WOMEN’S HEALTH AND RIGHTS ADVOCACY PARTNERSHIP (WHRAP) – SOUTH EAST ASIA & MEKONG REGION

KNOWLEDGE SHARING STRATEGY
[WORKING DRAFT]

Prepared for the WHRAP Project in South East Asia and Mekong Region
Linking Gender, Human Rights and Young People’s Sexual and Reproductive Health and Rights
WOMEN’S HEALTH AND RIGHTS ADVOCACY PARTNERSHIP (WHRAP) – SOUTH EAST ASIA & MEKONG REGION

Linking Gender, Human Rights and Young People’s Sexual and Reproductive Health and Rights

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I. INTRODUCTION

The Asian-Pacific Resource & Research Centre for Women (ARROW) was established in January 1993 in Kuala Lumpur, Malaysia, as a regional non-governmental, non-profit organization. ARROW’s vision is for women in Asia and the Pacific to be better able to define and control their lives, particularly in the area of women’s health and rights. The five key strategies of ARROW are INFOCOM, Evidence-based research and monitoring, capacity building, advocacy and organisational development.

The Women’s Health and Rights Advocacy Partnership (WHRAP) is a project that evolved out of a need to develop a strong advocacy agenda and presence in the region, to ensure the evidence generated through the research and monitoring effectively feed into policy and programme implementation. Started as an advocacy partnership project in 2003 in four countries in South Asia today WHRAP has become a programme expanding to 4 new countries in South Asia and 7 countries in South-East Asia including China. This current project in South-East Asia and Mekong Region – Linking Gender, Human Rights and Young People’s Sexual and Reproductive Health and Rights is being implemented in namely Burma, Cambodia, China, Indonesia, Laos PDR, Philippines, and Vietnam. Capacity building, evidence generation, and partnership are the core strategies for WHRAP-South East Asia. The project envisions the improved comprehensive sexuality knowledge amongst marginalized young people that enables them to act on that knowledge and claim for better SRHR services; which therefore improves sexual and reproductive health and rights.

Information and Communication (INFOCOM) is a key organisational strategy in ARROW. The INFOCOM objective is:

To create and implement a comprehensive information and communications strategy for ARROW, providing a strategic framework for the sharing of conceptual, practical and innovative information materials and tools; a system for the participatory monitoring and evaluating of the impact of this Strategy; the increased utilization of new technologies towards enhancing outreach; and the collection, production, dissemination, translation and promotion of such information materials and tools such that key NGOs, governments, the UN and other stakeholders are influenced towards improving health and population policies and programmes, specifically on critical women’s health and rights issues.

The INFOCOM strategy encapsulates the entire range of information and communication mechanisms within ARROW, namely: the ARROW SRHR Knowledge Sharing Centre (ASK-us), formerly known as
Information and Documentation Centre (IDC), the website, the publications section (including the ARROWs For Change bulletin) and the marketing and promotion section. Through these mechanisms, we collect, distil and repackage, or create and generate information that is rights-based, NGO-oriented and region-focused, and disseminate it to our stakeholders, including other NGOs and movements, United Nations agencies, government agencies, donors and the academe. In the process, we advocate for our issues and perspectives and foster networking, alliances and partnership building. In addition, we support capacity building and strengthening of key players within the women’s, human rights, health and other progressive social movements, in the hope that this will improve their ability to advocate for changes in policies and programmes on critical women’s health and rights issues, and ultimately, foster positive changes in marginalised women’s lives.

II. RATIONALE

Over the years, ARROW and her partners through the various partnerships projects – information, research, advocacy, have acquired a wealth of information and knowledge. However, this knowledge has not been systematically captured within ARROW and among her partner organisations. Most knowledge products, from projects, have been prepared as the usual end-of project publications and dissemination methods. However, in the past few years ARROW has been endeavouring to create a knowledge-sharing and information dissemination platform throughout the entire project period. One of ARROW’s strengths, as a regional organisation, has been its information and communications work and this is a key value-added of having ARROW coordinate the project. In order to better reflect this value-add was to consciously include an INFOCOM component in all the projects.

With the launch of a new project (WHRAP-SEA), we saw the opportunity for a deeper and meaningful engagement in the process. To this end, the Programme Officer, ASK-us, met and presented the rationale for having a knowledge capturing and sharing component in the project, to solicit feedback and assess the buy-in from the partners.

III. SUMMARY OF FINDINGS FROM THE RAPID NEEDS ASSESSMENT

Early this year the INFOCOM team conducted a rapid needs assessment among the WHRAP-SEA partners: to get an insight into partners’ information needs; information-seeking behaviour; and knowledge capturing and sharing mechanisms in their organisations, in order to develop an information and knowledge sharing strategy for the WHRAP-SEA project. This we hope will ensure better flow of information in the project and will enable us to capture valuable lessons and good practices from the project. It was also hoped that through the interactions a good rapport between Partner Project Officers’ and ARROW’s INFOCOMM team would be established.

Six country partners attended the meeting in January 2011 and these included: Reproductive Health Association of Cambodia (RHAC)(Cambodia), Yunnan Health and Development Research Association (YHDRA)(China), Yayasan Jurnal Perempuan (YJP) (Indonesia), University of Health Sciences, Faculty of Postgraduate Studies (Lao PDR), Likhaan Center for Women’s Health (the Philippines), and Center for Creative Initiatives in Health and Population (CCIHP) (Vietnam).

The summary of the needs assessment is presented below:
I. Information on Research Work
Five out of the six countries had a clear research component. The research topics ranged from: Knowledge, Attitude and Practice of and accessibility of adolescent sexual and reproductive health in ethnic minority groups; participatory study to understand and reduce the risk of unintended pregnancy among adolescents; cross-border study among young migrant population; exploratory study on young factory workers in order to ensure SRHR attainment among the economic migrant population (rural-urban); and understanding young people sexuality context and practice.

The partners were at different stages of the research. While some had completed identifying the research topic and sites, completed the design and also conducted the baseline survey, some others were still preparing the research questionnaire and plan. In terms of research methodology the commonalities were conducting a baseline surveys through questionnaires, rapid assessments and focus group discussions, in-depth interviews. Only one country used existing secondary resources such as the DHS. In terms of research design most of the partners used a pre-test, intervention, post-test modality.

II. General Information Needs & Information-Seeking Behaviour
In terms of access to information, interestingly all the six partners said they had access to libraries and resource centres be it their own organisation or to those connected to university and research centres. Some of them had access to research and journal databases. But they also looked forward to assistance from ARROW to fulfil their regional information needs.

Most of them had good access to internet services, including email and internet resources, and were connected except during field visits to remote areas and when out of office. The commonalities in information seeking behaviour were doing internet search, accessing print materials through the library and resource centres, and peers and networks in the country.

The types of information required by the partners were mainly related to their research topics and research methodology and design. These included: information of doing research on cultural beliefs and practices, especially those related to sexuality and reproductive health; with minority groups such as MSM, gays, lesbians; good practices on building public-private partnerships and information on “club models”; sexuality education, doing campaigns, capacity building on advocacy and advocacy tools etc.

III. Knowledge Capturing and Sharing Mechanisms in the Organisation
Some of the existing organisational knowledge capturing and sharing mechanisms among all the partners were: report writing; publications production – journals and newsletters, creating public awareness materials; regular information sharing meetings; and dialogue with stakeholders.

IV. Mechanism of Information Sharing
For all the organisations the preferred mode of information sharing was via emails and web-based platforms.

V. Advocacy products
Some of the planned advocacy products and mechanisms are: documentary films, IEC materials, educational tools, training materials, handbook; dialogue with the health workers and other stakeholder; plays and concerts.
VI. Challenges
The key challenges cited by the partners and gleaned through the discussions were those of language, time and personnel. As English was not the first language of most countries some difficulty in using and having information primarily in English was perceived as an issue. However, with online translation this could be resolved to a great extent.

The other issues were of time and personnel. This too would be dealt with to some extent with the appointment of inters and with the assistance of existing information personnel in the different organisations.

IV. OBJECTIVES OF THIS PAPER
The primary objective of this paper is to flesh out a strategy for implementing the knowledge capturing and sharing component of the WHRAP-SEA project. The strategy is a broad framework and plan. This paper is a working document and the details of the strategy will be tweaked as we progress in the implementation. It also seeks to provide an understanding of knowledge management, which incorporates both knowledge capturing & sharing.

V. UNDERSTANDING KNOWLEDGE MANAGEMENT
An understanding of the theory before moving into the practise is needed. Data, information, and knowledge are very much part of our daily parlance and is often used interchangeably to mean one or the other. But although they are linked and follow a hierarchical progression they are distinct in their meaning. Data are bits of facts and have no meaning. When data is organised in a way that it represents meaning, it becomes information. Information when contextualised, aids understanding and interpretation, it becomes knowledge.

Knowledge as stated by Sharratt and Usoro (2003, p 188) enables us to interpret information or derive meaning from data. They define knowledge as – ‘directly related to understanding and is gained through the interpretation of information’ (Hurley and Green, 2005). Thus knowledge extends beyond data and information and includes the judgement and experience needed to take action.

Nonaka and Takeuchi (1995) are credited with the classification of knowledge as being tacit, explicit or implicit. Tacit knowledge is unconscious and intuitive; it allows experts to make decisions without referring to rules or principles. This knowledge is undocumented and is intangible or invisible.

Explicit knowledge on the other hand is clearly articulated and accessible to anyone who reads, hears or looks at it.

Implicit knowledge helps individuals know what is socially and culturally appropriate in a given circumstance; it is knowledge of shared beliefs, values and expectations (e.g., understanding management attitudes within a given organisation) (Ramalingam, 2005; Rumizen, 2002; Haggie and Kingston, 1999).
In order to demonstrate how knowledge is created within the organisation and how knowledge transfers from tacit-explicit-implicit occurs Nonaka and Takeuchi used a matrix also known as the knowledge spiral\(^ix\) (see figure no.1).

![Knowledge Spiral Diagram](image)

**Figure 1. Framework of learning organisation**

As can be seen from the above illustration, tacit knowledge is transferred from one individual to another through a process of socialisation. Knowledge is made explicit and externalised through dialogue (written and/or oral). Explicit knowledge is further made explicit by widely disseminating existing knowledge. And finally through a process of learning and doing explicit knowledge is internalised and transformed back to tacit and implicit knowledge. This way new knowledge is transferred, transformed and created.

Knowledge management as a composite field has grown out of many disciplines – economics, business management, librarianship, human resources, communications, information technology, marketing, sociology among others. It has therefore also been defined in many ways. According to Milton (2004) knowledge management is – systematically and routinely creating, gathering, organising, sharing, adapting and using knowledge – from both inside and outside the organisation – to help achieve organisational goals and objectives\(^ix\).

**People, processes and technology** are the three essential elements of knowledge management. People are critical as they are not only the sources of knowledge but also its users. It is through the interactions between people and information processes and technology that knowledge is continuously created and transmitted. According to Skyrme (1998) there are two key thrusts to managing knowledge. One is ‘knowing what you know’ i.e. the awareness and sharing of existing knowledge and two is ‘creating and converting knowledge’ i.e. new knowledge.

Knowledge management in an organisation does not necessitate the setting up of a separate units or new technologies. It merely requires making changes in the way the organisation and the individuals in the organisation work. This will entail reviewing organisational values, culture, and people’s behaviour. Some of the pre-requisites for the knowledge management programme to succeed include: shared organisation vision, organisational cultural values that are embedded in learning and collaboration, an appropriate strategy that is tied to the organisational vision and needs, appropriate technology that supports the strategy and the organisational needs, and lastly a monitoring and evaluation system that capture the knowledge management indicators of the organisation.

There are several tools and mechanisms by which organisations can gather, organise, share and adapt knowledge. Some are low-cost and can easily be implemented while others are heavily reliant on technology and can be costly. This is represented in a table below:
Some examples of knowledge management initiatives within reproductive health are:

- **DELIVER Project** uses the mechanism of building social networks to link its staff dispersed in 12 country field offices. It aims to improve essential health commodity supply chains by strengthening logistics management information systems, streamlining distribution systems, identifying financial resources for procurement and supply chain operation, and enhancing forecasting and procurement planning. The project encourages policymakers and donors to support logistics as a critical factor in the overall success of their health care mandates. The project partners include: PATH, Crown Agents Consultancy, Inc., Center for International Health and Development among others. [http://deliver.jsi.com/dhome/](http://deliver.jsi.com/dhome/)

- **Health Information and Publications Network, HIPNET** also a USAID funded project is a mission-driven partnership that addresses a key public health need for access to technical health information and innovative information technologies that strengthen the performance and sustainability of health care programs, organizations, and services around the world. HIPNet facilitates collaboration among organizations that produce and disseminate print and electronic information in the field of international health. Through quarterly meetings, bi-annual conferences, an online resource center, an email forum and other activities, HIPNet ensures that member investments in health information materials and technologies are efficient, effective, and widely used. [http://www.infoforhealth.org/hipnet/index.shtml](http://www.infoforhealth.org/hipnet/index.shtml)

- **AIDS Competence Programme** uses a highly organised approach to knowledge sharing between programmes enabling building of human capabilities, thus benefiting reproductive health. Teams from different cities first conducted assessments to discover knowledge capacities in responding to HIV/AIDS and gaps they needed to filled. This self-awareness encouraged the team to exchange experiences fostering learning from each other. [http://www.aidscompetence.org/index.htm](http://www.aidscompetence.org/index.htm)
• Safe Motherhood Network in Nepal is a good example of communities of practice and alliance building. The network of volunteers grew out of a shared sense of frustration with the quality of maternal health. [www.smnnepal.com.np/introduction.htm](http://www.smnnepal.com.np/introduction.htm)

• World Bank’s internal communities of practice in about 80 thematic groups. Population and reproductive health, link globally dispersed employees with similar skills and responsibilities. Members of these communities of practice help one another adapt practices to local circumstances, solve problems, generate knowledge on good practices, and disseminate knowledge to other Bank staff. [http://go.worldbank.org/3YUX4YUD0](http://go.worldbank.org/3YUX4YUD0)

• Likhaan Inc. and Mae Tao Clinic’s Twinning Programme is an example of how organisation learn from each other’s experiences by face-to-face interactions. For the Mae Tao clinic, which serves refugee women living on the Thai-Burma border, upgrading the staff’s knowledge and skills was key to improving services. The solution to this knowledge management challenge was establishing an ongoing learning relationship with Likhaan, a feminist health NGO in Manila. Staff members from Likhaan conducted four trainings at Mae Tao on reproductive health rights, the psychosocial trauma left by violence and war and other topics. As part of the learning programme three women from Mae Tao visited Manila to get an hands on experience of the work of community health organisations with an opportunity to meet face-to-face with women’s organisations opposing the practices of mining companies and militarization.\textsuperscript{xii}

These are only a few examples of the number of knowledge management initiatives existing in the area of reproductive health and rights.

VI. WHY DO WE NEED KNOWLEDGE MANAGEMENT

The documentation process is generally seen as the weakest element in project implementation. This is often ascribed to lack of time, human resource, capacity and skills in documentation etc. Also the reporting mechanism, mainly aimed at the donors is seen as a mechanism to document the processes, outcomes and lessons learned from the project. Since the reports are donor driven and for the donors they are accessible only to few people and do not capture the detailed, nuanced and critical experiential information. Thus vital knowledge is lost at the end of the project. It is therefore critical to capture what has been done within the project and the lessons learned to ensure that the learning is not lost at the end of the project.

Learning happens throughout the lifecycle of a project (before, during, end-of-project) and not just at the end. Pre-project learning happens through a concept termed “pre-recycling”\textsuperscript{xii}, which aims are creating inventories of material generated through previous projects that provide important inputs in the form of lessons learned. It further raises awareness and what needs to be learned from the current project, and what stumbling blocks to avoid. Typical questions that one could ask are: can you describe the context, goals and approach of your project? What were the most critical and most risky phases of your project? What are the key knowledge questions being investigated in the project? etc. Learning during the project entails a way to structure learning once a project milestone has been reached. This is termed as “Significant Milestone Review” (SMILE). Questions one can ask are: what went well? Why did it work? If we could do it again what would we do differently? etc. Learning at the end of the project involves post project review and evaluation, where insights are gathered over the whole project period. Questions such as: what lessons have been learned? What were the key project goals? Which of these
Lessons are the most important? Learning is usually an individual moment of reflection, and if it is to create learning that can be transferred across a network it needs to be planned into the various stages of the project lifecycle.

In a partnership programmes, peer assist is a useful learning mechanism and can help problem solving and cross-national learning. ARROW has used this in its research projects. Youth initiatives are new yet it will be the norm of the future, therefore it is important to take this opportunity to build the knowledgebase now.

ARROW’s role as a regional organisation is to facilitate, coordinate and consolidate knowledge capturing and creation and sharing among partners and a wider audience through the various INFOCOM mechanisms, such as resource collection, website, AFC translations, and to facilitate cross-country and cross-project learning.

VII. KM Strategy for WHRAP-SEA Asia:

As has been mentioned earlier the key objective of the knowledge management strategy will be to facilitate capturing the knowledge generated in the project in terms of processes and lessons learned, and most importantly to facilitate collective learning through the peer assist/sharing mechanism. While it is a regional project and people are in remote locations (8 different countries), such sharing can only be facilitated through technology and a web-based mechanism.

The way we interact on the internet had dramatically changed with the advent of Web 2.0 technology. This has opened up spaces for the development of wikis and blogs, which allows dynamic intractability and democratic sharing spaces for the users.

The proposed plan with the knowledge management component of the project is to establish an information and communications mechanism hub within the WHRAP-SEA website. It will be a blog mechanism. The objective being the space becomes a knowledge repository for the project and the partners on youth related, HIV/ AIDS and its ancillary issues, as well as a space for learning & sharing between partners. The content of the knowledge hub will also include publications, bibliographies, research tools, documentation of good practices etc.

This space, it is hoped will enable dynamic sharing of information between partners and they will have access to the space through a login and password. Should it not be possible for the partners to upload files directly, they should at least be able to send the files through the space either via email of some other new technology if available to facilitate a drop-box.

The knowledge hub will be part of the main website. It will include: Publications, Resources Related to Youth Initiatives such as showcasing documentation practices, project tool to Document Processes, documentation of Case Studies, useful Links; Youth Policies / UNGASS activities / HIV AIDS / YP’s SRHR issues; Bibliographies; Contacts- Youth Directories / Youth Networks; Extranet/ Blog for Partner Sharing; and Link to the ARROW and the Virtual Library Database.

In addition, to the blog mechanism the project is also looking at possibilities of documenting case studies and the lived realities of the women on the ground. This will entail both written and video
documentation. As per the current plan we are hoping to have one case study / story on Mobile Populations (Burma); Comprehensive SRHR on Young People (Cambodia); Rural Women (Tamil Nadu, India); Conflict (Sri Lanka), and Maternal Health (Philippines and Lao PDR). Other knowledge products will include the translations of select AFCs into to various languages of the countries included in the WHRAP-SEA project.

Wherever the possibilities arise it is hoped synergies between different projects and programmes in ARROW will be brought into the WHRAP-SEA project keeping with the objective of facilitating cross-project/programming learning.

VIII. Timelines and Conclusion

Work on the knowledge management has already started with the initial gathering of materials and the preparation of tools. The Project Coordinator is currently working towards getting the website in place to ensure that the resources are made available for all the partners. In addition, the Programme Officer, ASK-us has begun looking up the requested resources for partner to facilitate their research work and has started compiling resources for the blog and KM hub.

It is hoped that the initiative will be supported from all sides and there will be active participation in the sharing, learning and documenting processes in the course of the project.
WHRAP SEA WEBSITE CONTENT OUTLINE
DRAFT

ABOUT WHRAP SEA

- Project Profile
  - Background / Overview
  - Rationale
  - Objectives / Expected Outputs
  - Components / Strategies /Methodology (e.g. Evidence generation [research]/ Capacity building/ Partnership building)
  - Activities / Interventions
    - Regional
    - National
  - Budget

- Partner Profile
  - Country
  - Name of the Partner Organisation
  - Background on the Organisation
  - Issues / Thematic Area / Target Population
  - Focal Points
  - Contact Address
  - Links to organizational website

- Donor Profile
  - Background
  - Contacts Person?? / Address
  - Links to organizational website

- Country Profile
  - Background (SRHR / Youth Status / Policies )

- People (Staff/ Personnel)
  - Contact (our contacts)

CALENDAR OF EVENTS

INFORMATION SOURCES / KNOWLEDGE HUB

- Publications
- Youth Policies / UNGASS activities / HIV AIDS /YP’s SRHR issues
- Bibliographies
- CONTACTS - Youth Directories / Youth Networks
- Extranet and Blog for Partner Sharing
- Link to the ARROW Library Database
Resources Related to Youth Initiatives
  - Showcasing Documentation Practices
  - Project tool to Document Processes
  - Documentation of Case Studies
  - Useful Links
KNOWLEDGE/INFORMATION CAPACITY & NEEDS ASSESSMENT

QUESTIONNAIRE

Objective:

• to get an insight into partners’ information needs; information-seeking behaviour; and knowledge capturing and sharing mechanisms in their organisations, in order to develop an information and knowledge sharing strategy for the WHRAP-SEA project. This we hope will ensure better flow of information in the project and will enable us to capture valuable lessons and good practices from the project. In addition, we hope

• to establish a good rapport between Partner Project Officers’ and ARROW’s INFOCOMM team.

I. INFORMATION ON RESEARCH WORK

1. What are the SRHR issues your organisation is working on in your country?
2. What kind of research are you doing? What methodology are you using to do your research?
3. What specific areas are you doing your research work?

II. GENERAL INFORMATION NEEDS & INFORMATION-SEEKING BEHAVIOUR

1. What types of information / information sources do you have within your organisation?
2. How do you access and gather information within the organisation and outside the organisation? (primarily internet, print/library, people, resource centre, networks)
3. Can you please tell us about the work that you are doing and what kind of information are you going to need to accomplish your work and your organisation’s work? (type of information, topic)

III. KNOWLEDGE CAPTURING AND SHARING MECHANISMS IN THE ORGANISATION

1. In your organisation how do you capture, document, and share the work you do?

IV. MECHANISM OF INFORMATION SHARING

1. How would you like to receive the information (email, website, print etc.)
WOMEN’S HEALTH AND RIGHTS ADVOCACY PARTNERSHIP (WHRAP) – SOUTH EAST ASIA & MEKONG REGION

FINANCE & PROJECT OFFICERS’ MEETING
25-26 January, 2011
Hotel Sentral, Kuala Lumpur, Malaysia

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1. This strategy paper has been prepared by Ambika Varma, Programme Officer, Information & Documentation Centre, ARROW in February 2011.

2. The main mechanisms of ARROW’s Information & Communications programme are the Arrows For Change (AFC) journal bulletin, the ARROW website, ARROW’s e-SRHR InfoResources services and ARROW’s Information & Documentation centre. In 2010 alone the key results for this section were:

   a) A total of 44,551 copies of all issues of AFCs and AFC translations were distributed in 2011 to at least 7,186 subscribers in 120 countries worldwide, as well as through the ARROW website, exhibition booths, exchange agreements with EBSCO and Gale and other means.

   b) An increase of hits and unique visitors to the ARROW website: hits increased from 10,328 hits in 2006 to 2,002,168 in 2010, which represents a 19,285% increase; the number of individual unique visitors to ARROW’s website increased from 19,126 visitors in 2006 to 185,240 visitors in 2010, an 868.5% increase.

   c) Twenty-one SRHR Info Resources issues, each one containing a minimum of 10 pieces of information, were sent out in 2010 to more than 1,839 recipients, comprising of NGOs, activists, researchers, government agencies, donors, students and interested others.
d) To reach the widest possible global and regional audience, we disseminated a total of 60,369 electronic and print ARROW resources in 2010 through a variety of regular and innovative mechanisms, including to our regular electronic and print subscribers, through the ARROW and partners’ website, the SRHR Info Resource e-news services, our publications compilation DVD, ARROW’s exhibition booths and agreements with global distributors Gale and EBSCO Publishing.

e) ARROW’s ASK-us, which is one of the few women’s health and SRHR-dedicated resource centres in the region and contains over 14,000 information sources, has supported over 4,344 individual researchers and activists through its information services

The Questionnaire and list of partners interviewed can be found in annex 1 and 2 of this paper.

Sivananthi Thanenthiran, Programme Manager, Information and Research and Ambika Varma, Programme Officer, Information and Documentation

Except Cambodia

The Philippines

As in the case of Lao PDR

Ramalingam (2005); Rumizen (2002); Haggie and Kingston (1999)

Rumizen 2002 pg 21

MAQ Paper No 5, 2004

MAQ PAPER No 5. pg 18

va Drute, Lara (2005) DCE Consultants

KIC Project (2008-2009); ICPD15++(2009-)

It is the second-generation "social Web facilitates cooperation and sharing between users, who create their own "conversational" content and includes weblogs (blogs), wikis, RSS feeds and social networking sites

A wiki is a website that allows the creation and editing of any number of interlinked web pages via a web browser using a simplified markup language or a WYSIWYG (what you see is what you get) text editor

Web-logs (blogs) are journals of entries displayed in reverse chronological order (last comes first), and includes feedback mechanism, like comment sections, after each post

This may change depending on the availability of funds, time and resources.