

Project description: Care Women Nepal

Care Women Nepal (CWN) was initially established in 1998 in order to improve the lives of women living in Dhankuta, Nepal. CWN does this by offering health camps throughout the year, which, in many instances may constitute the only time that women living in this region are able to access health services. While the camps may address general health concerns, their focus is on uterine prolapse, a dangerous condition which occurs when a women's pelvic muscles and ligaments become stretched/weakened, causing the uterus to fall from its normal position. 10 % of women in Nepal (13 million women)¹ suffer from this condition and are at an increased risk of uterine prolapse because of a multitude of factors that, at their core, stem from the inequitable treatment of women within Nepalese society (which is highly patriarchal).

Specifically, a large proportion of Nepalese women and girls are married at a young age owing to cultural norms and economic constraints, have a significantly greater work burden than men, are unable to access maternal health care (and health care in general) and are unable to take a sufficient amount of time to recover following childbirth. Women in Nepal often give birth at a young age and return to hard labor immediately after having given birth, a factor which likely contributes greatly to the proportion of women who suffer from and are stigmatized because they are experiencing uterine prolapse.

In 2008 a public interest lawsuit filed by women rights activists led by the Supreme Court of Nepal to call uterine prolapse a "human rights issue" and criticized the government for a lack of action to address this violation of women's rights¹. As a result, the government started providing funds for uterine prolapse surgeries in 2008. However, there is a lack of coordination between the ministry of health, hospitals, and clinics such as those carried out by Care Women Nepal, and far too many women are still living with prolapse. Crucially, there is a need to coordinate between grassroots NGOs like CWN and hospitals in order to ensure that women in need of surgery receive it in a timely manner.

Although I am not under the impression that I can change the underlying socioeconomic conditions that result in gender discrimination in Nepal, I believe that I can positively contribute to the work of CWN, particularly concerning the coordination of surgeries with hospitals in the region (a point of weakness within the organization). The work carried out by CWN serves the women and girls in the community of Dhankuta, and ultimately, stands to dramatically improve the health and overall well being of women who have long been living with embarrassment and experiencing pain owing to uterine prolapse. Importantly, for women to become economically and socially empowered, they first need to have control over their bodies and their health. CWN provides the opportunity to gain such control.

Description of my role within the project:

1. Facilitating the organization of **one health camp** in Dhankuta, Nepal that will screen up to 1,000 women.
2. Integrating CWN health camps within the health system by making sure that in addition to providing uterine prolapse screening, the camps offer a space for the training of Nepalese health professionals.

¹ Bijoyeta Das. (2014). Uterine prolapse: The hidden agony of Nepalese women. <http://america.aljazeera.com/articles/2014/6/9/uterine-prolapsethehiddenagonyofnepalesewomen.html>

3. Coordinating a schedule with government district hospitals (and physicians) to offer year-round free uterine prolapse surgeries to women who have been screened by CWN and are in need of such surgery.
4. Improving the long-term sustainability of CWN by working with the current founder, Indira Thapa, to hire and retain a full time staff member to address the ongoing administrative needs of CWN.
5. Documenting and disseminating the work of CWN via The Advocacy Projects platforms, as well as within my own personal network. This will involve blogging, photo-journaling, creating video content, disseminating information about the social and economic constraint facing women in Nepal generally, and specifically concerning the impact that these constraints have on women's health.
6. Posting regularly on social media about the role of CWN and the impact of CWN on the lives of women in Dhankuta.
7. Appealing to donors in the U.S. and elsewhere to secure funds to expand the mandate and ability of CWN to address the health needs (specifically concerning uterine prolapse) of women in Dhankuta, and, perhaps in other nearby communities. This may eventually evolve to include the goal of increasing the frequency of health clinics as well as increasing the number of health clinics within the region.
8. Raising funds for CWN via a crowd-funding campaign that I will launch to garner awareness and funds within and beyond my own network.
9. Upon returning from my community service mission, I will continue to advocate for and support the work of CWN from Europe.