



Community Development Programme

Annual Progress Report

July, 2012 - June, 2013



PHASE Nepal
Sinamangal, Kathmandu
Phone no. 01 411 2510
Post Box: 12888, Kathmandu
Email: info@phasenepal.org
URL: <http://phasenepal.org>



Boudrie
Advisory

Samdo
Bhabisy



Table of Content

Content	Page
List of Table	IV
List of Acronym	V
Chapter 1	
Background Information	1
Vision	1
Objective	1
Specific Objective	2
Chapter 2	
Project Information	3
Summary of Core Activities	4
Community Health Project	4
<i>Maternal Health</i>	4
<i>Child Health</i>	5
<i>Family Planning</i>	6
<i>Health Awareness Raising Activity</i>	7
<i>Local Capacity Building</i>	9
<i>Staff Capacity Building</i>	11
<i>Health Beneficiaries</i>	12
<i>Awareness Raising and Community Advocacy</i>	12
Community Education Project	16
<i>Adult Literacy Class</i>	16
<i>Alternative Education Class</i>	17
<i>Local Capacity Building/Strengthening</i>	21
<i>Teacher & Infrastructure Support</i>	22
<i>PHASE-NTTI Teachers Training</i>	23
Livelihood Improvement Programme	24
<i>Livelihood Activities</i>	24
<i>Drinking Water and Sanitation</i>	25
<i>Strengthening Local Community</i>	26
Education and Health as Child Rights	27
<i>Local Capacity Building/Strengthening</i>	27
<i>Awareness Raising Campaign</i>	28
<i>Safe Motherhood</i>	28
<i>Child Health Activities</i>	29
<i>School Enrolment Activities</i>	29

Equity & Access for Health Service Improvement	31
<i>Community Mobilization Activities</i>	31
<i>Emergency Fund Management</i>	32
Other Activities	33
<i>GP Visit to PHASE Health Posts</i>	33
<i>Solar for PHASE Field Posts</i>	36
<i>OJT Staffs</i>	36
Project Beneficiaries	37
Chapter 3	
Support, Monitoring, Networking & Partnership	38
Promotion & Marketing	39
New Board Members & Special General Assembly	39
Chapter 4	
Challenges & Solutions	41
Improving the Project	41
Sustainability	42

List of Tables

TABLE	PAGE
Table 1: Maternal Health	4
Table 2: Child Health	5
Table 3: Family Planning	6
Table 4: Health Awareness	7
Table 5: Training/Orientation to Local Stakeholders	9
Table 6: Meeting Facilitation to Local CBOs	19
Table 7: Staff Training and Capacity Building	11
Table 8: Direct Beneficiaries	12
Table 9: Meeting the Key Stakeholders	12
Table 10: Meeting/Orientation/Training for HFMC	13
Table 11: Meeting & Orientation for FCHV	14
Table 12: Activities for Mother's Group	14
Table 13: Meeting People from Community Cluster	15
Table 14: Adult Literacy Class, Gorkha	16
Table 15: Alternative Education, Yarchu, Chumchet	16
Table 16: Alternative Education, Taju, Chumchet	19
Table 17: Alternative Education, Hapra village, Hagam	20
Table 18: Orientation Meeting in Chumchet	21
Table 19: Orientation Meeting Facilitation in Sindhupalchok	22
Table 20: Support for Education Activities	22
Table 21: PHASE NTTI Teachers Training	23
Table 22: Agriculture Activities	24
Table 23: Drinking Water and Sanitation	26
Table 24: Capacity Building Activities in Livelihood	26
Table 25: Capacity Building and Local Group Strengthening	27
Table 26: Awareness Raising Campaign	27
Table 27: Safe Motherhood Activities	28
Table 28: Safe Motherhood Activities	29
Table 29: School Enrolment	29
Table 30: School Enrolment	31
Table 31: School Enrolment	32
Table 32: GP Visit, September, 2012 – May, 2013	34
Table 33: Engineers and Medical Student Visit	35
Table 34: PHASE Nepal OJT Staffs	36
Table 35: Support, Monitoring & Networking	38
Table 36: Reporting	39
Table 37: Promotional Activities	40

List of Acronyms

ACRONYMS	FULL FORM
ANC	Antenatal Care
ANM	Auxiliary Nurse Midwife
CBO	Community Based Organization
CB-IMCI	Community Based Integrated Management of Child Illness
CDP	Community Development Programme
CHP	Community Health Programme
CMA	Community Medicine Assistant
DAO	District Administration Office
DADO	District Agriculture Development Office
DEO	District Education Office
DHO	District Health Office
DPAC	District Project Advisory Committee
FCHV	Female Community Health Volunteer
GO	Government Organization
GP	General Practitioner
HA	Health Assistant
HFMC	Health Facility Management Committee
JICA	Japan International Cooperation Agency
MG	Mother's Group
NGO	Non Government Organization
NTTI	Nepal Teacher Training Initiative
OJT	On the Job Training
PNC	Postnatal Care
SM	Social Mobilizer
SWC	Social Welfare Council
TB	Tuberculosis
VCC	Village Cleaning Committee
VDC	Village Development Committee

CHAPTER - 1

Background Information

PHASE (Practical Help Achieving Self Empowerment) Nepal is a non-governmental, non-profit making, non-political organization providing equal opportunities. It specializes in improving health, education services and livelihood opportunities for disadvantaged populations in very remote and resource poor Himalayan mountain villages in Nepal. PHASE aims to support the most vulnerable people to break the cycle of poverty; by assisting communities and local authorities to lay the groundwork for a self-sufficient future.

PHASE believes that poor health, low educational levels and poverty are all aspects of the same problem, and create a cycle preventing people from taking control of their own futures; PHASE aims to address these aspects simultaneously, through integrated Community Development Programme (CDP) which empower individuals and communities on all levels.

PHASE has special emphasis and expertise on working in extremely remote areas - areas in the high Himalayas, with scant resources, a harsh climate, difficult terrain, and little or no access to basic services. These are areas often missed by development NGOs as being too difficult and expensive to manage successful projects in. PHASE's philosophy is to work in areas of greatest need, which is extremely challenging but is also an area in which we have had extensive success. Our target communities have experienced rapid change in short periods of time – for example, areas with no functioning health system and no access to or trust in modern medicine are provided with high standard of primary healthcare and preventative education. Beneficiaries learn to use and trust the system extremely rapidly and within months a PHASE health post can see between 30 and 60 patients a day.

Since its inception in 2006, PHASE has treated over 1,93,718 patients and can confidently assert that on average our health workers save a child's life every month. Similarly, the organization has contributed to more than 440 household toilets and furnished livelihood opportunities to 9,500 people of two VDCs. These are staggering figures that can't be claimed by many other organizations. The success of our projects under such challenging circumstances can be attributed in large part to our main asset: our staff team. We have an experienced and dedicated Nepali director with a background in engineering and rural development, and a hardworking and brave team of young, Nepali female field staff.

PHASE Worldwide raises funds and provides technical expertise to PHASE Nepal who implements programmes in remote communities in Nepal. PHASE Nepal's main funding partners include the PHASE Worldwide, PHASE Austria, Boudrie Advisory and Samdo Bhabishya. PHASE works to establish various support networks and partnerships with government and non-government agencies as well. As of March 2013 PHASE has 33 full time and 9 part time staffs and has supported the recruitment and management of a wider team of government health workers and teachers in conjunction with the local district authorities. Currently PHASE Nepal is working in 3 remote areas of Humla, Gorkha and Sindhupalchok districts in Nepal.

Vision

Self-empowered and self-sustained society; where all kinds of discrimination are absent.

Objective

To improve the livelihoods of rural people by providing immediate support and empowering them.

Specific Objective

- A.** Help people in the area selected to provide better education to their children in relatively comfortable place.
- B.** Make people aware about health and hygiene providing health education and setting up short term as well as long term health facilities.
- C.** Help the community to develop relatively safer and sustainable water supply infrastructure and train on health and sanitation aspects of water supply.
- D.** Help in refurbishment of the community properties.

CHAPTER - 2

Project Information

Programme Name : Community Development Programme (CDP)

Projects under CDP :

SN	Projects	District	VDC
1.	Community Health Project	Gorkha	Samagaun, Lho, Prok, Bihi, Chumchet, Chhekampar, Sirdibas
		Sindhupalchok	Hagam, Fulpingkot
		Humla	Maila, Melchham
2.	Child Rights Project	Gorkha	Uhiya, Kerauja, Gumda, Kashigaun, Lapu, Manbu
3.	Equity and Access Project	Gorkha	Uhiya, Kerauja, Gumda, Kashigaun, Lapu, Manbu, Laprak, Aru Arbang, Aru Chanaute, Thumi
4.	Community Education Project	Gorkha	Samagaun, Lho, Prok, Bihi, Chumchet, Chhekampar, Sirdibas
		Sindhupalchok	Hagam, Fulpingkot
5.	Livelihood	Sindhupalchok	Hagam, Fulpingkot
Total		3 Districts	21 VDCs

Project Funding Partners :

1. PHASE Austria
2. Tessa Boudrie
3. Samdo Bhabisya
4. Global Giving
5. DHO Gorkha

Project Staff (Present Structure):

Post	Number	Post	Number
Programme Manager	1	Child Rights Supervisor	1
Account/Admin Officer	1	Child Rights Mobilizer	4
Account/Admin Assistant	1	Community Development Asst.	1
Education Development Facilitator	1	Health ANM	14
Health Supervisor (HA)	1	Alternative Education Teacher	2
Health Supervisor (Staff Nurse)	1	Office Assistant	1
Government CMA	7	Alternative Teacher partial	1
Teacher Master Trainer (NTTI)	1	Field Runner (Pema)	1
Teacher Trainer (NTTI)	1		
Total Staffs			40

Reporting Period : July, 2012 - June, 2013

Summary of Core Project Activities

A. COMMUNITY HEALTH PROJECT

With financial support of PHASE Worldwide, PHASE Austria, Tessa Boudrie, Samdo Bhabishya and Global Giving, PHASE Nepal is running Community Health Project in 11 remote VDCs of 3 districts – Sindhupalchok, Humla and Gorkha. PHASE coordinates with district level government offices and supports regular health staffs (ANM), medicines and delivers capacity building trainings to the local stakeholders.

1. Maternal Health

Table 1: Maternal Health, July, 2012 – June, 2013

District	SN.	Name of VDC	ANC 1st	ANC 4th	Delivery	PNC
Singhupalchok	1	Hagam	57	39	15	28
	2	Fulpingkot	48	36	14	19
Humla	3	Maila	97	29	67	83
	4	Melchham	85	15	23	23
Gorkha	5	Sirdibas	50	26	11	12
	6	Bihi	14	4	4	11
	7	Prok	11	10	6	6
	8	Lho	32	10	5	16
	9	Samagaun	13	4	6	13
	10	Chumchet	25	12	6	18
	11	Chhekampar	20	7	2	10
Total*			452	192	159	239

*PHASE Service



Delivered with Love | Chumchet village, north Gorkha

Total of 452 pregnant mothers got antenatal (ANC) care service during this reporting period of one year. Amongst 11 VDC, Maila village has the highest ANC care record i.e. 97. Prok village has the lowest ANC 1st record i.e. only 11. It is because Prok village has a sub health post in Namrung village and the report from

this sub health post is not included in PHASE health report. Similarly, PHASE staffs provided 192 mothers to ANC 4th service. PHASE staffs conducted 159 deliveries during this period.

In Maila village, there were 67 deliveries conducted by PHASE health staff whereas 23 deliveries were conducted in Melchham village. Bihi has only 4 delivery record which is the lowest delivery record among 11 Village Development Committee. Deliveries that have been conducted in other place after completion of ANC 4th visit in the project area were not included in this report. PHASE is planned to include such delivery record from now onwards.

2. Child Health

PHASE primary health activities include child health care, emphasised on CB-IMCI; a standard set by government health policy of Nepal. PHASE health service includes support immunization, distribution of de-worming tablets in school, CB-IMCI and nutrition training to FCHV and Mothers' Group, child monitoring for nutrition status etc.

Table 2: Child Health, July, 2012 – June, 2013

Child Health Activities	Event	Male	Female	Sub total
A. Immunization				
BCG, DPT 1,2,3	66	817	788	1605
Measles				
Total				1605
B. De-worming/ Micronutrient				
Albendazole	16	322	219	541
Vitamin A	7	31	33	64
Total	23	353	252	605
C. Nutrition				
No. of child monitored	21	347	330	677
No. of Underweight children		5	9	14

PHASE staffs have supported 66 immunization events throughout the year where 1605 children were immunized in 11 field post. The immunization was for BCG, DPT1, DPT2, DPT3 and Measles & Rubella. Out of 1605, 817 children were male and 788 were female.



Child Health | Health staff prescribing medicine for child, Samagaun

PHASE Nepal staffs also facilitated 23 events of de-worming and micronutrient programme. Total of 605 children got Vitamin A and de-worming tablets in this programme. These events were organized in government schools to cover the school age children. Similarly, PHASE staffs also organized 21 events of child nutrition monitoring in local schools and health institutions where 691 children were monitored for their nutritional status. 5 boys and 9 girls out of 691 children were found underweight and counselled to their parents about balance diet and importance of child nutrition.

3. Family Planning

Table 3: Family Planning, July, 2012 – June, 2013

Female	
Depo-Provera injected (vials)	5389
Pills Distributed (person)	1007
Total	6396
Male	
Condom (person)	638
Total	638
Family Planning Total*	7034

* PHASE Records



During this reporting period, PHASE health staffs injected 5389 vials of Depo-Provera, a temporary family planning contraceptive which work for 3 months. If a woman gets 4 vials of Depo-Provera contraceptive for 1 year then 1347 women were directly benefitted in this year. Similarly, 1007 women took pills tablet at least one time from the field health posts. PHASE staffs distribute pills for 3 cycles (3 months) at one time. There were 638 men who took condoms from the field health posts. These contraceptives are supported by government of Nepal for free.

4. Health Awareness Raising Activities

Table 4: Health Awareness, July, 2012 – June, 2013

Activities	July, 2012 – June, 2013			
	Event /session	Male	Female	Sub total
Promotion Materials (Wall Calendar)	11			1780
Street Drama event	7	-	-	-
Day Celebration Event	22	-	-	-
School health education	104	1519	1158	2677
Community health education	157	737	1467	2204
Door to door Health education	949	1388	2434	3822
Clinic health education	158	539	1060	1599
Super flour making demonstration	40	140	562	702
Village cleaning program	200	1026	2290	3876
Total	1608	5349	8971	14320

Health awareness rising is another major activities of PHASE Nepal's Community Health Project. Street Drama events were organized in all 7 Village Development committees of north Gorkha. Field staffs were supervised and guided to develop script based on local scenario focusing on maternal, child and primary health. Local students, FCHVs, HFMC members were performed in the major roles of these plays where thousands of local community people directly observed the programme.



Awareness Raising | Street drama show in Samagaun village, Gorkha

Day celebration event was another big awareness raising event. This year, PHASE has organized 2 events of day celebration in each 11 field health posts. International Volunteer Day – 5th December, 2012 was celebrated as FCHV (Female Community Health Volunteer) day in all the field posts. PHASE staffs invited all the FCHVs, HFMC members (Health Facility Management Committee), Mother's Group and community stakeholders and organized a rally programme. There have been interaction programme organized which was focused on fundamental rights of health, rights and duty of Health Facility Management Committee, essential roles and responsibilities of Female Community Health Volunteers, Mother's Group members, health workers, political leaders, local school teachers and the community people.



Similarly, PHASE has also celebrated International Women's Day on 8th March, 2013 in 9 field health posts of Gorkha and Sindhupalchok. In Humla, PHASE has celebrated World's TB Day on 24th March, because homemade smoking is common in this area. The aim of celebrating World's TB Day was to raise awareness against smoking. PHASE does not have the exact data, but it is confirmed that more than 3,000 community people were participated in 22 different events of day celebrations across 11 VDCs of 3 districts.

40 events of super flour making events have been organized in the community occasion, events and day celebration. This event was focused on mothers and FCHVs where total of 702 community people directly participated and observed the process of making super flour – nutritious flour for children. Of the total 702 participants, 562 were female.



In one week, PHASE staffs provide clinical service 3 days in the field health post and Outreach clinic and goes out 3 days for community health awareness raising activities. Community Health Education, School Health Education, Door to door Health Education, Clinic Health Education and Village Cleaning Activities etc are the major components of health awareness raising activities. In this period, total of 1608 awareness

raising activities were conducted in 11 Village Development Committees. 14,320 community people participated in this awareness raising activities where 8971 female and 5349 male were directly benefitted.

5. Local Capacity Building

Table 5: Training/Orientation to Local Stakeholders, July, 2012 – June, 2013

Capacity Building Activities	Event	Male	Female	Total
IMCI Training to FCHV	10	-	80	80
Nutrition Workshop to FCHV & MGs	7	-	218	218
BCC Training to FCHV, HFMC, MGs	11	42	224	266
Traditional Healers Training	9	91	-	91
Total	37	133	522	655

Table 6: Meeting Facilitation to Local CBOs, July, 2012 – June, 2013

Capacity Building Activities	Event	Male	Female	Total
FCHV meeting facilitation	108	-	1123	1123
HFMC meeting facilitation	92	609	316	925
Mothers group meeting	119	-	1559	1559
Village Cleaning Committee Meetings	53	217	523	740
Total	372	826	3521	4347

PHASE has organized 10 IMCI – Integrated Management for Child Illness trainings to FCHVs of 10 VDCs. Purpose of this training was to boost of the capacity of local FCHVs to manage child illness – following several steps of treatment procedures. PHASE also conducted nutrition training in 7 VDCs of north Gorkha. The training was focused specially on FCHVs and Mothers Group leaders. After the training, participants are able to make home based nutritious diet for children, monitor nutrition status of children and treat basic malnourishment.



BCC – Behaviour Change (Formation) Communication trainings were conducted in all 11 VDCs. 42 male and 224 female of HFMC, FCHV and MGs were participated in the training. Training was conducted for 2 days in

each field posts and was facilitated by PHASE health staffs. Aim of this training was to develop the skill forming healthy behaviour in the community such as personal hygiene, cleanliness, village cleaning, end smoking, developing communication network among community to inform health institutions upon illness and emergency, encourage regular antenatal and postnatal care, institutional delivery by skilled health worker etc.



Local Capacity Building | Traditional Healer's orientation in Gorkha

Traditional Healers training was conducted only in 7 VDCs of north Gorkha. This training was conducted to raise awareness of traditional healers regarding modern treatment against home based traditional treatment including shamanism. Traditional Healers of north Gorkha are Lama Gurus and Amchis (Tibetan Herbal Practitioners) who are prestigious religious icon in the community. These Traditional Healers are now capable to advise and refer the community people to health institutions for modern treatment.



Capacity Building | Community meeting in Mail village, Humla

PHASE health staffs attend every meeting of HFMC, FCHV, MGs and VCCs for facilitation. In these meetings PHASE health staffs help these local CBOs to find problems in the community regarding health related issues; find the solutions of these problems and assist them in decision making. On other hand, PHASE staffs also organize orientation to teach them about basic health rights, duties, roles and responsibilities of

being a member such CBOs and community member. During this reporting period of one year, PHASE has organized 372 such events where 826 male and 3521 female CBO members were directly benefitted.

6. Staff Training/Capacity Building

To improve the skill of health workers, PHASE has organized training events in Kathmandu and in Arughat of Gorkha. PHASE health staffs along with Social Mobilizer also got Behaviour Change Communication training in Kathmandu as a part of improving community based advocacy and social mobilization.

Table 7: Staff Training and Capacity Building, July, 2012 – June, 2013

Capacity Building Activities	Event	Male	Female	Total
Clinical Training to Government Staffs	1	8	12	20
Clinical Training to PHASE Staffs	2	-	43	43
BCC Training to PHASE Staffs in Kathmandu	1	-	24	24
Total	4	8	79	87

During October, 2012 and May, 2013, 4 sessions of trainings were organized for health staffs to improve the quality of primary health services. In the month of October, 2012, all of the PHASE health staffs got clinical refresher training on gynae and obstetric in PHASE office Kathmandu. The training was facilitated by midwives Emma Carver, Joanne Lancashire, Marian Child and Shahida Mehrban from Rotherham Foundation Trust Hospital, UK. PHASE health staffs also got Autism training from Dr. Sunita Maleku Amatya from Autism Nepal. Main objective of Autism Training was to understand health staffs about management of autism patient in remote villages. Similarly, PHASE also organized four day Behaviour Change Communication Training which was facilitated by well experienced trainers Mr. Ramkrishna Parajuli and Mr. Anup Adhikari.



Capacity Building | IMCI, Childhood Disability and Mental Health training for government staffs

One session of Health Worker Training in Clinical and Communication Skills on IMCI, Childhood Disability, and Mental Health was organized in Arughat bazaar of Gorkha for government health staffs of north Gorkha. This training was organized in coordination with District Health Office, Gorkha where 20 health staffs participated in the four day training session from 1st May to 4th May, 2013. The training was facilitated by DHO Health Supervisor Mr. Ishwor Regmi, PHASE Worldwide Trustee Dr. Gerda Pohl, UK GP volunteers

Dr. Dilys Noble and Dr. Neil Margeriron. Similarly the same training was conducted to PHASE health staffs in Kathmandu from 7th May to 10th May, 2013.

7. Beneficiaries

Table 8: Direct Beneficiaries, July, 2012 – June, 2013

Beneficiaries	Male		Female		Sub total
	New	Old	New	Old	
Health Facility-wise					
Health post /Sub health post	10915	1236	13083	5805	31039
Out-reach clinic	3274	335	4178	2657	10444
Total	14189	1571	17261	8462	41483
Age-wise					
0 - 1 yr	826	115	712	109	1762
1 - 5 yr	1473	187	1440	191	3291
5 - 18 yr	3523	381	3485	371	7760
> = 18 yrs	7652	844	10231	1118	19845
Total	13474	1527	15868	1789	32658

In this reporting period, total of 41483 people were directly benefitted from PHASE primary health service where 25723 were female and the rest were male. 32658 got direct clinical service where 17656 patients were female which is more than 54%. Of the total patient of 32658, 5.39% (1762) were children under 1 year of age, 10% (3291) were children between 1 – 5 year and 23% (7760) were children between 5 – 18 years of age. In total of 41483 beneficiaries, 8825 were clients who received health related counselling such as family planning, antenatal, postnatal and delivery care.

8. Awareness Raising & Community Advocacy

As per agreement signed between PHASE and Kidasha (former donor of north Gorkha CHP), PHASE has appointed one Social Mobilizer in Community Health Project of north Gorkha till 30th June, 2013. The objective of hiring a Social Mobilizer was to empower local community in regards of basic primary health facility provided by the state. The role of Social Mobilizer was to identify key stakeholders in the area and organize orientation to HFMC, FCHV and MGs of each VDCs to sensitize their roles and responsibilities. PHASE has implemented community based advocacy and social mobilization as key activities for sustainability of the project.

a. Meeting the Key Stakeholders

Table 9: Meeting the Key Stakeholders, July, 2012 – June, 2013

Name of VDC	Event	Female	Male
Sirdibas	7	3	9
Bihi	11	1	17
Prok	6	6	23
Lho	11		16
Samagaun	8		9
Chumchet	13	2	31
Chhekampar	11	1	20
Total	97	19	214



Social Mobilizer (SM), Ms Shanti has already (2011-2012) identified key stakeholders within community and she attempted to meet them every now and then when she was in the respective field VDCs. Most of these key stakeholders belong to political parties and main leader of the village who can easily influence the community. Most of these stakeholders represent their VDCs in District Development Committee of Gorkha. Purpose of meeting these stakeholders was to discuss the issues related to primary health care in the community, finding problems and addressing them altogether. During this period, SM has met 233 stakeholders in 97 different time periods.

b. Orientation/Meeting/Training for HFMC

Table 10: Meeting/Orientation/Training for HFMC, July, 2012 – June, 2013

Activities for HFMC		Orientation/Meeting/Training	Times	Female	Male
1	Sirdibas	Meeting/Orientation	2	6	-
2	Bihi	Meeting/Orientation	4	7	17
3	Prok	Meeting/Orientation	3	8	23
4	Lho	Meeting/Orientation	3	4	24
5	Samagaun	Meeting/Orientation	4	16	22
6	Chumchet	Meeting/Orientation	7	26	23
7	Chhekampar	Meeting/Orientation	5	4	36
Total Participants			28	71	145

HFMC – Health Facility Management Committee members are also major stakeholders in the project area. HFMC is the small unit of CBO (consist of 7-9 community members, assigned by Government of Nepal) which has authority to manage government primary health institute. In north Gorkha, due to lack of education and proper training, these HFMCs in each VDCs are not capable to manage the health institution. Social Mobilizer has met every members of these HFMC and organized more than 28 meetings across 7 VDCs where total of 216 HFMC members got basic orientation training. Of the total 216 participants, 71 were female which include FCHV, Mothers' Group leaders and community leaders. Because of these orientations, HFMCs are now understood their roles and responsibilities towards management of health posts.

c. Meeting & Orientation for FCHV

Table 11: Meeting & Orientation for FCHV, July, 2012 – June, 2013

Activities for FCHV	Orientation/Meeting/Training	Times	Female	Male
1 Sirdibas	Meeting/Orientation	4	24	
2 Bihi	Meeting/Orientation	4	36	
3 Prok	Meeting/Orientation	4	38	
4 Lho	Meeting/Orientation	4	36	3
5 Samagaun	Meeting/Orientation	4	36	1
6 Chumchet	Meeting/Orientation	6	56	
7 Chhekampar	Meeting/Orientation	4	29	
Total Participants		30	255	4

FCHV – Female Community Health Volunteer is another health related stakeholders in the community. FCHVs are local women assigned by government of Nepal (9 FCHV members in each VDC). These volunteers' roles are specially focused of maternal and neonatal health issues. Being a less accessible area, most of the FCHVs are not able to get proper training from the government side in north Gorkha. PHASE Social Mobilizer has met more than 30 times these FCHVs in each VDCs and organized several training and orientation. PHASE health workers trained these FCHVs about clinical and technical issues and Social Mobilizer trained them about health related rights based issues to sensitize their roles and responsibilities. PHASE has also run adult literacy classes to these FCHVs and Mother's Groups members and most of the FCHVs can read and write Nepali language in most of the VDCs these days.

d. Mother's Group Activities

Table 12: Activities for Mother's Group, July, 2012 – June, 2013

Activities for MGs	Orientation/Meeting/Training	Times	Female	Male
1 Sirdibas	Meeting/Orientation	1	23	
2 Bihi	Meeting/Orientation	4	46	3
3 Prok	Meeting/Orientation	4	47	
4 Lho	Meeting/Orientation	3	42	
5 Samagaun	Meeting/Orientation	3	56	2
6 Chumchet	Meeting/Orientation	6	79	3
7 Chhekampar	Meeting/Orientation	9	84	
Total Participants		30	377	8

Mothers' Group is believed as most influential group in VDC level regarding their roles and success in improvement of community empowerment. Each VDC consist of 9 small cluster called wards and each wards consist of one mothers group. For north Gorkha, Samagaun has only two mother's group because of being dense in two parts – Samagaun and Samdo village. Social Mobilizer visited these mothers group every time and organized meeting and orientations for them. These Mothers' Group members are circulated to flow the message of ANC, PNC and Delivery including health situation of their neighbourhood to the FCHV and FCHV inform to local health institution. Together with health worker, Social Mobilizer oriented and trained Mothers' Group members for communication with HFMC, FCHV and health workers, super flour making, home-based treatment of diarrhoea.

e. Meeting People from Community Cluster*Table 13: Meeting People from Community Cluster, July, 2012 – June, 2013*

Activities for MGs		Orientation/Meeting/Training	Times	Female	Male
1	Sirdibas	Meeting/Orientation	3	2	5
2	Bihi	Meeting/Orientation	4		8
3	Prok	Meeting/Orientation	6	1	24
4	Lho	Meeting/Orientation	5	2	22
5	Samagaun	Meeting/Orientation	4	3	18
6	Chumchet	Meeting/Orientation	7		20
7	Chhekampar	Meeting/Orientation	4		15
Total Participants			33	8	112

This cluster represents people from different villages of the VDCs who did not participate during community meetings and decision making process. People from Samdo in Samagaun VDC, Shyopari and Lihi in Lho VDC, Chhak and Kwak in Prok VDC, Cryak and Dang in Bihi VDC, Nyak and Pangsing in Sirdibas VDC, Shipchet and Yarchu in Chumchet VDC, Nile and Chhule in Chhekampar VDC often used to miss the decision making process of every activity in VDC level development. Social Mobilizer has met people from these rear areas and encouraged them to participate in such programmes making them understand equal distribution of service and facilities is vital and this is the right of the every community member.

B. COMMUNITY EDUCATION PROGRAMME

PHASE Community Education Programme consists of Adult Literacy Class and Alternative Education Class. PHASE has run 3 alternative classes in Hagam VDC since 2007. PHASE has set 3 years course for each alternative class. After the completion of 3 years course in Alternative Education Class, pass out student joined government schools and some went to private schools as well. There were 2 batch of Alternative Education Classes is completed and now it is running in 3rd batch. During the period of 6 years, 2 alternative schools – Shermathan and Kalangsa got approval and getting facilities from government education office. Alternative education school of Hapra also got approval but still in worse condition in terms of infrastructural setting, so PHASE has decided to continue supporting till April 2014. After the detail baseline survey in Gorkha, PHASE has started running education activities from June, 2012 in Gorkha. PHASE has completed 4 sessions of Level 1 - Adult Literacy Classes in Samagaun, Prok, Bihi and Chumchet VDCs. PHASE also started one Alternative Education Class in Taju village of Chumchet.

1. Adult Literacy Class

Table 14: Adult Literacy Class, Gorkha, July, 2012 – September, 2012

Participations of Adult Literacy Class – Level 1				
	Name of Participations (July, 2012 – October, 2012)			
SN	Chumchet VDC	Bihi VDC	Prok VDC	Samagaun VDC
1	Ambi Lama	Sonam Dolma Lama	Nangmangbuti Lama	
2	chhiring dolma Lama	Nima Dhiki Lama	Lakpa Buti Lama	
3	Jhangmo Lama	Pema Dhiki Lama	Yangjen Dolma Thakuri	
4	Yangdon Lama	Tenjen Chhoten Lama	Chhiring Dhiki Lama	
5	Tenjin Sangmo Lama	Sonam Dhiki Lama	Dorji Buti Lama	
6	Pendoma Lama	Karma Sangmo Lama	Dhaba Buti Lama	
7	chhiring dhiki Lama	Rinjin Sangmu Lama	Dhaba Minduk Lama	
8	Sonam Lmaho Lama	Pema Chhenjon Lama	Mingmar Dhoima Lama	
9	Phurba Yanjen Lama	Sonam Jhangmu Lama	Chhiring Latun Lama	
10	TanjinLmaho Lama	Dorge Sangmu Lama	Dhaba Bhundi Lama	
11	Dolma Lama	Karma Chhuki Lama	Nila Dhoima Lama	
12	Pema Chhoten Lama	Phurbu Chheten Lama	Chhirin Yudun Lama	
13	Tanjen Chhoten Lama		Chhiring Yoden Lama	
14	Chhewang Lama		Tejen Sangmo Lama	
15	Lakpa Lama 'A'		Chheden Dolma Lama	
16	Lakpa Lama 'B'		Chhewang Lama	
17			Nima Dhiki Lama	
18			Chhirini Sangmo Lama	
19			Chhewang Dhiki Lama	
20			Nima Sangmo Lama	
21			Kasang Chhuten Lama	
22			Kungsan Chhutun Lama	
23			Dhejen Dhoima Lama	
Total	16	12	23	17



Total of 68 women participated in 4 different Adult Literacy Class Programme and completed 1st Level as per standard set by government of Nepal. Most of these women are local FCHVs, Mothers Group leaders and some younger women. PHASE is planning to run 2nd Level of same programme in Samagaun, Prok, Bihi and Chumchet VDC. 2nd Level is already started in Samagaun. Level 1st Adult Literacy Classes are already started in Nyak and Pangsing villages of Sirdibas VDC.



2. Alternative Education Class

Two alternative education classes in Hagam of Sindhupalchok district are already recognized by government and are proposed as community school. These schools get support from District Education Office – a government authority. This is an example of how PHASE and government partnership sustain the development initiatives in rural Nepal. PHASE is coordinating with District Education Office of Gorkha and has started two alternative education classes in Chumchet – a remote village of Gorkha. Along with support to education intervention, PHASE will function as a bridge between District Education Authority and the community for its sustainability.

Table 15: Alternative Education, Yarchu, Chumchet,

Alternative Education Class, Gorkha Chumchet VDC, Ward no. 7, Yarchhu Village Start Date: April, 2013, Completion Date: March, 2016					
SN	Name of Student	Ward No.	Age	Gender	Name of Parent/Guardian
1	Pema Tenzin Lama	6	9	M	Buchhima Lama
2	Karma Thile Lama	6	12	M	Chhetan Dhorze Lama
3	Pema Sangmu Lama	6	6	F	"
4	Tenzin Lama	6	5	F	"
5	Tshing Dorze Lama	6	7	M	Nurba Lama
6	Hise Lhamu Lama	6	5	F	"
7	Lakpa Tshiring Lama	6	9	M	Serap Dhorze Lama
8	Mingmar Dolma Lama	6	11	F	Ngawang Tshering Lama
9	Pasang Dolma Lama	6	4	F	"
10	Pasang Lama	6	7	F	Serap Lama
11	Ngawang Dhorze Lama	6	5	M	"
12	Lopsang Tenzin Lama	7	9	M	Ambi Lama
13	Tshewang Lama	7	8	M	Chhewang Dhundup Lama
14	Pema Lama	7	7	F	"
15	Furwa Renzin Lama	6	8	M	Ngawang Cheten Lama
16	Tenzin Jhangmo Lama	7	5	F	Chheton Lama
17	Penzung Lama	6	8	F	Chhenzom Buti Lama
18	Karma Chetan Lama	6	4	M	Nudup Lama
19	Nanga Tshering Lama	6	9	M	Sonam Jangmu Lama
20	Dawa Jangmu Lama (A)	6	10	F	Ngawang Tshering Lama
21	Sonam Chhenjom Lama	7	7	F	Ambi Lama
22	Pemba Tshering Lama	7	8	M	"
23	Lakpa Jhangmu Lama	6	13	F	Nanga Ghyanja Lama
24	Dawa Jangmu Lama (B)	6	14	F	Serap Dhorze Lama
	Total Number of Student	24			
	Number of Boys	11			
	Number of Girls	13			
	Age Range	4 to 14 years			

Yarchu village is situated in upper north part of Chumchet VDC. There are two small cluster (ward number 6 & 7) villages where more than 60 household people live. New Alternative Education Class in Yarchu village is started from April, 2013. There are total of 24 students including 13 girls are studying in this programme. PHASE is supporting teacher, stationary for students and basic infrastructure support to this programme.

Table 16: Alternative Education, Taju, Chumchet

Alternative Education Class, Gorkha Chumchet VDC, Ward no. 8, Taju Village Start Date: June, 2012, Completion Date: May, 2015					
SN	Name of Student	Ward No.	Age	Gender	Name of Parent/Guardian
1	Mingma Dolma Lama (A)		5	F	Kunsang Chhiring Lama
2	Furba Chenjom Lama		9	F	"
3	Mingma Dolma Lama (B)		6	F	Chhewang Gyalze Lama
4	Sangay Lama		8	M	Funjo Lama
5	Chhorejom Gurung		7	F	Sunmaya Gurung
6	Kanchhi Gurung		5	F	"
7	Lakpa Chhewang Lama		7	M	Lakpa Dhorje Lama
8	Karma Chhewang Lama		7	M	Serap Lama
9	Chhewang Palmu Lama		5	F	Karma Lama
10	Sonam Dholma Lama		7	F	Pema Lama
11	Karma Lama		6	F	Kunsang Lama
12	Tshering Dholma Lama		13	F	Ambi Lama
13	Nima Buti Lama		11	F	Thakpa Lama
14	Ngawang Dhorze Lama		6	M	Nawang Funjo Lama
15	Pema Chhyojom Lama		7	F	Pasang Lama
16	Tenzin Ghyacho Lama		9	M	"
17	Serap Dholma Lama		5	F	Nima Sandup Lama
18	Sonam Dheki Lama		13	F	Thakpa Lama
19	Tshering Buti Lama		11	F	Yungdung Lama
20	Ngawang Lama		11	F	Jhyanpal Lama
21	Dawa Chhiring Lama		9	M	Thakpa Lama
22	Pema Tenzin Lama		8	M	Lopsang Funjo Lama
23	Ngawang Thhile Lama		7	M	Lakpa Dhorje Lama
	Total Number of Student	23			
	Number of Boys	8			
	Number of Girls	15			
	Age Range	5 to 13 years			



Alternative Education | Alternative education students in Taju village, Chumchet

Taju village is situated in ward number 8 of Chumchet VDC. This is one of the scattered villages in Chumchet with more than 60 households. After education baseline survey, it is found that there are more than 27 school aged children. During survey, a focus group discussion organized and it is found that parents are interested to send their children in school but school is very far away. This village has identified as one of the neediest places in north Gorkha area, so PHASE has immediately started one alternative education class in June, 2012. There are 23 students studying in this programme where 15 students are girls and rest are boys. This programme will be completed in April 2015.

Table 17: Alternative Education, Hapra village, Hagam

Alternative Education Class, Sindhupalchok					
Hagam VDC, Ward no. 3, Hapra Village					
Start Date: 2009, Completion Date: April 2013					
SN	Name of Student	Ward No.	Age	Gender	Name of Parent/Guardian
1	Dipak Shrestha	3		M	Chandra Bdr Shrestha
2	Ram Shrestha	3		M	Bhim Bdr Shrestha
3	Parbati Shrestha	3		F	"
4	Laxman Shrestha	3		M	"
5	Bhakta Shrestha	3		M	"
6	Kamala Shrestha	3		F	Surya Bdr Shrestha
7	Purna Shrestha	3		M	"
8	Murali Shrestha	3		M	"
9	Sarwati Shrestha	3		F	Dev Bdr Shrestha
10	Gangalal Shrestha	3		M	Attar Bdr Shrestha
11	Khadkamaya Shrestha	3		F	"
12	Dev Bdr Shrestha	3		M	"
13	Nirmal Shrestha	3		M	Man Bdr Shrestha
14	Amrit Shrestha	3		M	Ratna Bdr Shrestha
15	Ishwor Shrestha	3		M	"
16	Om Maya Shrestha	3		F	Buddi Bdr Shrestha
17	Sunita Shrestha	3		F	"
18	Dev Shrestha	3		M	"
19	Krishna Maya Shrestha	3		F	Harimaya Shrestha
20	Urmila Shrestha	3		F	"
21	Rita Shrestha	3		F	Krishna Bdr Shrestha
22	Ram Bahadur Shrestha	3		M	"
23	Hari Bdr Shrestha	3		M	Lal Bdr Shrestha
24	Asmita Shrestha	3		F	"
25	Imaya Shrestha	3		F	Makar Bdr Shrestha
26	Prajita Shrestha	3		F	"
27	Thaka Kumari Shrestha	3		F	"
	Total Number of Student	27			
	Number of Boys	14			
	Number of Girls	13			
	Age Range	5 to 13 years			



3. Local Capacity Building Activities

Table 18: Orientation Meeting in Chumchet, July, 2012 – June, 2013

SN	Coordination & Support	No.	Participants	
			Male	Female
1	Meeting with Community	16	88	176
2	Meeting with Parents	5	54	47
Total		21	142	223

During this reporting period, Education Development Facilitator Ms Ragita has organized community meetings in all the VDCs. She has met School Management Committees, Mother's Groups and School Teachers. She has organized 21 meetings in 7 VDCs where 375 community people, mothers group and school teachers participated.

In the month of September, 2012, Ms Ragita has observed government primary school of Bihi for one month. Aim of this observation was to find why school aged children do not go to School? Following are the findings -

1. Lack of awareness
2. Big gap between rich and poor
3. Lack of infrastructure – school building, toilet, drinking water, furniture
4. Absenteeism of Teacher
5. Influenced by local politics, power and money

There is a big gap between rich and poor in this VDC. Rich people take their children to the private boarding school in Gorkha city or in Kathmandu. On, other hand rich people hold key position in every local CBOs. As a result they do not care about educational development in local village. The school does not have roofs, furniture, and drinking water facility. There is no school toilet in the school. Because of lacking in awareness, people think that sending their children to school is wasting of time. Community think, if they send their children to school, someone in the house need to stay for whole day to make foods for children. Absenteeism of school teacher is very high in this area. Most of the school teachers belong to lower part so they often leave schools closed and go down to their home.

Table 19: Orientation Meeting Facilitation in Sindhupalchok, July, 2012 – June, 2013

SN	Education Programme	No.	Participants	
			Male	Female
1	Meeting of School Mgmt. Committee	22	129	171
2	Meeting of Head Masters	8	19	68
3	Interaction with PHASE appointed teacher	31	15	16
4	Interaction with Parents/Guardians	90	441	477
5	School Toilet & Drinking Water	22	0	0
6	Alternative Education Programme	13	2	5
7	VDC Level Extra Activities	14	229	299
8	School visit and supervision	26	54	0
Total		326	889	1036

Ms Kavita Ghimire has facilitated SMC meetings, school teacher's meeting and alternative education teachers meeting in Sindhupalchok. During this reporting period, she has been able to meet and interact with 1925 community people and local key stakeholder in 326 different events in Sindhupalchok. She has visited the schools 22 times for monitoring of school drinking water and toilets, 13 times to alternative education schools and 26 times local government schools for monitoring infrastructural and educational situation.

4. Teacher & Infrastructure Support

Table 20: Support for Education Activities, July, 2012 – June, 2013

SN	Activities	Qty.	Remarks
1	Alternative Teachers – Full	2	Chumchet, Gorkha
2	Alternative Teacher – partial pay	3	Hagam, Sindhupalchok
3	Books and Stationary Support	205 sets	Sindhupalchok and Gorkha
4.	School Wall Construction	1	Panchakanya Primary School
5.	School Toilet Roof Support	1	Shermathan Alternative School
6.	Computer Room Carpet Support	25 Sq.M.	Laxmi Devi School,
7.	Tarpaulin Sheet for Roof	2	Chumchet Alternative School

There are 2 full time alternative education teachers working in Chumchet VDC of Gorkha. Normally, they run the alternative education class from 10 AM to 4 PM every day except in winter season. Apart from teaching, alternative education teachers organize regular extracurricular activities to enrich childhood development including monthly and quarterly evaluation process. 3 partially paid alternative teachers were working in 3 alternative education schools of Hagam. In Gorkha, PHASE health staffs have run adult literacy classes in their respective field villages for 3 - 4 months. Almost all the Adult Literacy Classes were run in evening because health staffs are busy for their clinical works and community women were busy with their household works in the day time. Stationary and books were supported for both alternative education and adult literacy classes. Similarly, PHASE has supported school carpet for Laxmi Devi School and tarpaulin sheet for alternative schools' room of Chumchet.

5. PHASE-NTTI Teachers Training

Table 21: PHASE NTTI Teachers Training, July, 2012 – June, 2013

SN	VDC	Training Type	Participants	Female	Male
1	Fulpingkot	Awareness with TOT	33	5	28
2	Fulpingkot	Awareness level	37	9	28
3	Hagam	Awareness level	37	12	25
4	Fulpingkot	Awareness level	25	9	16
5	Thumpakhar	Awareness level	41	18	23
6	Thumpakhar	Awareness level	45	17	28
7	Thulopakhar	Awareness level	45	21	24
8	Helambu	Awareness level	31	12	19
9	The Last Resort	Awareness level	18	4	14
Total			312	107	205



Teachers Training | NTTI Teachers Training in coordination with PHASE, Sindhupalchok

Nepal Teachers' Training Initiative (NTTI) has organized 9 events of comprehensive teachers' training in 6 villages of Sindhupalchok district. These trainings were Awareness Level Training and the curriculum is designed by teacher's training specialist Ms Ashley Hager. Total of 312 teachers got this training where 107 female teachers and 205 male teachers were participated. These teachers will get another level of training in 2013-14.

C. LIVELIHOOD IMPROVEMENT PROGRAMME

PHASE implements livelihood improvement activities in Hagam and Fulpingkot VDC of Sindhupalchok district. CDF Kavita Ghimire organized bee keeping, seasonal and off seasonal vegetable cultivation trainings in both VDCs. Along with trainings, community of both VDC received hybrid goat, bee hives and vegetable seeds from PHASE Nepal.

a. Livelihood Activities

Table 22: Agriculture Activities, July, 2012 – June, 2013

SN	Livelihood Programme	No.	Participants		Description
			Male	Female	
1.	Fundamental Training on Agriculture	30	311	307	
2.	Training Needs Assessment	6	-	-	6 events in 2 VDC
3.	Training Participants Selection	34	256	292	
4.	Refresher Training	6	48	79	
5.	Training Monitoring	4	45	26	
6.	Agricultural Construction	6	-	-	Nursery
7.	Agricultural Materials Distribution	14	311	307	
8.	Disease Control	1	-	-	2000 goats
9.	Tour to bee-keeping farmer	1	-	-	11 farmers
10.	Bee hive contribution	1	-	-	11 bee hives
11.	Hybrid goat contribution	2	-	-	1 goat in each VDC
12.	New area identification	2			Gorkha & Kavre

There have been 30 fundamental agriculture trainings organized in Hagam and Fulpingkot VDC. In this training community group received fundamental knowledge about kitchen gardening, seasonal and off seasonal vegetable cultivation procedures. Before organizing comprehensive training, there have been 6 different need assessment conducted in both VDCs to identify the prospective trainees from the community agriculture group formed in each VDC and after the need assessment, prospective trainees were selected for the training. Apart from the comprehensive training, 127 farmers got refresher training for off seasonal vegetable cultivation where 79 were female and the rest are male trainees. 6 nurseries have been constructed to grow vegetable plants. Agriculture materials have been distributed 14 times which includes seeds, water supply pipes and pesticides. PHASE has also supported two hybrid goats – 1 in each VDC. Disease control event have been organized to distribute de-worming tablet for goat. Goat farming and vegetable production became a means of income generation in these VDCs.



Livelihood | Agriculture training in Hagam, Sindhupalchok

In the month of January, PHASE has conducted an assessment in Fulpingkot VDC to find interested farmers for bee-keeping. Out of 35 farmers, 11 were selected for bee-keeping and organized a comprehensive training for them. After the training, they visited Godawary Bee-keeping Firm in Lalitpur district to observe modern bee-keeping technology. After the observation, PHASE has supported 1 modern bee-hive and bee to each farmer. These farmers are excited and starting bee-keeping as a means of small income generation.

During the month of May, PHASE CDF Kavita Ghimire visited Ryale VDC of Kavre and Gumda, Kerauja, Lapu and Manbu VDC of Gorkha. The aim of this visit was to identify the need and possibility of general livelihood opportunities.



Livelihood | Bee honey production in Fulpingkot, Sindhupalchok

Before receiving bee keeping training, farmers of Chilaune village used to have traditional bee keeping approach. Chilaune village is identified as a most suitable place for bee keeping. After the comprehensive training provided by PHASE they have modern bee hive and bee keeping approach. CDF Kavita Ghimire has observed the bee keeping in the month of June, 2013.



Livelihood | Growing vegetable plant in plastic tunnel, Sindhupalchok

b. Drinking Water and Sanitation

Table 23: Drinking Water and Sanitation, July, 2012 – June, 2013

SN	Livelihood Programme	No.	VDC		Description
			Hagam	Fulpingkot	
1.	Toilet construction	58	32	26	
2.	Drinking Water pipe	250 m	With coordination between District Forest and Soil Conservation Office & JICA		
3.	Cement (50kg pack)	15 pack			
4.	Toilet monitoring	180			

During this reporting period, total of 58 toilets are supported in Hagam and Fulpingkot for improvement of hygiene and sanitation. With coordination between District Forest and Soil Conservation Office and JICA, PHASE has supported 250 metre of drinking water pipe and 15 pack of cement for community drinking water tap construction. PHASE staff also monitored 180 household toilets in two VDCs and found that all the toilets are in good condition and used by household member regularly.



c. Capacity Building Activities in Livelihood

Table 24: Capacity Building Activities in Livelihood, July, 2012 – June, 2013

SN	Activities	Event	Male	Female
1.	Coordination Meeting	20	213	225
2.	Group Formation	25	167	355
3.	Group Meeting Facilitation	42	506	296
4.	Orientation Programme	12	135	128
Total		99	1021	1004

There is a regular meeting and orientation organized with community people. There are several local CBOs such as School Management Committee, Health Facility Management Committee, Agriculture Group formed in the community. PHASE staff has organized regular meeting to observe the progress and improvement towards the activities.

D. EDUCATION AND HEALTH AS CHILD RIGHTS PROJECT

PHASE Nepal started Education and Health as Child Rights Project in financial support of PHASE Austria. This project is started from December, 2012 in 6 lower VDCs of north Gorkha – Lapu, Gumda, Uhiya, Kerauja, Kashigaun and Manbu. Project period is 2 years. 1 Field Supervisor and 4 Social Mobilizers (ANM) are working in the field. Aim of this project is to raise child health and education awareness among community. Objective of this project is to improve maternal and child health as well as improving rate of school enrolled children.

1. Capacity Building and Local Group Strengthening

Table 25: Capacity Building and Local Group Strengthening, December, 2012 – June, 2013

SN	Activities	Event	Male	Female	Total
1.	Community Leaders Workshop	8	35	50	85
2.	Mothers' Group Meeting	73	34	777	811
3.	FCHV Meeting	3	2	6	8
4.	VCC Formation	19	-	-	-
5.	VCC Meeting	6	2	100	102
6.	Door to door visit	92	56	204	260

PHASE staffs have organized 8 events of community leaders' workshop meeting in 6 VDCs. In this meeting local political leaders, social service people and school teachers were participated. Aim of this meeting was to introduce the importance of child health and education. Mother's group were already formed in these VDC and PHASE staffs conduct regular meeting with them. There were 73 Mother's Group Meeting were organized in 6 VDCs where 777 Mother's Group members were participated. PHASE staffs facilitated this meeting and support them to manage emergency funds, stretchers, monitoring of ANC, PNC and delivery as well as child vaccination coverage situation. PHASE staffs always conduct small health education session as well with these members.



As per plan, PHASE staff also formed Village Cleaning Committee (VCC) in each VDC. VCC will be formed in each ward of VDC. PHASE is able to form only 19 VCC in this reporting period of 6 months. PHASE staff also conducted 6 meetings with this committee.

2. Awareness Raising Campaign & Events

Table 26: Awareness Raising Campaign, December, 2012 – June, 2013

SN	Activities	Event	Male	Female	Total
1.	Campaign for School Enrolment	16	28	14	42
2.	Hand Washing Campaign	1	0	13	13
3.	Village Cleaning Event	11	27	176	203
4.	Promotion (Wall Calendar)	6	-	-	900

PHASE staffs have organized 16 school enrolment campaigns throughout 54 wards of 6 VDCs. In this campaign, staffs directly coordinate with School Management Committee Members, school teachers and local stakeholders to organize campaign for school enrolment. PHASE staffs went around every wards of the village to find school aged children who do not go to school and organize campaign with parents and children to raise awareness. PHASE has organized promotional campaign in each VDC. With financial support from PHASE Austria, PHASE Worldwide, Stafforce, Google Trek and Eco Trip Nepal, PHASE Nepal has published 2500 copies of wall calendar and distributed 900 copies in 6 VDCs of lower Gorkha. This calendar contains awareness and advocacy messages written in bold Nepali scripts.

3. Safe Motherhood

Table 27: Safe Motherhood Activities, December, 2012 – June, 2013

SN	Activities	Total
1	No. ANC 1st attendants	79
2	No. of ANC 4th attendants	22
3	No. of delivery by health worker	11
4	No. of PNC attendants	23

Education and Health as Child Rights Project started from December 2012. Before PHASE started to work in this area, there were no any ANC, PNC and institutional delivery records found in this area. Most of the government health posts used to found staff less. On other hand, community people have lack of awareness regarding health facility. PHASE staffs have recorded 79 ANC first visitors during this reporting period. There were women took 22 ANC 4th and 23 women took PNC service from health institutions during this reporting period. 11 institutional deliveries were recorded. Most of these deliveries were conducted in Machhakhola birthing centre.



Child Rights | Training to local staffs for Education & Health as Child Rights, Lower Gorkha

4. Child Health Activities

PHASE staffs organized meetings with FCHVs, Mothers Group, Health Facility Management Committees and prospective stakeholders in the community. They built up relationship with government health workers, school teachers and parents for communication, orientation and facilitation of child health related issues. Such coordination have increased the rate of children vaccination coverage as well as number of children who took Vitamin A. PHASE staffs organized regular school visit programme to follow up and monitor the number of children who attend the school in regular basis. They organized health related awareness campaign for school children and teachers.

Table 28: Safe Motherhood Activities, December, 2012 – June, 2013

SN	Activities	Event	Male	Female	Total
1.	Children vaccinated	16	188	181	369
2.	Children who took Vitamin A	3	203	217	420
3.	Children de-worming	3	236	165	401
4.	No. of school visit	49	134	158	292
Total		71	761	721	1482



Child Rights | School children during orientation programme, lower Gorkha

5. School Enrolment

Table 29: School Enrolment, December, 2012 – June, 2013

SN	VDC Name	School Children	
		New	Old
1.	Manbu	71	746
2.	Gumda	29	726
3.	Lapu	31	482
4.	Kashigaun	91	422
5.	Kerauja	75	820
6.	Uhiya	146	440
Total		443	3636

New education session starts from the mid of April in government schools of Nepal. PHASE Nepal staffs, together with local School Management Committee, School Teachers and Parents organized school enrolment campaigns in each VDCs during the month of March. According to the data collected from field, 443 new children joined the schools this year. The highest number i.e. 146 children from Uhiya VDC enrolled in school. Uhiya village is scattered and most of the children often drop out from the school because of long distance between home and schools. Because of campaign school enrolment rate increased excitedly this year.



Child Rights | Mothers' Group meeting in lower Gorkha

E. EQUITY & ACCESS TO HEALTH SERVICE IMPROVEMENT

After the written agreement with DHO, Gorkha, PHASE Nepal started to work in the project from 1st Baisakh 2070 – April 14th, 2013 in coordination and financial support of District Health Office, Gorkha. Aim of this project was to improve in access to basic primary health service catered by government S/HPs. The programme was basically emphasised on reducing maternal and neonatal mortality and morbidity in the programme area, with a particular focus on poor, disadvantaged and underprivileged communities over a period of 3 months. By combining health education, advocacy and managing emergency funds at local levels and community-based outreach to change behaviour at the grassroots, PHASE has contributed to improve the lives of women throughout the project area.

To achieve the core objectives PHASE has strengthened public support for access to available primary health services, safe motherhood and neonatal care at the grassroots and community level. PHASE revitalized previously formed Mother's Group (MG), updated MG Emergency Funds, trained record keeping of funds, management of previously distributed stretcher along with emergency torch light. After the revitalization, PHASE started to conduct a targeted health education, behavioural form & change communication and advocacy sessions to promote health service, safe motherhood and to empower the underprivileged groups within communities. Local GOs, CBOs, and other stakeholders play a key role in coordinating the household response to maternal mortality and other reproductive health issues. PHASE Nepal is mobilizing the FCHVs, leaders of mother's group, health workers and teachers at community level, and one-to-one health education and advocacy visits. In each of the five project VDCs, PHASE educated FCHVs and mothers' group leaders to be safe motherhood advocates and safe motherhood volunteers. The primary function of these advocates is to counsel women and their families about danger signs during pregnancy and labour. In addition to conducting advocacy visits, PHASE staff organized awareness raising events and mobilized community support to empower women to access health services. On top of the programme's core objectives, PHASE also emphasised on basic primary health education such as personal hygiene, reproductive health and adolescence health. PHASE health staff (Social Mobilizer) received orientation in PHASE Office Kathmandu. The PHASE staffs departed to their respective fields immediately after the training and began to work according to the planned framework of DHO, Gorkha and PHASE Nepal.

1. Community Activities in Equity & Access Project*Table 30: School Enrolment, 14 April, 2012 – June 15, 2013*

SN	Activities	Total
1	Door to Door health education	120
2	Community Health Education Programme	13
3	FCHVs Meeting	10
4	Health Programme Management Committee Meeting	15
5	Stakeholders Meeting	17
6	Mother Group Meeting	83
7	Mother in Law, Sister in-law, husband-wife Meeting	21
8	Support for Immunization Programme	7
9	School Health Education Programme	21
10	Family Planning Counselling	506
11	Post Natal Care	10
12	ANC Service	50

Within 3 months of project period, PHASE has conducted stakeholders meeting in all the VDCs. There was a mass meeting and orientation programme organized in Laprak VDC to inform and orient about Equity and Access to Health Service Improvement project. 9 Mothers Group formed – one in each ward

of the VDC. Mothers' Group received emergency funds, stretcher and torch light for health service improvement specially focused on maternal and neonatal health. To encourage institutional delivery, PHASE Nepal, in support of District Health Office Gorkha contributed medical equipment kits to Machhakhola Birthing Centre of Gumda VDC. This birthing centre is established by DHO, Gorkha to improve institutional delivery service in 14 VDCs of upper Gorkha. Apart from the above, PHASE also established blue flag with safe motherhood logo in pregnant woman's house in Laprak VDC. 83 sessions of Mother's Group meeting have been organised and facilitated to monitor and support the health related issue and emergency fund management. 120 door-to-door health education programmes have been conducted. Education and demonstration on subject matters such as ANC, PNC, safe delivery, personal hygiene, sanitation, nutrition, uterus prolapsed, adolescent health, pneumonia and diarrhoea were conducted on these health education sessions. 17 community stakeholder meetings have been organised throughout 10 VDCs to sensitize community responsibility, stakeholders' accountability and the fundamental rights to health. 11 Health Facility Management Committee & FCHV meetings were held where they discussed on issues in serving the socially excluded community, managing the posts and plan for health programmes in general. During this period, there were 506 family planning counselling carried out and 21 school health education session was conducted.



2. Emergency Fund Collection and Utilization in Mothers' Group

Table 31: School Enrolment, 14 April, 2012 – June 15, 2013

SN	VDC	Fund Raising			Loan	
		Group	Members	Total Funds	Members	Amount
1.	Aaru Chanaute	12	455	598360	87	108730
2.	Aru Arbang	15	590	391007	26	34472
3.	Thumi	19	593	640117	53	35650
4.	Lapu	10	197	96644	14	83500
5.	Gumda	10	292	344744	15	309750
6.	Laprak	9	235	39840	-	-
7.	Uhiya	10	167	174645	19	136450
8.	Kerauja	10	239	351677	52	223220
9.	Kashigaun	10	186	129420	11	33200
10.	Manbu	14	334	123015	8	78500
Total		116	3348	1731556	266	821770

This is the completion of five months Equity & Access to Health Service Improvement (EAHSI) project in all 5 VDCs. So far there has been no vital assessment mechanism developed to check progress towards the indicators within short period. However HO and S/HP registers and anecdotal reports from the field show that progress is being made in all areas and the programme is on track to meet the goal. Working in community has enabled Social Mobilizer to conduct preventative activities. PHASE Nepal feels that working in this way we are likely to exceed the targets, as the community awareness should create a positive feedback loop and result in more consultations, especially for things like ANC/PNC and attended deliveries which is new for the communities and requires a lot of convincing.

Taken together the results demonstrate that EASMNH has made an impressive contribution to increasing underprivileged and women's access to health facilities at the community level and therefore to improving health outcomes particularly during pregnancy and delivery.



Mother's Groups (MG) are already formed in these 10 VDCs of lower Gorkha in first phase of Equity and Access project. PHASE staffs are regularly monitoring MGs activities and facilitate fund management in Education and Health as Child Rights Project area. PHASE staffs monitored and supported additional VDCs – Aaru Chanaute, Aru Arbang, Thumi. Laprak is the new VDC PHASE started Equity and Access project where 235 mothers are affiliated in 9 Mothers Group. Emergency fund should be used only for health treatment purpose. In some cases, member of Mothers Group can take loan for income generation purpose. Within 3 months of period, they are able to collect Nrs. 39840 for emergency funds. In total, there are 116 Mothers Group in 10 VDCs where 3348 mothers are associated. These MGs have raised Nrs. 1731556 so far and invested Nrs. 821770 within group members. Out of 3348 members, only 266 members took loan from the group.

F. OTHER ACTIVITIES

GP Visit

Table 32: GP Visit, September, 2012 – May, 2013

SN	Name of GP	Placement		
		Field	Time	To
October – November, 2012				
1	John & Amar	Sirdibas	Nov, 2012	
2	Lynda	Prok	Nov, 2012	
3	David	Manbu	Nov, 2012	
4	Alison	Sindhupalchok	Nov, 2012	
5	Andrew Moscrop	Humla	Nov, 2012	
March – April, 2013				
1	Sarah Watson	Sirdibas	April, 2013	
2	Bob Rivett	Lho	April, 2013	
3	Ann Rivett	Prok	April, 2013	
4	Richard Garlick	Hagam	April, 2013	
5	Dilys Noble	Hagam	April, 2013	
6	Dr Neil Margerison	Fulpingkot	April, 2013	



GP Visit | Dr. Andrew visited Maila health institution of Humla district

PHASE Worldwide, UK arranges General Practitioner (GP) volunteers every year who come from UK and facilitate teachings to health workers in PHASE Nepal's field health posts. This year, there are two group of GP volunteers visited PHASE Nepal working fields in Humla, Sindhupalchok and Gorkha and monitored, taught and supported the field health staffs. These GPs' average stay period in the field was 10 days.



Table 33: Engineers and Medical Student Visit, July, 2012 – June, 2013

SN	Name of GP	Placement		
		Field	From	To
March – April, 2013				
1	Er. Anthony ,	Sirdiba, Bihi, Chumchet		
2	Chris Walker, Software Engineer	Ktm, Hagam	19-Apr	22-Apr
3	Ben Rycroft, Software Engineer	Ktm, Hagam	19-Apr	22-Apr
June – July, 2013				
1	Mike Andrews	Ktm, Hagam		
2	William Lawson	Ktm, Hagam		
3	Henry Marklew	Ktm, Hagam		

Similarly, Hydropower Engineer Anthony Watson visited Bihi, Chumchet and Sirdibas VDCs of north Gorkha to observe the damaged micro hydropower. Objective of his visit was to assess the problems of damaged hydropower and possibility of restoration in minimum cost. Two Software Engineers from University of Sheffield developed local server based medical database management system and visited Hagam VDC of Sindhupalchok for piloting. In June, 3 medical students from University of Sheffield along with 3 public health students from Noble College, Kathmandu travelled Hagam VDC to conduct hygiene and sanitation research. The research was focused on household toilets supported by PHASE Nepal.

Solar for Field Health Posts

Bob Milne an Australian man donated four solar panels in North Gorkha Community Health Project. Mr. Milne himself installed these solar panels in Chumchet, Chhekampar, Sirdibas and Lho VDCs of north Gorkha. These solar panels have made a considerable improvement to the quality of life of our staff based in the remote areas. The solar panels will provide staff with light as well as being a source to charge electrical goods and laptop computers where they rent their work accommodation. These solar panel chargers which have been donated will allow our staff to have light in their room when it gets dark as well as being able to use when there is emergency in health post. PHASE Nepal staffs say a big thank you to Bob Milne and his family!



On the Job Training (OJT) Staffs

In this reporting period, PHASE has hired On the Job Trainees (ANM Trainees) from Jiri Technical School. Objective of hiring these Trainees was to support PHASE health staffs where there are no government staffs in the fields. These trainees worked with PHASE health staffs for 6 months in the field health posts.

Table 34: PHASE Nepal OJT Staffs, Jan, 2013 – May, 2013

PHASE Nepal OJT Placement Programme			
SN	Name	Placement	Duration
1.	Nirmaya Tamang	Samagaun	6 months
2.	Sakuntala Jirel	Prok	6 months
3.	Durga Basnet	Chhekampar	6 months
4.	Bageswory Jirel	Sirdibas	6 months
5.	Kalpana Sunuwar	Fulpingkot	6 months
6.	Sujita Jirel	Hagam	6 months

Beneficiaries

It is assumed that the entire population of 21 VDCs (which is 52477 people in 12238 households where 24143 male and 28334 female live as per National Census 2011/12) are direct beneficiaries of the projects, in having awareness in basic primary health, education and livelihood knowledge along with equity and access to health service. Even those who have difficulties in access to available service have the peace of mind that there is an emergency fund with MGs, there is a primary health service, and there is a school.

Within this reporting period, there were 170 women got delivery service, 531 pregnant women got at least one ANC service and 262 mothers' got at least one PNC service. Similarly 41483 community people visited PHASE health posts for counselling and treatment. More than 80 mothers group members are benefitted from PHASE adult literacy class. 78 children passed out 3 years alternative education class whereas 71 children are still studying. 548 farmers directly benefitted from PHASE livelihood trainings whereas 11 farmers got special bee keeping training with bee hive and bee support. 52 household toilets supported in Hagam and Fulpinkot VDCs. In Equity and Access project 3348 members from 116 mothers group got orientation for health service improvement. 56 traditional healers got orientation in north Gorkha while 104 FCHVs from 11 VDCs got IMCI and Nutrition training. After the integrated community awareness raising and social advocacy activities, it is hoped that community sensitize their rights and accountability and able to demand the services.

CHAPTER – 3

Support, Monitoring, Partnership & Networking

There is field based Health Supervisor who regularly conduct monitoring and supporting activities in the field health posts. PHASE has placed two Health Supervisors (HA/Staff Nurse) in 7 VDCs of north Gorkha, one Health Supervisor in Humla and one in Sindhupalchok. For Education Development Programme, PHASE has appointed one Education Development Facilitator in north Gorkha to support field teachers and adult literacy classes.

Table 35: Support, Monitoring & Networking, July, 2012 – June, 2013

SN	Support, Monitoring and Networking	Sindhupalchok	Humla	Gorkha	Total
1.	No. Public Audits in Field Posts	4	4	14	22
2.	No. of support by Health Supervisors	1	1	2	4
3.	No. of support by Education Supervisor			1	1
4.	No. of support by Child Rights Supervisor			1	1
5.	No. of Field Visit from Kathmandu	3		2	5
6.	No. of meeting with District Government	2	1	3	6
7.	No. of DPAC & Review meeting in District	1		4	2
8.	No. of Supervision of Project by SWC				1
9.	No. of Meeting with Donors				5

PHASE Nepal always organizes Public Audit event in each field villages to inform the detail project activities and financial activities. During this period, there were 22 public audit events organized in 11 field posts - half yearly Public Audit in each. 4 supervisors in health, 1 in child rights and 1 in education project are field based supervisors who regularly monitored and supported the field staffs. There were 5 field visits conducted from Kathmandu office. Field visit in Humla could not be done because of delay in starting a new field project in Kolti VDC of Bajura district. Regular networking meeting organized with district level government authorities. In Humla, field health staff Kalpana Sunuwar visited Simikot to meet with district level government authorities and submitted annual reports and plans. DPAC meeting could not organized in Humla but it was organized in both Gorkha and Sindhupalchok district. This year, Social Welfare Council (SWC), a government authority has conducted project evaluation of PHASE Nepal projects.



SWC Monitoring | SWC Authorities in Fulpinkot village during monitoring visit

Table 36: Reporting, July, 2012 – June, 2013

Report by	Report to	Subject	Period
PHASE Nepal	Donors	Annual Programme & Budget	Annual
PHASE Nepal	Donors	Progress and Financial Report	Quarterly
PHASE Nepal	Donors	Annual Budget	Annual
PHASE Nepal	Districts	Annual plan and Progress Report	Annual
PHASE Nepal	SWC	Annual plan and Progress Report	Annual
PHASE Nepal	District	Renewal of the organization	Annual

PHASE Nepal internal reporting period is in monthly basis. PHASE field staffs either send written report form to PHASE office in Kathandu or they make phone contact with in Kathmandu office and provide monthly reports each month. Reporting to donors has been done according to agreement. PHASE submits annual reports (project progress and financial) reports to government agencies every year. Besides, PHASE took part in yearly and half yearly review meeting of District Development Committee and District Health Office in Gorkha. PHASE has presented project progress reports during the review meetings.



Promotion and Marketing

PHASE Nepal keeps sending two monthly e-newsletters. PHASE Nepal has also published a new wall calendar for the Nepali year 2070 (15 April 2013 – 14 April 2014). This wall calendar contains awareness raising and advocacy messages in all 6 pages including achievement of PHASE Nepal since its' inception. This calendar is designed for publicity of the organization as well as spreading messages among the community to raise the health, education and child rights awareness. PHASE Nepal has also printed new glow sign board, flex sign board to fix in office location and printed 500 copies sticker of PHASE logo for organizational promotion.

Table 37: Promotional Activities, July, 2012 – June, 2013

SN	Promotional Activities	Total Qty.
1.	Wall Calendar	2500
2.	Visiting Card	1000
3.	PHASE Nepal Logo Sticker (cotton)	500
4.	PHASE Nepal Logo Sticker (plastic)	500
5.	PHASE Nepal Glow Sign Board	1
6.	PHASE Nepal Flex Sign Board	1
7.	Bimonthly e-Newsletter	6

New Members & Special General Assembly

PHASE Nepal has been fortunate in being able to recruit 5 new members who will help with developing the organisation. They are: Ms Sharada Acharya, who is an executive member, Mr Krishna Kumar Khulal, Mr Gopal Lamichane, Mr Chandra Bahadur Rai, Mr Baburam Karki. They will all act as general members. PHASE Nepal has been advised by the Social Welfare Council to broaden its member base. A general assembly was held at the PHASE office on the 19th of May to welcome the new members and also to amend the constitution to update the office address.

CHAPTER – 4

Challenges & Solutions

PHASE project area is extremely remote and need at least 2 days walk from the nearest road head. There is not a proper way of communication since almost all the fields do not have road transportation access and stable telephone communication.

- a. **Weather:** This year there was heavy snowfall during December to February. Almost all the VDCs of Gorkha and Humla were covered by snow for 3 months. Most of the community people migrated to warm places however PHASE supported health institutions in the field were remained opened and equipped. Similarly, monsoon rains have arrived early in Nepal; staff had to return to their respective field posts while it was raining most days. This increased the time to reach fields, risks of accidents and also loss of medication due to spoilage.
- b. **Programme:** PHASE has expanded its project area to 6 VDCs lower Gorkha. This project is started from December 2012 with financial support from PHASE Austria. This is a different project based on social mobilization and community advocacy on rights of children and maternal health. PHASE has planned to expand its CHP in 2 VDCs of Kavre and Bajura however funding is confirmed only in last of June, therefore, PHASE will start these two VDCs after rainy season of 2013.
- c. **Programme Coordination:** We repeatedly received feedback from district line government agencies that we do not liaise closely enough with them, although they are happy with our projects and the reports they receive. In the coming financial year we will make it a priority for the field supervisors to visit their respective District Government Office at least once every 4-6 months.
- d. **DPAC:** PHASE has organized District Project Advisory Committee (DPAC) meeting in Gorkha and Sindhupalchok. The purpose of DPAC is to review the ongoing project, its' target and achievement and to plan and include the upcoming project activities with District Development Committee; a government body. DPAC is also known as a platform for networking, sharing and dissemination of the project information among district level stakeholders such as – government agencies, NGOs and INGOs.
- e. **Project area in Gorkha:** The District Health Officer in Gorkha has requested that PHASE change its core working area to include a number of VDCs further South Gorkha and that we withdraw from four VDCs Bihi, Prok, Lho and Samagaun. The DHO has requested that CAN take over primary health care provision in those four areas. PHASE will leave these 4 VDCs on last of December, 2013 but has not made any commitment so far regarding programme expansion in south area of Gorkha.
- f. **Staff turnover:** This year, total of 7 staff left PHASE including 2 health supervisor and 5 ANMS. PHASE has appointed 9 new staffs including one alternative education teacher.

Improving the Project

It is observed that project is improving and has positive impact in the community. Most of the community people know that health and education are two important factors in life. In north Gorkha, now, many women in the community can read and write simple Nepali language and hopefully some of them will be able to read and write simple English very soon.

- a. PHASE health staffs got two times refresher trainings which include gynae, obstetric, IMCI, fracture, disability and autism trainings. PHASE also organized 4 day training session for government health staffs of north Gorkha area. This kind of training definitely improved the skills of health workers.

- b. Education and Health as Child Rights project staffs got advocacy and social mobilization training on child rights and maternal health. This training was also given to government health staff of the project area.*
- c. All the PHASE field staffs got 4 days Behaviour Change Communication Training in September. This training was organized to build up the communication capacity of field staffs who conduct awareness raising activities every so often in the project field.*
- d. PHASE has organized BCC training to community stakeholders such as HFMC, FCHVs and Mothers Group. PHASE has also conducted Traditional Healers Training in 12 VDCs of Gorkha project area. Similarly IMCI and Nutrition training and workshops are conducted in all the fields. These training have helped community people to increase their knowledge on common issues of health and education as well as practice healthy behaviour.*

Sustainability

In terms of sustainability of impact, the health education initiatives are fundamental for ensuring that general awareness levels of hygiene, sanitation, nutrition, maternal and child care, disease prevention and early treatment are raised in the communities.

In terms of sustainability of activity, working so closely with government entities can help to ensure this, as in poor and remote areas it is unlikely that fundamental health and education service can be provided on a private basis, so the government is likely to be the sole service provider in the area. In the future it is hoped that this successful partnership will convince the government to channel more resources into health, education and livelihood provision, as well as local community initiate utilization of local resources.

Already PHASE project is an interesting model for replication, for how NGO-Government collaboration can work to deliver essential primary service in rural Nepal. Furthermore, PHASE has emphasised on capacity building of local stakeholders, leaders, health and school management committees, government health staffs, FCHVs and by forming and revitalizing mothers group, village cleaning group throughout project VDCs. In child rights project (6 VDCs of lower Gorkha) area, Mother's Group members are raising emergency funds which is also using for income generation activities.