



An awareness-raising event on health rights in Banke district, Nepal. Credit: Bal Krishna Kattel/Oxfam

FROM POLICY TO PRACTICE

Young people in Nepal successfully lobbying for healthcare

In Nepal, My Rights, My Voice (MRMV) experience shows how setting up groups for young people – particularly young women – and empowering them to know and claim their rights, can enable them to advocate in a range of innovative and effective ways and make real changes to their local contexts.

In Nepal, MRMV set up a number of groups for young people of different ages – Child Health Committees (CHCs), Youth Health Committees (YHCs) and Community Discussion Classes (CDCs) for young women. It worked intensively with these groups to help them to learn about their rights and develop the confidence and skills to be able to claim them from duty-bearers.

The CDCs built on the methodology developed by Oxfam's earlier Raising Her Voice programme in Nepal,¹ itself based on the REFLECT approach to social change.² CDCs met daily for two hours in 57 communities, with young women devoting significant time and energy to the meetings and to follow-up activities. A facilitator worked with each group to help women explore issues of concern, identify actors who held power to make change in these areas, and explore how to influence these actors to achieve a solution. Efforts were made to ensure the inclusion of all political parties in advocacy initiatives, to avoid accusations of political endorsement which might prove harmful to campaign efforts. The initial starting point for MRMV groups

was the right to health and maternal health, but as levels of confidence and empowerment grew, young women increasingly identified their own issues such as child marriage, gender-based violence and trafficking, and organised their own influencing activities to bring about change. The groups also successfully focused on the empowerment of young women in the community, transforming the confidence, skills and leadership potential of those involved in the programme.

The CDCs and other youth groups successfully campaigned around free healthcare – a right which is guaranteed by the national health policy, but which communities struggle to access in practice. Lobbying of relevant duty-bearers resulted in improved services and more clinics being set up. A community awareness-raising campaign significantly increased take-up of free health services, up by 327% in target communities in 2014 compared to 2012 figures. Lobbying based on participatory videos³ made by youth campaigners secured solar panels for five maternity clinics so that they could operate at night, and achieved funding for a medical laboratory. CHCs and YHCs also campaigned in schools; as a result, schools have increased the availability of books, provided drinking water stations, constructed separate toilets for female students and set up waste-management systems.

**MY RIGHTS
MY VOICE**



Youth campaigners used a wide range of innovative and creative methods for influencing and campaigning. Forum theatre⁴ drama sketches have taken messages about issues such as gender-based violence and child marriage to communities; by confidently expressing their own opinions and actively involving the audience, young people are successfully changing attitudes towards such practices. They are also encouraging new respect for the leadership skills of young people and their role in public life, particularly for young women and girls. Radio has also been used to raise awareness about the right to access health services and allow constructive dialogue with duty-bearers. Video success stories as well as wall magazines⁵ and public hearings have helped to capture and disseminate learning and key campaign messages.

“Once I started going to the CDC in the village I learnt a great many things. I learnt about what government health services I was entitled to and how to access them. And I learnt about women’s rights and how to claim my rights. Because of this, my confidence increased and I found myself able to stand up and express my opinion in any situation.

“We women should no longer remain confined to the kitchen. We should get into village-level decision-making structures. And once there, we should stake a claim to leadership! We should participate in every situation equally with the men. Nepal can only make headway if women take the initiative, because women outnumber men here.”

Chitramaya, MRMV CDC member, Nepal



A National Assembly of CDC Facilitators in Kathmandu, Nepal.
Credit: Middleway Communication/Oxfam

The emphasis of MRMV’s work has been to develop active citizens who have the capacity and skills to advocate on any issue – not simply to deliver programme activities. Community stakeholders have become increasingly aware of the potential of women and young people, who are now being elected to decision-making structures such as parent-teacher associations, school management boards and forest-users associations. In all, 1,395 women and young people have now been elected to these bodies in programme areas, and are now able to demand effective services and ensure that the budget allocated to women and youth is used to meet their needs.

KEY LEARNING

- The discussion class methodology, used by MRMV and Raising Her Voice in Nepal, is an extremely effective approach to build the confidence and agency of young women, and develop their leadership skills so that they can advocate for change and take up positions in decision-making structures.
- For real, long-term changes in policy, local-level influencing needs to link to national-level advocacy. Successful national-level advocacy work requires working with well-connected partners and allies – and engaging with all political parties to avoid bias or co-option.

NATIONAL-LEVEL ADVOCACY

One key piece of learning to emerge from MRMV in Nepal is that community-level advocacy can only achieve so much and needs to link to national-level policy to achieve real influence and change in the future. For this reason, CDC facilitators worked with national-level partners with advocacy experience to organise a National Assembly in Kathmandu to coincide with Constituent Assembly discussions on the new constitution. More than 150 women, youth and children shaped their own health manifesto which was used for successful lobbying with key political representatives from all parties. Six out of eight parties included asks from the manifesto in their policies and made commitments to address the health needs of young people and mothers. MRMV recorded the campaign promises of duty-bearers on video so that it can follow up with them and hold them to account in future.

NOTES

¹ Raising Her Voice was an Oxfam global programme focusing on women’s political empowerment, which ran for five years until 2013. Raising Her Voice programmes have continued in some countries and the approach has been adapted for use in other programming. For more information, visit: www.oxfam.org.uk/raisinghervoice

² The REFLECT method of social change is based on the teachings of Paulo Freire combined with participatory development approaches. It was developed in the 1990s through pilot projects in Bangladesh, Uganda and El Salvador, and is now used by over 500 organisations in 70 countries worldwide.

³ Participatory video involves training a group or community to create their own film to bring about change on issues which they have identified.

⁴ Forum theatre was created by the practitioner Augusto Boal as a method of teaching people how to change their world. Forum theatre was part of his ‘Theatre of the Oppressed’.

⁵ Wall magazines are public displays created by youth groups to publicise the issues which they are campaigning on, and invite community members to contribute to activity planning and development.

MY RIGHTS MY VOICE

My Rights, My Voice is a four-year programme which engages marginalised children and youth in their rights to health and education services. The programme has been implemented through our local partners in eight countries - Afghanistan, Georgia, Mali, Nepal, Niger, Pakistan, Tanzania and Vietnam - primarily funded by the Swedish International Development Cooperation Agency (Sida). To find out more about the programme, please email us at mrmv@oxfam.org.uk or visit us at www.oxfam.org.uk/myrightsmymyvoice