GOV-HER-NANCE

The Gov-her-nance is a unique model that generates new voices to fix old problems around gender roles, local development, and open government. The Gov-her-nance bulletin gathers gender-related rumors, myths, issues/concerns, and questions from communities across Nepal. With this bulletin, we hope to reduce the information gaps between local governments and citizens, lift up the ideas of women and gender minorities (representing various backgrounds across Dhangadhi) and provide a shared basis of understanding to make Dhangadhi Sub-Metropolitan a more gender-friendly city.

FREE HELICOPTER RESCUE PROGRAM FOR THE PREGNANT AND POSTPARTUM MOTHERS

The Presidential Women Upliftment Program has been fully implemented in 19 districts and partially implemented in 29 districts of Nepal. The program is designed for people living in remote (from mountainous and hilly regions) areas without access to regular health service. The focus is on preventing pregnant and postpartum mothers from the health risks during pregnancy and childbirth at free of cost.

This free Helicopter rescue program is currently provided in three districts of the Sudurpaschim province:

- Doti: At all the local units except for Dipayal Silgadhi Municipality,
- Baitadi: At all the local units except for Dasrath Chand Municipality,
- Dadeldhura: Aalitaali Rural Municipality, Nawadurga Rural Municipality and Parshuraam Rural Municipality

Women from the above mentioned municipalities i.e, program implementation areas of Sudurpaschim province, facing a life threatening risk are given a treatment at Seti Zonal Hospital, Dhangadhi

Source: [https://mowcsc.gov.np/uploads/uploads/iPM3L8Bi9UQF3Gmgd0ClzUt8MGxukFLEH3p3Sdw.pdf](https://mowcsc.gov.np/uploads/uploads/iPM3L8Bi9UQF3Gmgd0ClzUt8MGxukFLEH3p3Sdw.pdf)
I want to live with my parents (forever) without getting married. Will I be eligible to receive the facility provided by the government for single women?

"Single woman" is defined as a divorced woman, a widow, an unmarried woman who has reached the age of thirty-five, a woman whose husband has been missing or is contactless for more than five years, a woman who has received property or woman who has separated from her husband. All the above-mentioned women groups are eligible to receive programs or schemes related to single women.

Source: https://mowcsc.gov.np/acts-regulations

The provincial government and the Ministry of Social Development manage the street children. The province government looks after the protection, rescue process, upbringing, family and social rehabilitation, reunification, reintegration, psychosocial counseling, rehabilitation of street children as well as management of medicine, non-formal education and vocational training. The main objective of these programs is to prevent street children from returning to the streets by creating a conducive environment for them to live in the society.

Source: https://mofaga.gov.np/model-law/566

I have heard that the government has brought the program of distributing Iron Folic Acid for adolescent girls. Where do we access this medicine?

This program is brought to address the problem of anemia among adolescent girls. This program targets adolescents girls of the age group of 10 to 19 years. Iron folic acid is distributed in schools which can be accessed by the school going girls, for those who do not go to schools are reached by the female community health volunteers and the health workers. Adolescents should take iron folic acid once a week for 13 weeks. After 13 weeks of taking the medicine, you keep a gap of another 13 weeks and start taking the tablets again for 13 weeks.

Source: https://www.mofaga.gov.np/news-notice/2273
Mina Devi BK (name changed) who lives in Ghosuwa, Ward No. 11 of Dhangadhi Sub-Metropolitan City is 42 years old. Before she got married, she was living a happy life at her mother’s house. She got married at the young age of fifteen. At the beginning of the first few years, she shared a good relationship with her husband. There were no quarrels or arguments in the family and the bond shared was strong. She got her first menstruation after two years of marriage and had to live separately in a cowshed with least facilities as per the household rules. She couldn’t conceive a child, even after a few years of menstruation. The behavior of the family also started to change because of her infertility. Soon, her husband got married to another woman. After 2/4 months of marriage, her husband migrated to India with his second wife. After moving to India, his second wife gave birth to 2 sons and 1 daughter. Mina’s husband returned to Nepal after seven years. After returning, he started torturing her in multiple ways. Mina faced many torture and accusation. Her husband demeaned her, said things such as, “You are infertile, you have no children, you are worthless and have no right to live here anymore.” The family also started physically abusing her and she was compelled to move to her mother’s house. However, the strong societal belief that the daughter should live at her husband’s house regardless of the situation rendered Mina homeless and helpless. After a lot of struggle for justice, she got a small room as a property share from her husband. Unfortunately, she was constantly tortured and couldn’t survive there anymore. Therefore, she came to live with her mother. Along with these issues, currently, she is suffering from many health (uterine) problems. In this situation, she is expecting some help from the concerned government authorities but she is disappointed as there are way too many formalities involved to get help.

She was denigrated with horrific names for not being able to conceive. They said things such as “You are infertile, you have no children, you are worthless”. Her husband’s family also started physically and mentally torturing her. Unable to bear the torture of her in-laws, husband, her husband’s second wife and sons, and daughters, she moved to her mother’s house.”
Radha BK
Ward Member, Dhangadhi Sub-Metropolitan City-3, Kailali

Women become the victims of violence from birth. Women especially those in leadership positions are more prone to violence. Not listening to them and humiliating them (at home, at the political level, in the office) is also a kind of violence against them. Women and men are not treated equally even at home. A woman cannot take any decision without seeking approval of her husband or male members in the family. Therefore, equality has to be maintained at home to develop the status of women and ensure equal access. More quotas should be opened (based on population) to empower women at all levels. Lastly, participation of women representatives should be increased at the local level so that women can put their ideas forward in the policy making process.

Bina Devi Chaudhary
Ward Member, Dhangadhi Sub-Metropolitan City - 19, Kailali

In our patriarchal society, women are often confined to the four walls of the house. It is still believed that women should only take the sole burden of household activities. A woman is asked several questions if she goes out of the house for work and returns home late. Further, management of the kitchen is considered to be a women’s duty and even the working women are expected to take full control of the kitchen after returning home from work. Thankfully, I have been lucky so far to receive support from everyone for these responsibilities. Out of everyone, my husband has been most supportive as he helps me in cooking, washing dishes, washing clothes and other household chores. This support from my husband has encouraged me to work further for the community. People in my ward have started encouraging their daughters, daughters-in-law, and wives to work like me. They give my example to the females of their families as encouragement.
The sources of information presented here are collected from community volunteers, validated online sources, government offices, and fellows appointed by the Accountability Lab based on research and interactions with different people, directly and indirectly, over the past week. The issues highlighted here are chosen based on prevalence, relevance, and potential impact on Dhangadhi Sub-Metropolitan City. The information presented in this issue is correct at the time of publication.