9 | 8 | 5 | 4 | 97 |
| Infertility | | 1 | - 11 | · | 1 | | 3 | | | 1 | | | 6 |
| Mental | 8 | 1945 | 94 97 5 | 5.45 | S(2) | 1 | 1992 - 1 | 245 | - 1 | ke sta sen | 1 | 1 | 9 |
| Swollen Vagina | 7 | 9 | | 3 | 3 | 12 | | 5 | 4 | 7 | 5 | 9 | 64 |
| Others | 11 | 15 | 13 | 9 | 4 | 16 | 20 | 5 | 6 | 13 | 7 | _ | |
| TOTAL | 162 | 231 | 114 | 126 | 95 | 271 | 270 | 128 | 141 | 193 | 108 | 98 | 1937 |

Note: Locations of WHRCs: 1- Jhilketole, 2 – Murkuchi, 3 – Chuhade, 4 – Jogidaha, 5 – Laxmipur, 6 – Handiya, 7 – Triveni, 8 – Khanbu, 9 – Saune, 10 – Bhalaya danda. 11-Jalpa, 12-Beltar

Table 27. Distribution of case registered in various WHRCCs by age groupUdayapur, 2005

| Age | | Location of WHRCs | | | | | | | | | | | | | |
|-----------------|-----|-------------------|-----|-----|----|-----|-----|-----|-----|-----|-----|----|------|--|--|
| group (year) | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | | | |
| 12-19 | 32 | 46 | 24 | 29 | 12 | 62 | 68 | 20 | 28 | 42 | 18 | 13 | 394 | | |
| 20-36 | 64 | 88 | 41 | 47 | 35 | 90 | 95 | 66 | 79 | 80 | 30 | 24 | 739 | | |
| 36-50 | 53 | 79 | 34 | 34 | 40 | 96 | 93 | 31 | 17 | 57 | 49 | 52 | 635 | | |
| > 51 | 13 | 18 | 15 | 16 | 8 | 23 | 14 | 17 | 12 | 13 | 11 | 9 | 169 | | |
| Total | 162 | 231 | 114 | 126 | 95 | 271 | 270 | 134 | 136 | 192 | 108 | 98 | 1937 | | |

Note: WHRCs: 1- Jhilketole, 2 –Rauta, 3 – Chuhade, 4 – Jogidaha, 5 – Partaha, 6 – Handiya, 7 – Triveni, 8 – Khanbu, 9 – Saune, 10 – Bhalaya danda., 11-Jalpa, 12-Beltar

Table 28. Distribution of Beneficiaries of the WHRCCs by Economic Condition,Udayapur, 2005

| Eco. | | Location of WHRCs | | | | | | | | | | | | |
|-----------|-----|-------------------|-----|-----|----|-----|-----|-----|-----|-----|-----|----|------|--|
| condition | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | | |
| High | 18 | 22 | 17 | 12 | 6 | 21 | 25 | 12 | 15 | 18 | 14 | 8 | 188 | |
| Middle | 63 | 117 | 58 | 78 | 30 | 103 | 116 | 57 | 78 | 106 | 43 | 38 | 887 | |
| Low | 81 | 92 | 39 | 36 | 59 | 147 | 129 | 65 | 43 | 68 | 51 | 52 | 862 | |
| Total | 162 | 231 | 114 | 126 | 95 | 271 | 270 | 134 | 136 | 192 | 108 | 98 | 1937 | |

Note: WHRCs: 1- Jhilketole, 2 – Murkuchi, 3 – Chuhade, 4 – Jogidaha, 5 – Laxmipur, 6 – Handiya, 7 – Triveni, 8 – Khanbu, 9 – Saune, 10 – Bhalaya danda. 11-Jalpa, 12-Beltar (New)

Table 29. Distribution of patients visiting the WHRCCs by ethnicity/caste, 2005

| S.N. | Ethnicity/caste | No of patients | Percentage |
|------|--------------------|----------------|------------|
| 1. | Brahmin/Chhetri | 701 | 36 |
| 2. | Danuwar/Tharu | 330 | 17 |
| 3. | B.K./S.K./ Pariyar | 144 | 7 |
| 4. | Rai/Magar/Tamang | 598 | 31 |
| 5. | Sada (Terai dalit) | 70 | 4 |
| 6. | Others | 94 | 5 |
| | Total | 1937 | 100 |

Table 30. Distribution of patients followed up by their status, Udayapur, 2005

| Location | Total # of patients followed up | Cured cases | Improving cases | Discontinued treatment |
|----------------|---------------------------------------|----------------|--------------------|---------------------------|
| Jhilke-tole | 88 | 17 | 50 | 21 |
| Murkuchi/Rauta | 217 | 55 | 80 | 82 |
| Hadiya | 328 | 152 | 127 | 49 |
| Jogidaha | 72 | 20 | 43 | 9 |
| Laxmipur | 99 | 9 | 47 | 43 |
| Chuhade | 44 | 3 | 34 | 7 |
| Khanbu | 173 | 3 | 106 | 64 |
| Triveni | 150 | 27 | 107 | 16 |
| Bhalayadanda | 117 | 13 | 70 | 34 |
| Jalpa | 27 | 2 | 8 | 17 |
| Saune | 205 | 20 | 104 | 81 |
| Total | 1520 | 321 | 776 | 423 |
| Percentage | 100 | 21 | 51 | 28 |

Table 31. Number of women visited women health fair camps by health problems Udayapur, 2005

| SN | Health Problems | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | Total# |
|----|--------------------|-----|----------------------------------------------|----------------------------------------------|----------|---------------|----------------|-----|----------|----|----|-----|-----|-------------------|-------|--------|
| 1 | Uterus | | | | | | | - 1 | | | | | | | | |
| | Prolasped : | | | | | | | | | | | | | | | |
| | l degree | 10 | 13 | 9 | 2 | | 1 | 4 | 11 | 1 | | 6 | 4 | 6 | 1 | 68 |
| | ll degree | 34 | 3 | 9 | 1 | 3 | 2 | 3 | 17 | 2 | | 12 | 7 | 11 | 44 | 148 |
| | III degree | 15 | 3 | 8 | 6 | 6 | 1 | 5 | 16 | 3 | 1 | 42 | 3 | 12 | 8 | 129 |
| 2 | ANC | 15 | 7 | 12 | 4 | 1 | + | 4 | 9 | 2 | | 20 | 18 | 20 | 12 | 124 |
| 3 | Cervicitis | 27 | 6 | 28 | 11 | 7 | 3 | 3 | 50 | 4 | 2 | 22 | 11 | 35 | 18 | 227 |
| 4 | Vaginitis | 20 | 17 | 26 | 5 | 3 | 4 | 4 | 1 | 3 | | 18 | 6 | 16 | 18 | 141 |
| 5 | Gastritis | 20 | 9 | 7 | 2 | 2 | | | 19 | 1 | 1 | 17 | 11 | 44 | 22 | 155 |
| 6 | Arthritis | 5 | 2 | 3 | | | | - | 1 | | | 7 | 1 | 1 | 4 | 24 |
| 7 | APD | 17 | 15 | 23 | 5 | 6 | | 4 | 1 | 8 | | 16 | 2 | 8 | 4 | 109 |
| 8 | Hypertension | 1 | 1 | 7 | | - | | 1 | 7 | | | 8 | 2 | 17 | 11 | 55 |
| 9 | Irregular | | | - | | | | | | | | | | | , | |
| | Mens. | 6 | 8 | 12 | 4 | 3 | | 1 | | 2 | | | 5 | 25 | 20 | 86 |
| 10 | UTI | 1 | 2 | 15 | 8 | 1 | 1 | 3 | 1 | 1 | | 3 | | 22 | | 58 |
| 11 | Asthma | 1 | 2 | | - | | - | 3 | | 1 | | | | 3 | | 10 |
| 12 | URTI | 18 | 2 | 5 | 1 | | | 1 | | | | | | | | 27 |
| 13 | Breast | | - | - | | | -+ | | | | | | 1 | | | |
| 10 | abscess | 5 | | 3 | | | 1 | | | 1 | 1 | 3 | | | | 13 |
| 14 | ENT | | | - | | | | | | | | | | | | |
| | problems | 19 | | | | | | 2 | | | | | | | 5 L | 21 |
| 15 | PID, | 8 | 9 | 24 | 5 | 5 | 1 | 2 | 27 | 2 | 1 | 44 | 41 | 67 | 50 | 286 |
| 16 | Vitamin | | 1 | | <u> </u> | | | | 1 | | | | | | , | |
| 10 | Deficiency | 8 | 5 | 40 | 4 | 3 | 2 | 3 | 4 | | 1 | 8 | 3 | 16 | 8 | 105 |
| 17 | Dysmenor- | | <u> </u> | | - | | - | | | | | | | | | |
| | rhea | 10 | 3 | 18 | | 4 | 1 | 3 | 6 | 1 | | 27 | 6 | 29 | 29 | 137 |
| 18 | Skin prob. | 5 | 2 | 3 | 1 | | 1 | | | | 1 | | | | | 12 |
| 19 | Muscular | | | <u> </u> | - | | | - | | - | | | | | | |
| 17 | pain | 2 | 10 | 15 | | - | 1 | 5 | | 3 | 1 | 1 | | | - | 36 |
| 20 | Worms | - | | | | | | | | | | 1 | | | | |
| 20 | infestation | 1 | | 4 | | 1 | _ | 1 | | 1 | | | | . कर्मना स्थित | · · · | 8 |
| 21 | DUB | 1 | - | 6 | 4 | $\frac{1}{1}$ | | 1 | 3 | | | 4 | 12 | 15 | 5 | 52 |
| 22 | Infertility | + - | 1 | Ť | + | 1 | - | 3 | <u> </u> | 2 | | | | | 14 | .7 |
| 22 | PV bleeding | 5 | 1 | 5 | 2 | 1 | - | 1 | | | 1. | | | | | 15 |
| 23 | Hernia | Ť | + | 3 | <u> </u> | 1 | | | | - | | | | | | 3 |
| 24 | Post opert. | + | - | + | + | | $\overline{1}$ | - | | + | 1 | · | | | | |
| 25 | case | 13 | | 5 | 3 | 1 | | | 2 | | | 1 | 1 | | 5 × | 25 |
| 26 | Referred | + | | - | + | | + | | | | 1- | 1 | ~ | T | | |
| 20 | cases | 5 | 3 | 2 | 2 | | 2 | 2 | 3 | 2 | | | 3 | 3 | 4 | 31 |
| 27 | Other | Ť | Ť | <u>†</u> | + | | | 1 | 1 | | | | | | 37 | |
| 2/ | cases | 2 | 9 | 22 | 5 | 2 | 1 | 2 | 20 | 2 | 1 | 8 | 20 | 41 | 6 | .140 |
| - | Total | 274 | | - | | 50 | 20 | | 198 | 42 | 8 | 266 | 156 | 39 | 264 | 225 |

Note: Locations: 1. Triyuga, 2. Khanbu, 3. Rauta 4. Bhalayadanda, 5. Jalpa, 6. Panchawati, 7. Saune, 8. Hadiya 9. Aanptar, 10. Bhutar, 11. Tribeni, 12.Jogidaha, 13. Belatr and 14. Sundarpur

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Table 31. Number of women visited women health fair camps by health problems Udayapur, 2005

| SN | Health Problems | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | Total# |
|---------------|--------------------|-----|-----|-----|------|---------|----|------|----------|----------|------------------|----------|-----------|-----------|------------|---------------|
| 1 | Uterus | | | | | | | | | | | | | 4. | in the | |
| | Prolasped : | | | 1 | 1000 | 1.12 | | 1.11 | | | 1 | (1, 2) | 1.2. | 1.5 | 17 (D) | difference of |
| | l degree | 10 | 13 | 9 | 2 | | 1 | 4 | 11 | 1 | | 6 | 4 | 6 | 1 | 68 |
| | II degree | 34 | 3 | 9 | 1 | 3 | 2 | 3 | 17 | 2 | | 12 | 7 | 11 | 44 | 148 |
| | III degree | 15 | 3 | 8 | 6 | 6 | 1 | 5 | 16 | 3 | 1 | 42 | 3 | 12 | 8 | 129 |
| 2 | ANC | 15 | 7 | 12 | 4 | 1 | | 4 | 9 | 2 | | 20 | 18 | 20 | 12 | 124 |
| 3 | Cervicitis | 27 | 6 | 28 | 11 | 7 | 3 | 3 | 50 | 4 | 2 | 22 | 11 | 35 | 18 | 227 |
| 4 | Vaginitis | 20 | 17 | 26 | 5 | 3 | 4 | 4 | 1 | 3 | 1.1 | 18 | 6 | 16 | 18 | 141 |
| 5 | Gastritis | 20 | 9 | 7 | 2 | 2 | | | 19 | 1 | 1 | 17 | 11 | 44 | 22 | 155 |
| 6 | Arthritis | 5 | 2 | 3 | 1 | | | | 1 | + | - | 7 | 1 | 1 | 4 | 24 |
| 7 | APD | 17 | 15 | 23 | 5 | 6 | | 4 | 1 | 8 | - | 16 | 2 | 8 | 4 | 109 |
| 8 | Hypertension | 1 | 1 | 7 | | | - | 1 | 7 | - | | 8 | 2 | 17 | 11 | 55 |
| 9 | Irregular | | - | | - | - | - | | - | - | | - | - | | 1 38 1 | 00 |
| | Mens. | 6 | 8 | 12 | 4 | 3 | | 1 | | 2 | | | 5 | 25 | 20 | 86 |
| 10 | UTI | 1 | 2 | 15 | 8 | 1 | 1 | 3 | 1 | 1 | 1 | 3 | | 22 | 20 | 58 |
| 11 | Asthma | 1 | 2 | | 1 | | | 3 | | 1 | | - | - | 3 | | 10 |
| 12 | URTI | 18 | 2 | 5 | 1 | | | 1 | 1 | 1 | 9 9 | | - | | (Light | 27 |
| 13 | Breast | | | | | | - | - | | + | | | | - | | 21 |
| | abscess | 5 | | 3 | | | | | | 1 | 1 | 3 | | | | 13 |
| 14 | ENT | | | | | | | | - | †- | <u> </u> | 0 | | - | 118 . | 1.1.5 |
| | problems | 19 | | | | | | 2 | | | | | | 22 | 13 3 | 21 |
| 15 | PID, | 8 | 9 | 24 | 5 | 5 | 1 | 2 | 27 | 2 | 1 | 44 | 41 | 67 | 50 | 286 |
| 16 | Vitamin | | | | | | | - | | | <u> </u> | | | 07 | 00.00 | 200 |
| | Deficiency | 8 | 5 | 40 | 4 | 3 | 2 | 3 | 4 | | 1 | 8 | 3 | 16 | 8 | 105 |
| 17 | Dysmenor- | | | | | - | - | - | <u> </u> | - | <u> </u> | | | 10 | 0 | 105 |
| | rhea | 10 | 3 | 18 | | 4 | 1 | 3 | 6 | 1 | | 27 | 6 | 29 | 29 | 137 |
| 18 | Skin prob. | 5 | 2 | 3 | 1 | | 1 | | - | <u> </u> | | 2/ | | 21 | 27 | 12 |
| 19 | Muscular | | | | | | | | | + | | | | 1.0 | | 12 |
| | pain | 2 | 10 | 15 | | | | 5 | | 3 | 1 | | | | | 36 |
| 20 | Worms | | | | | | | | | | + | | | 1 | | 30 |
| | infestation | 1 | | 4 | | 1 | | 1 | | 1 | | | - 4 | | | 8 |
| 21 | DUB | 1 | | 6 | 4 | 1 | | 1 | 3 | <u>ا</u> | $\left \right $ | 4 | 12 | 15 | 5 | 52 |
| 22 | Infertility | | 1 | | | . 1 | | 3 | - | 2 | $\left \right $ | 4 | 12 | 15 | 5 | 7 |
| 23 | PV bleeding | 5 | 1 | 5 | 2 | 1 | | 1 | | - | | | | 1. | 1991 | AC 918 996 1 |
| 24 | Hernia | | | 3 | _ | | | | - | - | | | | | 12 | 15 3 |
| 25 | Post opert. | | | | | | | | | - | | | | A. S. San | the second | 3 |
| | case | 13 | | 5 | 3 | | | | 2 | | | 1 | 1 | - 593 | 1 | .05 |
| 26 | Referred | | _ | | Ŭ, | | | | Z | - | | 1 | - | 100 | a Ar | 25 |
| | cases | 5 | 3 | 2 | 2 | | 2 | 2 | 3 | 2 | | 1 | 2 | - | and the | Vakiji I. |
| 27 | Other | - | ~ | - | 2 | | 2 | 2 | 3 | 2 | \vdash | | 3 | 3 | 4 | 31 |
| | cases | 2 | 9 | 22 | 5 | 2 | 1 | 2 | 20 | 2 | | 。 | 20 | | 1.15 | 1 |
| \rightarrow | Total | 274 | 133 | 314 | 75 | 2 50 | 20 | 61 | 198 | ∠ 42 | 8 | 8 266 | 20 156 | 41 391 | 6 264 | 140 2252 |

Note: Locations: 1. Triyuga, 2. Khanbu, 3. Rauta 4. Bhalayadanda, 5. Jalpa, 6. Panchawati, 7. Saune, 8. Hadiya 9. Aanptar, 10. Bhutar, 11. Tribeni, 12.Jogidaha, 13. Belatr and 14. Sundarpur

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Commitments...

Democratic Republic



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