

Aawaj

The Voice

"With Many Positive Memories

And Way forward"



Key Aspects for Good Practices in The Prevention of Violence, Abuse, Exploitation and Trafficking



Aawaaj Focused Program

- 1** Breaking the silence on sexual abuse and exploitation through social mobilization (working with children, youth and women network)
- 2** Establish community support mechanism (CSM) against gender based violence of children and women, working with community groups
- 3** Vocational Training, economic empowerment and Micro entrepreneurship program for marginalised community
- 4** Child Protection- Child help line, Child friendly space (interim Care, fostering, Social Integration of Children, Play activities with children, access health and education)
- 5** Temporary emergency shelter support and social integration for women and children that faced violence, abuse and exploitation
- 6** Community and family mediation for the minor degree of violence
- 7** Counseling, Care and Emergency support (psychosocial, legal, medical, education and economic support)
- 8** Advocacy and Campaigning against gender based violence, corporal punishment, child marriage and trafficking
- 9** Facilitation of local governance - Municipality and VDCs



Registration number – SKT 180/056/057, SWC – Affiliation
13616

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violence, please contact

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Foreword of President



Over the years since developing the Aawaaj which is already 17 years, I have been heartened to see the steady successes of our community support mechanism as they work toward full rights for women and children in holistic way. I have also continued to learn, teach, and write about the persistent challenges that children, youth, families, women and girls face: ending sexual violence, unequal access to rights and services, and the many other forms of gender discrimination that characterize our time. Thoughts in particular come to mind when reflecting back on what 2016 has made clear to us for women's and children rights.

First, the power of the collective, which was so strongly demonstrated every time community (women, men, parents, teachers, children and youth) came together to practice solidarity with targeted marginalized women, youth, families and children .

Women, girls, children, youth and men coming together in communities at local levels will continue to offer hope and imaginative responses to address all kind of gender based violence, discrimination and child sexual abuse. Aawaaj creates community support mechanisms against sexual and domestic violence and these support mechanisms are created at family and community level to foster a feeling of ownership against violence so that it can be institutionalized within the community. Aawaaj efforts made a huge difference in the lives of children and women by mobilizing and activating the existing forums, local groups, and through effective networking. Social mobilization has been proven an effective vehicle to prompt action and to establish social respect and dignity for the children and women who faced sexual and domestic violence.

Aawaaj is one of the most significant sources of support for children and women ensuring justice at grassroots level in MidwestNepal. We believe that it is a crucial time to make sure that Aawaaj can continue to be there for groups working toward the goal of every child, woman and girl being strong, safe, powerful, and heard. As an organization there are great challenges to meet

the increasing demand to respond services against gender based violence, child sexual abuse and trafficking with given limited resources. We urge all the partners to allocate more resources for the prevention and respond the services and seek commitment of concern authorities to ensure that program results will be sustained as much as possible throughout the program and focused on strengthening local capacity so that results are sustained.

Let us be there for the courageous children, parents, youth, women and men who are making change on the ground, often taking great personal risks and have strength. It is crucial to acknowledge and be grateful to all those people and without whose voices, courage, presence, and efforts, the collective would not have been one. I am looking forward for all of your positive response and support to make this Aawaaj successful. Thanks for all international, national and local partners, individuals, volunteers, dedicated executive board members, staff, and general members who supported Aawaaj from the beginning and stand for your solidarity.

Thank you for making a generous year-2016. Please know that your support allow us to reach more children, parents, youth, women and girls working for a better, safer future. Hope we learn to grow in strength, resilience, and collectiveness in the year ahead.

With warm wishes and much appreciation,

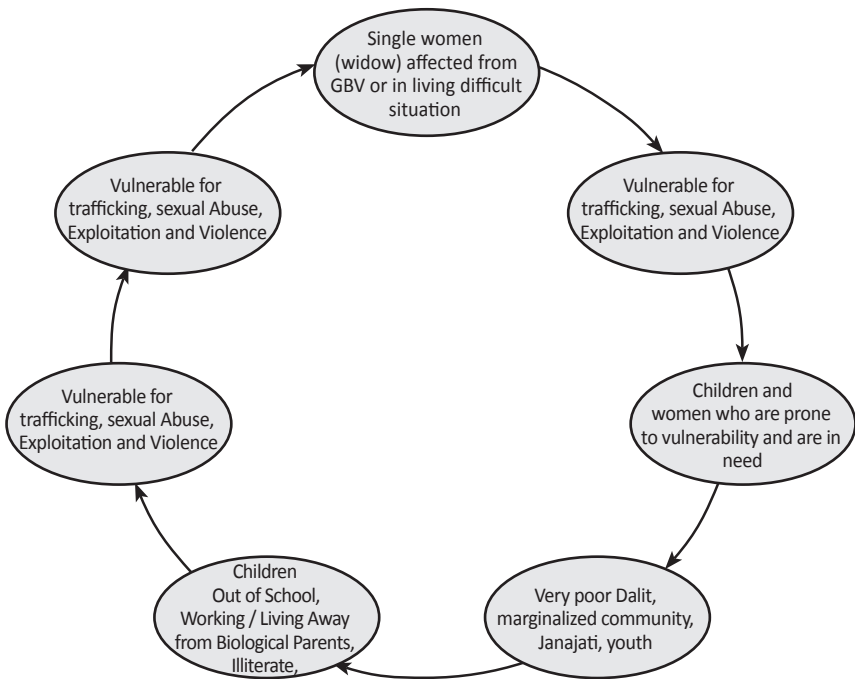
Irada Gautam

Founder chair and President
Aawaaj

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Target Beneficiaries



Background of Aawaaj

Aawaaj was established in 1999 by the Irada Gautam who is the founder chair with joint initiatives of professionals with strong hope to demonstrate capacity against violence and discrimination of women in Midwest, Nepal. Aawaaj has strong presence in Mid-West and registered in district administration office, Surkhet with registration number: 180-056-057 (PAN number is 301819051). We are also affiliated to the Social Welfare Council (SWC) and its number is 13616. It has been addressed all forms of gender based violence through social mobilization, campaigning, establishing community support mechanism, lobbying, advocacy, networking, training, income generation, community mediation, psycho social counseling services, educational support and operating temporary crisis shelter for severe degree of GBV victims.

Aawaaj is working with boys and men along with girls and women to prepare better manhood and socialized against such wrong behavior as problems of violence that mostly comes from boys and men at large. It focused on three important aspects of human rights “Safe, Strong and Free.” Everyone has these rights and they are indispensable for human life. The basic and the most effective tricky ways of protecting rights are “Say No”; “Go Away” and “Talk to someone”. CRC and CEDAW are the guiding principles of Aawaaj for the policies, practices and programs related to fight against the violence. Aawaaj is the voices of those women and children who are living with violence, vulnerability and at risk, and who have no access in social and legal justice. Aawaaj used the concept of resilience to open new paths for the prevention and response against violence and discrimination. Girls and women when faced devastating trauma and adversity how they are able to develop their inner capacity in a harmonious and positive way? This question is at the starting point of work. Aawaaj is facilitating Rural Communities to Combat the Violence and Discrimination of Children and Women. Despite all adversities children and women didn't lose hopes and started fighting with the abuse, violence, discrimination and exploitation. Now more than 500 change makers are actively involved in helping others at community.

Aawaaj has developed a very good relationship with the local stakeholders since last 17 years. The active participation and networking of local groups, stakeholders, and communities are consulted and take consensus before doing any program. These groups are strengthened and their interest are

respected and ensured the smooth running of program. We are sensitive with vulnerable group and seek the values of their participation throughout the process while at the same time explain the benefit for them. The focus will be brought back to the main issue of violence free society where children, girls and women feel peace through positive dialogue with police administration, district child welfare board, health personnel, legal authorities, municipal body, district development committee, political leaders and teachers in non-violent way.

It has capacity for a social change. Staffs are competent to build, maintain networks and to work in collaboration with government authorities, local groups and communities. Aawaaj has always been mainstreaming gender equality and social inclusion in its programs keep gender disaggregated data of our beneficiaries and stakeholders. Our organization team has been led by the representation of women, (90%) and 10 % is men.

At Midwest regional level we are coordinating women human rights defenders, also played secretarial role for 2nd election of constitutional assembly in Surkhet, and member of various human rights alliance. At national level, we are member of national child protection alliance, AATWIN, Women security pressure group, campaign for rights network. At regional level; Aawaaj is member of we can campaign of south Asia and globally Aawaaj is also member of global alliance against trafficking and network member of child sexual abuse.

The decision around strategy and program development is the product of beneficiaries, stakeholders and actually reflected by social audit, general assembly, monitoring visit and program evaluation. Aawaaj acts merely as a facilitator in the process of project implementation and developing the capacity in the management of violence at all levels to effectively monitor and manage the violence (not only identifying cases). We believe that every member of community can be an active change agent in process and encourage them to fulfill their responsibilities on social issues.

Aawaaj has been focused on education, health, child rights, women rights, child protection, and livelihoods through community empowerment programs. Aawaaj mobilize communities to ensure access justice, and quality of services in package i.e. health, education, and livelihoods. Likewise, Aawaaj ensure that children and women are protected against all forms of discrimination, violence, abuse and harmful practices by creating awareness, strengthening systems and mechanisms at the community level, district level and do advocacy for better policies to protect child rights and women rights.

Aawaaj facilitate to access government services easily and also strengthen and enhance the capacity of citizen especially the marginalized, vulnerable, Dalit, ethnic and women to ensure easy and equitable access in public good and services. Aawaaj believes that ensuring engagement with communities and among parents will lead to better health, education and violence free society. If you have social hearts then please join our mission, we salute and admired everyone co-operation. If you would like to make your contributions in these efforts, please donate us;

Account Name : Aawaaj

Account Number : 002 00631960013 , Current Account

Bank Address : Himalayan Bank Limited, Maharajgunj, Kathmandu, Nepal

Swift Code : Himan

Forms of GBV and Services Provided

Aawaaj Surkhet 2016

Forms of Gender Based Violence (GBV) Registered
from Jan to December 2016

year	Rape	Sexual assault	Physical assault	Force marriage	Denial of resources opportunity or services	Psychological/emotional abuse	Trafficking	Polygamy	Harmful traditional Practices (Blame as witch)	Child Marriage	Divorce	Total
2016	8	4	56		18	112	6	22	3	1	20	250

Services provided from Jan to December 2016,Aawaaj Surkhet

Year	Psycho Social Counseling	Mediation	Medical Support	Transportation, Economic Support	Application Writing	Legal Support Women	Case Register in Court	Women	Girls	Boys	Case Preparation	Referral Reintegration	Scholarship	Total Services
2016	154	25	15	47	64	16	8	49	48	37	8	88	67	663

Progress of Child Helpline Information

Aawaaj Surkhet
Child-Helpline Number 1098, Nepal
Fiscal Year (2016)

S.N.	Main Program Activities under Child-Helpline Number	Total progress		
		Boys	Girls	Total
1	Operation and management support to Child Help Line Number 1098	17	57	74
2	Psychosocial counseling	39	84	123
3	Temporary Shelter Support	11	37	48
4	Legal Support	2	15	17
5	Emergency rescue, protection and reintegration to violence, abuse and misbehavior faced by children	8	21	29
	Total	77	214	291

Screening Camp of Pelvic Organ Prolapsed Diagnosis (POP)

District	Year	1st Degree	2nd Degree	3rd Degree	Total Check Up
Surkhet	2016	6	10	5	164
Bardiya		26	20	8	271



Section A

Detail Program Achievements

- 1. Facilitation of protecting mechanism and access to justice through Prevention and Response on Early Child Marriage, Corporal Punishment and violence against children and women in Surkhet Midwest Nepal. Aawaaj has been worked in partnership with TDH Germany with support of AEILuxumburg**
- 1. Mass awareness / Campaign / social mobilization with youth, children, parents, women groups and Networks in Salkot and Babiyachaur VDCs. Total 54 groups are mobilized.**
 - 1.1 Interaction with school teachers school management /parent association committee for child friendly learning environment and on how we can prevent early child marriage and corporal punishment
 - 1.2 Street drama, Radio program /jingle broadcasting from regional radio Nepal mostly views of children who faced abuse, violence, CP and early marriage
 - 1.3 IEC materials Pamphlet, leaflet, posters, hoarding board, Cultural program , talk show focused on early child marriage and corporal punishment,
 - 1.4 child help line management and information
 - 1.5 Establish 2 Child-Friendly Spaces (CFS) in marginalized communities
 - 1.6 16 days campaign focused on early child marriage and corporal punishment

Results:

- Understand local situation of violence, early child marriage and corporal punishment its trend, why and how they children affected. We understand we can play vital role and form immediate actions group to end violence, child marriage and CP related behaviors at school, household and community level.
- Empower, sensitize teachers, students and mobilize children, women, youth, communities and influence duty bearers to report and respond violence, early child marriage and corporal punishment in 2 VDCs of Surkhet rural mid-west
- Beneficiaries work as change agents and sensitize on the issues.

- Reporting, listening, make immediate emotional support for children and women who have gone through corporal punishment, early child marriage
- Children and women receive appropriate support services at the family and community levels.
- Participants aware on a) benefit of delay marriage and b) their impacts on their own life C) sampled interaction & mass awareness participants agree that abuse, violence, child marriage and corporal punishment is not a private matter and must be reported and punished according to the law
- Communities are initiated for the legal process for reporting , child sexual abuse, child marriage including report to (CSM member, child club, youth club, children network, teachers, CPC members, Aawaaj, Police, DCWB), and aware on reporting detail and when to report
- Children and parents understand a) 3 importance of delaying marriage and b) 3 reasons why it is important to report of child marriage and corporal punishment
- Participants observed positive changes in the attitudes and/or behavior of their parents /peers / siblings since they joined the group
- Mass Awareness Materials are attractive, interesting and easy to understand
- Train parents association, SMC in each school are ready to fight against severe punishment in schools and make code of conducts for both teachers, parents and children and realize his/her mistake and not to repeat it again.
- Strengthen relationship between various groups, service providers and maintain protocols within school, VCPC, and district Child Protection Committee for reporting and work as watch dog and strengthen groups
- After awareness there is enabling environment and the community people take action in holistic way to support survivors by mobilizing children, youth and helped for sharing, caring to get justice in the target communities and schools.
- The group monitor, reporting and manage for the prompt response
- Children take help line and access for counseling if children face problems
- The children, youth group and its network at VDC and district level work with high motivation and taking ownership of the project

2. Capacity Building Training

- 2.1 Staff orientation, planning and review meeting
- 2.2 Child friendly learning and counseling training to school teachers, CFS facilitators
- 2.3 Future goal setting training to adolescent girls and boys has done.

Results:

- Concern staff understand the project concept, process, and implement smoothly
- After receiving temporary and legal services ; beneficiaries report satisfaction with a) attitude and treatment of staff and b) quality of services
- CFS facilitators are more sensitive for reporting, listening, make immediate emotional support for children and teachers value the child friendly learning.
- Aware on consequences of early child marriage, corporal punishment such as non-violent teaching, on alternatives ways and use the media to make the public aware.
- Monthly review, planning with staff help for sharing experiences and changing strategies as per need and situation
- Targeted group and communities, rights-holders and their supporters actively engaged in promoting awareness and create support mechanism for children.
- Survivors, families, stakeholders and concerned community members are willing to take a public stance against violence, early child marriage, and corporal punishment
- Three days future goal setting training to adolescent girls and boys was organized for 77 participants (38 girls and 39 boys) . They are from 4 schools, child network and child group.

3. Management and respond to children and women affected from violence:

- 3.1 Rescue, recovery and reintegration, Family and Community Mediation
- 3.2 Economic support to parents and youth, education support to children
- 3.3 Temporary shelter support (food, shelter, utilities, transportation, medicine)
- 3.4 Legal counseling and Legal Services support to survivors and their follow up

Results:

- 60 Vulnerable children have improved access and quality of educational recreational services and their families are less arguing and more supportive to children
- Rights-holders and related stakeholders take collective action and started reporting
- Survivors are willing and able to access counseling services and legal services
- Survivors of early child marriage and corporal punishment have improved emotional, social, and family functioning and able to join support groups
- Survivors support group of children are effective for the referral, mediation, emotional support, advocacy and for the solidarity of early child marriage
- Children and youth demonstrate at least 3 improvements in their family functioning (e.g. are able protect themselves/children, pay more attention to their family, are able to make decisions about themselves, children and families,)
- Parents/children receiving mediation services, improved attitudes and behaviors towards each other after completing mediation (e.g. listening, respect,
- Children do a) complete daily homework, b) achieve 80% school attendance c) pass final school exams d) explain ways of delaying marriage and safety measures
- CFS children regularly joining extra-curricular activities and can describe 3 ways that they have benefited from their activities
- 100% of drop-out/unschooled children receiving scholarships have 80% school attendance and ensure safety.
- 29 children were rescued and reintegration in coordination with DCWB
- 18 child clubs were formed and reformed in 2 VDCs. 375 (219 girls and 156 boys) children are affiliated in groups. Children started monthly meetings, discussed on child rights, child marriage and trafficking.
- 65 marginalized children (35 in Babiyachaur and 30 in Salkot) are regularly attending CFS that contributed for regular school of children, children are aware on child rights, domestic violence, and trafficking and child marriage.

- After family mediation its easy to do social integration and facilitate beneficiaries to work as change agents and sensitize on the issues.
- Increase children enrolment and retention in school and have safe place to meet and share consequences and skills to deal with the challenges, take normal life.
- They bring positive feelings and build up self-confidence, self-esteem, self-respect and continue education.
- Marginalized populations have reduced vulnerability via increased social, educational and economic resources

4. Meeting, Interaction and Discussion with duty bearers

- 4.1 District level program induction and progress sharing
- 4.2 VDC level interaction with VCPC and quick meeting to respond if child marriage and corporal punishment happen
- 4.3 District level interaction with DCWB, DCPC , DEO, DDC, WCDO, NGOs
- 4.4 Monitoring by DDC, DEO, WCDO, and line agencies

Results:

- Key stakeholders demonstrate positive attitudes and practices related to the prevention, reporting, rescue and reintegration of children and women
- Mainstreaming issues with Key Duty-Bearers and local authorities
- Duty bearers are active and fulfilling their responsibilities to rights-holders.
- Local duty-bearers develop improved mechanism / policies to stop corporal punishment and for the prevention of child marriage and services to benefit
- Its easy to integrate within a development plan of district development plan and with participation and empowerment of communities in mass awareness.
- Good Co-ordination & Collaboration with authorities and increase ownership, easy to linkages with government (DEO, DHO, DDC, Police, women and children office, doctors, Lawyers, district court) for prompt action.
- The Local government, all political parties at VDC, and related stakeholders work with high motivation and taking ownership of the project
- Child Protection Committee are formed at schools and engaged against corporal punishment and early child marriage.

- DCPC mandates and procedures have been developed to respond all forms of abuse and exploitation, including child marriage and corporal punishment.
- 80% of members are in school and allow CPCs are operated
- Duty-bearers, service providers, leaders are sensitive and responsive to the needs and demands of survivors.

2. Counseling:

Aawaaj has been providing counseling care and support to people who are in need especially to violence survivor, vulnerable women and children. Aawaaj has an experienced and trained counselor who provides counseling to the sufferers of violence hence helping to build their self-confidence; self-esteem, self-respect, self-reliance and bring positive feelings in their own life and help them live in the society with dignity.

Working Strategies that we believe and Important for the Positive Impact to Survivors

1. Respect and Dignity

- To find their own identity, aware on self-respect - I have full right over my body, its not my fault, I am not alone- drawing
- Active Listening in a way s/he feels that we are caring you
- Raising voice to get justice continuously with allies, family
- Believe what's the survivor said and understand her sense,
- Develop self-strength of survivors and able to control own rights and have decision making capacity- encourage.
- Work together; let them understand and recognize the problems; together think and explore the ways to address the problems and respect survivor's views, participation.
- Maintain confidentiality throughout the process.

2. Empowerment

- Give opportunity for skills, fun, play, song, game, dance
- Ensure her / his safety and look after short term basic needs
- Positively influence Men's and Boys who are change makers
- Give information on legal rights, women and children rights, legal procedure and services provided by Aawaaj, authorities
- Active participation in development activities through awareness, training and skills for good results

- Exploring resources for solving their own problem through linkages and Support economically self-sustained activities
- Support school fees, personal safety training/peer education and follow-up meetings to protect survivors.
- Engage to play the supportive role in community to manage and referral the affected person, monitoring and follow up of economic and education support, and identify those children and women who are living in violence and Abuse.
- Sharing feelings and problems among survivor network
- Vocational Skills training, business entrepreneurship and life skills, Job placement in local area or start self-employment

3. Participation of Survivors

- Facilitate family and community mediation and seek survivors participation for their own or while it happened to others
- Engage them at community for the immediate reporting, involve them in various awareness program, emotional support to other children and women who have similar problems
- Visit on the spot after reporting and interaction with people to whom survivor's feel important;
- Facilitate the survivors to work as change makers at community, and schools to end violence, abuse, neglect
- Creative Arts (drawing, song, dance, street drama, Events (competitions, campaign, media/press releases)

4. Partnership and Sustainability

- Working on what local resources, skills is available at community for long-term emotional and social recovery to promote protection and survival, development rights and to restore dignity of survivors
- Work with authorities for justice, Application Assistance, friends for legal process, birth registration, lobby to compensate Half salary, food and fees for children education
- Working with private sectors and their support to provide job.
- Build capacity of existing groups, Establish Support System, linkages with CSM, child group, Creating Conducive Environment through coordination and collaboration with authorities, civil society and various groups
- Support the strength of families, communities and work with them to support survivors as per need.

What we do in 1st session of counseling?

- Greetings and welcome, allow to drink water , tea
- Pre information – Name, from where it come, why they visited at Aawaaj
- Again welcome politely and emotional support in counseling room, see the situation, Rapport building, introduce each other
- Relaxation -allow to take rest, sleep,
- Listening the affected person, make immediate plan by counselor

Staff Preparation

- The place for counseling, level of sitting
- News print, colors, play materials, flip chart,
- Drinking water, emergency kit-
- Level of closeness, -talking, sitting in L shape
- Care the dress up of counselor
- Time preparation,

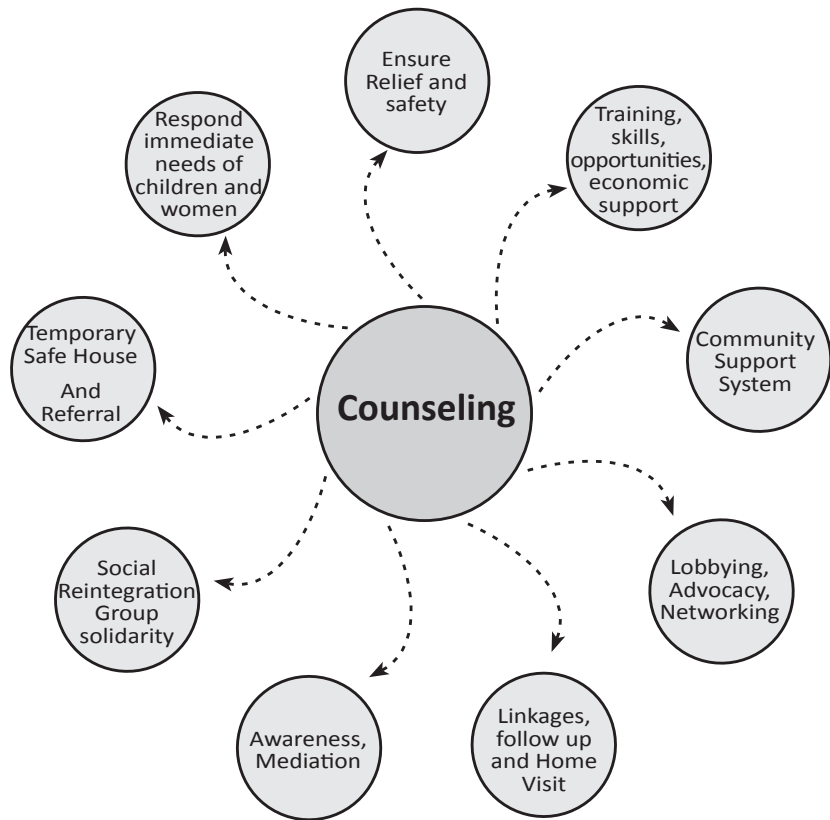
What we do not do in counseling

- Not discrimination based on caste/ ethnicity, gender, age, disability, status, geography,
- Not raising any expectation and not promising things which we can't do
- Not pressurized to give information if they are not ready and make ensure to prevent from re-victimized
- Do not disclose with their status without consent of her / his
- Not increased fear, humiliation, or sadness, not labeled, blame, guilt
- Do not ask too many questions at a time and don't show the power

Working with family

- Regular home visit, family counseling ask them not to leave children alone,
- Inform parents what to talk, what shouldn't talk and how to talk with children. Do telephone or contact in case of emergency
- Invite them in our program, training or send parents to attend meeting, workshop organized by others
- Legal information, economic support and scholarship support
- Ask them to join in network, women group, CSM

How Positive Impacts for Survivors



3. Child Helpline (1098)

Aawaaj has been operated free child helpline (1098) in Surkhet district in collaboration and with co-ordination with Ministry of women and child social welfare, central child welfare board, district child welfare board, district development committee and Nepal Tele-communication since 2010. A child helpline is a phone and outreach service for children. It is accessible to all children whenever they require assistance or just need someone to talk to. A child helpline places children and their protection as its core principle, providing emergency assistance and linking children to long term services. A child helpline is accessible to children and young people around the clock, free of cost and enables them to contact someone in any emergency situation.

It provides children and young people with an opportunity to express their concerns and talk about the issues directly affecting them. A child helpline is founded on the belief that children and young people have rights, and that they can identify their problems. Phone calls from children are received in contact centers, where helpline staff and volunteers attend to the calls.

The helpline team member will go out, meet the child and help the child to safety. The helpline will have to act immediately to get the child out of the dangerous or emergency situation and after that make sure the child is linked to the appropriate services for long term follow up.

Government of Nepal, Working Procedure of Child Helpline-2064 (2007) defines the term 'children at risk' indicate the following children.

- Street children
- Children at high risk labour
- Lost and abandoned children
- Children in bonded labour or forced labour
- Children who are victims of physical and mental torture, discrimination, exploitation of labour and misbehaviour
- Children who are suffered from severe illness, accident and disaster
- Children of arrested or imprisoned parents or children in conflict with law
- Children living under difficult situations
- Children who are victims or are prone to sexual harassment, sexual abuse and trafficking
- Children seeking psycho-social counselling.
- Children affected by armed conflict and wars
- Children who are victim of insolvency

4. “Improving Livelihood through Empowerment” at Thirpu and Ramnakot VDCs in Kalikot district , Karnali Zone, Midwestern part of Nepal:

Aawaaj has been worked in partnership with Fastenopferat Thirpu and Ramnakot VDCs of Kalikot district as these VDCs have been left aside from the different fundamental needs. Aawaaj Surkhet has taken it as the opportunity to reach to the target group in remote areas. The selected 2 VDCs are high Prevalence of gender and caste based discrimination. In the proposed district child marriage prevalence rate is very high - 47% in Kalikot, and its impact on education of girls and health is measurable. There is High infant and maternal

mortality rates due to a lack of basic health services and high malnutrition, low literacy rate, insufficient school facilities and limited access to quality education; Lack of transport facilities and road networks across the districts. There is lack of employment and high seasonal migration to India and high prevalence of HIV/AIDs among migrants. There is low agricultural productivity and poor rural infrastructure (e.g. roads, irrigation) that limits production and markets.

Since July 2014 Aawaaj has been working in very remote Village Development Committees Thirpu and Ramnakot of Kalikot district, and will continue for next 3 years. Kalikot itself falls in a very remote region geographically most of which area has been untouched by the development indicators like road, electricity, drinking water, communication facilities and other basic service. The project has been focused to enable to access basic health and education facilities and strengthen locally available natural resources like forests, water, wind, and land. The project has been implemented in an integrated approach of basic education, health, and agriculture, so that the fundamental rights of women and children can be ensured especially on improve quality of service on health, education and agriculture throughawareness,empowering couple and community awareness.

Program achievements:

- According to the reporting data from health post/ birthing centre, we found that 40% of increment in Antenatal regular checkup and among them 34 % women went in birthing center for delivery and attended for postnatal checkup as well.
- Every couple has established small kitchen garden, give attention in personal hygiene, mange dish wash place, garbage management and sanitation.
- In recent days, birthing center is establish well management and also trying to give 24 hours service after our regular meeting, discussion with staffs, management committee and technical support, now they are managing mothers to keep at least 4/5 hours after delivery.
- Couple and community people have submitted 15 proposals in VDC council that was for fruit plants purchase, health camp, awareness on early marriage / menstruation and birthing center management. They motivate own neighbor for kitchen gardening, sending children at school and regular heath checkup of pregnant women and lactating mother.
- After training and meeting with School and health post management

committee, they are doing regular meeting, trying to get more scholarship schemes for students and make rules/ policies like these; teachers and health post staffs are not allowed to take leave without permission from MC or at least need to inform. In case if they do not follow the rule, the authorized post will be bound to disagree to accept their leave and also deduct from the salary equivalent to the number of leave taken days.

- Couples' have been slowly developing their sharing and talking habit with community people and also they are introducing as the community couple in their own area (ward).

Couple Nain Bahadur Bam, Aula inhabitant of Ward no 6 Thirpu VDC, actively raised the corruption issues related to School Management Committee (SMC) and Head master which was happening since long period. With the help of couple Bam, community came to know that they were wrong and the couple got the support from community and DEO to change SMC and Headmaster. Now he has succeeded of being the president of School Management Committee. According to him, before selected as couple; he did not know what was going on and was never concerned regarding those aspects. As he was selected as couple, he started to give concern and was aware of what is wrong and what's right and in return he found that was wrong. As the chairperson of school he is regular and also encouraging students and parents to attend regular. This is one of the great achievements of couple's empowerment.



Saroti Acharya is another female couple of Ramnakot ward no 3. She shared, "before the selection as couple, I had a fear of talking directly with community men as well as own father and bother's in- law. I always used to feel shy and used to think on how to talk with them. After joining this empowerment program as couple, I had built the power and strength to talk with men and women. Now I definitely find some changes myself and can change my community too.

Learnings :

- If couples are taking ownership of program then It would be easy to work in community.

- Unless couples do not build up their self-confidence they are not ready to take responsibility of community work. So we feel that it is necessary to develop their self-confidence by doing regular interaction, meeting and monitoring their working activities in community.
- Once couple establish in community as facilitator it is easier to work them in community.
- If community people are also aware on the role of couple, community itself can watch whether they are doing work properly or not, so that couple will be function actively and honestly.
- Once couples are empowered it is easier to empower others.

Objectives of program:

1. Women and marginalized people able to represent in meaningful decision making process in community development activities and services.
2. Groups and network form/ reform/ strength
3. Promote quality of health and education services
4. promote linkage and coordination of community people with line agency

Expected results for next 3 years

- Develop the food habit to use vegetable in daily life and promote kitchen gardening on each household
- Increase representation of women in the decision making bodies of local governments, local structure like user groups and VDC council with meaning full participation
- Local governments disburse VDC target grant for the women's rights/IGA
- Women / girls and youth network are united and actively function to protect and promoting their right
- Sensitize community to reduce women work load and effect of early marriage and chaupadi
- Changing KAP of community people toward women and girls
- Women , girls, youth and boys network actively function in community
- Increase the enrollment of girls in lower and secondary school and also attend final exam 5, 8 , and 11
- SMC committee actively functioning to make teachers and student attendance regular and create girl friendly environment
- Internalize and demo code of conduct by teachers, student and school management committee

- Increase the health checkup ratio of women, Dalit and people in health post.
- women come out to share their uterus as well as STI problem and visit health post for check up
- Improve the quality of service in health and local governance system
- positive change on behavior and attitude toward meaningful women participation in different structure and as well as with services takers .

5. Prevention and management of Pelvic organ prolapsed in selected VDCs in Surkhet and Bardiya district

Aawaaj has been worked in partnership with Karuna – Shechen, USA for the implementation of the Pelvic organ prolapse program through awareness raising program since 2014 and has been continued till 2017 in 2 VDCs of Surkhet and 3 VDC in Bardiya district, Nepal.

The main Purpose of this program is early prevention and management of Pelvic organ prolapsed in selected VDCs in Surkhet and Bardiya district.

Achievements:

- Reporting of prolapsed uterus cases has increased in health center
- 70% of women had gone through health check up for uterus prolapsed and seek treatment
- Women has come out to share their reproductive health issues , uterus problems, as well as STI problem and visit health post, primary health care , hospital for health check up
- Improved linkages and coordination of community people with line agency especially health sector and improve the service in health especially to manage uterus prolapsed problems
- Local health institutions are sensitive for health services especially, prolapsed uterus problem.

The major focused activities are;

- Mass awareness with women, adolescent girls, youth, husbands, in laws, FCHV, TBA, women leaders in 3 VDC of Bardiya and 2 VDC of Surkhet
- Interaction with community people, women groups, FCHV, awareness to conduct for essential health checkup and reproductive health specially STI and uterus prolapsed.
- Rallies/Campaign Events, 16 Days activism day Against Violence, International Women's Day, TEEJ Festival focused on uterus prolapsed prevention

- Street drama performance in each VDC (3 VDC of Bardiya+2 VDC of Surkhet) focused on uterus prolapsed prevention
- All the existing group mobilization at VDC level and mainstreaming uterus prolapsed prevention and respond
- Interaction, discussion and orientation with health post management and monitoring committee and staffs
- Nutrition fair (Mela) organized for antenatal, lactating mother
- Interaction with pregnant ,delivery women, their family , husband and new married couple
- Facilitated Uterus prolapsed screening camp per year and transfer basic skills to put ring pessary and cleaning to women leaders, FCHV, TBA
- Interaction with health post, PHC, DHO, hospital duty bearers to access quality services for the women who suffered from prolapsed uterus problems

6. Strengthening local governance and community development in Surkhet

Aawaaj has been implementing LGCDP program in 15 VDCs and Birendranagarmunicipality since last 4 years in Surkhet district. The Program has brought all local actors, institutions, and local donors within a framework of network, collaboration, coordination mechanisms. The Programme envisaged to improve systems, procedures, structures, tools and capacities to improve local governance for effective service delivery and citizen empowerment. The program focuses on social mobilization, service delivery and resource mobilization, local economic development and livelihood improvement aspects. The core development principles of LGCDP II are sector-wide approach, equity, subsidiary, harmonization and alignment, participation and collaboration, sustainability and value for money.

Goal:

The overall goal of the LGCDP II is to contribute towards poverty reduction through better local governance and community development. To achieve the goal, the Program has identified local governance as an essential element which is directly linked to people in their day-to-day life. Accountable governance, quality infrastructure and efficient service delivery, public financial management, economic development and community development are major areas of the Program.

Purpose:

The purpose of the program is to improve local governance for effective service delivery and citizen empowerment. The program has adopted a framework to strengthen decentralization, devolution and accountable local

governance system which makes basic service delivery effective and efficient and empowers citizens mainly women, children and disadvantaged groups.

Program Components: LGCDP II comprises of four key components of intervention that include:

1. Citizen's empowerment (demand side improvements);
2. Service delivery and capacity development (supply side improvements);
3. Socio-economic and infrastructure development (local development)
4. Governance reform (policy).

Outcomes and Outputs:

LGCDP II has aimed to achieve four outcomes in the areas of downward accountability, (Local body) LB responsiveness, effective local services and policy strengthening. In total, there are nine outputs within the four outcome areas.

Outcome 1: Citizens and Communities hold their local governance actors accountable: In this outcome, LGCDP aims to achieve results in the areas of citizens empowerment including women, children, disadvantaged groups and their institutions through social mobilization processes. The outcome also intends to achieve results in the areas of local governance particularly holding LB accountable toward disadvantaged groups including women and children by engaging people in planning process, monitoring and oversight activities. This outcome contains two outputs

Output 1: Citizens and community organizations are empowered to participate actively and assert their rights in local governance

Output 2: Accountability mechanisms for local governance are in place

Outcome 2: Local Bodies are more responsible for citizen's demand:

On this outcome, expected result areas include: LBs become more resourceful to provide local services to the citizens, LBs increase their own resources, capacity development, formula-based fund transfer to LBs by the adoption of equitable principles on their performance measured by MCPM. Supply-driven capacity development initiatives are also emphasized aiming of improved local Public Financial Management (PFM) and reduced fiduciary risks. There are three outputs (outputs 3, 4 &5) under this outcome in the program result framework.

Output 3: LB's access to resources increased

Output 4: Public financial management system improved

Output 5: Institutional and human resource capacities of LBs and central level agencies involved in local governance strengthened

Outcome 3: All citizens are provided with efficient and effective local services: This outcome mainly aims to achieve results in the areas of improvement of services delivery of LBs for core services and improvement of development activities operating at the local level. The local services including social and infrastructure development are expected to deliver effectively and efficiently in a harmonious and integrated manner as per citizens' needs and preferences.

There are two defined outputs (outputs 6&7) contributing to this outcome.

Output 6: Access to and quality of local infrastructure and other socio-economic services administered by LBs are improved

Output 7: Strengthening integrated planning, budgeting, monitoring and evaluation and coordination amongst local governance actors

Outcome 4: Strengthened policy and institutional framework for devolution, sub-national governance, and local service delivery: Policy and institutional frameworks for devolution, sub-national governance, and local service delivery are expected key areas of expected results of this outcome that need to be updated and improved in the context of state restructuring process. The policy outcome mainly focuses on the political rights, administrative arrangement and devolution of responsibilities for improved local services including sectoral services. The institutional arrangements as per the constitutional provisions are other institutional framework areas that cover mainly local and sub- national (provincial) arrangements. This outcome result is dependent on following two outputs (output 8 &9).

Output 8: Refined policy on local governance and improved inter-agency cooperation

Output 9: Policies developed for devolution and federalism

So far in local level Aawaaj has done followings inputs and its achievements:

- Advocacy and training with community level health service provider
- Community level interaction between health service provider and clients
- Ward level social resources and access mapping, well being ranking
- Citizen awareness center (CAC) established and facilitate to access government services easily, and participated in the planning meeting at local level
- Increase capacity of social mobiliser, VDC secretary & GESI committee of DDC.
- Training on GESI Policy implementation with 50 VDC secretary

- Capacity building training to district Gender Equity watch group , GESI Budget planning and Audit facilitation
- Community based monitoring of projects; make it more accountable and transparent.
- Public hearing and capacity building trainings, orientations and community awareness

7. Micro Enterprise Development program, Surkhet

This project has been running with the partnership of MEDEP and Nepal Government since 2012 with Aawaaj in Surkhet Midwest Nepal. Main objectives of program are;

- To increase number of micro-enterprises being operated by members of poor and excluded groups, with a specific focus on women, Dalit, Janajati and disadvantaged indigenous nationalities in a working district..
- To develop knowledge, skills and capacity of micro entrepreneurs,
- To create more conducive and gender-equitable business environment for micro-entrepreneurs focused on forestry, agriculture and livestock.

So far every year under this project 555 marginalizes women, Dalit, Janajati and youth benefited from different training. The entrepreneurs are given exposure visit, technical support and skills build on. 80% are succeeding to establish small enterprise business and have earning 10000- 15000 per month

Impact

The program's activities had a direct economic impact; firstly on the target beneficiaries and secondly on the local economies in the ten implementing districts during phase I. Even though the impact was directly related to economic and income generation, there was a chain effect which rippled down to each member of a family supported by MEDEP. The chain effect of the economic impact was such that economic aspect was overshadowed by the improvement in the living standards of the beneficiaries in terms of meeting basic social development indicators as a result of the impact on people's income. The program hopes that impact of the program on the lives of poor people will help policy-makers understand the role, contribution and importance of the micro-enterprise sector in reducing poverty in Nepal.

Increased Family Income

One important purpose of MEDEP was to significantly increase the income of the poor people. As one indicator of success regarding incomes, MEDEP has compared the participating entrepreneur's family per capita income before MEDEP with the net income (revenues minus all non-family-labour

costs) of the resultant micro-enterprise (not including any other income that the family may still be earning). The average MEDEP micro-enterprise then provided 56% more per capita family income than the family was receiving before MEDEP. The percentage increase in family incomes is similar for Dalits, Indigenous Nationalities, and ultra-poor; however their enterprises are smaller than those of other MEDEP entrepreneurs.

Interestingly, the socially excluded Dalit and Indigenous Nationalities have performed well in terms of the increase in family incomes as a result of their participation in MEDEP. On average, they start from a smaller base salary, resulting in larger increases percentage-wise. Nonetheless, such rapid increases in family income among the very poor and disadvantaged can often have very significant impacts on their lives.

Although the average increase in family per capita income is 56%, it is important to note the differences. The following situations appear to affect performance. The percentages of entrepreneurs experiencing higher increases in income were greater among the Phase 1 entrepreneurs than with the Phase II and Phase III entrepreneurs who have only recently begun their enterprises.

Impact on Women's Position

Women entrepreneurs report that they have been able to raise their status and identity inside and outside their household, and strengthen their role in household decision-making. The majority of the women entrepreneurs interviewed stated that their income generally goes for better food, clothing, education for their children and other household expenses including their children's marriage. Despite the program target to have 70% women participation, women lagged behind their male entrepreneurs in their rate of family income growth (average increase 48%). This could be attributed to a large number of part-time enterprises managed by women. However, the fact that a greater percentage of women recently begun new entrepreneurs, and because women faced more problems than men in travelling during conflict situations.

A small in number but highly successful women entrepreneurs are the single women, either widow or abandoned by their husbands. They have scaled up their enterprises, constructed houses, provided education to their children. Women who have had low self-esteem have become economically empowered, are at decision-making, have a higher standing in the community and a sense of solidarity. A large number of the women are operating home-based enterprises in a slow but continued mode due to their family responsibilities.

Program's Efficiency

The MEDEP integrated approach, combining entrepreneurship training, technical skills training, micro-finance access, market linkages, and considerable on-going advice and encouragement to new entrepreneurs have significant upfront costs. However, MEDEP's reliance on Enterprise Development Facilitators who are locally resident, its consolidation of some management functions, and other cost-efficient strategies helps minimize the expenses, even for a complex project. Most important is that the costs are offset by the low drop-out rate among MEDEP entrepreneurs that results in a relatively low "unit" cost.

8. Emergency and Resilience training in Kathmandu

Aawaaj organized training on the concept of RESILIENCE, in collaboration with BICE International from 23rd to 26th May 2016 in Kathmandu Nepal. Aawaaj worked with BICE more than 13 years in Mid-west Nepal.

RESILIENCE is defined as the process of adapting well in the face of adversity, trauma, tragedy, threats or significant sources of stress. Tutor of RESILIENCE contributes in this sense to promote resilient processes in children victims of traumatic experiences. Recognizing and responding to children's needs, creating a secure, warm and stimulating environment, make the vulnerable children more resilient and lead him to overcome the difficulties, the anxieties and traumas and to restart again their growth path. "Tutors of resilience" is an intervention which aims to orient the work and transmit practical resilience tools of all who work with children in vulnerable contexts.

Objective:

Provide training's participants with tools and methods that encouraged them to assume the role of tutors of resilience for children who had experienced traumatic situations of different kinds (natural disasters, war, violence, forced displacement, sexual abuse,)

The participants were from organization that includes NGO social workers, counsellors, psychologists, and educational staff who are involved in the care of children victims of traumatic experiences through natural disasters or abuse exploitation and to inspire them in their daily work. The participants were highly motivated and have already a good experience in the field, which take part in the training is considered very enriching.

For adult participants:

It was focused on acquisition and development of theoretical and clinical knowledge about resilience process, risk factors and protective factors of children victims of traumatic experiences. Maturation of operational skills in promoting the resilience process in children victims of traumatic experiences.



For Children:

Increased psycho physical well-being, strengthening of self-identity and identify child's internal resources, consolidation of external resources, group, peers and families and strengthening formulation capacity of traumatic experiences.

The training was focused on theoretical and followed by 2 days practicum with children and parents.

9. Child Friendly Space (CFS):

Child Friendly Spaces Aawaaj is running Child Friendly Spaces for the protection and care of vulnerable children. The CFS is a structured in safe place where children and youth meet their peers to play, learn competencies and skills to deal with the risks they face, be involved in some educational activities and relax in a safe place. It gives the children the sense of safety, structure and continuity that provides support. It gives them a sense of belongingness after having been displaced. It builds cohesion and a sense of community. Children who are from marginalized community used to come for tuition classes to improve the school performance and child friendly activities to build the confident. CFS has helped the children in following ways:

- CFS has helped to develop children’s reading/studying habit. They do not miss any CFS class.
- In the CFS class, talented student helps weak student to study, sing a song and jointly plays a drama as well, thus, CFS children use to learn faster and effectively.

- Likewise a senior student helps new students in the CFS, thus they have built a habit of helping each other and sense of unity has developed among them.

Target Children Beneficiaries for CFS

Community Level:

- High Incidence of Abuse/Addictions/Poverty/Crime
- Lack of Law Enforcement Capacity / Commitment
- Lack of Prevention and Protection Mechanisms for Children
- Lack of Access to Primary Education & Basic Health Care Services

Family Level:

- History of Sexual Abuse / Domestic Violence Among One or Both Parents
- Female Headed Household, esp. no property rights
- Illiteracy in Parents
- Lack of Parenting / Discipline Skills
- Extreme Family Poverty / Unemployment of Parents, inc. Children not in school, poor food security, large family debt, poor housing, poor health care,
- Lack of Understanding of Sexual Abuse /Legal Mechanisms

Individual Child Level:

- History of Physical/Sexual Abuse, Neglect or Bullying of Child
- History of Child Substance Abuse
- Child with Disability
- Child is Especially Unattractive, especially discriminate against girls
- Child is Extremely Shy / Poor Social Skills
- Child is Isolated in Family / Community (lacks social/protection network)
- Child is Out of School / Illiterate
- Child has Lack of Nutrition and Poor Hygiene
- Child Working / Living Away from Biological Parents
- Child Lacks Understanding of Sexual Abuse /Legal Mechanisms

Child Participation:

Child Participation is key pillar of Aawaaj program. It has found that the participation of children and its mobilization to address the issues at grass root level has taken positively by all stakeholders. Children are speaking up and demanding to get services from NGOs, DCWB, DEO, VDC, WCO and DHO.

Their self-confidence and strength has also increased due to group solidarity. The children indicated that when they came in the training they have a chance to share their issues. This also helped them in solving their problems through sharing and discussions.

“They demonstrated their capacity with strong resilient and can manage their lives. They can identify the issues and refer the children to different organizations to receive the services. The children stated that they have to listen to the children, and also to meet children's need as per condition. It was repeatedly mentioned by all children " now we move ahead and develop confidence ourselves and to look after other children and secure their future”. Those people who were against them now support and pay a good respect. In the beginning, the children did not talk with each other but now they have started to trust each other and create a positive environment for building their strength. They developed confidence, self-respect, and learned to solve their problems by themselves. As they were worried about themselves, they mentioned that children have to be loved and cared which has helped in making their life comfortable.

10. Community Support Mechanisms (CSM)

Who are the members of CSM?

Men, women, social leaders, political leaders, school teachers, youths and children are the members of community support groups and they are representative of various groups existed in community such as women group, agriculture group, forest user's group, mothers group, political leaders, teachers, youth and child club.

Why CSM groups are formed?

- To create social mobilization against violence of children and women
- To promote culture of supporting vulnerable/abused children and women
- To avoid stigmatization and blame to women and children that faced violence

The activities that are carried out by CSM group are follows:

- Raise awareness in the community.
- Support the women and children in providing emotional support and help them to access services (safe place and safe person) in each community are promoted for threatened or abused children and women. For serious type of violence, they are referred to the temporary crisis support center.
- Identify children and women in the community who are most seriously in need.

- Decide those who will benefit from educational support, vocational training and Income generation activities targeted for vulnerable or who have faced violence.
- Organize group discussion and find solution. Sharing with others give some relief and hope, particularly when discussion is part of the culture.
- Campaigning- lobbying, advocacy, work as pressure group
- Organize community mediation.



11. Mediation:

Mediation is done to manage for the minor degree of violence in the community and family. Once the mediation process proceeds and understanding between the two parties is made along with community then the person affected will return to their own place. Following are the steps followed in the mediation process.

- 1) First step: Identifying the concern person
- 2) Informal interaction
- 3) Problem Identification

How to start the mediation

- Have to listen actively the problem of problem faced people.
- When the problem faced people are sharing their problem in between mediator should shake their head by saying “yes ...yes”. go on”
- Mediator have to support the client by saying you mean to say this....in odd situation where client is not able to express.

- Mediator should summarize the first party problem or client problem by saying this are the thoughts of the first party now let's listen to the second party, mention the main point and listen to them actively and the mediator should shake his or her head saying "yes ...yes" and summarize the points at last.
- For the problem faced by people identifying the problem at first its affect and informed about its effect.
- Mediator should prioritize the good points of both parties and should repeat them.
- Mediator should encourage both to come to a conclusion by identifying their weaknesses and make them realize that it is their problem, what are your hidden interests, take a decision on how to solve the problem.
- Mediator should not show biasness to either party. Should behave equally.
- Create a win-win situation for both parties, if they both do not agree mediator should not force them to take a decision.

Section B

Success Stories

A mother succeed to stop her daughter's marriage

Surkhet residential Sita (name changed) had agreed to do marriage at the age of 14yrs old. She had lured by an un-known boy (person) on getting new cloths, gold ornaments, unconditional love, stay without any work and ran away with that un-known boy in order to marriage. Her mother Kamala (name changed) knew that situation and instantly, met facilitator of Aawaaj and she requested to do prompt rescue of her daughter. She said, "I knew about early marriage consequences before 2 days with you so, I won't let my innocent daughter to become victim of this problem. Anyhow please stop my daughter's marriage." Aawaaj Facilitator with Kamala went at that place to bring Sita, where she was.

At first, family members and relatives of that boy stop Kamala and facilitator of Aawaaj to meet her. Facilitator told them about problems of early marriage and law against early child marriage. Facilitator adds more; I will forward this case to Aawaaj office as well as district police office. Sita (daughter) convinced with facilitator and return back own home. Finally, Kamala succeed to return back her daughter. Now Sita has continued in school.

Journey of Aged Woman

65 years old, Sumita (name changed) has been living at rural area of Surkhet. After her husband's brought second wife, she used to stay with her son and daughter-in-law but her son and daughter-in-law left her alone. Then she shifted at daughter's home though she felt uneasy. After few months she had been staying alone. Due to lack of money and resources she started to collect (Kandamul, Githa, Tata, yam (Tarul) and Kholisag vegetable from the Jungle and she sold those collected vegetable at the local market. She earned some money, and then she started to collect village product vegetables to sell. She got some cash from the Village Development Committee for survival. After collection of money she started a street shop. She participated in session of violence affected Women and selection of vocational support. Aawaaj has

selected her and provided economic support for vocational occupation. She started a retail shop in the market. She came to know her family member and relatives started to love her. She said that “I used to hard work just for food, but now I become a retail businesswoman and I am very much happy and thankful to Aawaaj that has been supporting vulnerable women like me.”

“I am feeling easy and getting better”

Eighty years old mother came at screening camp and silently observed wall-poster. She observed Pelvic Organ Prolapsed poster than other poster, facilitator watched her closely and took her at counseling room. Her tears came-out while counselor started talking with her. She shared her painful story with counselor- “I am victim of this Pelvic Organ Prolapsed problem while I was age of 50 yrs old”. I never told this problem with anyone. However, my son and daughter-in-law took me from Surkhet district head-quarter to Lakhanau of India for my health check-up. I told them my pain in legs, hands, and head, but never told my real problem to any of them. Also, she added; I feared, if I told this problem to my family they might hate me but when I came to know all women are coming here to check-up of pelvic organ going on ; I have courage and decided to tell my painful story.

She shared her story, felt relaxed and she wiped her tears. As she didn't agree for operation, Ring pessary kept on to support her pelvic organ. After treatment, she came out with smile and said, “I am feeling easy and getting better.” She was thankful to Aawaaj .

Mother in law provided good treatment to her daughter-in-law

Children Union Club's had shown street drama regarding Pelvic Organ Prolapse of women in Surkhet. At that street drama, children gave information about cause and symptoms on Pelvic Organ Prolapse of women in native language. Women audience has full of tears in eyes and men audience were talking about Pelvic Organ Prolapse and they realized, we never talk on this case with life-partner, now we are going to talk on this issues. One of the audiences (around 65 years old) came near of me and asked to me, Yeah, Nani do you work or not on these issues. I replied her, yes we do. She said, as I observed in drama; my daughter-in-

law has similar problems. My daughter-in-law got marriage at age of 14 yrs old. She continued birth of two babies and she had been facing such problems, what should I do, Nani? I suggested take health post for her check-up.

Next day, she took her daughter-in-law for medical check-up at health post. She has Pelvic Organ Prolapsed and was at first degree. Doctor gave her medicine and taught methods of exercise. After few days, she holds my hand, thanks me and told if I didn't see that street-drama; I may be unknown on this case. Indeed, I became very happy by listening her words.

My self-esteem and self-trust has increased

A 43 years old, Belkumari was born in Bardiya district. Due to her poor economic condition, she got marriage at young age and became a mother of six children. Her husband used to go other places for daily wages work to earn money. She collect firewood from Jungle, and daily wages work. She never cared her own health and not getting nutritious food at pregnancy and delivery. She was suffering by lower stomach pain and back pain. She said, "Due to fear of society, I never shared my problem to anyone, also never visit to doctor and hospital. Now due to my careless, I have Pelvic Organ Prolapsed problem." Also she adds; I came to know causes, signs, symptoms and preventive methods of Pelvic Organ Prolapsed and ways to care on delivery and pregnancy period after attending the Aawaaj Bardiya's awareness program. She came to know that Pelvic Organ Prolapsed is not a disease it is only problem. She awake up and shared in program- "my self-esteem and self-trust level has increased and we have to share if we have problem of Pelvic Organ Prolapsed."

She promised to visit hospital for own health check-up, help others to visit doctors/hospital, a step forward to stop child marriage and special support to delivery and pregnant women. She told her experiences regarding pelvic organ prolapsed problem of her community. All people aren't aware about what it is, how to take care and access health facility. All women hide this problem due to shame, fear of society and family members.

Nowadays, women easily used to go at hospital for check-up, shared their Pelvic Organ Prolapse problems openly with concern place/people and help to each other on this issue.

Micro Enterprise Program brought light in my life

LokBahadur Nepali is 32 years old from SurkhetAulnching VDC-9. His family belongs under the poverty and he was growing up with lots of scarcities. He went India to earn money for his family at the age of 12 yrs old. He spent there as house- maid, daily wage worker and labor. He continued to go India in order to fulfill his family's basic needs.

In last year he returned back village to celebrate Dashain. He got chance to visits Micro Enterprise Program organized in Aulching VDC, Surkhet by Aawaaj. At that time, LokBahadur met facilitator of Micro Enterprise Program and he knew about Micro Enterprise program and aware that he could be one of the participant of target-group of Micro Enterprise Program.

After filling household survey form A and B, he participated on eight days MicroEnterprise for Poverty Alleviation Training. He learnt what entrepreneurship is, how to get loan, what risk management is, market management, knowledge on quality and features of success entrepreneur. At the training period, he made a plan in order to establish small industry of leather -shoe according to the demand and availability of goods from the local market. He took more information on his selected occupation (Small Leather -Shoe Industry) through the facilitator. Also by the help of facilitator he knew on chances of success, challenges, merits and challenges of the occupation. There were lots of chances of success than weakness and challenges of the Leather -Shoe Industry. That's why he requested to Aawaaj organization for the basic training regarding repairing and manufacturing Leather –Shoe business.

On the basis of his request, Aawaaj provided 2 months (390 hours) basic training to repair and manufacture Leather - Shoe by organizing Technical/ Life-Skill Training form 2072/06/09 to 2072/08/09 at Birendranagar, Surkhet. After training, instantly, he started repairing and manufacturing Leather -Shoe business at Aulching VDC-8, DharampokharaBazaar from 2072-08-11 BS.

He said that, "I'm earning money 500-1000 NRs daily, from the beginning of his business, My sad days are hidden and my happy days are coming. Micro Enterprise Program brought light in my life. I am very much thankful to Aawaaj". He added further, if we do business and enterprise according to the demand and available of raw materials in our local place, we can stay happily with our family and we can spend our whole life in meaningful and productive way in village.

In-past, LokBahadur faced lots of challenges and suffering due to poverty but now his life is fruitful with happiness along with his family members in his own village.

Awareness program has changed my life

My name is Man Kumari Bishokarma. I am 42 years old. I have been living in Kalika VDC, ward number - 4 Bardiya district of Nepal. There are 7 members in my family, consisting husband, 4 sons, one daughter and myself. Due to poor economic condition of my house as well as more number of children; I worked in house and other daily wages activities at the period of pregnancy. I never got the chance for rest, delicious food, take care and check-up facilities at the period of pregnancy and delivery. My lower stomach, stomach and back pain started as I gave birth 5 babies in short time. At start of pain, I make it separate even I didn't tell my husband. Later, having much pain I told my husband about my health problem, we visited to health post. We didn't get right information and treatment from health post, continuously, I had pain. Due to the Pelvic Organ Prolapsed problem my husband left me.

In the meantime, I came to know awareness program on Pelvic Organ Prolapsed that conducted by Aawaaj in my village. I participated and knew causes, signs, symptoms and prevention methods of Pelvic Organ Prolapsed. Later, Aawaaj conducted health screening camp at our village; I went there for screening, after my check-up, I knew that I have Pelvic Organ Prolapsed problem in second stage and I kept ring pessary. Now, I am so much happy and thankful to Aawaaj.

Girls's Safety is Uncertain

Sunita (name change) is 15 years old, living in a rural area of Surkhet. She is a third child of her parents. Due to her family economic background, she studied till grade six and left her school. On 2073/07/27 her parents went to worship God and went to Accham. She and her two sisters were at home. She went with her two sisters at Aunt's home. During that period her neighbor's brother Padam Thapa was drunk, then he came in her room when she was sleeping. He abused her and she wake up and started to shout. After a while, her neighbors came and rescued her. Next day, she went to the police station to file a case. Politicians and neighbors in that village told that needs to be solved at the village and sent her back at home. She knew that she was being abused so she went to the Babiyachaur Police station to report. Then, police station asked Aawaaj for help. After that the culprit was sent to Surkhet district and filed a case against him. Then, legal procedure against rape had done with the co-ordination of district Police Office, Surkhet and Aawaaj. For the time being that girl lived at Aawaaj's shelter and provided psychosocial counseling and all the support.

I visited health-post after seeing poster of Pelvic Organ Prolapsed

My name is Sunita (Name Changed) and I am 35 years old. I did marriage at the age of 16 years and I have baby at the age of 17 years old. I used to do stone grinding and carry, fetching water, carry sand at construction site and did home/kitchen based work after delivery. After 5/6 months, I felt discomfort at my Vagina, back pain and have fever for one week. I had been facing this problem from the age of 17, but I never shared and told this problem with any-one due to the fear of family members. I saw the poster of Pelvic Organ Prolapsed at mother group discussion program then I afraid. Next day, I went Health post and I did checkup my body. Nurse of that health post told me, you have mild Pelvic Organ Prolapsed, no need to keep ring pessary but don't carry heavy load and do exercise. Nowadays, my health condition is in progress.

Golden life started from the painful life

Susila (Name Changed) is 27 yrs old from Badichour VDC, Surkhet. She is honesty and laborious. There are seven members in her family including father, mother, brothers and sisters. Due to poor economic condition of her house as well as more member of her family her father used to do daily wages work and her mother used to work at others' home, however it was not sufficient to fulfill their basic needs. She left school at 5 grade. She used to do daily wages works for income and helped her family. Her parents forced her for marriage. She did early marriage at 14 yrs old due to poor economic condition of her family. She became mother and have 2 babies at young age. Also, her husbands' house had same economic condition. It was like problem after problem. She used to work more to make food for morning and evening for children. She came to know her husband became sick at India; then her husband could not send money to her. She has more responsibilities towards husband and children. She was worried on how to take hospital for medical check-up for husband and how to continue children at school.

She came to know about Micro Small Enterprise Development program and Aawaaj is going to conduct Micro-Enterprise Development Program Training for poverty alleviation at Badichour VDC, Surkhet. She participated on village level orientation program to know more about program. She knew that she could be one of the participants who deserved for Micro-Enterprise Development Program Training to poverty alleviation.

She actively participated in the orientation program. She shared that, "I want to become independent and improve the level of economic status of my family." She filled out household survey form A and Entrepreneur Probability form B. She participated on eight days Micro Enterprise for Poverty Alleviation Training.

She learnt what entrepreneurship is, how to get loan, what risk management is, about market management, knowledge on quality and features of success entrepreneur. At the training period, she made a plan in order to establish tailoring enterprise. She has selected training for sewing and Cutting Technical and Life-Skill Training as per her interest. On the basis of her request, Aawaaj provided 2 months (390 hours) basic training to sewing and cutting technical and life-skill training from 2072/12/16 to 2073/02/16. She actively participated on training and quickly learnt than other participant.

After training, instantly, she tried to start sewing and cutting enterprise but she could not able to buy sewing machine due to her poor economic condition. Due to her keen interest on sewing; her Micro-Enterprise Group demanded with Aawaaj to support sewing machine to her. Aawaaj had supported Paddle sewing machine, and then she started tailoring micro enterprise at Badichour, Surkhet. She is doing her best at her job and she became an entrepreneur role model at society. She said, "I'm earning money 500 NRs daily and more at festive season from the beginning of this business."

Micro Enterprise Program has changed her life and it reduced her vulnerability. She said, "It became as golden life from my painful life." She has been fulfilled her family needs by operating enterprise, learned knowledge, capacity and skills. She is very much thankful to Micro-Enterprise Development Program (MEDEP) Program and Aawaaj in order to provide life-skills training, skill development training and sewing machine".

We should not making noises at classroom and focused on studies

A 12 years old, Nisha BK has been studying at Shree Nepal Rastriya Adharbhut School. She has father and mother and is happy to stay with her family. There are seven family members in her family. Before she is not regular in school, not to do her school's home works but

after involving in CFS, it has improved many aspects and found positive change. She has started doing her homework, including mathematics, consulting with teachers, positive changes like dedication to her study. In class four she got third position in the final examination and now she secured first position. Her parents told that she has shown more interest in her study most of the time. Before CFS; she used to make noises at classes and felt shy. While asked question she confidently told and suggest other students not to make noises at classroom and concentrate on their studies.

A boy become good example in the society

A 9 years old, Dinesh Sunar has been studying at Shree Nepal Rastriya Adharbhut School. Dinesh Sunar is happy to stay with his family. There are six family members in her family. Before CFS and after leaving school he used to play (KHOPI) and waste his time. Not to read at home, doesn't care about his personal hygiene and not complete his homework, but after CFS started at Salkot; he has improved a lot. He is attending school regularly, doing homeworks of every subject, consulting with teachers and correcting his mistakes. CFS has brought the positive changes in his thinking and is working hard on his study and improved in his personal hygiene and discipline. When he was promoted to class four he secured first position. After involving at CFS, he got knowledge on topics like- negative effects of child marriage, child rights, child abuse, gender discrimination, child helpline and violence against women. He involved in different games and become one good example in the society.

Get ready by her-self and regular at school

A 10 years old, Anita Sunar has been studying at local School and is happy to stay with her family in Salkot 9. Though she attended school, she used to concentrate more on games, playing with friends, and did not care her personal hygiene. Now she cleans her hygiene and surrounding environment. Before her parent's force her to send school, but now after she gets ready by herself and regular at school. She got knowledge on child marriage, child rights, child abuse, and gender discrimination and also discussed with her friends. Through CFS she got knowledge on negative impact of caste discrimination in society. Anita says she knows the child helpline numbers 1098 and involved in games.

Courageous Girl

A 13 years old girl Nirmala reported in Aawaaj with support of her school teacher as her father badly scolded and beaten despite she cooked food daily and finished all household activities. Even he asked his daughter not to go in school and did verbal abuse. She is studying in grade 3 at local public school in Surkhet. Her mother ran away due to domestic violence faced continuously. It's unbelievable that she started cooking while she was 5 yrs old. She is responsible to look after 4 years old brother and 7 years old sister. Actually she is playing mother's role as well. Aawaaj invited her father to discussed Nirmalasarki's situation. After mediation with his father, he realized his mistake and took her daughter at home with close supervision of Aawaaj . Aawaaj is doing home visit on weekly basis, at present all children are lving

Mother came at Aawaaj for her daughter' justice

15 yrs old, The Suman (name change) Nepali first child of her parents lived in Surkhet. Due to her poor economic condition she faced many difficulties. She went to school near by her home and studies grade eight. She goes to school at day time and helps her mother with household chores at morning and evening. Her father is differently able person. Her mother works as a labor and help her family. On 2073/1/10 day she went to collect the woods at a jungle when her school was off. When she was at jungle with her friends they started to collect their own woods and left her. Her neighbor's brother came to talk and asked her that he will help her to carry the woods. She was sexually abused by that brother near the bank of the river. He threatened her not to share anyone else. She didn't tell anything to anyone and used to cry and sitting alone. He used to come and continuously threatened her, abused her. He used to tell her that he will marry her. Then she got pregnant. After continuous growth of the baby her mother asked her about it and then she shared everything to her mother. Her mother came at Aawaaj for her justice. After counseling her they filed a case against him at the District level Police Station at Surkhet. She is now staying with her parents.

SECTION C

CHALLENGES AND LEARNINGS

Challenges

- In some cases, though we receive urgent request from the community to visit in their area; it is difficult to make visit. Because, in some places staff security is prime concern due to the threat received from abusers.
- There is an increasing demand of the scholarship quota than budget to the children with disability, poor and marginalized students.
- The youth clubs request to expand more program in the rural villages, so mobilizing and continuing support to those youth group in long run is question.
- While Aawaaj deals with the problem of violence affected children and women, request for other issues such as of legal written document of the ownership of land was also raised and dealing in this process is very complicated and a long.
- The offender threatens Aawaaj staff. In solving problem, both the parties the offender and the affected victims feel money is everything and that try to solve their problem on the basis of money matter. Also, while mediating many people keeps their views for and against the community, rather than solving problem of the victims of violence, they put forward their views according to nepotism and relationship due to which there is problem while facilitating to Aawaaj.
- After the victims come to Aawaaj for help, the way the community looks at them is different due to which the victims felt acquired and hesitant.
- Still the women are being dependent and hesitate to take decisions which impact to access services and opportunities provided to them.

Learning's

- Many men are involved in the awareness program of Aawaaj; they are playing a supportive role in dealing with the problems of violence at community. So, in the future day's too men should be included in various programs and training.
- Facilitating regular formal and informal interactions between the service providers and service receivers has helped to reduce the gap between them. It also has helped to strengthen the relationship, also helped in

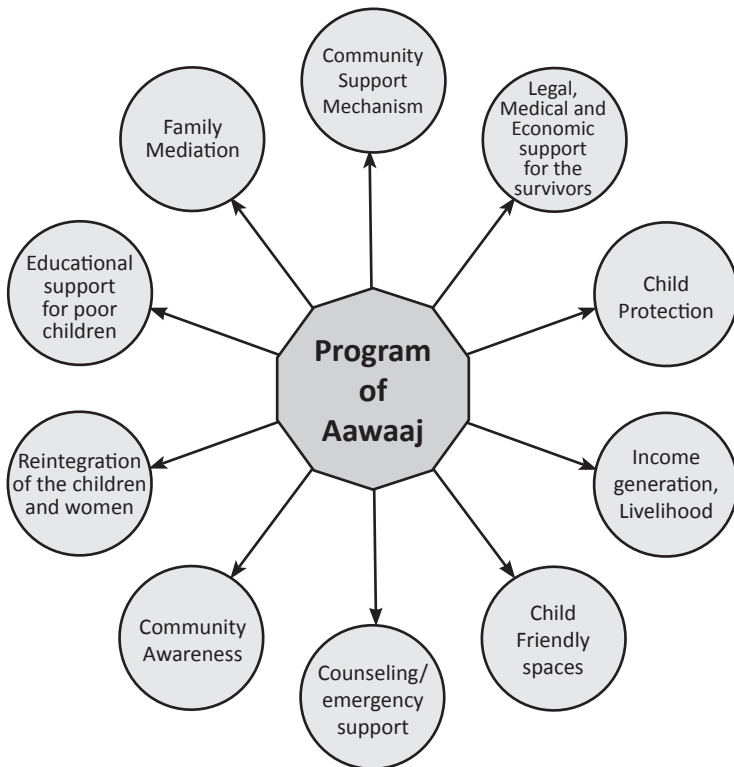
facilitating in immediate access of service in friendly manner rather blaming each other.

- Involving journalist, human right activists and working together in dealing the issues of women and children is found to be beneficial in overcoming the problems.
- When conducting training, stories, poems, games are found to be very effective among the target group to understand the issues more clearly.
- When children are actively involved in the matter of social issues they work with full dedication in bringing a significant change. So, children should not be isolated and make them active participant in community issues rather seen beneficiaries only.
- When the experience of survivors are shared among the network; it helped to encourage the new ones to report and gave strength in recovering their life in a dignified manner.
- When follow-up visits are made after mediation, it is found that the families change a lot in a positive and constructive manner. Even their behaviour and attitude changes and one of such change is notified through the way they speak. The couples whose problems are solved through mediation are actively involved as change makers in their society.
- When dealing with victims problems it is necessary to identify the challenges, the alternative solutions of the problem and also have to



analyses whether the problem is genuine or not, from the victim's perspective.

- Having patience and listening to others are the essential qualities in society.
- A good relationship has to be kept with all the section of the society. Also, before working out any issues, listing the positive areas of development of the planned work.
- Positive thinking is inevitable factors for an effective working mechanism. It brings a healthy environment in every aspects of life; and leads a better society.
- Team work is a key to success for an excellent output of the organization
- Clarity in language plays a vital role as we should be in direct contact with the community people. Moreover, use of appropriate words is a must. The expression of words and languages must be polite and informative.



Aawaaj

The Voice

Leading Life Positively Even in Dire Circumstances...

Aawaaj

सुखम तथा सत्यता सामाजिकसंस्थानले समाजको विकासको लागि विभिन्न योजनाहरू चलाउँदै, विद्यार्थी, आमाको स्वास्थ्यमा ध्यान गर्दै।

सांस्कृतिक विभिन्नताको बारेमा जानकारी, सुझाव, सुझावहरूको साथै समाजको विकासको लागि विभिन्न योजनाहरू चलाउँदै।

समाजिक संस्थानले अर्थिक रूपमा कमजोर वर्गका लागि विभिन्न योजनाहरू चलाउँदै।

समाजिक संस्थानले अर्थिक रूपमा कमजोर वर्गका लागि विभिन्न योजनाहरू चलाउँदै।



१० औं वार्षिक उत्सव तथा १० औं वार्षिक समारोह तथा

आ. सं. २०७०/०७३

वार्षिक प्रतिवेदन

आवाज संस्था

वीरगन्ज-१, बागमती, सुर्खेत

आवाज

बाल विद्यार्थीहरूको लागि विभिन्न योजनाहरू चलाउँदै।

Aawaaj

The Voice

Let's Walk Hand in Hand, Not Before Our Struggles against Gender Based Violence and Child Sexual Abuse

सुरक्षित हाँ सतर्क भएर

चुप नलागाईं दुर्व्यवहार सहेर

समाजिक संस्थानको माध्यमबाट विभिन्न योजनाहरू चलाउँदै।

Aawaaj

The Voice

Breaking The Silence

Preventing To Establish Community Support Mechanism Against Violence of Children and Women

आवाज

आवाज वार्षिक छुलेटिन

२०६१ वैशाख

समाजिक संस्थानले अर्थिक रूपमा कमजोर वर्गका लागि विभिन्न योजनाहरू चलाउँदै।

आवाज

आवाज कोसेली २०६६

समाजिक संस्थानले अर्थिक रूपमा कमजोर वर्गका लागि विभिन्न योजनाहरू चलाउँदै।

महिला माथि हुने घरेलु हिंसाको बारेमा सबैले जान्नुपर्ने कुराहरू

आवाज

बालयौन दुर्व्यवहारको बारेमा सबैले जान्नुपर्ने कुराहरू

बालयौन दुर्व्यवहार विरुद्ध विशेष प्रयास

bice

बालयौन दुर्व्यवहारको बारेमा सबैले जान्नुपर्ने कुराहरू

बालयौन दुर्व्यवहार विरुद्ध विशेष प्रयास

स्कूल तथा घरमा बालबालिकालाई रमाइलो तवरले खुशिको साथ पढ्ने, सिक्ने, जान्ने वातावरण श्रुजना गरौं



भाईबहिनीहरू तिमिहरूलाई कसैले नराम्रो कुरा, गाली गलौज, कुटपिट गरेको छ भने निर्धक्कसंग सहयोग माग्न सक्छौं । हामी तिम्रो नाम, ठेगाना सबै गोप्य राख्ने छौं ।

“ बालबालिकालाई हुने मानसिक र शारिरीक सजायले राम्रो सिकाइ हुन सक्दैन, तसर्थ हामी सबैले कर्तव्य पुरा गरौं र सिक्ने प्रक्रियालाई बाल मैत्री बनाऔं ”



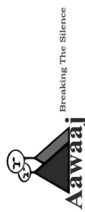
१०२८ मा फोन गरी बाल अधिकारको संरक्षण गरौं ।

Aide à l'Enfance de l'Inde



LE GOUVERNEMENT DU GRAND-DUCHÉ DE LUXEMBOURG
Ministère des Affaires étrangères et européennes
Direction de la coopération au développement et de l'action humanitaire

terre des hommes
Help for Children in Need



“बालविवाहको अन्त्य गरौं, प्रत्येक बालबालिकाको सुनौलो भविष्यलाई सुनिश्चित गरौं”

बाल विवाहको जीवन चक्र

बेरोजगार

कलिलै उमेरमा आमा बन्ने

उच्चमातृ तथा शिशु मृत्युदर

कुपोषण

अबसरबाट बन्चित

कम तौलको बच्चाको जन्म

शिक्षाबाट बन्चित

पाठे घरमा समस्या

बालविवाह

सम्बन्ध विच्छेद

घरेलु हिंसा

बहुविवाह हुने



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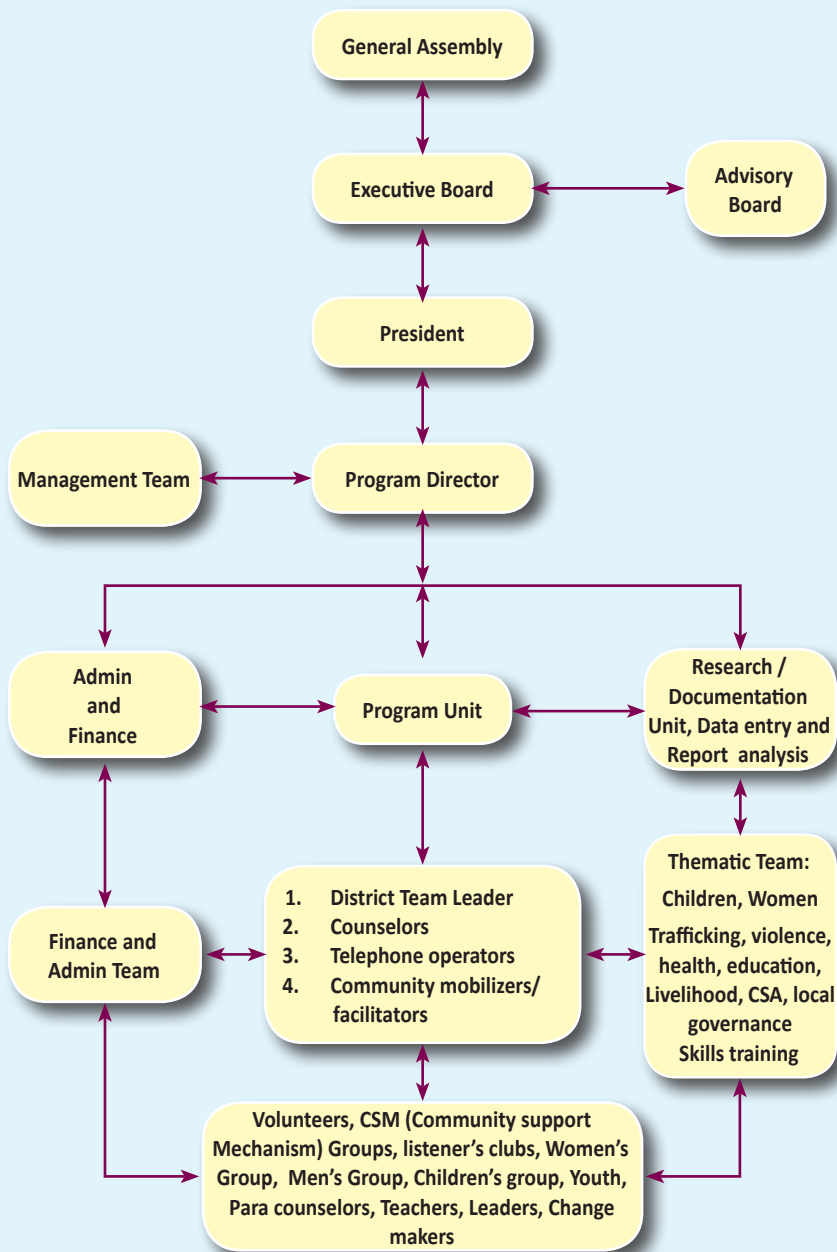
Aaavaaj
Breaking The Silence







Institutional structure of Aawaaj



AAWAAJ - Pictorial Reflection

