

KOSHISH

E - Newsletter

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Message from the Chairperson



Dear Partners and friends,

The Millennium Development Goal (MDG) mentions to **Promote gender equality and empower women (Goal 3) and to Improve maternal health (Goal 5)**. On the other side, the report of (Safe Motherhood, 2009/2010) states Suicide as the leading cause (16%) of maternal mortality.

These are associated with the psychosocial well being of the women. But, in the context of Nepal, women are vulnerable to psychosocial problem due to gender based violence. The Government of Nepal (Council of Ministers) had declared 2010 as the "Year against Gender based Violence." Simultaneously, 16 days campaign against gender based violence is conducted every year. Similarly, National Alliance for Women Human Right Defenders (NAWHRD) has announced the 100 days campaign against gender based violence in December 2011 with the theme 'SAY NO, ENSURE JUSTICE'.

The voices against gender based violence are widely heard but it's necessary to understand the consequences of gender based violence.

KOSHISH joins hands with Ministry of Women, Children and Social Welfare

Interaction Program 'Gender based Violence and it's Psychosocial Impact'

The government of Nepal had celebrated 2010 as the year against gender based violence. Recently, 16 days campaign against gender based violence was accomplished. But, KOSHISH realized that gender based violence ultimately results in stress and psychosocial problem. So, the Psychosocial Impact of Gender based violence should be discussed. Hence, KOSHISH coordinated with Ministry of Women, Children and Social Welfare to organize a interaction program to generate the ideas for

addressing psychosocial problems due to gender based violence. The Ministry of Women, Children and Social Welfare too realized it hasn't any

programs to heal the psychosocial problem so it is necessary for brainstorming.

The interaction program entitled 'Gender based Violence and its Psychosocial Impact' was scheduled for January 11, 2012. The Program was jointly organized by Ministry of Women, Children and Social Welfare along with KOSHISH, National Mental Health Self Help Organization.

The participants were invited from government officials, international donor agencies and national non government organizations working in the sector of gender based violence and Psychosocial issues.



Figure 2: Matrika Devkota addressing the programme

The Interaction Program on '**Gender based Violence and its Psychosocial Impact**' was commenced after the brief introduction of the program by Master of Ceremony Mr. Uddhab Guragain, Programme Coordinator of KOSHISH. He requested the Chief Guest of the Program, Minister of Women, Children and Social Welfare (MOWCSW) Mr. Dan Bahadur Chaudhari to light the Panas Lamp to inaugurate the program

formally. The participants from different GOs, I/NGOs, media persons were welcomed by the short speech of Joint Secretary of MOWCSW, Mr. Upendra Adhikari. The Program was conducted on the chairmanship of Ananda Raj Pokharel, Secretary of MOWCSW.



The program was held in Hotel Everest, Kathmandu. Altogether 85 persons including representatives from DFID, WOREC, LACC, Ministry of Health and Population with 57 other organizations had participated.

The program was followed by the Presentation on Gender based Violence by Parwati Basnet, Senior Programme Manager of WOREC Nepal. The Women Rehabilitation Center Nepal (WOREC Nepal) is actively working in gender based violence. WOREC Nepal as a part of National Alliance for Women Human Right Defenders (NAWHRD) has announced the 100 days campaign against gender based violence in December 2011 with the theme 'SAY NO, ENSURE JUSTICE'. The presentation discussed

on the causes, effects and types of Gender based Violence.

The presentation session was followed by Matrika Devkota, Chairperson of KOSHISH. He presented the psychosocial impact of gender based violence and its effect on persons' mental health. He discussed to assure psychosocial well being to meet the Millennium Development Goals (MDG). The Goal 3 of MDG states to **Promote gender equality and empower women**. The goal 5 of MDG states to **Improve maternal health**. Suicide is the leading cause of maternal mortality (Safe Motherhood, 2009/2010). So, to meet the MDG 3 and 5, and to ensure sound maternal health, as Devkota discussed that Gender based Violence is the root cause and it has various dimension that affects the psychosocial well being.

After the presentation session, the floor was open for discussion. The participants expressed their views regarding the psychosocial impact of gender based violence and they discussed about the government provisions necessary for addressing the issue. Some participants suggested the government authorities to make a strong policy.

Finally, Mr. Arbind Shah, State Minister of MOWCSW, Ms. Mohana Ansari, Honorable Member of National Women Commission, Mr. Dan Bahadur Chaudhari, Minister of MOWCSW committed to take a positive steps in remarking the gender based violence and its psychosocial impact from the policy level.

The program was concluded by Mr. Ananda Raj Pokhrel, Secretary of MOWCSW pointing the real ground of psychosocial issues in the global context. He mentioned that government is lacking the proper mechanism to deal this issue.

After the program, Mr. Upendra Adhikari, the Joint Secretary of MOWCSW said the program was 99 percent successful. The Honorable Minister and Honorable State Minister of

MOWCSW and Honorable Member of National Women Commission seemed enthusiastic to hear the expressions from the participants during the interaction session. They realized that the government hasn't any programs.



Figure 3: Programme Coordinator Uddhav Guragain conducting the programme

They have now realized that women are vulnerable towards mental health problem and has created psychosocial problem due to the domestic violence and gender based violence. They have now committed to take positive steps for addressing the psychosocial well being issues. The participants also thanked KOSHISH for stimulating the government to eye on this issue. They thanked KOSHISH for helping women who are on the streets due to mental health problem. The participants realized that gender based violence is the root cause behind mental health problem that results in affecting psychosocial environment.

EXPRESSIONS



There's no change on the gender based violence. The context is same as before. We still lack shelter homes for the women who are vulnerable to come on streets due to domestic violence. If any woman seek help from us then we have to request the organizations like KOSHISH, WOREC, Saathi who have the shelter home. I also request the government authorities to instigate shelter homes.

Mohana Ansari
Member, National Women Commission



The State has not given attention to the psychosocial impact issues. We are not able to launch programs to solve these issues due to the limited resources we have on our ministry. We will try to allocate the resources and budget. We will request the government for preventive programs related to gender based violence and mental health problems.

Arbind Shah
State Minister, Ministry of Women, Children and Social Welfare (MOWCSW)



I request all the persons representing different organizations not to focus just in Kathmandu but launch awareness programs regarding gender based violence and psychosocial impact on the remote areas. I commit to take steps in addressing this psychosocial issue in women and children. I request all to join hands to work for this issue.

Dan Bahadur Chaudhary
Minister, Ministry of Women, Children and Social Welfare (MOWCSW)

Gender Based Violence

Gender Based Violence (GBV) happens throughout the life cycle of women and girls. Girls and young women face violence due to forced marriage, dowry, domestic violence and marital rape. Abuse of women with disabilities and women as they enter their older years are also common. Worldwide, Gender Based Violence (GBV) is the leading cause of death of women between the ages of 19 and 44 – more than war, cancer, or car accidents. Apart from the individual suffering, it carries high a cost for society and is a major obstacle to development. The challenges experienced by women in Nepal are especially severe. Several research projects in Nepal have indicated that 66 percent of women have endured verbal abuse, 33 percent emotional abuse, while 77 percent of the perpetrators were family members (UNICEF 2001). Social relations of power place women in a subordinate position, giving many women few rights in the family, community and society in general.

There is lack of comprehensive data on sexual and gender-based violence, including domestic violence, but small scale studies all indicate that GBV is high in Nepal. 43 percent of women experience sexual harassment in the workplace. 5,000 - 12,000 girls/women aged 10 to 20 years of age are trafficked every year with 75 percent of them below 18 years age. Majority are sold for forced prostitution. Gender based violence is a public health issue but has not yet been addressed comprehensively from a health perspective in Nepal. This action plan details a health sector response to GBV. It recognizes that a concerted effort on different dimensions like health, education, legal rights, protection and security is necessary to address GBV. Working with men and boys to prevent violence and for a

shift in understanding of masculinity is also essential. In this context, the Government of Nepal (Council of Ministers) based on the decision of 2066/5/26 (September 9, 2009) has declared 2010 as the "Year against Gender based Violence."

According to the findings of Nepal Maternal Mortality and Morbidity Study (MMMS 2008/2009)) the shocking finding that suicide was reported as the leading cause of WRA deaths (16%), a steep increase from 1998, when it was ranked third (10%), highlights the urgent need to address this issue, which has received little attention since its significance was first noted in 1998. There is a need to improve understanding of the circumstances and contributory factors of these tragic events, to guide interventions. Analysis of verbal autopsy data indicates mental health problems, relationships, marriage and family issues are key factors. It is also noteworthy that 21% of the suicides were young women, aged 18 years and under, indicating that youth is a factor to be investigated.

The consequences of gender-based violence are devastating. Survivors often experience life-long emotional distress, mental health problems and poor reproductive health. The impact of violence may also extend to future generations: Children who have witnessed abuse, or were victims themselves, often suffer lasting psychological damage. Thus, gender-based violence is a serious issue that requires a comprehensive solution. Government should pay attention to the implementation of action plan against gender-based violence. The government has paid attention only to the formulation of these plans instead of their implementation.