

### Sustainable Development Goal (SDG) and its linkage with the project

The Millennium Development Goals (MDGs) declaration by the United Nations has set foundation for Sustainable Development Goals (SDGs) to be achieved by 2030. Nepal, as a member of the UN, is committed to this global initiative.



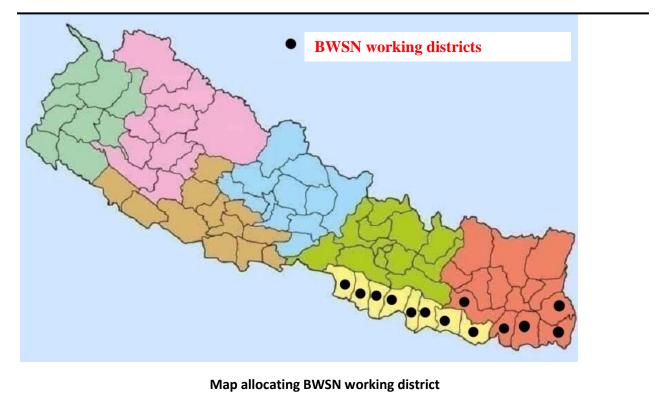
# Short Description of the Project

Donor Agency	Project Title	Project Duration	Sector	Working Areas
ADRA	HSS- Mother and child health and nutrition	June 2022- Jun 2025	Health and Nutrition	Mahottari & Sarlahi district
ADRA	WISH project	July 2022- Jun 2024	COVID	All 8 districts of Madhesh province
Save the Children	National Tuberculosis program	Mar 2018- Jan 2025	Health	198 local levels of Madhesh and Koshi province.
World Vision	Child Sponsorship Program	Mar 2019- Mar 2034	Child development education, and protection	Haripurba and Parsa RM of Sarlahi district
IWMI	RES-WASH project	Jan 2023- Dec 2024	WASH research	Sarlahi district
Water Aid Nepal	Hygiene Behavior Change in School and HCFs	Jul 2021- Mar 2024	WASH	Kajanha, Mirchiya and Kalynapur of Siraha district
OXFAM	Alternative Management Model	January 2023- Jun 2025	WASH	Haripur Municipality
Islamic Relief Nepal	Building Resilience community in province 2 of Nepal	July 2022-June 2025	WASH, DRR, Agriculture, Protection	Ishwarpur Municipality
PSI	Mother and Neonatal Health- continuum of care project	Jan 2022- Sep 2024	Health	Saptari and Siraha district
CARE	USAID-ARH Project	Dec 2022- Sep 2027	Adolescent Reproductive Health	Sarlahi district
OXFAM	Partnership Investment Fund	Jun2023- Dec 2025	Organization Development	Not Required
Islamic Relief	Scaling-up extreme poverty graduation and climate resilience in vulnerable community	Apr 2024-Mar 2025	WASH, Livelihood, DRR, Protection, Education	Haripur Municipality
РАТН	SNEHI project	Jun 2024- Dec 2024	Neonatal Health	Kathmandu and Sunsari

# **CHAPTER 1: BWSN AT A GLANCE**

# Introduction

Bagmati Welfare Society Nepal (BWSN) was established in 1995 A.D (2051 B.S.) and registered as non-profit making, nonpolitical and non-governmental organization in District Administration Office, Sarlahi district. It is also affiliated with and registered in Social Welfare Council, NGO Federation Nepal, and NGO Coordination Committee. BWSN is one of dedicated organizations in the district working for promoting human rights and increasing access of basic social services to poor, marginalized, and vulnerable population including children, women, and differently able persons.



**Thematic areas** 





**PROMOTION OF** 

INCLUSIVE GOVERNANCE



DISASTER RISK REDUCTION, NRM, AND CLIMATE CHANGE EDUCATION

#### Vision, Mission, Goal, Values and Target groups



Creation of equitable, justice, peaceful and prosperous Society where rights of everyone is ensured.

To work towards creating a prosperous, peaceful, free and equity based Nepali society.

To promote inclusive economic, social, political, environmental development through right based, participatory an democratic process to eliminate social evils, illiteracy, ignorance, ill-health, immortality, discriminat practices, environmental degeneration, in democratic norms and usage.



People's participation, Non-discrimination, Inclusive Governance, Equity and Equality, Compassion Transparency and Accountability



Protection and promotion of human rights of marginalized communities including Poor, deprived, Dalits, PWD, elderly Persons, women, children and youths, disadvantaged Muslim and Madhesi communities

# CHAPTER 2: BWSN Implemented Project in FY 2022/23

# **National Tuberculosis Program**

#### Introduction

Tuberculosis (TB) is a public health problem in Nepal that affects thousands of people each year and is one of the leading causes of death in the country. Nepal NTP has adopted the global WHO's END TB Strategy as the TB control strategy of the country. National Tuberculosis Program (NTP) is guided by the National Strategy Plan 2016-2021. Grant of global fund in Nepal is being managed by Save the Children (SCI) under the technical leadership of National Tuberculosis Control Center (NTCC). Under the new funding model, SCI has provincial level sub recipients (SRs). In province 1 and 2, Bagmati Welfare Society Nepal (BWSN) is implementing the project in close coordination with provincial government and local government. The key stakeholders of the project are National Tuberculosis Center, Provincial Health Directorate, Provincial Public Health Laboratory, Provincial Health Logistic Management Center, Health Office of the district, Municipality/Rural Municipality, Public and Private Hospitals, Primary Health Care Centers, Health Post. Duration of the project is March 2018 to July 2024.



Figure: Map allocation Tuberculosis project district

# **Target Beneficiaries**

All the patients visiting OPD in HFs and hospitals, Household member of Index TB cases, SAM/MAM/ARI children, People visiting pharmacy and doctors, Migrant entering through major borders, Prisoners.

#### **Major Activities**

TB case detection in hard to reach population by establishing sputum courier system to Microscopic centers

Mandatory contact tracing to family members of PBC and all childhood TB cases

TB screening in malnourished children in Outreach clinics/ Health facilities and major hospitals

Screening and testing of all presumptive DR TB, family screening of index DR TB case, screening for sesonal workers, prisoner and migrants,

TB Preventive Therapy (TBPT)

Physician handling TB cases by pay for performance mechanism in private sector

Implementation of FAST strategy at major hospitals.

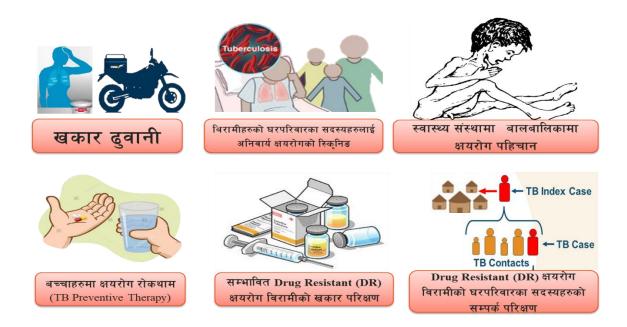


Figure : Diagrammatic representation of major activities

#### **Major Achievements**

	Program/Target Vs, Achievement TB Case Finding									
	Koshi Province			Madh	esh Prov	vince	Total Both Province			
Years	т	Α	%	Т	Α	%	т	Α	%	
2021	3225	1543	48%	3830	4,014	105%	7055	5557	79%	
2022	4455	2667	60%	5465	6085	111%	9920	8752	88%	
2023	4710	2805	60%	5933	6791	114%	10643	9596	90%	
Jan. to July 2024	2750	2192	80%	3427	4670	136%	6177	6862	111%	

# **Community Engagement and Child Sponsorship Program**

#### Introduction

Community engagement and Sponsorship Program (CESP) is an effective way to make positive and lasting change in the lives of children, their families, and their community. This program aims to ensure that the individual child gets access to quality education, better health, and better life. This program is implemented through the fund donated by our sponsors. The registered child is the representative child for their vulnerable community to raise the fund needed for the investment in the intervention that benefits the sponsor child as well as all other most vulnerable children in the community. World vision international Nepal in partnership with Bagmati Welfare society Nepal is conducting Community Engagement and Child Sponsorship Program.

# Objective

To improve the care and development of children within families and communities.

# Activities

- Child Expression Worksheet.
- Orientation of Sponsorship Approach.
- Child Monitoring and Positive Parenting Session
- School Health Nutrition (SHN) Program
- Rupantaran Life and Protective Skill ToT
- Rupataran Life and Protective Skill classes in the community- (Upto 26 sessions in every Saturday)
- District Level Rupantaran Alumni formed.
- Capacity building of Child Club Members

- Child Club Support- Child Friendly Learning Center.
- Self and Social Awareness and Responsibility interpersonal, Life and Protective Skill including issues of climate change.
- Capacity Building of Child Protection Actor
- Child Congress (Assembly)
- Coordinate with Local Government for CFLG indicator-based Campaign (birth registration, full immunization, child marriage, school enrollment, child labor, etc)
- Development and Endorsement of Child Profile.

# Achievement

- 1. Community people and parents are being aware on child
- 2. marriage and child marriage rate is in decreasing trend.
- 3. The child and adolescent from child club and Rupantaran group conduct different activities related to anti child marriage such as
- 4. street drama.
- 5. Development of child profile of Parsa RM and Endorsement of Child Profile from Haripurwa Municipality.
- 6. Increased Collaborative Partnership with wards and LGs
- 7. DPAC recommended for the last couple years to extend the program in other remaining LGs of the district.
- 8. Ward President from Haripurwa-8 stopped one child marriage in his ward.
- 9. Service Operating Indicator (SoI) is green through out the year in sponsorship correspondence.

# Total reached

Total beneficiary=28487 (Children-21997, Adult-6490)

Girl-11411, Boy-10586, Men-871, Women-5619)

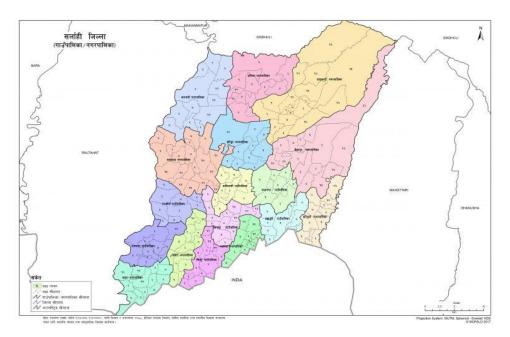
Registered Children- 7305

# **RES-WASH Project**

#### Introduction:

The project entitled 'Addressing Climate Vulnerability in Nepal through Resilient Inclusive WASH systems (RES-WASH), is a two-year research project funded by the Department of Foreign Affairs and Trade (DFAT) and implemented by the International Water Management Institute (IWMI), Nepal through the partnership of partner organizations, including Bagmati Welfare Society Nepal (BWSN), Global Institute for Interdisciplinary Studies (GIIS), and National Association of Rural Municipalities (NARMIN). The primary aim of this research is to enhance our understanding of how climate change impacts water resources and the Water, Sanitation, and Hygiene (WASH) infrastructure.

#### Working area





#### **Progress Vs Activities**

#### **Support in Qualitative Data Collection**

BWSN has supported the team in the field for the purpose of qualitative data collection. The organization played a vital role in supporting coordination and engagement of community members during the qualitative data collection process. It actively supported collaboration between community members and relevant stakeholders, such as local authorities and the researcher's team to ensure effective data collection. Through these initiatives, the organization promotes a sense of ownership and empowers community members to contribute to the data collection process, ultimately leading to more accurate and comprehensive qualitative data. Emphasized the importance of privacy and data security in the local

language when collecting and sharing information. Ensure that appropriate measures are in place to protect the confidentiality of community members' data and comply with relevant legal and ethical guidelines.

# KVL workshop with WASH stakeholders

Knowledge sharing and learning workshop with user stakeholders focusing user committee and other relevant stakeholders were conducted on 15 May 2024 with a diverse group of 80 participants, with a gender breakdown of 64 males and 16 females. The ethnic composition of the attendees was equally varied, with 14 Brahmin/Chhetri, 4 Dalit, 4 Muslim, 7 Janjati, 55 Madheshi, and 11 individuals with disabilities. The participant list included WASH (Water, Sanitation, and Hygiene) focal persons from the local levels of Bagmati, Godiata, Malangwa, Balara, Chakkraghatta, Haripur, Chandranagar, and Lalbandi, as well as WASH user committees from the local levels of Godiata, Dhankaul, Balara, Malangwa, Haripur, Harion, Bagmati, Chakraghatta, and Lalbandi. This suggests a strong representation from the grassroots level, with a focus on engaging local stakeholders in WASH-related issues. , The opening session of the event was led by the chairman of the District Coordination Committee, setting the stage for the day's proceedings emphasing the significant of the event in addressing climate change's impact on WASH.

# knowledge validation and learning (KVL) workshop with municipals

Knowledge sharing and learning workshop with user decision makers of municipalities and other relevant stakeholders was conducted on 16 May 2024. A total of 96 attendees, comprising 75 males and 21 females participated in the event. The ethnic composition of the participants was also diverse, with 21 Brahmin/Chhetri, 6 Dalit, 2 Muslim, 10 Janjati, and 58 Madheshi individuals. The event had a significant presence of local government officials, such as Mayors and Deputy Mayors from the local levels of Barahattwa, Balara, Bishnu, Malangwa, Dhankaul, Basbariya, Kaudena, Chakraghatta, Ishwarpur, Kabilashi, and Harion. Additionally, Chief Administrative Officers from the local levels of Dhankaul, Basbariya, Kaudena, Ishwarpur, Balara, Haripurba, Brahampuri, Malangwa, Harion, and Haripur were present, along with Ward Chairpersons from Malangwa, Bagmati, and Harion.

Key messages from group discussion

- Increase of water shortage in terai in the last few years due to decline in groundwater level
- Excavation in Bagamti river and chure region needs to be regulated
- Plantation of Masala tree should be discourage as they are associated with decreasing water level
- Protect water sources from encroachment
- Implementation of plans and polices

# **3.8: Field visit and interaction at water supply scheme**

The International Water Management Institute (IWMI) and the Bagmati Welfare Society Nepal conducted a joint visit to the Siddheshwor and Aapchori water supply schemes in Lalbandi Municipality, Sarlahi District. The purpose of this visit was to assess the status and interact with the stakeholders in the prospective climate resilience of these two critical water infrastructure projects. During the visit, the team engaged directly with the key stakeholders namely chairperson, vice-chairperson, members, and advisor of the user committees for each scheme. The ward chairpersons and community members were also present during these discussions.

These interactions aimed to gather firsthand insights on the operational challenges, maintenance needs, and adaptation strategies in place to ensure the water schemes can withstand the impacts of climate change. By understanding the on-the-ground realities from the local stakeholders, the IWMI and Bagmati Welfare Society team was able to assess the climate resilience of these vital rural water supply systems. The findings from this joint visit will be invaluable in informing future interventions and recommendations to enhance the climate resilience of similar water infrastructure projects in the region. The key concerns from the community people were that the available water source are drying. The innovation from siddeshwor water supply system was highlighted that they are charging less price for water consumed.

# 4.1 Endline Gender Equality and Social Inclusion Self-Assessment (GESI-SAT) workshop

The Endline Gender Equality and Social Inclusion Self-Assessment (GESI-SAT) Workshop took place on August 30, 2024, bringing together Board members, the senior management team, project teams, and representatives from ongoing projects. This collaborative gathering aimed to assess the progress and effectiveness of gender equality and social inclusion (GESI) initiatives within the organization, specifically in the context of WASH (Water, Sanitation, and Hygiene) projects. The workshop had three primary objectives. First, it sought to foster individual and collective reflective practice among BWSN staff, encouraging them to critically evaluate the extent and quality of GESI work within their projects and overall organizational framework. Second, participants engaged in meaningful discussions to identify current strengths and explore ways to enhance processes that drive positive change in GESI. This involved sharing best practices and lessons learned, which are essential for continuous improvement. Third, the workshop provided a platform to reflect on the opportunities, challenges, and progress made since the initial GESI-SAT workshop was held in 2023, with a particular focus on the GESI Action Plan.

# Workshop on hands-on training on the use of an online dashboard

On September 25, 2024, a pivotal workshop was held in Sarlahi District, aimed at enhancing the capacities of WASH (Water, Sanitation, and Hygiene) focal persons and engineers from all the municipalities and rural municipalities. This workshop focused on the critical intersection of climate change and the WASH sector, providing participants with essential knowledge and practical skills to address emerging challenges. The training began with a comprehensive overview of climate change, illustrating its direct and indirect impacts on water resources and sanitation systems. Participants explored biophysical vulnerabilities, understanding how environmental changes can compromise water availability and quality. Additionally, the workshop addressed gendered vulnerability, emphasizing the disproportionate effects of climate change on different demographics, and highlighted existing gaps in policy frameworks while identifying opportunities for improvement.

# Awareness program at school and communities via street drama involving media personal

In a significant initiative to raise awareness about climate change and its impacts, a series of street drama performances were conducted across eight selected locations, targeting both schools and marginalized communities. This project aimed to engage and educate individuals about the pressing issues related to climate change and the importance of resilience. The trained performance team effectively portrayed how climate change affects everyday life, particularly in vulnerable communities. Over the course of these performances, approximately 1,200 school students and teachers, along with 800 community members, were reached, fostering a broad understanding of environmental issues.

# Improvement of Hygiene Behaviour in Schools and Health Care Facilities (IHBSH)

#### Introduction:

The Improvement of Hygiene Behaviour in Schools and Healthcare Facilities (IHBSH) Project is supported by JICA and WaterAid Nepal and implemented by BWSN. The project aims to promote hygiene behaviour at the institutional level. Nepal is one of the 3 project recipient countries. The project is being implemented in 3 municipalities (Mirchaiya, Karjanha and Kalyanpur) of Siraha covering 14 schools and 15 HCFs. The project duration is from the October 2021 to March 2024. The school students in schools and the health professionals in Health Care Facilities (HCFs) are the primary target population. To reduce the spread of WASH-borne diseases, improve hand hygiene practices and prevent infectious diseases and wider replication of the best practices in the sector are some of the major objectives of the project.

Key project objectives are:

- To reduce the spread of WASH borne diseases,
- To improve hand hygiene practice in schools and HCF and prevent infectious diseases,
- Wider replication of the best practices in the sector etc.

Project	Project Milestones	Achievement
Outcomes		
Outcome1: Improved hygiene behaviour of target populations in target schools and HCFs in Siraha, Province 2 of Nepal	% of students observed using hand washing facilities with soap and water % of visitors and health staff observed using hand washing facilities with soap and water	<ul> <li>Conducted district-level inception meetings and municipal-level inception meetings,</li> <li>Conducted Preliminary Assessment of WASH facility in 30 institutions,</li> <li>Conducted 30 coordination meetings in institutions,</li> <li>Signed tripartite agreements between municipality, institutions and BWSN,</li> <li>Constructed and renovated necessary WASH facilities in 29 institutions based on the preliminary assessment,</li> <li>Drilled 10 successful boreholes (mechanical: 6 and manual: 4) with hand pump installation,</li> <li>Installed 25 water treatment units in institutions with WQT issues,</li> <li>Conducted wASH facilities,</li> </ul>

# Activities vs Achievement

<ul> <li>Handed over WASH facilities to institutions and concerned municipalities</li> </ul>
after the social audit.
<ul> <li>Capacity building of teachers and HCF staff on operating ENPHO field test kit and general plumbing with 4 days of training,</li> </ul>
<ul> <li>Water Quality Tests- 4 times in lab (2 times with ENPHO Lab and 2 times with Nepal Watawaraniya Sewa Kendra, Biratnagar,</li> </ul>
<ul> <li>Conducted ToT on Hygiene Package for school teachers and HCF staff for 6 days (3 days for each),</li> </ul>
<ul> <li>Conducted monthly SMC meetings for 6 months,</li> </ul>
<ul> <li>Conducted monthly HFOMC meetings for 6 months,</li> </ul>
<ul> <li>Conducted monthly hygiene sessions for 6 months in schools and HCFs,</li> </ul>
<ul> <li>Practiced daily operation and maintenance checklist to ensure proper functionality of WASH facilities and water treatment units,</li> </ul>
<ul> <li>Conducted a total 5 sports days in school during the pre-test, baseline survey, 1<sup>st</sup> monitoring, 2<sup>nd</sup> monitoring and end-line survey,</li> </ul>
<ul> <li>Conducted total 10 PPR meetings,</li> </ul>
<ul> <li>Distributed SATO Tap in one school,</li> <li>Conducted DPAC in March 2022</li> </ul>
<ul> <li>Conducted 3 MPACs in March 2023</li> </ul>
<ul> <li>Conducted 3 MPACs in March 2024</li> </ul>
<ul> <li>Prepared and shared weekly updates, monthly reports, quarterly reports, semi- annual reports, and annual reports to WAN.</li> </ul>
<ul> <li>Vent pipe of 15 HCF replaced with 10" diameter and 1-meter long pipe to ease in disposing of the safety boxes,</li> </ul>
<ul> <li>Conducted a closing ceremony including all 3 municipalities in March 2024.</li> </ul>

Outcome2:Arigorous, enhancedevidence base on hand hygiene informing internalWAlearningand wider practice in Nepal	Evidence of lessons being applied (Additional indicators to be added after the research design has been completed) Level of microbiological contamination of the water in [schools] and [HCFs]	WAN will generate and share ahead
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# **Beneficiary Reached**

WASH Access	Beneficiarie	S	School	(Users)	HCF Users		
Category	Direct	Indirect	Direct	Indirect	Direct	Indirect	
Water			3175		44724		
Sanitation			3175		44724		
Hygiene – Use			3175		44724		
Hygiene – Reach			1852		108		

# **Alternative Management Model**

### Introduction

Developing Alternate Management Model (AMM) for the Water Supply Scheme has been implementing since January 2023 in the financial & technical support Oxfam. Its main goal is to work for sustainability of all WSS within the territory of Haripur Municipality of Sarlahi district. There are 6 WSS altogether in the municipality, but no WSS has been working well. The project has aimed to make a municipality level Water Supply Management Board, with required act, separate office and management and other facility, to operate all the water supply scheme within municipality. Hence, the direct targeted population of this project is the population who are associated with WSS now, and indirect or future targeted population is all population of the Haripur municipality, who will be covered at future by the board. All people of Haripur Municipality are waiting or expecting for safe, reliable and sustainable water supply at their household. This project has been funded by Oxfam GB.

#### Objective

Pilot the Board model for water supply system management that supports local government in delivering safe water regularly through reliable, accountable, and efficient service-delivery mechanism at affordable rates.

#### Activities

# Outcome 1: Water Supply scheme design, and implementation practices are improved/upgraded and is practiced while upgrading water supply schemes in board's service area

- 1. Upgrade rural water supply schemes in the RM to hand it over to board
- 2. Automated Device Installation

Outcome2: Rural Water Supply Management Board in each RM is operating sustainably and provides provide safe water regularly with minimal or no service disruption and is identified as an alternative management model by the government

# Output No. 2.1 Strengthen Rural Water Supply Management board for effective management and response

- 1. Capacity building and exposure visits of staffs of WSMB and other relevant stakeholders on relevant roles/guidelines
- 2. Support Water Supply Management Board on operationalization of board policy and implementation guidelines to improve governance
- 3. Strengthen financial status of water supply management board.

# Output No. 2.2 Strengthen field operation and ground management of board

1. Strength field operation through supplies of assets/human resources/technologies and capacity building.

Outcome-3: Water users act as a creative watchdog to report dysfunctionality through digital platforms, question delays in response and demand accountability and transparency from management while paying regular scientific tariff for water use.

# Output No. 3.1 Orient water users on board modality and rights, functions and responsibilities of board as well as users

2. Events to orient water users & stakeholders on board operation process, its rights, functions and responsibilities together with users' responsibilities and rights.

# Output No. 3.2 Capacitate users on use of digital platform for tariff payment and complaint feedbacks

3. Events to orient water users on different digital platforms to make use of platforms easy and transparent

# Output No. 3.3 Campaign, awareness, and improvement in life

4. Campaigns and day celebrations

# Output No. 3.4 Mini water quality Lab establishment & WSS fitting Items from Oxfam internal fund

- 5. Lab equipment and Materials
- 6. WSS Fitting items

# C Monitoring, Evaluation, Accountability and Learning (MEAL)

- 1. Monitoring and travel to the site
- 2. Review Reflections (Bi-annual)
- 3. Coordination meeting with government, and all other stakeholders
- 4. CPAC, MPAC and other joint monitoring visits by local stakeholders, private sector

# Achievements

- 3 DWSS have been made functionable
- Water Supply Management Board at Haripur Municipality has been formed for the sustainable and integrate management of all DWSS at entire municipality territory.
- 2 DWSS have been enrolled at water board and one is ready to enroll.
- Awareness and trust of public and stakeholders at water board has been increased.
- Awareness on child labour, HIV/AIDS and other sexually transmitted and water borne diseases.
- GESI analysis and safeguarding orientation session to the staffs and stakeholders.
- Staffs and occupational workers adopted safety and security measures.

# Maternal and Neonatal Health -Continuum of care project

#### Introduction

The project aims to improve utilization and linkages across the continuum of quality maternal and neonatal health services in Madhesh province where maximum impact can be realized. The project has been funded by PSI and implemented by Bagmati Welfare Society Nepal. The objective of the project is to increase knowledge of and demand for MNH care and services; Strengthen capacity of government health facilities and providers to deliver quality MNH services; and strengthen linkages, referral and follow up for mothers and newborn.

#### Objective

The main purpose of this project is to address the demand and supply side barriers to increase utilization of MNH services across the continuum of care.

#### Activities

- 1. Conduct a meeting with the group of pregnant women, key influencers.
- 3. Facilitate an advocacy-focused meeting and arrange an event at a high school.
- 5. Provide assistance in conducting HFOMC meetings at health facilities.
- 6. Implement onsite coaching for skilled birth attendants (SBA).
- 7. Develop and execute a comprehensive implementation plan for the entire site.
- 8. Carry out routine assessments of data quality in health facilities.
- 9. Conduct performance-based community coaching at health facilities.
- 10. Engage in advocacy efforts at the municipal level.
- 11. Organize Municipality Project Advisory Committee, public hearing for community feedback.
- 13. Conduct monitoring and supervision activities by local government bodies.
- 14. Perform a social audit to evaluate community services and interactions.

#### **Population Reached**

Reach 11125 pregnant women (till date 15 sep 2024)

# of PWG : 2779

# of advocacy :114

# of Influencer : 1236

# of HFOMC :808

# high school event : 36

# **WISH project**

### Introduction

The project aims to contribute strengtheing community acceptane of the COVID-19 vacccination and increasing access to women health services and strengthen socio-economic receivery and resillance through effective partnership and community engagement. The project interventions and strategies are designed to reach pregnant, lactating mother, disable people, elderly population, population with morbidity, caretakers pediatrics and hard to reach population. Project aims to reach total 100,000 beneficiaries. The project was implemented in all the districts of Madhesh province in the support of ADRA.

The objective of the project is: -

- To address prioritized demand and supply-side barriers to improve utilization and linkage across the continuum of care through intersectoral collaboration and sustainable efforts.
- To improve the capacity of local level government in management and preparedness of future disaster or pandemic scenario.
- To improve the knowledge of the importance and demand for early detection and treatment of reproductive health services.

Activties a	nd Achi	evement
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Indicators	Camp 1 : Sarlahi District	Camp 2 : Dhanusha district	Camp 3 : Mahottari District	Camp 4: Rautahat district	Total
Total Registration	395	301	424	533	1653
POP Screening	260	155	280	347	1042
Total POP case	74	23	54	74	225
Uterine Prolapse (UP)	7	23	37	57	124
Cystocele and/or Rectocele	67	13	17	14	111
Vault Prolapse	0	0	0	3	3
Ring Pessary Insertion	6	10	10	9	35

#### Service details of the RH camp

surgery Identified case	7	2	11	21	41
cystocele	6	0	2	4	12
rectocele	0	0	0	0	0
Uterine Prolapse (UP)	1	2	9	14	26
Vault Prolapse	0	0	0	3	3
VIA Screening	20	18	30	53	121
VIA Positive	7	1	18	0	26
VIA Negative	13	17	12	53	95
Family Planning service	73	36	108	88	305
condom	45	8	32	44	129
Pills	10	12	51	11	84
Depo-Provera	3	5	8	9	25
Implant Removal	1	0	0	0	1
Implant Insertion	11	9	14	19	53
IUCD Insertion	3	2	3	5	13
Obstetric Service	23	26	36	18	103
ANC	21	22	31	15	89
PNC	2	4	5	3	14
GBV counseling	4	49	141	0	194
GBV related psychosocial counseling	4	2	10	0	16

# Conduction of Cervical cancer screening and prevention (CCSP) training.

Organization Age >18 Years Ethnicity	Disability
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	Male	Female	sicu	B/C	Dalit	Janjati	Madheshi	Muslim	Other	Yes	No
Participant	9	5	0	1	1	3	8	1	0	0	0
PMWH	1	7	0	1	1	6	0	0	0	0	0
ADRA	2	0	0	1	0	0	1	0	0	0	0
BWSN	2	0	0	0	0	0	2	0	0	0	0
FWD	0	1	0	1	0	0	0	0	0	0	0
РНТС	3	0	0	2	0	1	0	0	0	0	0
TOTAL	17	13	0	6	2	10	11	0	0	0	0

# Conduction of Infection Prevention and Control training.

		>18 Yea		Ethnicity						Disability	
Organization	Male	Female	sicu	B/C	Dalit	Janjati	Madhesi	Muslim	Other	Yes	No
Ramgopalpur M	17	3	0	1	7	1	0	11	0	0	0
Mahottari M	14	3	0	1	2	1	10	3	0	0	0
Ekdara M	14	3	0	1	3	3	7	3	0	0	0
Dhankaul RM	14	4	0	1	3	2	10	2	0	0	0
Harion M	13	6	0	3	2	3	10	1	0	0	0
Pipra RM	12	7	0	1	3	2	11	2	0	0	0
Ishwarpur M	14	3	0	2	2	4	7	2	0	0	0
Manrasiswa M	15	5	0	0	2	2	16	0	0	0	0
TOTAL	113	34	0	10	24	18	71	24	0	0	0

# **Building Resilience community in Province 2**

#### Introduction

Building Resilient Communities in Mahesh Province of Nepal (BRC) project is designed to work under the graduation model which is a 3 years project. The project aims at building community resilient by addressing food and livelihood security, WASH & Protection at the Ishworpur Municipality, ward number 1,3& 9 of Sarlahi district. The major objective of the project is mentioned below: Targeted households adopt resilient livelihood practices and their food and household economic security is enhanced; Community resilience reinforced through social cohesion, protection services and access to government assistance; Children and their families continue to use basic or improved latrines, sanitation practices and use reliable and safe drinking water sources. The Project aims at building Community résilience by addressing food and livelihood insecurity, WASH and Disaster Risk Reduction and Protection in Sarlahi districts

#### Activities

- Distribution of Small Livestock (Goat and He-Goat).
- Identification of youth/women to be supported to viable business.
- Consultation meeting with value chain actors.
- Provide Orientation to child club/ youth clubs/ protection groups/ women/ faith leaders on proetction and referral pathways mechanism.
- Teaching basic sanitation and hygiene to communities and school children.
- Vegetable seed distribution program.
- Agriculture training to farmer groups.
- To raise awareness regarding the protection issues early child marriage, domestic violence the at school level.
- Handpump installation.
- MPAC Meeting.
- Water testing of drinking water (iron, arsenic, etc.
- Soil testing.
- Provide training in business and technical skills.
- Transfer of livelihood assets.
- Provide technical and mentoring support.

- Formation of protection Groups.
- Organize Financial Literacy Training.
- Provide orientation on DRR/CCA.
- Vulnerability Risk Assessment.
- Capacity Building of Stakeholders.
- Support to develop/Update DRR/CCA plan/strategy.
- Demonstration of adaptive farming practices.
- Support Irrigation systems and other infrastructure.
- Develop Advocacy Strategy & Action Plan.
- Organize Learning sharing visit for farmers.

#### Achievement

- 804 households adopt resilient livelihood practices and their food and household economic security is enhanced.
- Community resilience reinforced through social cohesion, extension of protection services, and facilitating access to Government assistance.
- Children and their families continue to use latrines, demonstrate improved hygiene practices and have increased access to safe drinking water sources.
- Scaled up climate-resilient agricultural production and diversification through better access to agricultural inputs and improved farming practices.
- About 120 HH'S (600 Population) have direct access of the pure drinking water and able to drink pure water.
- All the 8 farmers groups were registered in the agriculture department of the Ishworpur municipality and able to receive several benefits from the district and municipality (training, subsidies, soil test and so on).
- Farmers were able to minimize the investment in the in farming and increase their productivity with the use of their own prepared organic manures and fertilizers.
- All the project beneficiaries were able to identify the social problems and refer to the respective platform (organization, office, department and so on).
- Goats have been distributed to 400 RHs, leading to increased income sources for these households, which in turn allows them to invest in critical areas such as education and health.
- Able to set up 115 well succeed business enterprises which enhanced their livelihood (increased the living standard of about 575 population).

# **Maternal and Child Health Nutrition**

Goal: Health and Well-being of Nepalis Improved and Sustained

**Objective:** To improve the Nutritional Status of pregnant and lactating women (PLW) and children 6 to 23 months of age.

# **Project intervention**

# Supply Side Interventions:

Provide technical assistance to MoHP, Provincial Health Directorate, and selected health facilities.

Provide training, infrastructure development, and material/supplies support to health facilities.

Linkage with agriculture sector to access to locally available adequate and diverse diets among poor, food insecure, and vulnerable households.

Develop Policy paper – Health and Nutrition

# **Demand Side Interventions:**

Broadcast key messages through mass media (radio), print and disseminate of SBCC materials in local languages to health facilities, schools and communities to create a public awareness campaign on nutrition, health and WASH.

Mobilize FCHVs, health workers and community volunteers (MSNP) by providing training on recipe book, cooking demonstration and gender sensitive.

# **Key Achievement**

Beneficiaries reached: Child Screening = 4224, Child SAM Case=154, Child MAM Case=556, Lactating & Pregnant women Counselling =3937, Lactating SAM Case=8, Lactating MAM Case=46, Pregnant SAM Case=91, Pregnant MAM Case=483, Nutrition Counselling =4851, Family Planning Counselling =1156.

Training/workshop reach: In the DIP meeting there were participation of 33 participants i.e. 21 Male and 11 Female. Likewise, A total of 154 local authorities i.e., 126 Male and 28 Female were oriented during municipal level planning meeting. Similarly, a total of 23 i.e., 9 Male and 14 Female health staff received training on GMP-QI. A total of 25 health service provider i.e. 21 Male and 4 Female were trained on mental health, a total of 30 health service providers i.e. 26 Male and 4 Female were trained on quality improvement training. Additionally, 101 farmers i.e. 51 Male and 50 Female were trained on vegetable seed production. A total of 224 FCHV and health service providers i.e. 62 Male and 162 Female were trained on nutrition recipe book. Minimum service standard orientation was provided to 86 health service

providers i.e. 73 Male and 13 Female. ENAP, EPMM and HMIS workshop was conducted with a participation of 17 Male and 4 Female. Community care group volunteer training was provided to 90 Female Volunteer and 9 Female project nurses.

# **Partnership Investment Fund**

# Introduction

BWSN have multiple areas that need to be addressed for the growth and positioning of the organization nationally. There is need to improve the standard of the organization by adoption of uniform performance appraisal timing in all the projects under the organization, Developing and orientation on organizational software for the information of all the past and running projects. Similarly, a website serves as a centralized platform to provide information about the NGO's mission, goals, projects, and activities. Likewise, research have not been given that much importance, but it is very useful for proper planning and designing the prioritized need of the community. Regarding this research will be conducted titled identification of the barriers of water sanitation and hygiene (WASH) practices in Haripur Municipality of the Sarlahi district.

#### Activities

# Action 1: Develop proposal and strengthen the organization policy/procedure/tools and techniques used.

Internal discussions were held with the senior management team and board members to determine the best approach for merging the various safeguarding policies into a single, comprehensive Safeguarding Policy. This process involved careful deliberation and collaboration among the organization's key decision-makers. The policy work was primarily carried out by the BWSN project head and the senior management team. They meticulously reviewed the existing child safeguarding policy, child protection policy, and prevention of sexual exploitation, abuse, and harassment policy, and worked to consolidate them into a unified Safeguarding Policy. Once the initial drafting was completed, the proposed Safeguarding Policy was then forwarded to an external consultant for review and final editing. The consultant's expertise and fresh perspective helped to ensure that the policy was aligned with the latest guidelines and regulations, and that it addressed all the necessary components of a robust safeguarding framework.

During the reporting period, the organization developed a total of six proposals or concept notes. The concept notes and proposals were initially developed by the expert team within the organization. This team leveraged their expertise and knowledge to craft the initial drafts of these project proposals. After the in-house development, the proposals and concept notes were then forwarded to an external consultant for review and insightful suggestions. The consultant's expertise and fresh perspective helped to refine and strengthen the proposals, ensuring they were aligned with the latest funding requirements and guidelines. Out of the six proposals and concept notes submitted, one was selected, and the agreement process was completed. Additionally, one of the concept notes was accepted for the next phase of full proposal development. However, the remaining four proposals or concept notes

were not accepted by the funding agencies or partner organizations. This mix of successes and nonacceptances highlights the competitive nature of the funding landscape.

BWSN identified a team of expert staff members to take the lead on developing the CFAM and leave templates for the organization. This team likely included senior managers, HR professionals, and subject matter experts who had a deep understanding of the organization's needs and best practices in these areas. The expert team was assigned the responsibility of formulating the templates. This involved analysing BWSN's existing practices, and collaboratively designing templates that would effectively meet the organization's requirements. The draft templates were then discussed in detail with the broader managerial staff. This allowed for input, feedback, and refinements to ensure the templates were comprehensive, user-friendly, and aligned with the organization's policies and procedures. To further strengthen the templates, BWSN engaged the services of an external consultant. The consultant reviewed the templates, provided insightful suggestions, and worked with the organization to identify areas for improvement. Once the templates were finalized, they were properly documented. After the templates were developed and finalized, BWSN provided orientation sessions to familiarize all relevant staff members with their purpose and usage.

# Action 2: Organizational visibility for fund raising.

Have been planned in the next half of the 2<sup>nd</sup> year project period.

### Action 3: Capacity building of organizational staff as per the emerging needs.

Computer/mobile/internet safety and security training: Identification of trainer and content development is in the process. The training has been planned in the next half of the 2<sup>nd</sup> year project period.

#### Added value.

- Agreement with one additional funding agencies.
- Updated safeguarding policy finalization has been done.
- Template development have enhanced uniformity and consistency in documentation and communication.
- One of the proposals is in the next stage as per the requirement of funding agency.

# **USAID-ARH Project**

# Introduction

In terms of reproductive health, Adolescents in Nepal face critical challenges in meeting their RH needs and attaining RH rights. Poor access to RH information and low use of RH products and services is fueled by cultural taboos on adolescent sexuality and pre-marital sex. Girls face additional challenges due to social norms on child, early and forced marriage (CEFM), early childbearing, restrictions on physical movement, exclusion from home and schools during menstruation and gender-based violence (GBV), all of which have been deepened by COVID-19. Existing ARH services are limited and are not adolescent friendly due to factors such as lack of privacy and confidentiality in service delivery. All of this is compounded by capacity gaps of ARH service providers in addition to provider stigma towards adolescents receiving ARH services. As such, many adolescents, particularly unmarried, access RH services through the private sector. Sexuality education in schools is poor, inconsistently implemented and does not link to ARH services. The few digital ARH platforms launched in Nepal face functionality issues or are not widely used. Eight local level of Sarlahi district : Haripurwa Municipality, Chandranagar Rural Municipality, Ishworpur Municipality, Haripur Municipality, Barhathwa Muncipality, Kabilashi Municipality, Malangawa Muniipality and Brahampuri Rural Municipality.

# Objective

- To provide accurate, relevant FP/RH information and behavior change support to adolescents; and educate their parents, teachers, and communities, addressing current social norms; to facilitate healthy reproductive health decisions and adoption of healthy behaviors by adolescents
- To improve availability and accessibility of quality FP/RH services for adolescents by identifying and addressing key gaps in current services and in systems that determine effective access and utilization of adolescent-friendly services and products.
- To institutionalize successful data-driven approaches and mechanisms addressing adolescent reproductive health through the public and private sectors.

# **Activities vs Achievement**

S.N. Activ		activities	Number (Year I- 2022/23)		Number (Year II- 2023)/24	
			Target	Achievement	Target	Achievement

1	Inception workshop at district level	1	1	0	
2	UCPVA ward prioritization	8	8	0	
3	Mapping for group formation of adiolescents, mother and father group	8	8	0	
4	District level SAA training	1	1	2	2
5	SAA group formation	96	96	256	256
	FCHVs modular package at municipality level	8	8	0	0
	FCHVs modular package at health facilities	24		0	0
	Oreintation on ARH to religious leaders	1		0	0
	Self assessment, development of action plan and follow up by health facility on adolescent-friendly services with ARH team			24	28
	Rollout Hub and spoke model of mentorship in hub sites			2	2
	Implement Youth-led community health score board with engagement of targeted adolescents	4	0	8	6
	Rollout of health package for elected government officials	8	0	8	6
	Team building within groups through sports activities				
	SAA session among adolescent girls (10-14)	48	48	756	448
	SAA session among adolescent girls (10-14)	48	48	797	470
	SAA session among adolescent boys(10-19)	48	48	1492	891
	SAA session among young mothers	48	48	379	286
	SAA session among father of adolescent	48	48	411	240
	SAA session among mother of Adolescent	48	48	415	293
	Intergroup session between girls and boys		1	192	37
	Intergenerational dialouge		3	192	6
	Develop mechanism to periodically evaluate health facility on adherence to key service standards	6	0	0	0
	Organize RH Committee at Local Level for ARH Priority budgeting and planning	3	0	8	0
	MEL MIS Data Validation Meeting	0		3	2
	Monthly Progress Sharing and Planning Meeting with Staffs and Board	0		6	6
	Solidarity campaign for awareness raising (International girl child day, Menstrual Hygiene, Family Planning Day, FCHV Day)	0		16	10
	Introduce SATH In existing health mothers group (SATH approach refers to Self-Applied Technique for quality Health)	0		24	24
	Train FCHVs on ARH to include ARH issues in session conducted by health mothers groups	0		24	22
	Conduct Review meeting with FCHVs annually	0		8	6
	Reusable Sanitary pad training to adolescent girls group	0		8	8
	Quarterly SAA Dialogue with social influencers (Community leaders, Religious influencers)	0		3	2

AHFS municipal coordination committee meeting	0	8	6
Planning workshop with local government to formulate ARH plan	0	8	6
District Level Semi-Annual Review Reflection and Planning Meeting (internal)	0	2	2
Review Reflection Meeting with District Government	0	1	1
Collaboration with Province health Directorate Office for Routine Data Quality Assessment (RDQA)-District	0	1	2

# **SNEHI Project**

# Introduction

The Comprehensive Lactation Management Centre (CLMC) is an elaborate set up established for the purpose of collecting, screening, processing, storing and distributing donor human milk (DHM). CLMCs are established at Government federal and province level Hospitals with high delivery load and availability of newborn treatment units such as NICU/SNCUs.

An extensive ground work was taken earlier by Ministry of Health and Population's -Family Welfare Division, the PATH, and the Bagmati Welfare Society Nepal for feasibility of establishing Comprehensive Lactation Management Centre (CLMC) at BPKIHS. Then after the decision to open was taken after it had fulfilled the criteria laid down in 2079 Lactation Management Centre Guideline 2079 by the Government of Nepal, Ministry of Health and Population, Department of Health Services.

# **Project Location**

B.P. Koirala Institute of Health Science (BPKIHS) Dharan, Sunsari district and Lactation Management Units (LMU) at Tribhuwan University Teaching Hospital (TUTH), Maharjgunj-Kathmandu

# Objective

- Establishing Comprehensive Lactation Management Centers (CLMC) and Lactation Management Units (LMU).
- Addressing both systemic and practical challenges related to breastfeeding and newborn care.

# **Major Activities**

- Perform a needs assessment to determine the requirements for establishing CLMC, following the standards set by the government of Nepal and finalization of the CLMC site.
- Procure and supply medical instruments and equipment to support the establishment of CLMC & LMU.
- Layout and architectural plan development and civil work at CLMC & LMU site
- Transportation of medical instruments and equipment to the CLMC/LMU sites.

- Conduct training for CLMC & LMU service providers.
- Facilitate mentoring and learning exchange visits to share good practices.
- Develop tools, job aids, room-wise checklists, and standard operating procedures (SOPs), as well as equipment calibration protocols and quality assurance standards (CLMC scorecard, LMU scorecard) for CLMC/LMU.
- Develop, print, and distribute appropriate Information, Education, and Communication (IEC) materials for CLMC and LMU sites.
- Organize events to celebrate health and nutrition-related themes.(world health day, nutrition day)
- Conduct review meeting with hospital manangemet and government stakeholders to assess progress.

# Achievement

The initiative has effectively collaborated with the designated hospital to create a milk bank, resulting in the hospital and project signing a Memorandum of Understanding (MOU). Furthermore, materials related to Information, Education, and Communication (IEC) have been created and translated into the native tongue to guarantee community comprehension and accessibility. Following the guideline requirements of Nepal's Community Lactation Management Center (CLMC), the design and cost estimation have been finished. In addition, the essential civil works for LMU and CLMC establishment and the purchase of medical equipment and instruments have been in process.

# Scaling-up extreme poverty graduation and climate resilience

#### Introduction

Haripur Municipality of Sarlahi selected based on a multicriteria analysis that considered poverty, marginalization, food insecurity, exposure to climate risk and the presence of relatively more Muslims and Dalit. It has been suffering from very high multi-dimensional poverty despite there are tremendous potential for agriculture, livestock, fisheries and skills development. It is also vulnerable to climate change due to its physical landscape as part of the broad Churia ecosystem. Every year district affected by localized floods and drought. The vulnerability to climate change risk is high in Haripur Municipality because of poverty, marginalization, and low adaptive measure. Most of the assessed Muslims and Dalits have only homesteads and earning is not sufficient to meet their day-to-day household expenditure. Around 50% of assessed families were indebtedness to meet their household needs. livelihood opportunities beyond the agriculture sectors are very limited in rural communities.

Majority of the farmers have inadequate knowledge and skills in improved farming practices. More than 55% of farmers grow seasonal vegetables for domestic consumption and the rest sell them in the local market. There is insufficient water for agriculture due to dry spells and lack of irrigation. There is limited availability of information and research products to enable evidence-based advocacy and scaling of poverty graduation approach. This makes it challenging to initiate advocacy efforts to hold the government more responsive for disaster risk-reduction and climate change adaptation, particularly for the most vulnerable groups like Muslim /Dalit, women etc. The Project aims at building Community résilience by addressing food and livelihood insecurity, WASH, Protection in Sarlahi districts.

# Major activities

For sustained and holistic pathway of poverty graduation in areas of entrenched poverty with an integrated and responsive package of community level and household level following major interventions planned to implement.

- Identification of 400 rights-holders for IGA support
- Selection of Livelihood Package
- Provide training in business and technical skills
- Transfer of livelihood assets
- Provide technical and mentoring support
- Identification of vulnerable children for educational Support
- Formation of Self-Help Groups
- Capacity building of SHG
- Organize Financial Literacy Training

- Provide orientation on DRR/CCA
- Vulnerability Risk Assessment
- Capacity Building of Stakeholders
- Preparation of adaptation plane for targeted communities
- Support to develop/Update DRR/CCA plan/strategy
- Demonstration of adaptive farming practices
- Support Irrigation systems and other infrastructure
- Develop Advocacy Strategy & Action Plan
- Organize exposure Visit
- Establish Academic Partnerships
- Carry out research
- Documentation and sharing of knowledge products
- Organize exchange learning visit
- Organize webinar to share the learning
- Pilot HCD based Innovation
- Training on HCD

#### **Expected Result**

IRN projected to achieve the following results

- 400 Ultra-poor and vulnerable families especially Muslim and Dalit will be able to enhance their income and livelihood towards a better resilience to climate change through a graduation approach
- 40 Vulnerable communities will benefit from increased access to targeted and context-specific adaptation solutions, substantially reducing their vulnerabilities to climate change.
- 300 smallholder farmers benefit from the adoption of resilient farming practices and increased access to irrigation.
- 9931 populations will benefit from capacity building, awareness activities and learning of the project interventions.
- The project will directly reach out to 9931 individual populations of which 49 % are women 60% Muslim.