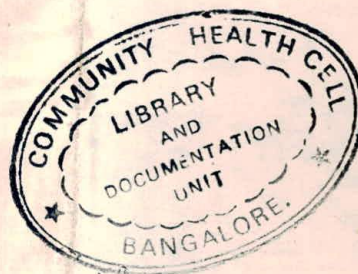


CHETNA'S

WOMEN'S HEALTH AND DEVELOPMENT RESOURCE CENTRE

STRATEGY PAPER



DECEMBER, 1992
CENTRE FOR HEALTH EDUCATION, TRAINING & NUTRITION AWARENESS.
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EXECUTIVE SUMMARY

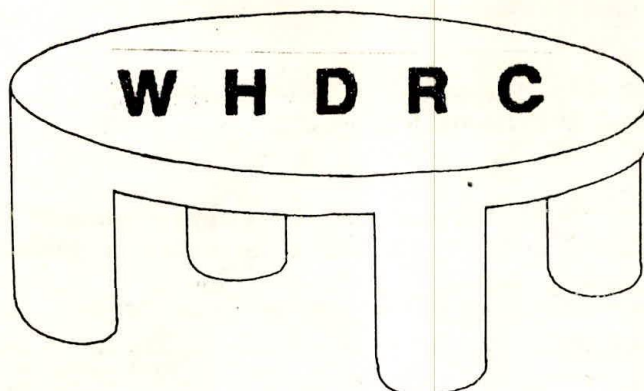
With the financial support of the MacArthur and Ford Foundations, CHETNA launched a Women's Health and Development Resource Centre (WHDRC) on October 1, 1992.

With a mission that seeks to empower women to gain control over their own health, WHDRC's analysis and approach takes into account the totality of women's social, economic and political environment, including the implications of gender discrimination on women's health. In its attempt to enhance women's health status, WHDRC's strategy addresses the social, physical, and psychological well being of women throughout their life cycle.

Built on this firm foundation, WHDRC's strategy is to support NGOs, GOs and other autonomous bodies in the states of Gujarat and Rajasthan, India. Its strategy is to strengthen their capacity to implement and manage effective health programmes for women through awareness-raising and sensitization, the development of educational and training material, and by organizing capacity-building workshops leading to organizational and human resource development. In the process, WHDRC will initiate and foster the formation of links among its partner organizations, building a strong network for effective advocacy at the regional and national policy levels.

The present document provides a detailed outline of WHDRC's philosophy and programme strategy.

THE FOUR PILLARS OF WHDRC



The following four pillars represent the underlying principles of WHDRC's philosophy and strategy.

INTEGRATIVE

WHDRC recognizes that a woman's health encompasses her social, physical, and psychological well being. These are considered to be interconnected and will be addressed together in an integrative fashion.

HOLISTIC

WHDRC does not see women merely in their role as mothers. The programme will focus on all the stages of the life cycle: infancy, childhood, adolescence, adulthood and old age. WHDRC believes that only by addressing the distinctive concerns of each stage can there be a significant improvement in women's overall well being.

GENDER-SENSITIVE

WHDRC recognizes that gender discrimination is one of the important determinants of women's low health status. Thus, understanding and addressing the implications of gender relations, and enlisting the participation of men and the community would be central to its efforts in enhancing women's health and development.

REALISTIC

In its analysis and approach, WHDRC considers the totality of political, economic and social factors that shape women's environment, particularly norms, traditions, taboos, religion and other forces which affect women's ability to control and improve their health status.

CHETNA'S

WOMEN'S HEALTH AND DEVELOPMENT RESOURCE CENTRE

VISION

WHDRC ENVISAGES AN EGALITARIAN AND JUST SOCIETY WHERE EMPOWERED WOMEN LIVE HEALTHY LIVES.

MISSION/GOAL

TO ENHANCE WOMEN'S HEALTH STATUS BY EMPOWERING THEM TO GAIN CONTROL OVER THEIR OWN HEALTH AND DEVELOPMENT CONCERNS.

STRATEGY

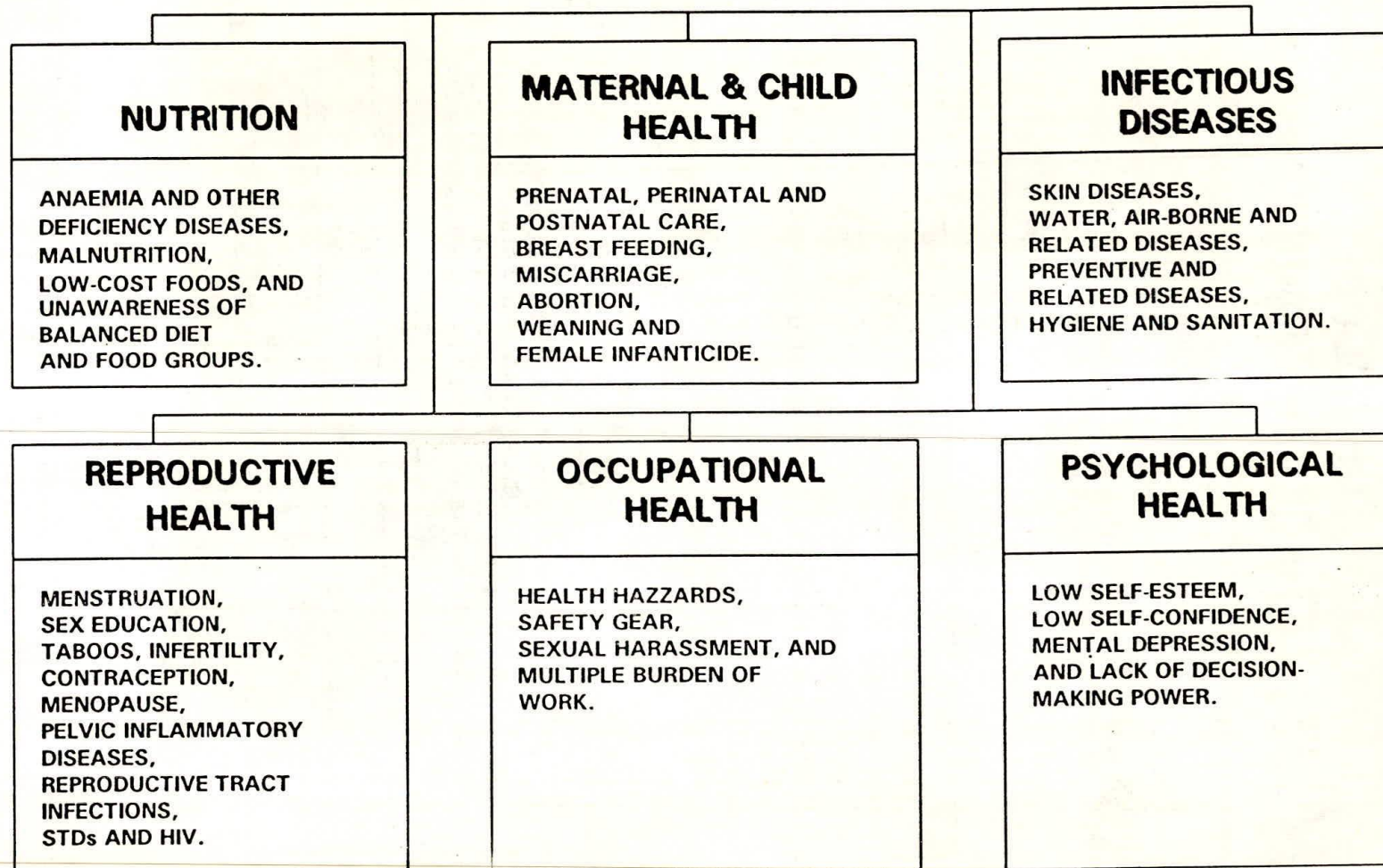
TO SUPPORT GOs, NGOs AND OTHER AUTONOMOUS BODIES THAT WORK IN THE STATES OF GUJARAT AND RAJASTHAN, INDIA BY STRENGTHENING THEIR CAPACITY TO IMPLEMENT AND MANAGE EFFECTIVE HEALTH AND DEVELOPMENT PROGRAMMES FOR WOMEN.

ACTIVITIES

WHDRC'S ACTIVITIES WILL FOCUS ON DOCUMENTATION, DEVELOPING EDUCATIONAL AND TRAINING MATERIAL, AWARENESS-RAISING AND SENSITIZING, ORGANIZING CAPACITY-BUILDING WORKSHOPS, NETWORKING AND ADVOCACY.

WHDRC'S STRATEGIC HEALTH CONCERNS

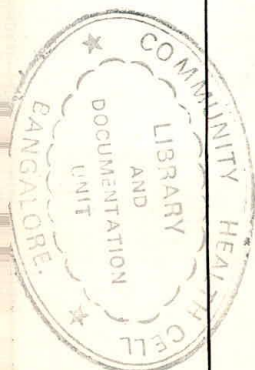
WHDRC WILL CONTINUE TO FOCUS ITS ATTENTION ON NUTRITION, MATERNAL AND CHILD HEALTH, AND INFECTIOUS DISEASES. ANAEMIA, WHICH IS PREVALENT AMONG WOMEN OF ALL AGES, WILL RECEIVE SPECIAL ATTENTION. IN ITS NEW STRATEGY, HOWEVER, WHDRC WILL ALSO ADDRESS REPRODUCTIVE, OCCUPATIONAL AND PSYCHOLOGICAL HEALTH AS PART OF ITS EFFORT TO ENHANCE WOMEN'S OVERALL HEALTH STATUS.



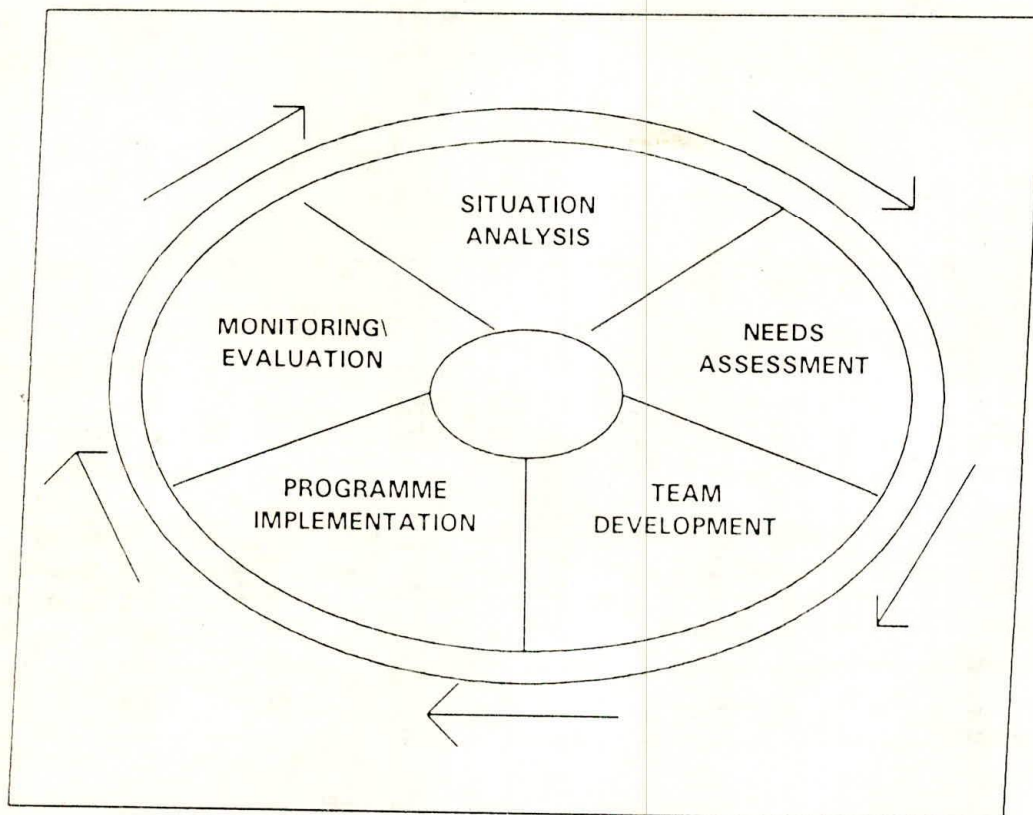
WHDRC'S LIFE CYCLE INTERVENTIONS

THROUGH WHDRC'S HOLISTIC APPROACH, ALL STAGES OF WOMEN'S LIFE CYCLE WILL BE ADDRESSED BY THE PROGRAMME, WITH SPECIAL ATTENTION GIVEN TO ADOLESCENT HEALTH. CHETNA'S CHILD RESOURCE CENTRE WILL FOCUS ITS ATTENTION ON THOSE BETWEEN THE AGES OF 3 AND 18.

<p>INFANT (0-1)</p> <p>NEONATAL, PERINATAL AND POSTNATAL CARE, BREAST FEEDING, WEANING, IMMUNIZATION, PREVENTION OF DISEASES, PROMOTION OF SOUND TRADITIONAL HEALTH PRACTICES, AND SENSITIZING AGAINST GENDER DISCRIMINATION.</p>	<p>CHILD (2-9)</p> <p>NUTRITION, PREVENTION OF DISEASES, IMMUNIZATION, OCCUPATIONAL HEALTH, SENSITIZING AGAINST GENDER DISCRIMINATION, AND RAISING SELF-ESTEEM.</p>	<p>PRE-ADOLESCENT (10-12)</p> <p>NUTRITION, SEX EDUCATION, PREVENTION OF DISEASES, BUILDING SELF-ESTEEM, AND PROMOTING HEALTHY SOCIAL BEHAVIOUR.</p>
<p>ADOLESCENT (13-19)</p> <p>NUTRITION, PREVENTION OF DISEASES, SEX EDUCATION, REPRODUCTIVE HEALTH, PREPARATION FOR MOTHERHOOD, OCCUPATIONAL HEALTH, SENSITIZING AGAINST GENDER DISCRIMINATION, AND RAISING SELF-ESTEEM.</p>	<p>ADULT WOMAN (20-45)</p> <p>NUTRITION, PREVENTION OF DISEASES, IMMUNIZATION, MATERNAL AND REPRODUCTIVE HEALTH, SEX EDUCATION, OCCUPATIONAL HEALTH, PROMOTION OF SOUND TRADITIONAL HEALTH PRACTICES, SENSITIZING AGAINST GENDER DISCRIMINATION, AND RAISING SELF-ESTEEM.</p>	<p>OLDER WOMAN (46+)</p> <p>NUTRITION, PREVENTION OF DISEASES, GYNAECOLOGICAL HEALTH (MENOPAUSE), OCCUPATIONAL HEALTH, PROMOTION OF SOUND TRADITIONAL HEALTH PRACTICES, AND RAISING SELF-ESTEEM.</p>



WHDRC'S ACTIVITY CYCLE



THE ABOVE ACTIVITY CYCLE IS PROGRAMMED TO BUILD WHDRC'S INTERNAL CAPACITY FOR IMPLEMENTATION AND TO ENSURE MAXIMUM SUCCESS OF ITS EXTERNAL ACTIVITY PROGRAMME. SITUATION ANALYSIS, NEEDS ASSESSMENTS, TEAM DEVELOPMENT, AND MONITORING AND EVALUATION WILL TAKE PLACE ON AN ON-GOING BASIS ACCORDING TO NEED. THESE STEPS ARE NOT MUTUALLY EXCLUSIVE, BUT RATHER THEY OVERLAP AND INTERACT THROUGHOUT THE CYCLE.

SITUATION ANALYSIS

Based on the analysis of available research and documentation, and on CHETNA's ten years of experience in the field of preventive health, WHDRC has developed a deep understanding of the situation and condition of women's health in India. This is outlined in greater detail in WHDRC's Perspective Paper. CHETNA recognized the need for more integrative, holistic, gender-sensitive and realistic health programmes for women. The creation of WHDRC, its philosophy and strategy represent a response to this need.

NEEDS ASSESSMENT

In order to implement its programme effectively, WHDRC will conduct needs assessments with NGOs and GOs in the states of Gujarat and Rajasthan. This process will help to determine the specific needs of other organizations for documentation, education and training material, and capacity building. Based on the results, WHDRC will begin implementing its activity programme.

TEAM DEVELOPMENT

In-house workshops for team development will be organized to strengthen WHDRC's internal capacity for implementation. The workshops will focus on the health concerns which WHDRC recently incorporated into its strategy. These include reproductive health, occupational health, and psychological health. For the newly recruited team members, the workshops will also focus on WHDRC's philosophy and strategy. Where necessary, other workshops will be organized for knowledge and skill building in conducting participatory trainings, using computer software, programme planning, monitoring and evaluation.

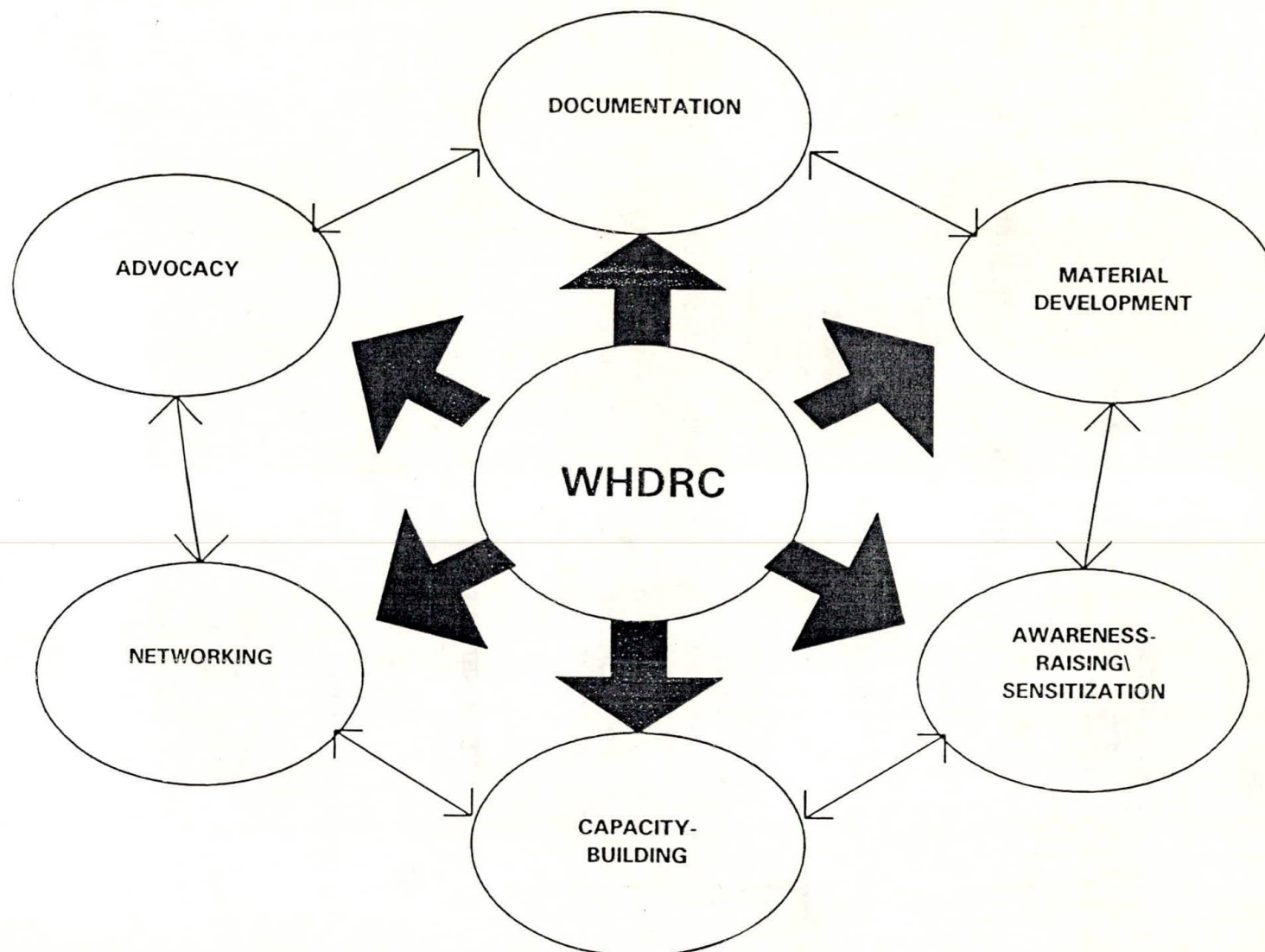
PROGRAMME IMPLEMENTATION

The objectives, content and strategies of each of WHDRC's programme activities are summarized in the following pages.

MONITORING AND EVALUATION

On-going monitoring and periodical evaluations form an integral part of WHDRC's internal programme cycle. They will serve to review WHDRC's activity programme and assess its progress in relation to previously defined goals and objectives. The process will draw attention to problems and limitations and highlight successful activities and techniques which can be incorporated into future plans to enhance the programme.

WHDRC'S ACTIVITY PROGRAMME
FOR STRENGTHENING THE CAPACITY OF NGOs AND GOs.



DOCUMENTATION

OBJECTIVE

To build a documentation unit comprising of books, articles, journals, research papers, pamphlets, reports, modules, audio cassettes and audio visual materials related to women's health and development. This includes information as well as education material. The unit will be used by WHDRC and other GOs, NGOs, women's groups, academicians, researchers, students and other interested individuals.

CONTENT

WHDRC will document material on relevant issues pertaining to women's health and development, and particularly on WHDRC's strategic health concerns. The centre will also document WHDRC's experiences and activities.

STRATEGY

The documentation unit will collect and classify material which is already available, and review it to determine its suitability, appropriateness and the languages in which it is available. If required, material will be translated into Gujarati, Hindi and/or English, and adapted based on the needs of its target group. The unit will also document and translate the experiences of WHDRC, its reports, the proceedings of workshops attended, and the written and audio visual material which is developed. Finally, the unit will disseminate material according to need.

MATERIAL DEVELOPMENT

OBJECTIVE

Information material will provide the technical and thematic input on women's health concerns which is needed by other organizations. Material for education, awareness raising, sensitization and capacity building will assist organizations to implement woman-centred health education at the grassroots level using WHDRC's strategy. The material will also promote self-reliance and sustainability by providing organizations with the technical know-how for developing their own material and for conducting internal trainings independently.

CONTENT

WHDRC will develop need-based written and audio visual material on the technical aspects of women's health and development, as well as material for education, training, awareness raising, sensitization, capacity building and advocacy.

STRATEGY

WHDRC will review the material already available within CHETNA and in other organizations in terms of their suitability, appropriateness, and languages available. WHDRC will translate available material into Gujarati, Hindi and/or English, and adapt it in order to suit the needs of its target groups. WHDRC will also encourage organizations in other states within India to translate material. Existing education and training material will be modified and replicated based on the suggestions of its users. Finally, WHDRC will develop and disseminate material which is not available but needed by other organizations.

AWARENESS-RAISING SENSITIZATION

OBJECTIVE

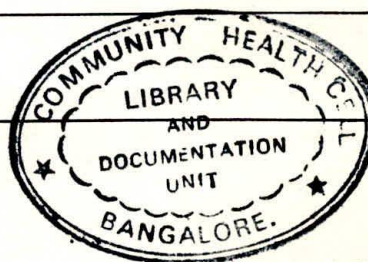
To raise awareness and sensitize NGOs and GOs on women's health and development concerns, and on the need to adopt and implement WHDRC's strategy. However, WHDRC recognizes that to encourage this, it is necessary to work closely with supervisors and managers as they tend to be the decision-makers. Thus, workshops for awareness-raising and sensitization will be directed at trainers as well as supervisors or managers.

CONTENT

The focus will be on the conceptual understanding of WHDRC's strategy and on promoting its adoption by other organizations. Technical and subject information input will also be provided on WHDRC's strategic health concerns.

STRATEGY

WHDRC will organize local, state and national level workshops and seminars for other GOs, NGOs and autonomous bodies specifically for awareness-raising and sensitization. These will be directed particularly towards trainers and supervisors, but may also include policy-makers, academicians, decision-makers and other individuals concerned with women's health and development. WHDRC will also participate in local, state, national and regional workshops and seminars organized by other organizations as a means of sharing experiences, raising awareness and sensitizing, and of promoting WHDRC's strategy.



CAPACITY-BUILDING

OBJECTIVE

To build the capacity of NGOs and GOs to implement and manage effective programmes for women's health and development, and to promote their self-sufficiency so that they can develop their own education and training material, and conduct their own in-house trainings independently.

CONTENT

Human Resource Development and Programme Management for Trainers and Supervisors, which includes workshops on conceptual understanding of WHDRC's strategy, technical and subject information input, training for skill development in training trainers on how to raise awareness, sensitize, develop education and training material, and conduct needs assessments, baseline surveys and qualitative and participatory research. Workshops will also focus on programme planning, monitoring and evaluation.

STRATEGY

WHDRC will organize need-based workshops specifically for building the capacity of GOs and NGOs in the states of Gujarat and Rajasthan.

NETWORKING

OBJECTIVE

To share WHDRC's strategy and experiences with other organizations. Networking will also promote cooperation among all organizations working in women's health and development. It will foster the formation of links among WHDRC's partner organizations, and help to build a pressure group for policy advocacy at the state and national levels.

CONTENT

WHDRC will network with NGOs, GOs and other autonomous bodies concerned with women's health and development.

STRATEGY

WHDRC will participate in local, state, national, regional, and international workshops, seminars, conferences and other forums related to women's health and development. WHDRC will also organize workshops on women's health and development, and publish articles through CHETNA's quarterly newsletter.

ADVOCACY

OBJECTIVE

To sensitize and orient government decision-makers on women's health and development concerns, promote the integration of WHDRC's strategy into the government policy agenda, and ensure effective policy formulation and implementation at the district, state and national levels. WHDRC will also support the efforts of NGOs in Gujarat and Rajasthan to implement government schemes which are gender sensitive.

CONTENT

Critical analysis of government policies and programmes on women's health and development, especially those on nutrition, adolescent health, maternal and child health, reproductive health, infectious diseases, occupational health, psychological health, and on the promotion of gender-sensitive traditional health practices.

STRATEGY

Document and share the experiences of NGOs, as well as their major recommendations for policy makers in the states of Gujarat and Rajasthan and at the national level. WHDRC will participate in debates, meetings, workshops, seminars and other forums organized at the district, state and national levels. It will also organize meetings, seminars and consultations on women's health and development, and invite decision-makers for dialogues with NGO representatives.

STRATEGIC ASSUMPTIONS FOR PLANNING INTERVENTIONS

Initially, WHDRC made a list of assumptions about women's health and development concerns in general. However, in order to determine WHDRC's key areas of intervention it was necessary to review the initial assumptions and to select only those which could be adopted realistically, that is, based on CHETNA's past experiences, its resources and capacity. Thus, the review process generated a list of carefully selected **strategic assumptions**. Each strategic assumption reflected a specific need and therefore helped to determine an area for planned intervention.

WHDRC's strategic assumptions and areas for planned intervention are grouped below according to the strategic health concerns addressed by the programme.

NUTRITION, MATERNAL AND CHILD HEALTH, AND INFECTIOUS DISEASES

1) Nutrition, maternal and child health, and infectious diseases are important concerns for women's health and development.

WHDRC will address these strategic health concern as part of its overall effort to improve women's health status.

2) The specific needs of NGOs and GOs regarding nutrition, maternal and child health and infectious diseases are not presently known to WHDRC.

WHDRC will conduct a needs assessment.

3) WHDRC has an extensive body of documentation on nutrition, maternal and child health, and infectious diseases.

WHDRC will only collect and classify new and up-to-date material that relate to these issues.

However, it will translate, adapt and disseminate material from its documentation centre on an on-going basis according to need.

4) WHDRC's senior team members have the knowledge, skills and experience necessary to address these health concerns. However, WHDRC's newly appointed members will need some orientation.

WHDRC will conduct in-house workshops for team development on nutrition, maternal and child health, and infectious diseases.

5) Other organizations will not necessarily respond positively to WHDRC's efforts and strategy.

WHDRC will organize workshops and seminars to raise awareness and sensitize health organizations on the need to implement WHDRC's strategy.

6) Health organizations require appropriate and effective education and training material.

WHDRC will develop and disseminate need-based and woman-centred education and training material on these three health concerns.

7) Not all organizations have the capacity to implement and manage effective programmes on nutrition, maternal and child health and infectious diseases.

WHDRC will organize need-based workshops for capacity building.

8) There is a need for sharing experiences and for greater cooperation and linkages among GOs, NGOs and other autonomous bodies concerned with women's health and development.

WHDRC will network through its newsletter and periodicals, and by organizing and participating in local, state, national and regional workshops, seminars, conferences and other such forums which address nutrition, maternal and child health, and infectious diseases.

9) There is need for gender sensitive and holistic government policies on nutrition, maternal and child health and infectious diseases.

WHDRC will advocate for positive changes at the policy level.

REPRODUCTIVE, OCCUPATIONAL AND PSYCHOLOGICAL HEALTH

1) Reproductive, occupational, and psychological health are crucial to women's overall well-being.

WHDRC will address these health concerns as part of its overall effort to improve women's health status.

2) The specific needs of organizations concerning these health concerns are not yet known to WHDRC.

WHDRC will conduct a needs assessment.

3) There is need within WHDRC for documentation and research on all these health issues.

WHDRC will promote research and will collect, classify, translate, adapt and disseminate written and audio visual material that relate to these health concerns.

4) In-house workshops for team development are required in order to build WHDRC's internal capacity to address these health concerns.

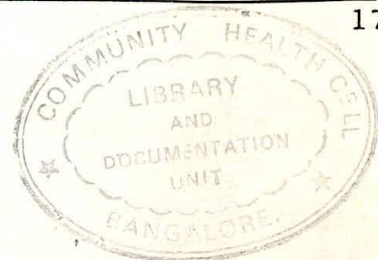
WHDRC will conduct in-house training workshops for team development in reproductive, occupational, and psychological health.

5) Development organizations will not necessarily respond positively to WHDRC's efforts and strategy.

WHDRC will organize workshops and seminars to raise awareness and sensitize organizations on the need to implement WHDRC's strategy for addressing effectively these health concerns.

6) For these three health issues, there is need for education and training material, capacity-building, networking and advocacy, but WHDRC will need to strengthen its own internal capacity first in order to address these concerns effectively.

WHDRC will initially concentrate its efforts on documentation and research, awareness raising, and team development before phasing into the next stages of material development, capacity-building, networking and advocacy. For these it will seek external support.



APPENDIX I

TERMS OF REFERENCE

HEALTH

A state of physical, psychological, emotional and social well being that derives from having knowledge of health, control over one's health, and access to adequate health facilities.

EMPOWERMENT

Raising women's level of consciousness towards an understanding of the physical and social causes of ill health, articulating alternatives for improving their health, and developing those skills which have the transformational potential of enhancing women's health status and their ability to act as decision-makers in matters that concern their own health and development.

SELF-ESTEEM

Awareness and appreciation of one's strengths, having a positive image of oneself and a sense of self-worth, as well as confidence in one's ability to control and enhance one's health status.

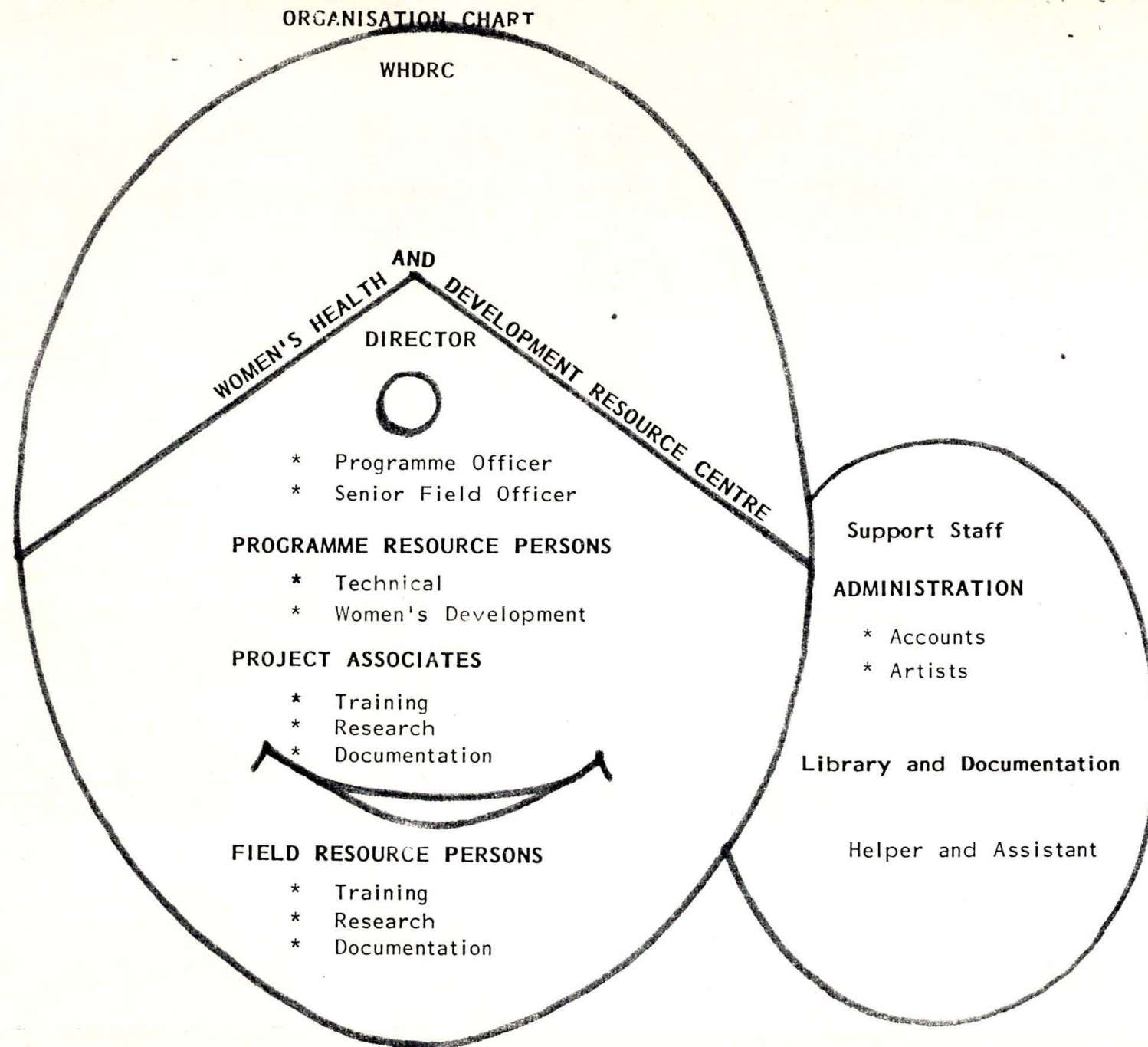


FIGURE 1 : ORGANISATION CHART OF WOMEN'S HEALTH AND DEVELOPMENT RESOURCE CENTRE

WHAT IS CHETNA?

CHETNA, which means 'awareness' in many Indian languages, defines its mission as the empowerment of disadvantaged women and children so they can gain control over their health and that of their families and their communities.

CHETNA, the Centre for Health Education, Training and Nutrition Awareness, is a non-governmental organization (NGO) based in Ahmedabad, Gujarat. CHETNA provides technical and capacity-building support to NGOs, GOs and other autonomous bodies that work in the areas of health and nutrition for women and children.

Founded in 1980, CHETNA began with a single project: To improve the effectiveness of the government-implemented Supplementary Feeding Programmes for mothers and children in Gujarat. With the success of that project, the government asked CHETNA to develop training and education modules for the implementation of health and nutrition programmes designed to help disadvantaged mothers and children in rural, tribal and urban areas in India.

Over the past decade, CHETNA has broadened its activities in the field of health and nutrition education for women and children. Its impact can be felt in rural, tribal and urban areas of Gujarat and Rajasthan.

CHETNA develops and field-tests all their training and educational materials. The training programmes can be easily modified to suit the needs of individual organisations and communities.

CHETNA believes that a participatory approach is the most effective way to educate women and children on health-care concerns. Creating basic health information that can be understood by women and children regardless of their education level is the challenge facing CHETNA's team. CHETNA has met this challenge by devising a variety of creative participatory materials to teach health and nutrition: skits, illustrations, role-plays and songs.

As a support agency, CHETNA works with GOs, NGOs and autonomous bodies to improve their capacity to implement and manage effective health programmes for disadvantaged women and children. Through training programmes and educational material, CHETNA ensures that grassroot health and nutrition programmes meet the needs of disadvantaged women and children.

Other activities that CHETNA supports include awareness programmes for village women; fertility awareness camps for women and adolescent girls; and action research on traditional health-care practices.

CHETNA provides information and resource material on woman and child health to both the government and voluntary sectors. It also acts as a liaison between local health and nutrition workers and policy makers to ensure that programmes are implemented effectively.

CHETNA is represented on several state, regional and national level policy-making bodies and is also frequently invited to share its knowledge and experience at international workshops.

CHETNA started its **Child Resource Centre (CRC)** activities in June 1991. The CRC draws upon CHETNA's first-hand experience in children's health and nutrition education. The CRC documents and designs innovative educational materials on a variety of health and nutrition concerns that can be used to empower children and to train child care workers and teachers.

On a broader level, the CRC acts as a liaison between child-centred organisations and relevant government departments. In doing so, the CRC tries to ensure that government policies meet the needs of children.

In October 1992, CHETNA initiated a **Women's Health and Development Resource Centre (WHDRC)**. The Centre addresses the physical, social and psychological health concerns of women of all ages, rather than focusing exclusively on women of a child-bearing age.

Because CHETNA believes an individual's health cannot be separated from the society in which they live, the WHDRC will also consider the societal and cultural factors that can adversely affect a woman's health.

- * -



CHETNA

Women's Health and Development Resource Centre



Chaitanyaa

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