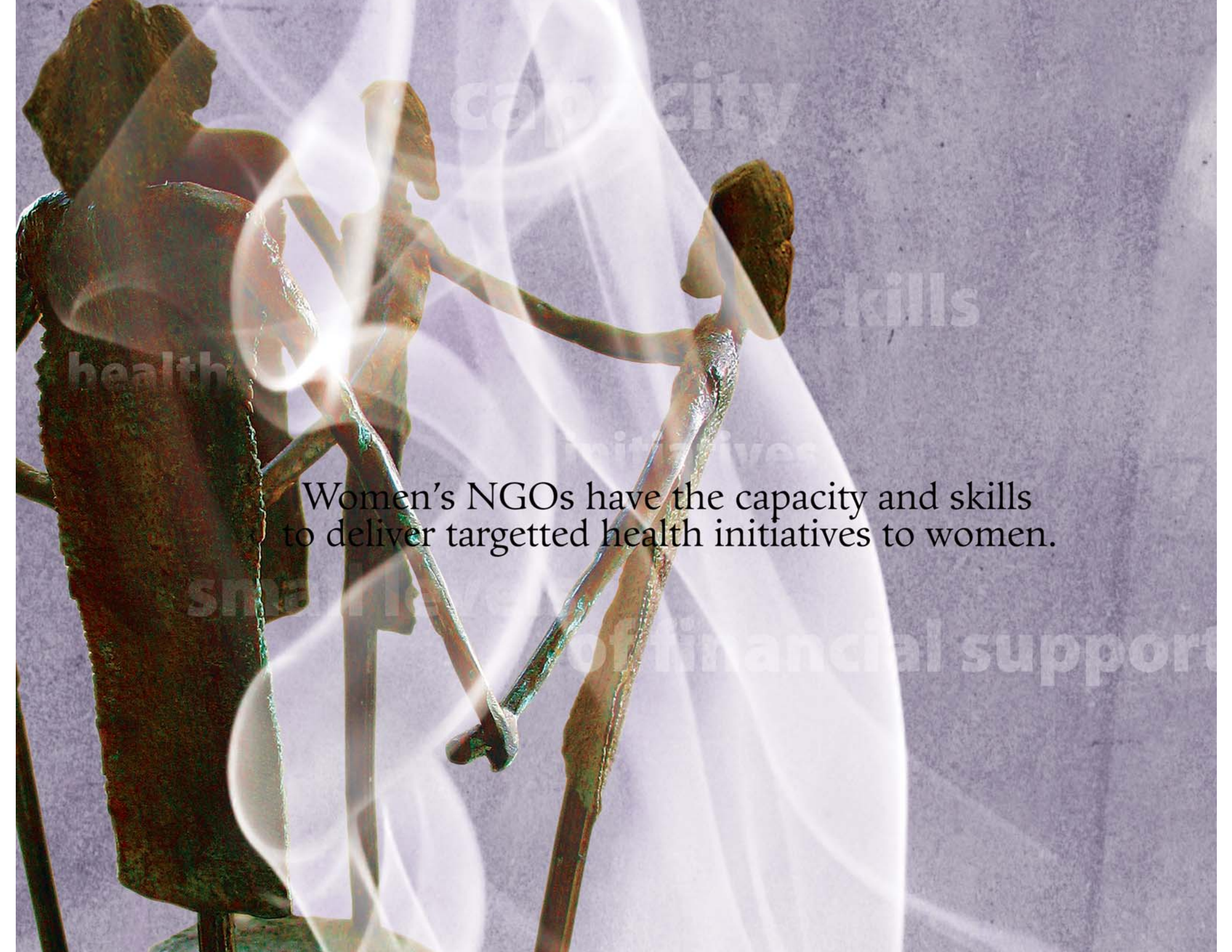


The value of investing in women's health and education is well recognized throughout the world as it improves not only the women themselves but also their children and families. While great progress has been made over the last 2 decades in providing women and girls with better health facilities and equal educational opportunities, large numbers of girls in Asia still do not complete primary school. This has implications not only for their socioeconomic status but also for the countries as a whole given the positive correlation between girls' education and poverty reduction, improved family health and nutrition, and reduced fertility rates.

## WOMEN'S HEALTH AND EDUCATION



Women's NGOs have the capacity and skills to deliver targeted health initiatives to women.

## HEALTH AND WELLBEING

Safe motherhood and maternal and infant mortality will remain the focus of government-funded and donor-supported women's health care programs, but other health and wellbeing concerns also require attention. While governments often lack the resources or experience to address the full range of women's health issues, NGOs may have the capacity and skills to deliver health initiatives with relatively small levels of financial support. Three projects demonstrate the value of utilizing NGO expertise and skills in health care projects.

### Burn Care Centre— *Watan Welfare Society, Pakistan*

Although there are no official statistics on the types and causes of burns in Pakistan, figures collected by NGOs suggest cases are increasing. Most occur at home in or around the kitchen from contact with gas stoves, lamps, leaking gas pipes, exposed electrical wiring, boiling water, and hot oil. According to data collated by the Watan Welfare Society, women and children accounted for 82% of the 306 burn victims treated at the Burn Care Centre between January 1999 and April 2000. Of those, 62% were burnt in or around the kitchen with children most at risk. Of the 41 cases of suicide burnings they treated, 88% were women.

While the majority of burns are accidental, there is also disturbing evidence that increasing numbers of victims—particularly those described as suicide cases—are young women who have been set alight or who have had acid thrown on them by their husbands or in-laws. The Human Rights Commission of Pakistan reported that between 1998 and 1999, more than 560 women were burnt in their homes in Punjab (Pakistan's most populous state) and that while many of these cases were suspicious, there was only a handful of arrests. The Progressive Women's Association tracked 3,560 women who were hospitalized between 1994 and 1995 after they were attacked at home with fire, gasoline, or acid. Victims of such crimes face special problems in terms of their rehabilitation into society. Even in the case of accidental burns, women are often rejected by their husbands and in-laws or are perceived as unmarriageable due to scars and in some cases to limited mobility. For these reasons, programs designed to treat burns must incorporate a wide range of specialized services, including education and prevention campaigns, surgery, counseling, and rehabilitation.



Alarmed by the lack of specialized burn care available in Pakistan, the Watan Welfare Society established a 15-bed burn center in Peshawar in January 1999. The Burn Care Centre has since treated over 300 victims drawing on the skills of a dedicated team of 15 volunteer medical specialists and health professionals. The centre provides heavily subsidized or free medical, nursing, and allied health care according to the victim's financial situation. To extend and improve services, the centre launched a project that included a 1-day seminar on burns to build awareness and capacity in government institutions; upgrading the laboratory and curative facilities at the Burn Care Centre; brochures and pamphlets in Urdu on the prevention and care of burns; rural "burn camps" to raise awareness on prevention, care, treatment, and management; and televised public awareness-raising campaigns and advocacy.

With support from ADB, Watan Welfare Society, was able to fully outfit its laboratory and operating theater and to promote awareness on the prevention and treatment of burns. Project components included a 1-day seminar on burns designed to build awareness and capacity in government institutions; upgrading the laboratory and curative facilities, production of brochures and pamphlets in Urdu on the prevention and care of burns; piloting rural "burn camps" to raise awareness on prevention, care, treatment, and management; and televised public awareness-raising campaigns and advocacy.

**SAADIA** is a lady health worker who suffered third-degree burns on her legs and arms as the result of a leaky gas cylinder in the kitchen. By the time she was admitted to the Burn Care Centre—about 2 weeks after the accident—her wounds were infected making treatment difficult. She spent over 2 months in the centre undergoing skin grafts.

As a lady health worker, Saadia often comes across other female burn victims. As she says, burns are part of a woman's everyday experience, and yet the majority of women are ignorant of both the risks and of simple treatments such as rolling victims in a blanket or putting them in cold water. She notes that many women who suffer serious burns are not taken to hospital because their families cannot afford the treatment, or do not value them, or do not realize the importance of seeking treatment as soon as possible. Saadia discusses her own experience as a way of educating women on the dangers of burns. She believes lady health care workers can play a special role as they mostly deal with women and children, the primary victims of burns.

After upgrading the facilities, both treatment and recovery rates improved. The cost of treatment also decreased as procedures became more successful and did not have to be repeated and as the centre met its own pathology requirements. In terms of prevention and education, the seminar in Peshawar attended by key health policy planners, NGOs, women's groups, and donor agencies was a great success. Consultants from the centre have also met informally with government officials on the need to regulate standards for cooking equipment and for legislation to ensure such standards are met. The burn camps proved very effective in reaching rural women who lacked education on prevention and/or access to proper treatment because of immobility or insufficient funds. The camps also raised the profile of the centre and led to an increasing number of children and female patients coming in for treatment.

The centre also distributed brochures and posters in Urdu to seminar participants, burn camp patients, and other people working at the grassroots level such as social workers and female health care workers. A televised talk show focused on simple yet effective techniques for preventing burns and on first aid measures that improve the victim's recovery. As a result of such activities, more acute cases now come directly to the centre instead as referrals. This has meant that victims receive more timely and effective care that dramatically improves their chances of survival and recovery.

In terms of sustainability, the centre is now able to meet its recurrent costs. Although it continues to rely on the volunteer services of its specialists, funds generated from patient fees and from fees for the use of laboratory equipment cover the cost of treatment and rent of the building.



# health

**Needs of Women with Disabilities—  
Disabled People’s Organization,  
Cambodia**

Women living with disabilities face discrimination, neglect, and a generally lower socioeconomic status. Disability carries a social stigma that not only reduces a young woman’s chances of marriage but can also mean she withdraws from education and from her job. Many young women are further prevented either by their families or by their own lack of confidence from taking advantage of available educational and technical resources. This further jeopardizes their status. Part of the campaign to inform disabled women about such opportunities and to gain access to them must, therefore, also include educating the general public on the specific needs and issues disabled women face.



**disability**

The Cambodian Disabled People’s Organization (CDPO) developed networks and self-help groups for women with disabilities and raised public awareness on their interests, concerns, and skills. The success of the project was to a large extent dependent on the involvement of the Women’s Active Group of the CDPO, a sector support group that has a high degree of legitimacy with disabled women, the government, and the general public. The group conducted monthly meetings with representatives of national and international organizations, including the national NGO Forum, and four to six weekly meetings with the Disability Action Council.

The project had a number of benefits both for disabled women and for CDPO. The meetings with the Women’s Active Group increased the self-confidence of disabled women to solve the problems they face, and the training and information sessions with parents and community groups opened more avenues for disabled women and girls to pursue work and education. After the sessions, more families were willing to allow their disabled daughters to work and to go to school outside the home. The Women’s Active Group was recognized by the Ministry of Women’s and Veterans’ Affairs and was invited to participate in relevant seminars and major events including the 2001 International Women’s Day march in which 120 women with disabilities participated. In addition, the Ministry of Education has begun to accept children with disabilities in schools; the Women’s Active Group was asked to contribute to the CEDAW report on the Beijing+5 Meeting where it was noted that the needs of women with disabilities had been overlooked; and the group participated in a 16-day Committee on Domestic Violence. One member of the group was invited to attend the follow-up workshop in Phnom Penh.

The Women’s Active Group also benefited from the project by improving its organizational capacity and by developing new skills and a broader understanding of the concerns of disabled women. Specific skills gained included project management, planning, and facilitation and workshop organization. One staff member attended the international accessibility campaign in Bangkok that attracted over 600 delegates from Asia and the Pacific. This gave her the opportunity to meet women from different countries and to share strategies on how to achieve recognition from their respective governments and promote greater public awareness of the issues confronting women with disabilities.

**DISPELLING** myths and stereotypes is key to the success of any program promoting the rights of the disabled. The Cambodian Disabled People’s Organization conducted a 6-month public awareness campaign on the interests, concerns, rights, and skills of the disabled including radio interviews and articles in newspapers and journals. The Women’s Media Center of Cambodia used stories of disabled women in their bulletins and radio programs on station FM 102, and two women with disabilities were interviewed about the issues they face on station FM 103.

## Water Blues (Telefilm on Arsenic Poisoning)—FemCom, Bangladesh

Mass communications and other forms of media are important tools in public health campaigns; the challenge is to present the audience with information that is both entertaining and relevant. One innovative approach was a telefilm on arsenic poisoning in Bangladesh by the NGO FemCom. What made the film unusually effective was that it used the popular soap opera genre and included hit songs and local film stars to enhance its appeal.

Arsenic occurs naturally in the water supply and therefore is a growing problem in Bangladesh. The World Health Organization has, in fact, described the situation as the largest mass poisoning of a population in history and warns that up to 80 million Bangladeshis may be affected. Arsenic causes vomiting; diarrhea; abdominal and muscular pain; skin rashes; swelling of the eyelids, feet, and hands; and ultimately affects the heart, lungs, and kidneys. In a society where arranged marriages are the norm and facial features are critical, the chances for success in the marriage market for women suffering from arsenic poisoning are grim. Various NGOs are working with the Department of Public Health and Engineering to eradicate arsenic from water supplies, but meanwhile there is an urgent need to educate the population about the dangers of using contaminated water, the treatments available, and the preventive measures they can take.

# communication



**TO** be effective, mass communication must capture the interest of the masses. Famous names and faces can help a lot in that regard. The participation of popular performers was key to the success of the telefilm on arsenic in Bangladesh. Their presence meant the premier was covered by all the daily newspapers and film magazines and made the screening on Bangladesh TV a big hit. In fact, the film was featured in the TV guide as the best telefilm of the year. A wide audience was thus educated about an important public health issue.

Recognizing this need, FemCom researched and developed the telefilm *Patal Purir Galpo* (*Story from under the Earth*). A version with English subtitles, *Water Blues*, was produced for use in other South Asian countries that suffer arsenic contamination. The telefilm was shot in affected villages, and local residents assisted in various activities including the identification of victims of arsenic poisoning. Victims were pleased to participate because of the involvement of popular film and television personalities. Not only did these performers build a strong rapport with the victims, their participation also guaranteed a wide audience for the film. The enthusiastic response to the film by audiences, the media, and television stations demonstrates the potential of this medium, if used thoughtfully, for achieving important social outcomes.

## EDUCATING FOR CHANGE

While significant progress has been made over the last 2 decades in providing women and girls with equal educational opportunities, large numbers of girls in Asia still do not complete primary school. This has implications not only for their socioeconomic status but also for the countries as a whole given the positive correlation between girls' education and poverty reduction, improved family health and nutrition, and reduced fertility rates.

In Pakistan, girls' educational attainment continues to lag behind that of boys. Women's literacy rates in the North West Frontier Province are among the lowest in Pakistan at 12% compared to over 47% for men. There are many social and cultural reasons for this imbalance including both poverty and cultural attitudes on the value of girls' education. Girls frequently drop out of school to help with household chores and to look after younger siblings. Many families view the formal education of daughters as a waste of family resources since after marriage girls move into their husbands households. As girls are perceived as only temporary family members, priority is given to educating sons. Early marriage of girls also works against their continuing at school. Structural factors include the lack of female teachers and schools for girls in rural areas, the distance of schools from villages, and low quality teaching.

### Promoting Girls' Education — *Khwendo Kor, Pakistan*

Khwendo Kor (Sisters' Home) has been active in breaking the silence on gender inequality in education by mobilizing community support for girls' education and advocating policy reform. Under its community-based education program, the NGO has successfully established 100 community schools throughout the North West Frontier Province (NWFP). Despite this success at the community level, Khwendo Kor, in common with other small NGOs, has difficulty reaching and influencing government officials and policy makers. This restricts the range of advocacy work it can achieve. To overcome these limitations, Khwendo Kor developed institutional capacity in advocacy and strengthened its leverage on government policy to promote girls' education in NWFP by stimulating informed public debate, applying social pressure, and lobbying government to bring about positive changes in educational policy.

Six district workshops provided an important forum for sharing information on constraints and opportunities related to girls' education in different regions. In general, constraints were summarized as economic, social, and administrative. Issues, relevant experiences, and positive developments discussed in these workshops were shared with others in a quarterly newsletter and other media outlets.

A provincial seminar on girls' education was held in Peshawar and was attended by more than 150 participants including representatives from NGOs, community-based organizations, the provincial education network (PEN) established by Khwendo Kor, academia, donor agencies, media, and government. The aim was to promote the role of PEN in educational policy and reviews and to establish PEN as an important forum for addressing key issues.

**PRACTICAL** and traditional constraints to girls' education in Pakistan are especially evident in conservative areas like the North West Frontier Province (NWFP). Long-term, sustainable changes in policy and practice are needed, but influencing government officials and policy makers is no small task. Khwendo Kor therefore used several innovative measures to promote girls' education in NWFP. They established a provincial education network (PEN) comprising representatives from NGOs, community-based organizations, and government to create an enabling environment for girls' education. They published a biannual newsletter and articles in the local and national press. They hosted district and provincial seminars to share information and to devise strategies on constraints and opportunities for girls' education, and they established the Education Resource Centre at Khwendo Kor and a database of provincial and national organizations and institutions working in the field.

Following the district and provincial workshops, Khwendo Kor drafted an action plan to counteract a growing trend among reactionary religious groups to criticize girls' education and with PEN developed and disseminated strategies to mobilize community support for schools and for educating girls. This has already worked in some areas where village leaders have advised local religious leaders not to interfere in the general affairs of the village and have used cultural values such as literacy and a respect for education to discredit religious leaders' arguments. Other strategies include holding community consultations on the value of educating girls and involving mothers in the discussions as they are often more supportive.

The biannual newsletter, *Poaha*, has strengthened information sharing between PEN members and Khwendo Kor. Published in Urdu, the newsletter promotes girls' education by sharing information on policy, Islamic perspectives, case studies, and donor agencies. The Education Resource Centre at Khwendo Kor not only supported these activities but also provided an important basis for future advocacy. The centre has started to build a collection of books, reports, case studies, audio and video materials, policy documents, and newspaper clippings as well as a database of institutions and organizations operating in girls' education.

The success of PEN is already evident. In addition to disseminating successful strategies that mobilize community support for schools and the education of girls, other PEN organizations have also lobbied the Education Department on establishing and running community schools. They have proposed that the department assume financial responsibility for community-based schools after 5 years and administer examinations and certificates to students who currently lack formal recognition of their schooling. They also want the department to develop strategies to address the enrolment, retrenchment, and re-enrolment of female students, to encourage high levels of community participation and support, to locate schools close to villages, and to provide low-cost education to girls.

# policy



**THE** constraints to educating girls in Pakistan are numerous and diverse. In general they fall into three categories: economic, social, and administrative.

#### Economic

- Poverty, unemployment and the cost of education limit the attendance of girls. Many families view formal education of daughters as a waste of resources and give priority to sons.
- Families in rural areas perceive that education does not guarantee future work or access to well-paid jobs.
- Girls frequently drop out of school to help with household chores and to look after younger siblings.

#### Social

- Early marriage means girls frequently drop out.
- Educated girls are seen as more likely to break with tradition and challenge male authority.
- The distance of schools from home and the restricted mobility of girls discourage their attendance.
- Religious groups emphasize the moral dangers of educating girls and mobilize against schools that aren't segregated by gender or that don't have female teachers.

#### Administrative

- The government does not give high priority to education which results in a shortage of schools and facilities.
- There is a shortage of female teachers because of isolation, inadequate transport, and low salaries.
- New schools must be built on land donated by communities which means they are generally located far from home.