

Organization Information	
Name of Organization	ACRA CCS FOUNDATION (CCS Italy), NCO
Address/ Telephone	Chundevi Marg, Kathmandu, Nepal. Tel: 977-1-4720048
Contact Person/ Designation	Hit Kumari Gurung Program Coordinator (Health)
Email	hit.gurung@ccsitlay.org
Major Health Program Focus	
Program Components	School Health and Nutrition
Implementation Approach	Partnership with local NGO and coordination with government authority form centre to grass root level
Activity Details	Annual physical/oral check up, Mid day meal, Provision of daily tooth brushing/hand washing facility, distribution of tooth paste/soap, first aid kit distribution, training to focal teacher and child club members on school health and nutrition, support on healthful school environment.
Partners	Centre for Development and Cooperation Nepal (CCD), Nepal Little Flower Society (NLFS), Educational Resource Centre and Development Nepal (ERCDN), Prisoners Assistance Nepal (PA Nepal), Karuna Bhawan, CWARD, People Dental College and Hospital (PDCH)
Geographical Coverage (District and VDC coverage)	Kavre Districts- 7 VDCs, Chitwan- 2 VDCs, Makwanpur- 5 VDCs, Kathmandu – 6 VDCs and 3 wards
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	2013=70,800Euro 2014= 60,000Euro
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	Actively participating in SHN network to finalized Joint Action Plan for School Health and Nutrition in national level, also participated in AIN HWG network.
How can AIN HTG Contribute to effective health sector strategy implementation?	Health working group should coordinate and pressurize department of health and department of education to implement SHN program effectively in school.
Documents, Manuals, Research Reports and other papers produced by the organization	KPC survey, Mid-term/final review, annual report, SHN polity, leaflet on oral health, Context analysis of school

Organization Information	<p>Action against Hunger was founded in 1979 by a group of French intellectuals in response to the emergency in Afghanistan. ACF's mission consists of saving lives via the prevention, detection and treatment of malnutrition, in particular during and following disasters and conflicts.</p> <p>There are 4 key pillars for ACF's programming:</p> <ol style="list-style-type: none"> i. Prevention and treatment of under-nutrition ii. Water, Sanitation and Hygiene iii. Food Aid and Food Security iv. Advocacy <p>Through its nutrition programmes, ACF prevents diagnoses and treats acute malnutrition in those most at risk, including young children and pregnant or breast-feeding women. In addition, ACF also takes into account the quality and nature of the care given to children within the family and the community. Our programmes therefore include the reinforcement of childcare practices and of the parent-child relationship, promoting the child's physical and mental progress.</p> <p>our programmes also include mental health segment, providing psycho-social and psychological support.</p>
Name of Organization	ACTION CONTRE LA FAIM (ACF)/ ACTION AGAINST HUNGER (AAH)
Address/ Telephone	Sanepa, Jhamsikhel-2, Lalitpur, Nepal Tel: +977-5542812, 5534094
Contact Person/ Designation	Mr SHASHWAT SARAF/ COUNTRY DIRECTOR
Email	hom@np.missions-acf.org
Major Health Program Focus	NUTRITION, MENTAL HEALTH AND CARE PRACTICES
Program Components	<p>Community mobilisation - involves identification of acutely malnourished children at community level on an on-going basis to enable widespread early detection and referral before the clients condition deteriorates further (i.e. children with MAM becoming SAM and children with SAM developing complicated SAM). This aims to increase coverage and maximise effectiveness of treatment. In Nepal the primary vehicle for this is the Female Community Health Volunteer (FCHV).</p>

	<p>Inpatient Therapeutic Care (ITC) – involves management of complicated cases of SAM according to WHO protocols on an inpatient basis at tertiary level facilities (hospitals) or specialised units (Nutrition Rehabilitation Homes).</p> <p>Outpatient Therapeutic Care (OTC) – involves the management of non-complicated cases of SAM in outpatient care using ready-to-use therapeutic foods (RUTF) provided on a weekly basis, simple routine medicines and monitoring and orientation to the client/caregiver. Outpatient care is offered through decentralized low level health structures (health Posts or sub-health posts) or outreach sites ideally within a day's walk of people's homes.</p> <p>Management of Moderate Acute Malnutrition (MAM) through nutritional counselling and preventive messages for MAM children not to fall under SAM</p> <p>Operational Research and Learning from the program are also important component of the program</p>
Implementation Approach	Through partnership with District Public Health Office
Activity Details	<p>Central and District consultation meeting</p> <p>Community assessment</p> <p>Sensitisation and community dialogue</p> <p>Infant and Young Child Feeding</p> <p>Developing messages and materials</p> <p>Community training/Capacity building</p> <p>Diagnosis and treatment of severely malnourished cases</p> <p>Research</p>
Partners	District Public Health Office (DPHO)
Geographical Coverage (District and VDC coverage)	Entire Saptari District: 114 VDCs + Municipality
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	<p>Total expenses for 2013 EUR 229,400</p> <p>Estimated budget for 2014 EUR 148,000</p>
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	Treatment of severely malnourished children with provision of therapeutic foods, capacity building of the government health staffs at various level, Highlighting importance of health practices including nutritional health, Health System strengthening through strengthening health workers on management of acute malnutrition

How can AIN HTG Contribute to effective health sector strategy implementation?	It can develop a joint commitment with MoHP to integrate nutrition into health.
Documents, Manuals, Research Reports and other papers produced by the organization	Annual Program Update 2013, SMART survey 2013 (Saptari) , SQUEAC Investigation 2013 (Saptari), IEC materials for diagnosis and prevention of acute malnutrition.

Organization Information	<p>ActionAid International Nepal (AAIN) is an international development organization founded in the United Kingdom in 1972 and registered as a global organization in Hague, the Netherlands in September 2003. The AA International Secretariat is based in Johannesburg, South Africa. ActionAid is a secular and non-political organization working with over nine million of the poorest people in the developing world in over 43 countries across Asia, Africa, Latin America and the Caribbean. It is committed to improving the quality of life of the poorest and the most marginalized people so that they can live a life of dignity.</p> <p>AAIN has been working in Nepal since 1982. Its mission here is to eradicate poverty by facilitating the process of empowerment the poorest and the most marginalized women, men, girls and boys. The work of ActionAid International Nepal (AAIN) over the years has undergone various changes informed by its engagement at the community and other levels. Its scope of work has thus grown in content coverage, complexity and commitment over the period.</p> <p>AAIN changed approach from direct service delivery to partnership mode with local NGOs in 1996. Similarly it adopted rights-based approach in 1998 with an aim to creating an environment in which poor and marginalized communities can exercise their rights, and address and overcome the causes and effects of poverty by actively engaging themselves in all aspects of development activities. AAIN is now working on HRBA and is working together with the poor and excluded communities on different four objectives with several priority themes and issues to help eradicate poverty and create conditions under which poverty might be mitigated in the future. AAIN right now is implementing its CSP IV i.e. Equitable Actions to End Poverty.</p>
Name of Organization	ActionAid International Nepal (AAIN)
Address/ Telephone	Apsara Marg Lazimpat, Kathmandu. Tel 977-1-4002177
Contact Person/ Designation	Dibya Karki and Mona Sherpa
Email	Dibya.karki@actionaid.org ; mona.sherpa@actionaid.org
Major Health Program Focus	Community sensitization, Health governance
Program Components	Reproductive health, Safe Motherhood, Immunization, HIV and AIDS

Implementation Approach	<p>Human Rights Based Approach (HRBA)</p> <ul style="list-style-type: none"> • Partnership for community empowerment, • Evidence based advocacy, • Critical and constructive engagement with local government, • Facilitation for accountable local health institutions
Activity Details	<ul style="list-style-type: none"> • Interaction and workshop • Awareness on policies and process • REFLECT Circle mobilization • Use of Community Score Card (CSC) • Facilitation to conduct Social audit, public hearing and proper use of citizen charter • Advocacy for allocation of budget from VDC and DDC • Action research and prepare Citizens' Health Report (CHR)
Partners	<p>Health related project partners (phase over in 2013)</p> <ul style="list-style-type: none"> • RWSC- Makawanpur, • Patan Academy of Health Science-Ktm, • INDERNI-Nawalparasi, • DJKYC-Siraha, • KMJS-Bardiya, Swasthya Samiti-Sindhupalchok <p>AAIN's Local Right Program (LRP) partners are also implementing some health governance related initiations</p> <p>Bajura: HRC, PEACEWIN, Doti: EDC, Bardiya: KMJS, Banke: Nepal Muslim Samaj Bikash Chetna kendra, BEE Group, Dang: SEED, BCD, Kapilvastu: Sahaj Nepal, SSDC, Nawalparasi: Indreni, MMBKS, Kaski: Siddhartha Club, CWES, Dolakha: HURADEC, ECARDS, Rasuwa: MSN, NAF, Kathmandu: Homenet, NMES, Parsa: AYC, DYC, Bara: RDC, JJA, Dhanush: SODEP, DSS, Siraha: DJKYC, Udaypur: Chelibeti Club, NESPEC, Terhathum: Deurali Society, DAS, Sankhuwasapha: TST Nepal</p>
Geographical Coverage (District and VDC coverage)	<p>Makawanpur (2 VDCs), Rasuwa (11 VDCs), Dolakha (10 VDCs), Kapilvastu (10 VDCs), Parsa (8 VDCs), Siraha (3 VDCs & 1 Muni.), Dang (10 VDCs), Dhanusha (10 VDCs), Kaski (5 VDCs & 1 Muni), Nawalparasi (19 VDCs), Bara (12 VDCs), Morang (10 VDCs), Dang (10 VDCs), Udaypur (9 VDCs & 1 Muni), Bajura (10 VDCs), Dang (10 VDCs), Banke (9 VDCs & 1 Muni), Terhathum (10 VDCs), Bardiya (6 VDCs), Sankhuwasabha (5 VDCs), Doti (5 VDCs & 1 Muni), Kathmandu valley</p>
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	<ul style="list-style-type: none"> • Expenditure (2013) : Around 5,000,000/- • Estimated Budget (2014) : Around 4,000,000/-

<p>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</p>	<p>Effective implementation of government health services in local level and accountable local health facilities, Quality of health services and role of HFMC</p>
<p>How can AIN HTG Contribute to effective health sector strategy implementation?</p>	<ul style="list-style-type: none"> • Community sensitization on health policies and provisions through partner organization who are working in health & governance sector • Sensitization through social Media (www.govaction.org, Governance Initiative Network in Facebook page : https://www.facebook.com/#!/groups/221992161254111/) • Organize conference, workshop and training in community and national level to institutionalize good practices. • Resource Material development for community sensitization and accountable local health facilities. • Development of Citizen Health report (CHR) • Good coordination, communication and working relation among AIN member
<p>Documents, Manuals, Research Reports and other papers produced by the organization</p>	<p>RELECT Resource Book for community facilitators, Resource book to use CSC(participatory accountability tool), Documentary on government health services, Citizens' Health Report</p>

Organization Information	
Name of Organization	ADRA Nepal
Address/ Telephone	PO Box: Ph: +977 – (1) – 5555913/914 Fax: 977 – (1) – 5554251
Contact Person/ Designation	Simon Lewis, Country Director
Email	Simon.lewis@adranepal.org
Major Health Program Focus	Reproductive Health
Program Components	<ul style="list-style-type: none"> • Construction of birthing centers with installation of Solar power and equipments and instruments support. • Strengthening capacity of the health service providers • Community mobilization
Implementation Approach	Implementation through partnership and coordination and collaboration with GON health programs
Activity Details	<ul style="list-style-type: none"> • Construction of 17 Birthing centers in Dailekh, Kailot and Jajarkot • Installation of solar power in Birthing centers and in District Hospital • Equipments support in Birthing centers. • Strengthening capacity of health institution • Capacity enhancement of Health Facilities Management Committees through leadership and management training, follow up workshop and coaching visits (complete cycle of ROLDP approach) • Implant training service providers • SBA training service providers. • Orientation Trainings to all levels of health staff on the use of Birth Preparedness Packages (BPPs) • Strengthening existing Mother's Groups (BPP orientation) • Scale up of Adolescent Sexual and reproductive health • Mass Campaigns • Female Community Health Volunteer Mobilization and Support • Publication and distribution of IEC & BCC Materials • Scaling up of adolescent sexual and reproductive health • Dissemination of Clinical Protocol on Pelvic Organ Prolapse and findings from quality of life study. • Review and printing of Medical Eligibility Criteria (MEC) and translation of Decision Making Tool (DMT) and dissemination meetings.

Partners	Implementation Partner: Safe Motherhood Federation, Nepal Collaborative and supportive Partners: Family Health Division, Regional Health Directorates and District Health Offices,
Geographical Coverage (District and VDC coverage)	Dailekh, Kalikot and Jajarkot.
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	419,240 USD 684,359 USD
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	<ul style="list-style-type: none"> • Prevention of maternal and neonatal morbidity • Health education on adolescents sexual and reproductive health issues • Prevention and management of Pelvic Organ Prolapse
How can AIN HTG Contribute to effective health sector strategy implementation?	<ul style="list-style-type: none"> • Lobbying with donors to seek health related funds • Coordinating with partner/governments and donors
Documents, Manuals, Research Reports and other papers produced by the organization	<ul style="list-style-type: none"> • Clinical Protocol on Pelvic Organ Prolapse • A report on quality of life study findings • Final reports on RH mobile health camp projects.

Organization Information	AMDA-MINDS aims to provide support for vulnerable and marginalized communities to attain their ideal environment by their own efforts which ensure better health and living standards. With the spirit of 'Sogo-Fujo' (mutual assistance), 'coexistence of diversity' and 'Partnership with local initiatives', AMDA-MINDS is working in Nepal, Myanmar, Honduras, Indonesia, Zambia and Sierra Leone.
Name of Organization	Association of Medical Doctors of Asia-Multisectoral Integrated Development Services (AMDA-MINDS)
Address/ Telephone	G.P.O. Box No. 12014, Maharajgunj, Kathmandu-3, Nepal Telephone: +977-1-4412045
Contact Person/ Designation	Ms. Chiho Matsumoto (Country Director) Mr. Raghunath Adhikari (Program Coordinator)
Email	amdamins.nepaloffice@gmail.com
Major Health Program Focus	Improvement of Maternal and Child Health using curative and preventive measures
Program Components	<ul style="list-style-type: none"> • Hospital Enhancement • Community Support Activity
Implementation Approach	Having close collaboration and coordination with concerned agencies, AMDA-MINDS works in a participatory way through mobilizing CBOs like mother groups.
Activity Details	<p>Hospital Enhancement:</p> <ul style="list-style-type: none"> • Financial and technical support to Siddhartha Children and Women Hospital (SCWH) for the construction of maternity building and the installation of necessary equipment and infrastructures. • Support to enhance the capacity of medical and paramedical personnel for the effective service delivery. <p>Community Support Activity:</p> <ul style="list-style-type: none"> • Provide technical support to women in communities to carry out health awareness programs (ANC, Safe delivery, PNC, Nutrition, Family planning, HIV/AIDS, Child health and Environmental sanitation), saving in community development fund and growth monitoring of under five children and pregnant women. • Provide technical support to conduct Literacy classes in the community. • Capacity enhancement of Health Facility Operation and Management Committee (HFOMC) to ensure basic quality of health services.
Partners	<ul style="list-style-type: none"> • AMDA-Nepal

Geographical Coverage (District and VDC coverage)	<p>Hospital Enhancement:</p> <ul style="list-style-type: none"> • SCWH is located in Butwal municipality rendering services to neighboring districts too. <p>Community Support Activity:</p> <ul style="list-style-type: none"> • Rupandehi District (4 VDCs)
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	<ul style="list-style-type: none"> • Approx.129,000,000NPR in JFY 2013
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	<ul style="list-style-type: none"> • Holistic approach to improve maternal and child health including education and awareness to family members. • Strengthen the capacity of health service provider
How can AINHTG Contribute to effective health sector strategy implementation?	<ul style="list-style-type: none"> • Coordinate with its members and government agencies for smooth program operation.
Documents, Manuals, Research Reports and other papers produced by the organization	<ul style="list-style-type: none"> • Annual Report, 2012

Organization Information	Amici Dei Bambini is an Italian NGO working for the protection of children and promoting the right of children. Mission of Ai.Bi. is to create a safe environment for children and help them enjoy their childhood. Ai.Bi works with children and families with integrated approach.
Name of Organization	Amici Dei Bambini (Ai.Bi.)
Address/ Telephone	Ai.Bi Associazione Amici Dei Bambini-Nepal Kamaladi-Shanta Marg, Kathmandu Building 80/52, Apartment Number 4 G.P.O. Box: 8974 C.P. C. No.: 522 Phone number: 01-4246787
Contact Person/ Designation	Ms. Tulasa Kharel, Deputy Country Coordinator
Email	Kathmandu@aibi.it;Tulsa_amicideibambini@hotmail.com
Major Health Program Focus	Promote an access of the health services to poor and vulnerable social group
Program Components	Child nutrition, health check up and prevention of child mortality causing from diarrhea and pneumonia , health and hygienic and sanitation of children and family
Implementation Approach	Coordination and collaboration with concerned government agencies (central, district and local) and NGOs/INGOS with integrated approach
Activity Details	To provide nutritional food to poor and needy children To provide regular health check up To organize health camps To create awareness on health and hygienic issues to children and families To refer beneficiary to get proper treatment by Social Worker To sensitize young mother to fight against infant mortality To develop training manual to deal with infant disease by mobilizing community
Partners	Society for Solidarity of Children-Nepal and Nepal Pollution Control and Management Centre
Geographical Coverage (District and VDC coverage)	KMC-Ward 35 Narephat, Garbage collector from Kathmandu Valley (urban poor)
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	25,000 EURO (each year)

<p>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</p>	<p>reduce the child mortality rate causing from Diarrhea and Pneumonia</p> <p>Promote the basic health hygienic and sanitation of children and family</p>
<p>How can AIN HTG Contribute to effective health sector strategy implementation?</p>	<p>Identifying the number of needy beneficiary to diverse of health sector and develop action plan and share responsibility of each working sector</p> <p>Active coordination between donor, NGOs and government bodies</p>
<p>Documents, Manuals, Research Reports and other papers produced by the organization</p>	<p>Training manual to create awareness on Infant mortality causing from diarrhea and pneumonia (in progress...)</p>

Organization Information	The Britain Nepal Medical Trust (BNMT) envisions a Nepal where all Nepalese are aware of their basic rights and are able to live healthy and productive lives in a safe environment without having to worry about food, income or security regardless of their gender, ethnicity, religion, disability or HIV status. Since its inception in 1967, BNMT has contributed significantly in formulating policies, developing effective implementation modalities in tuberculosis control, community drug scheme, safe motherhood, fostering health and livelihoods of disadvantaged people.
Name of Organization	The Britain Nepal Medical Trust (BNMT)
Address/ Telephone	GPO Box. 20564, Lazimpat, Kathmandu, Nepal Tel: +977 1 4436434/ 4428240 Fax: +977 1 4439108
Contact Person/ Designation	Ms. Shobhana Gurung Pradhan, Director
Email	director@bnmt.org.np
Major Health Program Focus	Tuberculosis (TB), Lung health, HIV/AIDS, Sexual and Reproductive Health (SRH), Neo-natal and Child health, and Mental health
Program Components	<ol style="list-style-type: none"> 1. Promoting quality health services and ensuring health rights; 2. Maximizing Livelihood Opportunities; 3. Responding to Effects of Climate Change, Environment and Disaster on Human Health; and 4. Peace Building, Social Harmonization and Solidarity.
Implementation Approach	Rights based approach (RBA), Partnership and Alliance, Transparency and Accountability, Gender sensitivity, Social inclusion, Knowledge management, Advocacy and policy influence, and Operational research.
Activity Details	<ul style="list-style-type: none"> • Capacity building of health service providers and health institutions for effective delivery of health services • Awareness generation and behavior change among communities to access and utilize health services • Health rights advocacy to communities to claim their health rights • Capacity building of partner NGOs and CBOs • Diagnosis of new positive TB cases in hard to reach and high case load areas • Counseling and Referral of TB cases to the nearest DOTS centre for treatment, and follow up • Advocacy, communication and social mobilization for TB awareness • Operational research on TB • Public private mix • TB-HIV collaboration (scale-up cross-referral system between DOTS and VCT centers)

	<ul style="list-style-type: none"> • Strengthening laboratory networks • KAP study • Situation analysis • Peer education and learning • Evidence based advocacy for implementation of national HRH Strategy • Establish Youth Information Centers (YICs) for improved access to/utilization of quality health services for adolescent sexual and reproductive health (ASRH) services • Rehabilitation support for conflict affected children (school drop-out children) • Livelihood support (income generation) to the families of conflict affected children, and people living with/ at high risk of HIV/AIDS • Psychosocial counseling to children, and people living with/ at high risk of HIV/AIDS • Produce and disseminate IEC/BCC materials on health program focus areas • Prepare VDC level local adaptation plan of action
Partners	<ul style="list-style-type: none"> • National Tuberculosis Centre (NTC) • Nepal Anti Tuberculosis Association (NATA) • World Health Organization (WHO) • European Commission (EC) • Inter-Church Organization for Development Co-operation (ICCO) • Nepal Climate Change Support Program (NCCSP) • Family Planning Association of Nepal (FPAN) • BP Memorial Health Foundation (BPMHF) • Women for Human Rights (WHR) • Women Welfare Society (WWS), Ilam • Child Society-Nepal, Morang • Shivashakti Rural Development Center (SRDC), Siraha • Oppressed and Tribal Caste Development Council (OTDECO), Arghakhanchi • Siddhartha Social Development Centre (SSDC), Kapilvastu • Village Development and Save the Environment Forum (VDSEF), Kalikot • Astha-Nepal, Achham • Bagmati Sewa Samaj-Sarlahi • Student Awareness Forum-Parsa • Madheshi Organization for Poor People in Nepal • Sagarmatha Development Center-Biratnagar • Sahara Nepal-Jhapa • Government Line Agencies (at national, regional, district and local level) • Community Based Organizations (CBOs)

Geographical Coverage (District and VDC coverage)	<p>39 districts across all Development Regions</p> <p>TB NSA project: Jhapa, Ilam, Panchthar, Taplejung, Morang, Sunsari, Dhankuta, Terathum, Sankhuwasabha, Bhojpur, Saptari, Siraha, Udaypur, Khotang, Okhaldhunga, Solukhumbu, Dang, Banke, Surkhet, Jajarkot, Dailekh, Achham and Baitadi</p> <p>TB REACH project: Chitwan, Makwanpur, Rautahat, Bara, Parsa, Sarlahi, Mahottari, Dhanusa, Siraha, Saptari, Sunsari, Udayapur, Morang, Jhapa and Ilam</p> <p>HRH project: Panchthar, Sindupalchowk, Nawalparasi, Kapilbastu, Dang, Kailali, Kalikot, Doti, Bajura and Achham</p> <p>RCP project: Ilam, Morang, Siraha, Arghakhachi, Kapilbastu, Kalikot and Achham</p> <p>RBA project: Banke and Surkhet</p> <p>LAPA project: Kailali, Achham and Bajura</p>
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	<p>Financial report not published yet</p>
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	<p>Integration and mainstreaming of HRH issues in the national health policies/plans/programs; Essential health care for disadvantaged groups; Strengthen the capacity of health service providers; and, Other issues that have positive impact on the health and livelihood of marginalized groups.</p>
How can AIN HWG Contribute to effective health sector strategy implementation?	<p>Facilitating coordination with government, donors and member organizations; organizing regular sharing meetings among member organizations; seeking funding, sharing learning and developing allies for advocating health policies.</p>

<p>Documents, Manuals, Research Reports and other papers produced by the organization</p>	<ul style="list-style-type: none"> • Policy and Strategy: Advocacy, Communication and Social Mobilization (ACSM) for TB Control in Nepal • An Orientation for Treatment Literacy and Treatment Adherence: Training Manual for Health Care Providers • Operational Research on TB • Success Stories: TB REACH Nepal • BNMT and TB Control in Nepal (Flyer) • Case story of MDR TB published in “We can Heal - Prevention, Diagnosis, Treatment, Care, and Support: Addressing Drug-Resistant Tuberculosis in Children” by Treatment Action Group (TAG) • A Hand Book on Mental Health and Psychosocial Support (prepared for Primary Health Workers in Nepal) • Final Evaluation Report: Rehabilitating Children, Supporting Families and Communities Affected by Armed Conflict (RCP) in Nepal • Lessons Learned and Success Stories: A Journey with a EU Funded Project of BNMT (RCP) • Human Resources for Health in Nepal: Analysis of Policies and Practices (Factsheet) • Proceedings from National Workshop on Human Resources for Health: Current Situation, Prospects and Challenges • Analysis of Policies and Practices of Human Resources for Health in Nepal (in Nepali) • Analysis of Human Resources in Public and Private Health Sector in Nepal (in Nepali) • Local Adaptation Plan of Action for 15 VDCs in Achham, Bajura and Kailali • “Health Improvement for Disadvantaged People in Nepal: An Evaluation” published in BMC Journal of International Health and Human rights • BNMT Strategic Plan 2009 - 2013 • Annual Report 2012/13 • BNMT at a Glance: Capability Statement
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Organization Information	
Name of Organization	CARE International Nepal
Address/ Telephone	Dhobighat (Opp. DAV School) P.O. Box 1661, Kathmandu, NEPAL Tel: 977-1-5522800 Fax: 977-1- 5521202 e-mail: carenepal@np.care.org Web: www.carenepal.org
Contact Person/ Designation	Nirmala Sharma, Health Program Coordinator
Email	Nirmala@np.care.org
Major Health Program Focus	<ul style="list-style-type: none"> • Maternal health: Capacity Building, increasing access • Neonatal /child health: capacity building, Family Planning • HIV and AIDS: prevention, support and care • Local Health governance • Strengthening health service delivery system • BCC, community mobilization and empowerment
Program Components	<ul style="list-style-type: none"> • CB-NCP (Newborn care package) : Technical training at all levels, equipment, and infrastructure support to Hospitals and Health facilities • Safe Motherhood through Birth Preparedness Package, Skilled Birth Attendant Training, Birthing center strengthening • Misoprostol distribution • Micro planning, Orientation/sensitization on FP basics and method specific • Peer education and community mobilization • Community Home Based Care Service, Community support group for care and support of PLHIV • strengthening service delivery mechanism (DHO, DACC) • Community outreach program (e.g Mobile camps for testing of STI/HIV and treatment)
Implementation Approach	<ul style="list-style-type: none"> • The program is implemented with close coordination and collaboration with Family Health Division, Child Health Division and National Centre for AIDS and STD Control for all thematic areas. At the district level, we collaborate with District Public /Health Office (D/PHO) and at the community level we collaborate with local health facilities, HFOMC, and the VDCs. All the technical protocol is implemented through DHOs, and HFs as per the government's protocols. • The community actions (BCC, Peer education, Mother's groups strengthening) done through Local NGO partners in the districts.

	<p>Major implementation approaches at the community level are as follows;</p> <ul style="list-style-type: none"> • Peer Education with Five Friend’s approach for reaching out to the migrants and their spouses with prevention messages and linking with services on HIV • Self Applied Technique for Quality Health (SATH) approach to disseminate health messages, behavior change, promoting health seeking behavior among women of reproductive age and mothers in MNH • Community Health Score Board (CHSB) approach with health service providers and beneficiaries to improve access, quality, accountability and overall health governance • Partnership Defined Quality (PDQ) for the interface between service providers and beneficiaries to improve access and quality of service related to HIV and AIDS • Collaboration with CARE other projects, and other stakeholders for synergy building and complementarity
<p>Activity Details</p>	<p>Activities are grouped under three broad headings:</p> <ol style="list-style-type: none"> i. new Born care related ii. Maternal health related iii. HIV and AIDS related. <p>Cross cutting interventions are social mobilization, community empowerment and social inclusion, local health governance, and capacity building.</p> <p><u>Examples of specific activities are listed below:</u></p> <ul style="list-style-type: none"> • Community mobilization for awareness on Birth Preparedness Package for four times ANC, institutional delivery and post natal care • Newborn care: implementation of Community Based- Newborn Care Package (CB-NCP) • Micro planning at district level, HF/VDC level and ward level to strengthen the family planning program • training support and Orientations to health providers including FCHVs , HFOMCs , VDC secretaries on MNH technical protocols • Birthing Centre support with equipments & supplies, and construction and maintenance support (in where absolutely necessary) for increasing access, effectiveness and quality of service delivery • Periodic review and planning meetings with government and other stakeholders at national, regional and district level • SATH application in Health Mothers groups • Community health Score Board (CHSB) for Interface between health service providers and beneficiaries

	<ul style="list-style-type: none"> • Mass awareness through radio program on MNH, FP and HIV/AIDS, and BCC message dissemination through FCHVs, MGs, and HFOMCs. • Peer educator mobilization for outreaching the migrant and spouses of migrants for HIV prevention • Supporting Drop in centers and information centers/desks for pre-departure information to outgoing migrants and prevention messages for returnee migrants • support to PLHIVs for accessing ART drugs and CD4 count and treatment, Community Home Based Care (CHBC) service to PLHIVs and livelihood support to the family • Supporting the MNH through interventions such as Misoprostol, Chlorohexidine, • Outreach services through mobile camps esp. for HIV testing and treatment of STIs and referral for ART and CD4
<p>Partners</p>	<p>For the technical intervention, implementation is done in close collaboration with District health offices and its below structure. Coordination is maintained with the Family Health Division and Child Health division, Regional Health Directorate.</p> <p>For community mobilization and awareness we partner with the local NGOs; SOURCE Nepal/Doti NNDSWO/ Dadeldhura FAYA Nepal/Kailali PEACEWIN/ Bajura Saipal Development Society/ Bajhang GARDEF /Accham NEEDS/ Kanchanpur NAMUNA/ Rupandehi SAHAJ/ Nawalparasi</p> <p>For Operation research, and documentation, partnership is done with HERD Nepal, based in Kathmandu</p>
<p>Geographical Coverage (District and VDC coverage)</p>	<p>We are working in <u>Nine districts</u>;</p> <p>Bajura, Bajhang, Accham, Doti, Dadeldhura, Kailali, Kanchanpur, Nawalparasi, Rupandehi.</p> <p>For MNH programs in Doti, Dadldhura, Kailali and Nawalparasi we cover all the VDCs and in Rupandehi, we cover only 14 VDCs</p> <p>For HIV program implementation we have both district level activities and VDC level activities, we have 30 VDCs in Bajhang and Bajura 20 VDCs in Accham and Kanchanpur</p>

<p>Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014</p>	<p>Budget for the FY 13 (USD): 1,328,674</p> <p>Expenses for the FY 13 (USD): 1,226,151</p>
<p>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</p>	<p>Advocacy issues include: Promotion of local ownership, resource mobilization, and sustained results, scaling up of listing of and best practices, Adequate budget allocation at the central level, fulfillment of vacant positions in rural hospitals and health facilities, adequate training and/or trained human resource deployment in the health facilities, supply of essential equipments, infrastructure, and essential drugs as per the population’s need and size in the given geography and situation.</p> <p>Advocacy for the provision of transportation costs of PLHIV for ART, CD4 count and treatment services, livelihood of the PLHIV</p>
<p>How can AIN HTG Contribute to effective health sector strategy implementation?</p>	<ul style="list-style-type: none"> • Dissemination of findings from pilot studies, operation researches, field experiences of implementing MNH, HIV services, • Coordinating different organisations for exchange of learning, • Helping to identify critical issues and raise them with relevant forums/bodies, • Helping to identify synergy areas for collective actions • Scaling up and replicating the proven effective approaches and models of interventions for better program outcomes and sustained impact in the communities
<p>Documents, Manuals, Research Reports and other papers produced by the organization</p>	<ul style="list-style-type: none"> • Baseline, midterm and end line evaluation reports of the projects, • CARE Nepal annual reports, • CARE Nepal Health Program Strategic Plan, • Training manuals in series HIV/AIDS, • A Review of Laws and Policy on Migration and HIV & AIDS, • Livelihood Improvement Plan (LIP) Tool, • Participatory Governance Assessment (PGA) Tool, Participatory Wellbeing Ranking (PWBR) Tool, • Public Hearing and Public Auditing (PHPA) Tool, • Promoting Collective Action towards Total Sanitation,

	<ul style="list-style-type: none"> • Way To Hope (twenty real life stories of ASHA Project run by CARE Nepal in nine districts of mid and far west Nepal at the support of DFID), • Psychosocial issues of women affected by conflict in Churia region of Nepal, • Initiatives (Pictorial document on capturing the Doti Poverty Reduction Program), • Video documentary (RH/Uterine Prolapse) • Operational research on various topics (MNH) • Vulnerability study report (HIV and AIDS) • Series of Training Manuals, for prevention, support and care for use of service providers, and community • Geeti cassette on immunization (Polio, MNH) • Video documentary on adolescent RH • Photo book on RH, water and sanitation • Case story publication • Video documentaries on; <ul style="list-style-type: none"> Migrant network (a search for those who never returned), migrants spouse towards safety and dignity , hoteliar groups (the agent of change), peer education (building impacts at the community), Community Support Group (people’s initiatives for PLHIV), Helping hands are better than praying lips (a positive life of Kala) • A PDQ Manual of CARE Nepal • A learning series of EMPHASIS Project • Periodic newsletters of various projects
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Organization Information	
Name of Organization	CBM Nepal Country Office
Address/ Telephone	House#547, Shree Marg, Lazimpat-2, Kathmandu - Nepal Phone: +977 1 4000055 • www.cbm.org
Contact Person/ Designation	Dr. Sara Varughese, Regional Director (Shaurabh Sharma, Programme Officer in Nepal)
Email	Shaurabh.sharma@cbmsaro.org
Major Health Program Focus	INCLUSIVE DEVELOPMENT FOR PEOPLE WITH DISABILITIES IN NEPAL
Program Components	Eye Health, Ear Health, Physical Disability, Mental health, Inclusive Education and Community Based Rehabilitation
Implementation Approach	Community based and through Partner Organizations
Activity Details	<ul style="list-style-type: none"> • Establishment of ear care services for local populations, Community outreach camps, Capacity building of paramedical/ professionals, Monitoring, evaluation and research; • Establishment of ear care services for local populations, Community outreach camps, Capacity building of ear health professionals; • Health and rehabilitation mobile camps, referral services, CTEV treatment through ponseti technique, Medical services and support to the children with disabilities, Capacity building of rehab professionals, Vocational trainings to the CWDs • Psychosocial counselling, treatment and rehab to persons with psychosocial disability • Education materials for Visually Impaired Persons, Mainstreaming CWDs in inclusive education, Education support to girls with disability • Community based rehabilitation for visual impairment (blind/low vision), hearing impairment (deaf/hard of hearing), physically impairment, Intellectually impairment, psychosocial impairment, Cerebral palsy, Deaf-blind, Multiple disability • Disaster preparedness for persons with disability
Partners	Nepal Netra Jyoti Sangh (Biratnagar and Sagarmatha Chaudhary Eye Hospitals), Nepal Association for the welfare of blind, Impact Nepal, Friends of Disabled (HRDC), INF Nepal, Nepal Disabled Women's Association, KOSHISH

Geographical Coverage (District and VDC coverage)	Saptari, Morang, Siraha, Shankhuwasabha, Udaypur, Khotang, Sunsari, Bhojpur, Okhaldhunga, Terhathum, Sarlahi, Dhanusha; Kathmandu, Lalitpur, Kailali; Siraha, Saptari, Udaypur, Mahottari; Makawanpur, Chitwan, Dhading; Tanahun, Syangja, Lamjung, Parbat, Kapilvastu, Surkhet, Jumla and Mugu; Banke, Kanchanpur, Morang; Bhaktapur, Dhading
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	Total Programme Budget of NPR 71,775,567 for 2013 and NPR 75,688,630 for 2014
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	<ul style="list-style-type: none"> • Advocacy initiatives through AIN/Disability working group and National Federation of Disabled Nepal (NFDN) • National Eye Health Policy and Strategic Plan of Eye Care Program of Nepal to achieve Vision 2020 • Sound Hearing 2030
How can AIN HTG Contribute to effective health sector strategy implementation?	AIN Health Task Group need to work closely with Apex body for Eye health and Sound Hearing 2030 committee for Eye and Ear Health as well as need to coordinate with AIN DWG for practical collaboration
Documents, Manuals, Research Reports and other papers produced by the organization	Visit http://www.cbm.org/Nepal-252506.php for Documents, Manuals, Research Reports and other papers

Organization Information	
Name of Organization	Child Protection Centers and Services International
Address/ Telephone	Dillibazar – Kathmandu – Phone 00977-14414394.
Contact Person/ Designation	Jean-Christophe Ryckmans – Country Director. Inge Bracke – Program Coordinator Arjun Mohan Bhattarai – Vice Country Director
Email	CPCS_nepal@yahoo.com – CPCS_int@yahoo.com – inge-bracke@yahoo.com
Major Health Program Focus	General Health Care and CSA awareness for street children and children at risk.
Program Components	General health check up. Hospital referral. Prevention classes and awareness about HIV, SOA, CSA. Ambulance service in Kathmandu.
Implementation Approach	Street field programs. Rehabilitation and Shelter Centers. Emergency Clinic and Emergency Line.
Activity Details	
Partners	CPCS NGO.
Geographical Coverage (District and VDC coverage)	Kailali (Dhangadi) – Makawanpur (Hetauda) – Ramechhap – Sarlahi – Rupandahi (Butwal) – Sindhupalchok (Chautara) – Jhapa (Birtamod) – Chitwan (Narayangadh) – Dolakha (Charikot) – Sirkhet – Sindhuli – Kavre (Banepa) – Siraha (Lahan) – Gorkha – Sunsari (Itahari) – Udayapur (Katari) – Kathmandu – Bhaktapur.
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	Nrs. 6 million approx.
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	Health awareness for children and parents in 21 districts. Health awareness classes for street children.
How can AIN HTG Contribute to effective health sector strategy implementation?	Networking with other organizations involved with health care services in different districts. Participating in health programs and activities.
Documents, Manuals, Research Reports and other papers produced by the organization	Research “The Street Children of Kathmandu”. “Abuse of children in Kathmandu”, “Children Homes in Kathmandu”, Posters HIV, Glue sniffing, anti-begging campaign, CSA. Calendar 2014 about Child Protection and CSA.

Organization Information	
Name of Organization	FHI 360 Nepal
Address/ Telephone	GPO 8803, Gopal Bhawan, Anamika Galli, Kathmandu – 4 +977-1-4437173
Contact Person/ Designation	Satish Raj Pandey, Country Director, FHI 360 Nepal Hare Ram Bhattarai, Chief of Party, Ghar Ghar Maa Swasthyaa
Email	spandey@fhi360.org hbhattarai@fhi360.org
Major Health Program Focus	
Program Components	<p>USAID-funded Saath-Saath Project</p> <ul style="list-style-type: none"> • HIV prevention and family planning promotion among key populations (female sex workers (FSWs), clients of FSWs, male labor migrants and spouse of male labor migrants) and people living with HIV. • Family Planning counseling, services and referral to key populations and people living with HIV. • HIV testing and counseling for key populations • Diagnosis and treatment services of Sexually Transmitted Infections (STIs) for key populations • Community and home based care (CHBC) services including positive prevention for people living with HIV and their families • Early infant diagnosis services • Capacity Building • Research and Surveillance • Healthcare Waste Management • Technical assistance to NCASC and FHD in integrating HIV and FP for key population, strengthening second generation surveillance system in the country, strengthening the capacity of DACCs in data analysis and use <p>USAID-funded Ghar Ghar Maa Swasthyaa project</p> <ul style="list-style-type: none"> • Technical assistance and mentoring in institutional strengthening of Nepal CRS Company to enable it to emerge as a fully sustainable social marketing organization • Conduct research and provide information to CRS to help it make informed decisions • Design and implement generic behavior change communication (BCC) programs in areas of health <p>World Bank-funded Monitoring of NGO Contracts to Provide HIV Services in Nepal</p> <ul style="list-style-type: none"> • Monitoring and Evaluation • Program Management • Recording and reporting • Capacity Building <p>KFW-funded Project on Social Franchising and Study of Emergency Contraception Project</p> <ul style="list-style-type: none"> • Technical assistance on improving the Sangini Franchising Network of CRS Company • Conduct research on the use of Emergency Contraception

<p>Implementation Approach</p>	<ul style="list-style-type: none"> • Expanded Integrated Health Services (EIHS) for key population combined with effective prevention outreach • Moving for international to local perspective • Preparing for transition to country owned platform • Evidence-based decision-making to guide program development and revision • Promotion of appropriate positive behavior change and maintenance using interactive IEC/BCC materials • Community and peer based outreach • Provision of or linkages with services • Maximizing population coverage and impact • Capacity-building for long-term sustainability • Localizing the response • Coordination with all partners to maximize scale and national impact • Support meaningful involvement of PLHIV (MIPA) and key populations. • Providing technical assistance
<p>Activity Details</p>	<ul style="list-style-type: none"> • Strategic behavioral communication through community and peer-based outreach education for family planning promotion, HIV and STIs prevention, condom promotion and distribution, • Operation of Drop-in center (DIC) and Community Interaction Points (CIP) • Provision of quality expanded health services including family planning services and referral, diagnosis and treatment of STIs, HIV counseling and testing, essential package of care for PLHIV and early infant diagnosis (EID) • Expanded Community and Home-Based Care (CHBC) and Positive prevention (Positive Health, Dignity and Prevention) programs among PLHIV • Research and surveillance-related activities • National support for systems development in laboratory, HIV monitoring and evaluation (M&E), HIV surveillance system, HIV human resource development and FP/HIV integration • Capacity strengthening activities to government agencies and local NGO partners • Supportive supervision and monitoring • Coordination and collaboration among stakeholders at national and district level. • Monitoring of ongoing targeted intervention programs led by NCASC • Assessment of institution development requirements of CRS • Engagement of national/international consultants to work with CRS to close the identified gaps • Capacity building in identified areas through workshops, training, study visits and onsite coaching

Partners	<p>Saath-Saath Project</p> <ul style="list-style-type: none"> • Core partner: Association of Medical Doctors of Asia (AMDA) Nepal • Program activities implemented in the districts through more than 40 local NGO partners <p>Ghar Ghar Maa Swasthyaa project</p> <ul style="list-style-type: none"> • Nepal CRS Company <p>Monitoring of NGO Contracts to Provide HIV Services in Nepal</p> <ul style="list-style-type: none"> • NCASC and Consultant NGOs
Geographical Coverage (District and VDC coverage)	<ul style="list-style-type: none"> • USAID-funded Saath-Saath Project: 33 districts • USAID-funded Ghar Ghar Maa Swasthyaa Project: 49 districts (33 hills and 16 mountains) • Monitoring of NGO Contracts to provide HIV Services in Nepal: 38 districts and 59 project sites
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	<ul style="list-style-type: none"> • Saath-Saath Project (October 2012-September 2013): US\$ 4,939,519 • Ghar Ghar Maa Swasthyaa Project (August 2013 – July 2014): US\$ 2,293,025 • KFW-funded Project on Health and Family Planning Social Marketing and Social Franchising Project (August 2013 – July 2014): US\$177,652 • Monitoring of NGO Contracts to Provide HIV Services in Nepal (October 2012-September 2013): US\$ 135,979
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	<ul style="list-style-type: none"> • Integration of HIV in existing FP services of the government of Nepal. • District ownership and initiation for care and support to PLHIV. • Working with GoN and other EDPs to promote the use of Zinc with ORS in treating simple diarrheal cases of children less than 5 years of age and to promote the use of Chlorhexidine in navel care of newborns.
How can AIN HTG Contribute to effective health sector strategy implementation?	<ul style="list-style-type: none"> • Strategic mapping of resources to avoid program overlaps of AIN members • By creating a mechanism of sharing information among its members on areas of mutual interests.

<p>Documents, Manuals, Research Reports and other papers produced by the organization</p>	<p>Saath-Saath Project</p> <ul style="list-style-type: none"> • Project Annual and Semi-annual reports for year One and Two • Baseline Family Planning (FP) Survey Including Rapid Assessment of HIV, STIs and FP Situation Among Migrant Couples • Multiple HIV and family planning related behavior change communication materials (list can be provided upon request) • SBC strategy for migrants and their spouses • Strategic behavioral communication and demand generation strategy for integrated family planning and HIV services for key population in Nepal. • Guideline for implementing integrated family planning promotion and HIV prevention program among most at risk population. <p>Ghar Ghar Maa Swasthya project</p> <ul style="list-style-type: none"> • Reports on KAP survey on FP/MCH in 49 districts of Nepal in 2011 • Study on quality of care of Sangini Network using Mystery Client approach • Report on the assessment of Health Care Waste Management (HCWM) in Sangini outlets in Mugu, Syangja and Sunsari districts • GIS based study on access and quality of access to condoms in areas where risky sexual activity takes place • Training materials on effective demand creation (EDC) and effective product marketing (EPM) <p>Monitoring of NGO Contracts to Provide HIV Services in Nepal</p> <ul style="list-style-type: none"> • Training Curricula for Reporting
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Organization Information	German Nepalese Help Association (GNHA) is a non – profitable social and charitable organization working as an international non – governmental organization (INGO) in Nepal.
Name of Organization	GERMAN NEPLESE HELP ASSOCIATION
Address/ Telephone	104 Jit Jung Marga Thapathali Height , Kathmandu , Nepal
Contact Person/ Designation	KAMAL RUPAKHETI = Country representative KEDAR TAMANG = Program Coordinator
Email	gnhanepal@wlink.com. np / dispensarydnh@gmail.com
Major Health Program Focus	Medical equipment supply to community and government hospitals, direct medical supplies to poor and needy patients.
Program Components	Dispensary program for poor patients, medical equipment supplies
Implementation Approach	Support upon request of government hospitals Scrutinizing poorest of the poor for medical supplies
Activity Details	<ul style="list-style-type: none"> • running free dispensary at Bir Hospital • Charity to poor patient through Spinal Injury Rehabilitation Center • equipment supplies for Western Regional Hospital , Pokhara • charity to poor patients through Dispensary
Partners	Bir hospital Western Regional Hospital Spinal Injury Rehabilitation Center
Geographical Coverage (District and VDC coverage)	Kathmandu Kavre Kaski and all over Nepal(through service of GNHA , Dispensary at Bir Hospital)
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	€ 73,763.64
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	No advocacy , direct service delivery

How can AIN HTG Contribute to effective health sector strategy implementation?	Collaboratively working within the framework of government for service delivery as well as health awareness raising in the field level
Documents, Manuals, Research Reports and other papers produced by the organization	Annual report of GNHA Dispensary, Annual report of Spinal Injury Rehabilitation Center

Organization Information	
Name of Organization	Good Neighbors International
Address/ Telephone	Jhamsikhel-3, Lalitpur. 01-5-553607
Contact Person/ Designation	Ram Naresh Yadav – Senior Public Health Officer
Email	gnihso@gmail.com
Major Health Program Focus	<ol style="list-style-type: none"> 1. Basic Health Care 2. Medical Services 3. Disease Control 4. Reproductive Health and Family Planning 5. Health Education 6. STD Control including HIV/AIDS 7. Basic Health Infrastructure Support
Program Components	<ul style="list-style-type: none"> • Basic Nutrition Support • General Health Check up • First Aid Kit Support • Critical Treatment Support • De-worming Support • Capacity Building in Reproductive Health • Study and Advocacy on Menstrual Hygiene Management • Research/Study on Chhaupadi tradition • Advocacy on HIV/AIDS & STD • Basic Infrastructure Support
Implementation Approach	<ol style="list-style-type: none"> A. Participatory and learning B. Local Generated Material (LGM) C. Need based
Activity Details	<ul style="list-style-type: none"> • Training, meeting, workshop and seminar etc • Research • Supports • Interaction and coordination • Meaningful participation
Partners	<ol style="list-style-type: none"> 1. Ashal Chhimeki Nepal (ACN), Lalitpur 2. Sonah Bikash Samaj, Bardiya 3. Lele Community Development Centre (LCDC), Lalitpur
Geographical Coverage (District and VDC coverage)	<p>Districts Working VDCs</p> <ol style="list-style-type: none"> 1. Kathmandu 4: Sangla, Kavresthali, Jhormahankal and Phuntung 2. Lalitpur 7: Badikhel, Godawari, Chapagaun, Lele, Devichaur, Nalu & Chhampi 3. Kailali 5: Pathraiya, Tikapur, Durgauli, Baliya & Kotatulsipur 4. Bardiya 5: Daulatpur, Patabhar, Manau, Gola and Sanoshri

	<ol style="list-style-type: none"> 5. Mugu 13: Ruga, Rowa, Jima, Kalali, Dhainakot, Bihi, Khaumale, Rara, Mangri, Pulu, Kimari, Sukadhik & Seri 6. Humla 10: Darma, Mimi, Shreemasta, Melchham, Kharpu-nath, Thehe, Gothi, Rudikot, Simkot, and Bargaun 7. Doti 2: Ladagada and Pokhari 8. Myagdi 5: Gurja, Mudi, Lulang, Muna, and Marang 9. Parbat 7: Deurali, Bhuktangle, Kyang, Phalmkhani, Bhangara, Pang and Limithana 10. Bajura 5: Bichchhe, Rugni, Bandhu, Wai and Jukot 11. Darchula 5: Datu, Bagwati, Shankarpur, Malikarjun and Uku 12. Gorkha 6: Aarubarang, Thumi, Gumda, Laprak, Phinam & Lapu 13. Kaski 5: Mijuredanda, Saimarang, Lumle, Lwangghalel, and Vadaure Tamagee
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	<ol style="list-style-type: none"> A. Budget Expenditure of 2013: 13,310,998.00 NRs. B. Estimated Budget for 2014: 15,819,498.00 NRs.
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	<ul style="list-style-type: none"> • Develop and Implement health related guidelines • Community Based Health Insurance Program (CBHI) implement as pilot project in Kailali district. • Community and School based Menstrual Hygiene Management (MHM) Project implement as pilot project in Kailali and Bardiya districts. • Preliminary Study completed in Doti for reducing Chhaupadi tradition in Doti district. • Raising awareness to reduce social stigma and discrimination for HIV/AIDS vulnerable people in Doti district.
How can AIN HTG Contribute to effective health sector strategy implementation?	<ul style="list-style-type: none"> • Best practice exchanging among AIN members • Suggest to focus on government priorities • Taking lead role among all
Documents, Manuals, Research Reports and other papers produced by the organization	<ul style="list-style-type: none"> • Health Baseline Survey Report of Badikhel, Lalitpur • Health Baseline Survey Report of Kailali, Tikapur • Health Implementing Guideline • Baseline Survey Report of Menstrual Hygiene Management (MHM) Survey of Kailali and Bardiya • Preliminary Survey Report of Chhaupadi Tradition in Doti • Critical Case Treatment Guideline • Health Training Guideline • Health Boucher

Organization Information	<p>Handicap International is an independent and impartial international aid organisation working in situations of poverty and exclusion, conflict and disaster.</p> <p>“Working alongside persons with disabilities and other vulnerable groups, our action and testimony are focused on responding to their essential needs, improving their living conditions and promoting respect for their dignity and their fundamental rights”.</p> <p>“Handicap International in Nepal focuses on improving the living conditions and the participation of children, women and men living with disabilities”.</p>
Name of Organization	Handicap International Federation
Address/ Telephone	<p>Narayan Gopal Chowk, Sallaghari (behind Thailand Embassy) P.O. Box 10179, Kathmandu Tel: +977-1-4378482, 4374609, Fax: +977-1-4376983 Email: hinepal@hi-nepal.org Web: www.handicap-international.org</p>
Contact Person/ Designation	Ms. Sarah Blin / Country Director
Email	director@hi-nepal.org
Major Health Program Focus	
Program Components	<p>(i) Physical Rehabilitation:</p> <p>Obj: Strengthening sustainability of physical rehabilitation services with improved quality and accessibility at the five physical rehabilitation centers.</p> <p>(ii) Earthquake preparedness:</p> <p>Obj: Enhancing the health sector crisis preparedness in the event of a high intensity earthquake in Kathmandu Valley.</p>
Implementation Approach	<p>(i) <u>Physical Rehabilitation Project:</u></p> <ul style="list-style-type: none"> Improving quality of rehabilitation treatment services in HI supported five rehabilitation centers through: implementation of HI inhouse Rehabilitation Management System (RMS), training and capacity building of national rehabilitation professionals of the centers, and provision of regular technical support.. Increasing provision of reconstructive surgery services for persons with disabilities through: enhancing strategic collaborations of rehabilitation centers for referral services with regional, district and specialized hospitals; and developing a Rehabilitation Model of Care to ensure post-operative care and follow up services to clients in close coordination with the hospitals: Improving the accessibility to rehabilitation services through: mobilizing community disability workers (CDWs) and organizing outreach mobile rehabilitation camps in remote districts.

	<ul style="list-style-type: none"> • Strengthening sustainability of rehabilitation centers through enhancing their fund raising and resource mobilization strategy and enhancing their center management system and capacities. <p>(ii) <u>Earthquake Preparedness Project</u>: Through a consortium of HI, WHO, Save the Children and Oxfam.</p> <ul style="list-style-type: none"> • Enhancing the capacities of Ministry of Health and Population (MOHP), health facilities and catchment communities around the targeted health facilities to respond effectively to a major disaster (earthquake). • Enhancing the capacity of MoHP to provide effective leadership and guidance to health care providers to implement comprehensive mass casualty management. • Strengthening capacities of Health facilities and health personnel to respond to mass casualty incidents. • Strengthening the preparedness and response capacities of the community in the catchment area of the target health facilities to manage disasters risks.
Activity Details	<p>(i) <u>Major Activities of Physical Rehabilitation Project</u></p> <ul style="list-style-type: none"> • Provision of quality rehabilitation services (physiotherapy, prosthesis & orthotics, mobility aids and counseling services) at the rehabilitation centers. • Provision of referral services for corrective / reconstructive surgeries for people with deformities and in need of subsequent post-surgery rehabilitation care • Referral for other services including health, education, social, livelihood and empowerment. • Quality assurance and capacity building (management and technical) support to the 5 rehabilitation centers • Organization of mobile rehabilitation camps to extend the accessibility of rehabilitation services to people in remote districts • Support the strengthening of Physical Rehabilitation Sector in Nepal through developing collaboration among rehabilitation and health services providers in the districts and promoting policy dialogue with authorities at national level. <p>(ii) <u>Major activities of Earthquake Preparedness Project</u></p> <ul style="list-style-type: none"> • Support Ministry of Health and Population (MoHP) for establishing the Health Emergency Operation Centre (HEOC). • Support MOHP in strengthening the existing health sector disaster management policies and guidelines. • Under the guidance of Curative Services Division, MOHP, development of emergency trauma guidelines on medical, surgical, nursing and rehabilitation management of Head and Burn injuries expected in the event of a high intensity earthquake. • Under the guidance of National Health Training Centre, MOHP, development of training manuals based on the emergency trauma guidelines.

	<ul style="list-style-type: none"> • Under the guidance of National Health Education, Information and Communication Centre, MOHP, development of 6 sets of IEC materials for patients and their caregivers based on the emergency trauma guidelines. • Enhancing the capacities of targeted health facilities and health human resources to manage Mass Casualty Incidences (MCI) based on the emergency trauma guidelines) and expected during a mega earthquake. • Roster mapping of health human resources and health institutions surge capacities in Kathmandu valley, Pokhara, Chitwan, Kailali, Biratnagar and Dharan. • Development of early deployment strategy for health human resources in the event of mega disasters. • Development of IEC materials on 5 topics (Bowel and Bladder management, Deep Vein Thrombosis, Amputation management, Bed sore management and Wound management) based on the three emergency trauma protocols (Spinal cord injury, Amputation, Complex open fractures) and sensitize health professionals and patients to prevent secondary complications, disabling consequences and early rehabilitations. • Institutionalization of the roster management and early deployment plan / mechanism of health human resources during disaster and capacitate health sector on this mechanism. • Institutionalization of the emergency trauma guidelines. • Establish mechanism for ensuring the need and rights of people with disabilities and other vulnerable groups – establish disability and vulnerable focal points (DVFPs) • Enhancing the capacities of Female Community Health Volunteers on emergency first aid to manage disaster risks and reduce further complications.
Partners	<p>(i) Physical Rehabilitation Project</p> <ul style="list-style-type: none"> • Community Based Rehabilitation (CBR) Biratnagar, Morang • National Disabled Fund (NDF), Kathmandu • Prerana, Malangawa, Sarlahi • Nepalgunj Medical College (NGMC), Kohalpur, Banke • Nepal National Social Welfare Association (NNSWA), Kathmandu • National Association of Service Providers in Rehabilitation (NASPIR), Kathmandu <p>(ii) Earthquake Preparedness Project</p> <ul style="list-style-type: none"> • Nepal Red Cross Society (NRCS), Kathmandu <p><u>Selected activities with</u></p> <ul style="list-style-type: none"> • National Disabled Fund (NDF), Kathmandu • Nepalgunj Medical College (NGMC), Kohalpur, Banke • Nepal National Social Welfare Association (NNSWA), Kathmandu • Community Based Rehabilitation (CBR) Biratnagar, Morang

<p>Geographical Coverage (District and VDC coverage)</p>	<p>(i) Physical Rehabilitation Project</p> <ul style="list-style-type: none"> • Morang, Sunsari, Jhapa • Kathmandu, Lalitpur, Bhaktapur, Sarlahi, & Rautahat Banke, Bardiya • Kanchanpur, Kailali, Doti & Darchula <p>(ii) Earthquake Preparedness Project</p> <ul style="list-style-type: none"> • Kathmandu Valley • Pokhara • Bharatpur • Biratnagar. • Kailali
<p>Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014</p>	<p>(i) Physical Rehabilitation Project : Expenditure in 2013: NRs 36,382,961 Estimated budget for 2014: NRs 37,248,602</p> <p>(ii) Earthquake Preparedness Project : NRs Expenditure in 2013: NRs 13,406,663 Estimated budget for 2014: NRs 16,878,541</p>
<p>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</p>	<p>Physical Rehabilitation Project :</p> <ul style="list-style-type: none"> • Integration of rehabilitation care in health care system at primary health care facilities and district and regional hospitals • Development of national policy/programs for quality rehabilitation service provisions • Integration of rehabilitation service provisions into the NHSP phase III. <p>Earthquake preparedness project:</p> <ul style="list-style-type: none"> • Institutionalization of emergency trauma guidelines for the management of specific conditions (Spinal cord injuries, Amputation, Complex open fractures, Head injuries and Burn injuries) as part of the Mass casualty management systems. • Institutionalization of roster management and early deployment plan/ mechanism of health human resources in the event of high intensity earthquake disaster. • Establishment of Disability and Vulnerability focal point as part of the service delivery and protection mechanism for the vulnerable groups including the people with disabilities around the open spaces identified for the set-up of camps in the event of earthquake disaster. • Establishment of Health Emergency operation center and its operationalization under Ministry of Health and Population. • Integration of health sector disaster management and specific conditions management within the curricula of the health professional courses.

<p>How can AIN HTG Contribute to effective health sector strategy implementation?</p>	<ul style="list-style-type: none"> • Promoting/lobby for integration of rehabilitation services into the health care system during workshop and meetings with health related authority. • Integration of health sector disaster management and specific conditions management within the curricula of the health professional courses. • Establishment of Disability and Vulnerability focal point as part of the service delivery and protection mechanism for the vulnerable groups including the people with disabilities around the open spaces identified for the set-up of camps in the event of earthquake disaster.
<p>Documents, Manuals, Research Reports and other papers produced by the organization</p>	<ol style="list-style-type: none"> 1) Brochure on HI physical rehabilitation project 2) CP management brochure 3) Amputation Stump Care brochure 4) Emergency trauma guidelines on the medical, surgical, nursing and rehabilitation management of Spinal Cord injuries, Amputation, Complex open fractures. 5) IEC materials on management of Deep Vein thrombosis, Amputation care, bowel and bladder, Wound care, bed sores. 6) Early deployment mechanism of health human resources in the event of high intensity earthquake disaster. 7) Study on the role of traditional community institutions in disaster management. 8) Role of female community health volunteers in disaster management.

Organization Information	
Name of Organization	HealthRight International
Address/ Telephone	Oasis 49 Dhara, Patan Dhoka Lalitpur / 977-01- 5528843, 977-01-5520897
Contact Person/ Designation	Hari Bahadur Rana/Country Coordinator
Email	Hari.rana@healthright.org
Major Health Program Focus	Maternal and Neonatal Health
Program Components	Implementation Research on Maternal and Neonatal Near Miss Review process.
Implementation Approach	NGO Partnership with national NGO Public Health and Infectious Disease Research Center (PHIDReC), government partnership with Family Health Division, Child Health Division, and District Health Office Arghakhanchi
Activity Details	This is an Implementation research on “District-wide Implementation of Maternal and Neonatal Near Miss Reviews in Arghakhanchi, Nepal”. The key activities are: Baseline assessment/situation analysis: barriers/enablers. Model development Model implementation Process/outcome documentation and evaluation Generation of recommendations for scaling up Dissemination: Integration/Scale-up
Partners	NGO Partner: Public Health and Infectious Disease Research Center (PHIDReC) Government Partners: Family Health Division, Child Health Division, and District Health Office Arghakhanchi
Geographical Coverage (District and VDC coverage)	100% (14) Birthing Centers, and district hospital of Arghakhanchi
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	Budget (Expenditure) for Health Sector 2013: Rs. 296,42,960 (PMNHP/USAID) Estimated Budget for Health Sector 2014 : Rs. 51,28,244 (WHO/ IRP)
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	Implementing and proving the model, and advocating for integration and scale up Maternal and Neonatal Near Miss Review process in MOHP system.

<p>How can AIN HTG Contribute to effective health sector strategy implementation?</p>	<p>Supporting to strengthen evidence based effective modalities.</p> <p>Sharing best practices and lesson learnt that each AIN member organizations experienced.</p> <p>Collaborative efforts with government for effective implementation of proven methodologies</p>
<p>Documents, Manuals, Research Reports and other papers produced by the organization</p>	<p>Under PMNHP/USAID, HealthRight International has produced the following Documents:</p> <p>Pagers:</p> <ol style="list-style-type: none"> 1. Partnership for maternal and Neonatal Health (PMNH) Project 2. Use of MSC for prevention of PPH and use of CHX for prevention of umbilical cord infection, 3. Improving Maternal and Newborn Health Status through the Positive Deviance Approach, Experience from Shivapur VDC, Kapilvastu <p>Reports:</p> <ol style="list-style-type: none"> 1. Maternal and Newborn Care Quality Improvement process implementation in health facilities of Arghakhanchi 2. Strengthening HFOMC to improve MNH status in peripheral health facilities of Arghakhanchi 3. Exploring opportunities to extend MNC services by mobilizing Women's cooperatives and Savings and Credit groups in Arghakhanchi

Organization Information	
Name of Organization	Helen Keller International
Address/ Telephone	PO Box: 3752, Green Block, Ward # 10, Chakupat, Lalitpur 977-1-5260247, 5260459, 5260837
Contact Person/ Designation	Dale Davis : Country Director
Email	ddavis@hki.org
Major Health Program Focus	Nutrition promotion for pregnant and lactating women and children under 2 years of age
Program Components	<ul style="list-style-type: none"> • Capacity building for health service providers, Female Community Health Workers (FCHV), Social Mobilizers, mothers group on Essential Nutrition Health Actions (ENHA) • Homestead food production (HFP), water, sanitation and hygiene (WASH) for improving the nutritional status of pregnant and lactating women and children under two • Capacity building of social mobilizers to undertake integrated nutrition and health initiatives at VDC, Ward and community level • Climate change and livestock: research on how to build resilience to climate change through improving mixed farming systems • Nutrition training and quality management: research on the effect of nutrition education and cash incentives to mothers of young children • Assessment and Research on Child Feeding
Implementation Approach	<ul style="list-style-type: none"> • Partnership with all levels of GON offices of Health Agriculture, Livestock, NGOs & CBOs • Capacity building of stakeholders • Monitoring, supervision, mentoring for quality of training/service, counseling and group education.
Activity Details	<ul style="list-style-type: none"> • Program development, training human resources for promotion of nutrition for pregnant and lactating women and children under two years of age • Addressing food security in disadvantaged households and promotion of food security through VDC resources • Assessments and evaluation of program interventions • Assessment of the promotion of child feeding and practices
Partners	<ul style="list-style-type: none"> • International: Save the Children International, Poverty Alleviation Fund, University of Utah, Tufts University, Bill and Malinda Gates Foundation • National: Government of Nepal, Nepali NGOs
Geographical Coverage (District and VDC coverage)	<ul style="list-style-type: none"> • Darchula, Bajhang, Bajura Rupandehi Nawalparasi, Parbat, Baglung, Syangja, Myagdi, Mustang, Manang, Gorkha, Lamjung, Rasuwa, Sindhupalchowk Dolakha, Sankhuwasabha, Solukhumbu, Bhojpur, Taplejung

Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	<ul style="list-style-type: none"> • Nrs. 186,524,040. • • Nrs. 394,238,070.
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	<ul style="list-style-type: none"> • Integrated and multisector approaches to address Nepal's malnutrition issues with the active involvement of all relevant sectors at all levels • Increased availability of nutrient-dense vegetable and animal source food production • Behavior change communication for improving consumption of micronutrient rich foods among highly vulnerable groups especially during the critical 1,000-day period through the active participation of women and community volunteers • Advocacy for the promotion of quality nutrition education
How can AIN HTG Contribute to effective health sector strategy implementation?	<ul style="list-style-type: none"> • Strengthening coordination and collaboration among the developmental stakeholders by arranging roundtable discussions and sharing forums on the latest evidence and learning in health and nutrition
Documents, Manuals, Research Reports and other papers produced by the organization	<ul style="list-style-type: none"> • Essential Nutrition and Hygiene Actions (ENHA) Manual, 2012 • Homestead Food Production (HFP) Manual, 2012 • Health Sector Strategy for Addressing Maternal Undernutrition, 2013

Organization Information	
Name of Organization	ICCO COOPERATION, Nepal office
Address/ Telephone	Jhamsikhel, Lalitpur-2
Contact Person/ Designation	Mr. Bidyanath Bhurtel, Country Representative
Email	Bidyanath.bhurtel@icco-cooperation.org
Major Health Program Focus	HIV/AIDS
Program Components	Voluntary testing and counseling, rehabilitation of IDUs, community awareness, support to health institutions, livelihood support
Implementation Approach	<ul style="list-style-type: none"> • Awareness building through massive use of print and electronic media • Provision of services, including rehabilitation, treatments, home-based care, referrals, counseling, community support programs, livelihood support programs • Providing technical and material support to local government health institutions
Activity Details	<ul style="list-style-type: none"> • Training and Workshops for capacity building of service providers • Treatment of IDUs through rehabilitation • Development and dissemination of IEC materials • Awareness raising campaigns • Networking and advocacy • Counseling, Care and Support • Voluntarily Counseling & Testing (VCT) • Technical support to health institutions • Income generation activities for better livelihood
Partners	Naulo Ghumti Nepal Sakriya Sewa Samaj INF-Nepal British Nepal Medical Trust (BNMT)
Geographical Coverage (District and VDC coverage)	Kaski (3 VDCs- Bharatpokhari, Nirmalpokhari, Hemja and Pokhara SMC) Baglung (8 VDCs-Palakot, Bhimpokhari, Dhamja, Tangram, Bhakunde, Argal, Hila, Tarakhola) Arghakhanchhi-2 VDCs, Kapilbastu-7 VDCs, Rupandehi-2 VDCs, Palpa-4 VDCs, Syangja-2 VDCs

Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	FY 2012-2013 = NPR 11.42 M FY 2013-2014 = NPR 11.7 M FY 2014-2015 = NPR 11.7 M
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	Cross-border migration and risk of HIV/AIDS spread Health Management practices in local health institutions
How can AIN HTG Contribute to effective health sector strategy implementation?	Initiate programmatic collaboration between AIN members, especially for advocacy
Documents, Manuals, Research Reports and other papers produced by the organization	

Organization Information	
Name of Organization	Nepal Country Office, INF Worldwide
Address/ Telephone	PO Box: 1230, Kathmandu, Nepal. Tel: 977-1-5521183
Contact Person/ Designation	Ms Seeta Gurung, Country Director Dr Asha Lal Tamang, Programmes Director
Email	director@nco.inf.org, programmes.director@nepal.inf.org
Major Health Program Focus	<ul style="list-style-type: none"> • TB • Leprosy • HIV/AIDS • Spinal Cord Injury • Disability • Nutrition • Community Health • Health services support (health system strengthening and capacity building) • Special health camps for Gynecology, ENT, Dental and Plastic surgery
Program Components	<ul style="list-style-type: none"> • Awareness raising • Treatment • Care and rehabilitation of the clients with above health problems • Capacity building of Government health system
Implementation Approach	Implemented by local NGO – INF Nepal in close coordination with DDC, DPHO, District and Regional Hospitals
Activity Details	<ul style="list-style-type: none"> • Specialized Hospitals <ul style="list-style-type: none"> ○ Green Pastures Hospital and Rehabilitation Centre, Pokhara, Kaski ○ Nepalgunj TB/Leprosy Referral Centre, Banke ○ Surkhet Referral Centre for Leprosy and Disability, Surkhet ○ TB/Leprosy Referral Centre, Jumla ○ Nutrition Referral Centre, Jumla • Community health awareness raising and other technical support to target communities • Support in running of ANC/PNC/MCH, HPMC, SHPMC • HIV and AIDS prevention and care; counseling, VCT services, awareness raising • Organizing different kind of Medical and Surgical camps in remote areas of Western, Midwestern and Far western regions
Partners	<ul style="list-style-type: none"> • INF Nepal • Ministry of Health, Department of Health Services and relevant Divisions/Centres e.g. National Health Training Centre, National TB Centre, Leprosy Control Division and Family Health Division.

Geographical Coverage (District and VDC coverage)	<p>Based in</p> <ul style="list-style-type: none"> • Kaski • Baglung • Kapilvastu • Banke • Dang • Surkhet • Jumla • Mugu • Bajura • Rolpa • Kanchanpur <p>and supporting clients from Western, Mid-western and Far-western regions</p>
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	<p>Expenditure 2013</p> <ul style="list-style-type: none"> • NRs. 212,183,000 <p>Estimated Budget 2014</p> <ul style="list-style-type: none"> • NRs. 221,355,000
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	<ul style="list-style-type: none"> • Health Post and Sup-health Post Management Committees activated in our working VDCs. • Capacity building of local health system through workshop and training to the stakeholders. • Support to Hospital Management Committees by being member of the Hospital Board and regional and district health committees. • Advocacy and Lobbying on behalf of poor and marginalized to have better access to quality health services. • Interaction among community members and HP/SHP, HP/SHP committees and DPHO and DDC. • Advocacy for allocation of budgets and distribution of medicine.
How can AIN HTG Contribute to effective health sector strategy implementation?	<p>Lobbying and influencing the central government for smooth and enough manpower and resources allocation in remote areas.</p>
Documents, Manuals, Research Reports and other papers produced by the organization	<ul style="list-style-type: none"> • Progress reports • Annual reports • Evaluation Reports (external and external) • HIV/AIDS Policy Paper (Internal) • Disability Guidelines and Reports • Partnership Guideline (internal) etc.

Organization Information	INTERVITA Onlus is an Italian INGO that collaborates with local partners to support children and local communities for sustainable development and the fight against poverty and inequality. Intervita Onlus in Nepal is working currently in education and child sector with the aim to improve the health and educational opportunities for the vulnerable population.
Name of Organization	Intervita Onlus
Address/ Telephone	Manbhawan, Lalitpur Sub-Metropolitan City-5, +977-1-5534850- Fax. +977-1-5534850, P.O. Box: 5537, info.nepal@intervita.it , www.intervita.it
Contact Person/ Designation	Dr. Paolo Nicolai (Country Representative)
Email	paolo.nicolai@intervita.it
Major Health Program Focus	
Program Components	School education, health, hygiene, nutrition and sanitation
Implementation Approach	The activities been carried out through partnership with NGOs and coordination with government authority.
Activity Details	<ul style="list-style-type: none"> - Health camps - Health education to parents and students - Installation of water purification system in schools - First aid training to teachers and students and distribution of first aid tool kit and hygienic materials - Health awareness materials publications - Formation of Health and Hygiene committees in school
Partners	Child Workers in Nepal-Concern Nepal (CWIN) Global Action Nepal (GAN) Child Nepal (CN)
Geographical Coverage (District and VDC coverage)	11 VDCs (Kathmandu and Sindhupalchok) and Kathmandu municipality
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	Expenditure 2013: NPR 5,40,000.00 Budget 2014: NPR 9,20,000.00
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	Few models like forming eco clubs and quality circle in school to maintain health, sanitation in schools is undertaken in order to support government to promote quality health programs.

How can AIN HTG Contribute to effective health sector strategy implementation?	Lobby with government in ensuring school maintaining proper healthy environment for the students and teachers.
Documents, Manuals, Research Reports and other papers produced by the organization	Annual reports, health related publications.

Organization Information	<p>Ipas, founded in 1973, is a global nongovernmental organization dedicated to ending preventable deaths and disabilities from unsafe abortion. Through local, national and global partnerships, Ipas works to ensure that women can obtain safe, respectful and comprehensive abortion care, including counseling and contraception to prevent future unintended pregnancies. Since 2004, Ipas has been supporting Government to make safe abortion available, accessible and affordable to women across Nepal.</p>
Name of Organization	Ipas Nepal
Address/ Telephone	Teku, Kathmandu; PO Box 11621/ Tel: 01-4100180
Contact Person/ Designation	Deepak Bajracharya (Admin and Finance Manager II) Swadesh Gurung (Research and Evaluation Advisor I)
Email	bajracharyad@ipas.org gurungs@ipas.org
Major Health Program Focus	Reproductive health
Program Components	Safe abortion Services, Post Abortion Contraception, Women's right, Awareness and information dissemination on safe abortion
Implementation Approach	Work closely with Government from central upto the district level for providing safe abortion services at the Public health institutions. Focuses mainly on providing Medical Abortion (MA) services from peripheral level health institutions (PHCCs and HPs).
Activity Details	<p>The activities conducted are:</p> <ul style="list-style-type: none"> • Training providers and preparing sites to provide MA services. Providers are doctors, nurses and mid-level providers (ANMs and SANMs). Provide necessary support to sites for providing MA services. • Implementing the provider and site support system: Provides clinical and programmatic support to the providers on need based basis. Clinical mentors are recruited in each district to provide clinical support to providers whereas PHNs of the districts are engaged in providing programmatic support. • Second-trimester services: Selected tertiary hospitals of Nepal are prepared for providing second-trimester services. The physicians are trained to provide second-trimester services through WHO recommended technologies. • FCHV Training: FCHVs are trained on conducting Urine Pregnancy Test for early pregnancy detection and on referral for safe abortion services. FCHVs are also trained to provide safe abortion related information to the community.

	<ul style="list-style-type: none"> • Safe Abortion Care Monitoring: Routine monitoring of safe abortion services is being done through collection of HMIS-11 (safe abortion register) from the sites where MA services are in place. Moreover, other routine monitoring tools (such as site progress report and provider progress reports) are used to monitor provider's performance and site's condition. • Community Outreach and work with Youth: Youth focused programs are being implemented in Rupandehi and Kailali districts.
Partners	<ul style="list-style-type: none"> • Government Partners: FHD, NHEICC, NHTC, LMD, RHD, D(P)HO • NGO Partners: Safe Motherhood Network Federation, People Promote Center (Dhanusha), MOOD Nepal (Rautahat), NRCS (Saptari), Janauddhar Sangh (Panchthar), ABC Nepal (Morang), Jana Adarsha Samajik Kendra (Kapilvastu), Nepal Ama Samuha (Nawalparasi), Jana Jagaran Youth Club (Bara), and Bikash Nepal (Parsa)
Geographical Coverage (District and VDC coverage)	<p>As of December 2013, 27 districts are being covered across Nepal:</p> <ul style="list-style-type: none"> • Eastern Region: Panchthar, Morang, Jhapa, Dhankuta, Saptari • Central Region: Dhanusha, Rautahat, Bara, Parsa, Chitwan, Dhading, Kavre, Lalitpur • Western Region: Tanahun, Nawalparasi, Kapilvastu, Kaski, Baglung, Rupandehi, Myagdi • Mid-Western Region: Dang, Surkhet, Banke, Jumla, Kalikot • Far-Western Region: Kailali, Kanchanpur <p>The programmatic areas reach upto the peripheral site level, covering VDCs of these districts as well.</p>
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	<p>Expenditure for 2012/13: \$ 1.57 million Estimated Budget for 2013/14: \$ 1.73 million</p>
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	<ul style="list-style-type: none"> • Women's right to receive safe, accessible, affordable and quality abortion services without any stigma and discrimination • Raising awareness and information dissemination on safe abortion (legal conditions and service provision)
How can AIN HTG Contribute to effective health sector strategy implementation?	<ul style="list-style-type: none"> • Ensuring availability and accessibility to safe abortion services upto the peripheral level health institutions • Preparing skilled providers to provide quality safe abortion services • Implementing awareness and knowledge raising programs upto the community level

Documents, Manuals, Research Reports and other papers produced by the organization	<ul style="list-style-type: none">• Increasing access to safe abortion services through auxiliary nurse midwives trained as skilled birth attendant- Findings from an implementation research (Report)• VCAT (Value Clarification and Attitude Transformation) training manual (in Nepali)• Community engagement and mobilization activities for safe abortion in Nepal, 2007-2010 (Report)• Evaluation of nurse providers of comprehensive abortion care (CAC) using manual vacuum aspiration (MVA) in Nepal. (Journal Article)• Increasing access to safe abortion services through auxiliary nurse midwives trained as skilled birth attendants. (Journal Article)• Implementation of legal abortion in Nepal: A model for rapid scale-up of high-quality care (Journal Article)• Prospective study of complications from comprehensive abortion care services in Nepal. (Journal Article)
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Organization Information	
Name of Organization	The ISIS Foundation
Address/ Telephone	Italitar, Budhanilkantha, Kathmandu GPO Box. 8974, CPC 222
Contact Person/ Designation	Pralhad Kumar Dhakal – Nepal Country Director
Email	Pralhad.Dhakal@isisgroup.org
Major Health Program Focus	
Program Components	<ol style="list-style-type: none"> 1. Mobile medical team 2. Tibetan health care 3. Disability services 4. Malnourished children, hygiene, infant/ maternal morality 5. Health post improvement 6. Environment protection and waste removal 7. Discretionary Fund Support 8. Medical Care from Monasteries
Implementation Approach	<ol style="list-style-type: none"> 1. Infrastructure Support 2. Human Resource Support 3. Medicine and Material Support 4. Community and management Committee Mobilization
Activity Details	<ol style="list-style-type: none"> 1. Mobile Clinic in Humla to increases local awareness and the use of both allopathic and Tibetan medical treatment options 2. Providing free consultation, free medicines, free treatment and free diagnosis of the disease to disadvantaged and financially constrained people 3. Dental Check-ups 4. Treatment of Hepatitis B children 5. Free health camp 6. Ventilated Improved Toilet 7. Nutrition Super Porridge 8. Smokeless Metal Stove 9. Drinking Water - Slow sand water filter
Partners	<ul style="list-style-type: none"> - The ISIS Children's Foundation - Himalayan Children Society - Hands In Outreach - Himalayan Medical Foundation - Community based organisations in Humla

Geographical Coverage (District and VDC coverage)	<ul style="list-style-type: none"> - Kathmandu District - Humla District <ul style="list-style-type: none"> • Chaughanphya • Kholsi • Kermi • Challa • Yalbang • Yangar • Dharapori • Lama Kholsi • Simikot • Hepka • Tangin • Gadapari • Pamlathum • Dandafaya • Tulin
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	NRS. 5,532,980/-
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	We don't have any direct advocacy initiatives.
How can AIN HTG Contribute to effective health sector strategy implementation?	By sharing information about our successful projects of health services delivery in rural parts of Nepal
Documents, Manuals, Research Reports and other papers produced by the organization	<ul style="list-style-type: none"> - Some Research papers - Yearly Operational Report

Organization Information	
Name of Organization	Karuna Foundation Nepal
Address/ Telephone	Thirbam Sadak, Gate No.3 Baluwatar, Kathmandu, Nepal +977 1 4413340,4410687 Web: www.karunafoundation.com
Contact Person/ Designation	Deepak Raj Sapkota/Country Director
Email	deesapkota@karunafoundation.com
Major Health Program Focus	Prevention of Disability and Rehabilitation of Children with Disability, Implement Community Based Health Insurance and lobby for Social Health Insurance
Program Components	<ul style="list-style-type: none"> • Share&Care Project • Prevention and Rehabilitation Project • Policy Advocacy and Networking
Implementation Approach	<ul style="list-style-type: none"> • Strengthening local structures and Health facilities and capacity Building of Health Facility Operation and Management Committees (HFOMCs) • Capacity building of Village Disability Rehabilitation Committees • Empowerment of community
Activity Details	<ul style="list-style-type: none"> • Organizational Development • Upgrading Health Facilities • Training and Capacity Development • Community Based Health Insurance • Health Promotion and Childhood Disability Prevention • Community Based Rehabilitation of Children • Advocacy and lobbying for rights of Children With Disabilities and their families
Partners	<ul style="list-style-type: none"> • DHO,CBR District Coordination Committee • Health Facility Operation and Management Committees (HFOMCs) • Village Disability Rehabilitation Committees(VDRCS)
Geographical Coverage (District and VDC coverage)	<ul style="list-style-type: none"> • 7 VDCs of Sunsari • 5 VDCs of Rasuwa • Preparing to implement Inspire2Care program in all VDCs of Ilam from 2014
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	<ul style="list-style-type: none"> • 2013 expenditure: NPR.20,679,718.00 (unaudited) • 2014 Estimated budget: NPR 24,713,243.00

<p>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</p>	<ul style="list-style-type: none"> • Incorporate disability prevention as a goal of Health policies and programs in general, and Reproductive Health programs in particular. • Prioritizing birth defect prevention activities to accelerate reduction of neonatal and Infant mortality. • Inclusion and mainstreaming of Children With Disabilities and their families
<p>How can AIN HTG Contribute to effective health sector strategy implementation?</p>	<ul style="list-style-type: none"> • Activate Quality Assurance Working groups to improve Quality of Health Care in all districts • Create network of thematic organizations and increase coordination • Ensure fair distribution of INGOs throughout the country • Work to lobby for Social Health Insurance to reduce OOP and protect the population from health related financial risk
<p>Documents, Manuals, Research Reports and other papers produced by the organization</p>	<ul style="list-style-type: none"> • Disability Resource book together with Ministry of Women Children and Social Welfare • Training manual for Health Workers on Disability Prevention


Organization Information	KIDASHA is a UK development organization, established in 1997, works for children and families who are disconnected and isolated from mainstream services and opportunities to achieve their basic rights. With its country office based in Pokhara, Nepal, KIDASHA has been implementing projects with its local partner organizations in western region of Nepal.
Name of Organization	KIDASHA
Address/ Telephone	Office Address: Indrapuri Marg, Nagdhunga, Pokhara-8, PO Box No. 399 Kaski Telephone No: 00977 61 522085 & 530002 Fax No: 00977 61 537947 Email: kidasha@kidasha.org Website: www.kidasha.org
Contact Person/ Designation	Hridaya Raj Devkota Health Programme Manager
Email	hridaya@kidasha.org
Major Health Program Focus	Maternal, newborn and child health, nutrition, hygiene and sanitation, early childhood development, parenting capacity and Primary healthcare
Program Components	Safe motherhood, newborn care, urban maternal and pardiatic primary care development, children's rights in health, strengthening access to care and Strengthening community level capacity for action
Implementation Approach	Partnership with local government and non-government organizations, assisting and facilitating service development – not a service provider, capacity building for local service delivery organizations and community/primary care level and Input to emerging policy level
Activity Details	Urban and rural primary health services, clinical service delivery, outreach services, quality assurance, assessment and support to improving children's right in health settings, women's groups, community mobilization and strengthening, facilitating emergency funds and emergency transport systems, regular monitoring of partners implemented health activities, lobbying and advocacy

Partners	NAMUNA Integrated Development Council (NAMUNA), Bhairahawa, Rupandehi and Child Welfare Scheme Nepal, Pokhara, Kaski
Geographical Coverage (District and VDC coverage)	Kaski - Pokhara and Lekhnath Municipalities and three VDCs Lamjung - One VDC Rupandehi – Sidharthanagar and Butwal municipalities (one ward in each municipality) and 28 VDCs
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	Expenditure in 2013: Rs. 16,506,903.00 Estimated budget in 2014: Rs. 19,830,098.00
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	Urban primary health care, promoting the implementation and realization of the UNCRC in health settings, equality of access and practice strategies for remote areas and hard to reach population
How can AIN HTG Contribute to effective health sector strategy implementation?	Supporting and strengthening evidence base modalities and interventions, consistent approach to advocacy and policy development, inputs to Government in policy formulation in health sector
Documents, Manuals, Research Reports and other papers produced by the organization	Annual reports and project evaluation reports

Organization Information	
Name of Organization	Lutheran World Federation Nepal (LWF Nepal)
Address/ Telephone	Tel: 4720217, 4720152, 4721271 Fax: +977-1-4720225
Contact Person/ Designation	Subash Gurung (Phd) / Sustainable Livelihoods Development Coordinator
Email	sldc@lwf.org.np
Major Health Program Focus	Community Health
Program Components	<ul style="list-style-type: none"> ▪ Environmental health - Dailekh ▪ WASH Program - Dailekh ▪ HIV/AIDS - Jhapa
Implementation Approach	<ul style="list-style-type: none"> ▪ Participatory approach ▪ Community empowerment approach ▪ SLTS/CLTS
Activity Details	<ul style="list-style-type: none"> ▪ Access to and use of sustainable sanitation. ▪ Empowerment communities, specifically women and girls, demand and achieve sustainable access to and use of safe water, sustainable sanitation and hygienic living conditions. ▪ Environmental sanitation and hygiene (WASH) practices ▪ Improve economic situation with improved WASH services ▪ Increase awareness within the government institutions ▪ Sustainable sanitation systems at public places ▪ Media/ communication campaigns ▪ Multi-stakeholder coordination and synergy in WASH sector ▪ Awareness on HIV/AIDS
Partners	<ul style="list-style-type: none"> ▪ Dailekh: Everest Club (EC) ▪ Jhapa: Social Awareness Development Group (SADG)
Geographical Coverage (District and VDC coverage)	<ul style="list-style-type: none"> ▪ Dailekh: Katti, Ruma and Jaganath VDCs ▪ Jhapa: Damak, along the highway, HIV/AIDS
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	<ul style="list-style-type: none"> ▪ EURO. 15,592 (budget of 2013) ▪ EURO. 65,000

<p>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</p>	<ul style="list-style-type: none"> ▪ LWF Nepal is promoting WASH in line with the government WASH master plan 2010 through Nepal WASH alliance (NWA) ▪ At community level LWF Nepal support community for implementing WASH through building linkages with VWASH CC and DWASH CC
<p>How can AIN HTG Contribute to effective health sector strategy implementation?</p>	<p>AIN can contribute to effective health sector strategy implementation via</p> <ul style="list-style-type: none"> ▪ Alliance building among the donors of similar nature of health for synergetic add effect ▪ Identifying gaps in Government health system and strengthening ▪ Research and study in implementing health strategy and support government in fulfilling the gaps
<p>Documents, Manuals, Research Reports and other papers produced by the organization</p>	<p>Annual Reports Quarterly Monitoring Report Baseline Report Manual about Human Rights including Right to Health</p>

Organization Information	Marie Stopes International /Nepal is part of Marie Stopes International, a provider of sexual and reproductive healthcare that works in 37 countries across the world and focuses on reaching the world's most underserved communities.
Name of Organization	Marie Stopes International/ Nepal
Address/ Telephone	Baluwatar, Kathmandu Telephone number: 977-01-4438732/4419371
Contact Person/ Designation	Dr. Justine Coulson, Country Director
Email	Justine@msinepal.org.np
Major Health Program Focus	Sexual reproductive health
Program Components	<ul style="list-style-type: none"> • Sexual and reproductive healthcare services mainly focused on Family Planning (Full range of Family Planning methods through static and outreach camp) and Safe Abortion • Adolescents Sexual and Reproductive Health (ASRH) • Reproductive health training • Call center • Contraceptive Social Marketing (CSM) • Cervical cancer screening – in pilot phase • VSC (Voluntary surgical contraception) outreach in partnership with DHO
Implementation Approach	Advocacy, Behavior Change Communication, Direct service provision with focus on quality and capacity building approach
Activity Details	<ul style="list-style-type: none"> • Sexual and reproductive healthcare services including safe abortion and contraception from Marie Stopes Centers • Adolescents Sexual and Reproductive Health focusing on BCC and youth friendly services • Reproductive health training from RH training center • Offering sexual and reproductive health advice and information through Marie Stopes call center (Marie Stopes helpline) -toll free no. for NTC user-1660-01-19756, NCell user-9801119756 • Mhealth-to support women on using Medical abortion pill correctly and also to empower adolescents and youth to address their SRH issues • Targeted intervention to newlywed couples • Outreach program- for Voluntary surgical contraception and Long acting method • Contraceptive social marketing (CSM) - markets and distributes Jodi Gold Premium condom and Feminyl Oral contraceptive pills through pharmacies and groceries. • Conduct different BCC programs to make aware of safe Medical abortion Pills (Mariprist) and to reduce chances of unsafe abortion.

Partners	Sunaulo Parivar Nepal, Marie Stopes Services P. Ltd., SAAF, UN-FPA and AusAid, Medecins Du Monde(MdM), NHTC
Geographical Coverage (District and VDC coverage)	<p>Healthcare services from 37 centers in 30 districts(Dadeldhura, Kailali, Banke, Surkhet, Dang, Jumla, Pyuthan, Gulmi, Argakhan-chi, Kapilvastu, Rupendehi, Parbat, Kaski, Tanahu, Gorkha, Chitwan, Nuwakot, Parsa, Sarlahi, Kathmandu, Lalitpur, Mahottari, Dhanusa, Kavre, Siraha, Sunsari, Dhankuta, Ilam, Jhapa, Nawalparasi)</p> <p>Outreach camp- 21 districts (Banke, Bardia, Kailali, Kanchanpur, Kaski, Syangja, Parbat, Baglung, Myagdi, Kavre, Ramechhap, Dolakha, Sindhuli, Rupendehi, Kapilbastu, Chitwan, Ilam, Paanchthar, Jhapa, Taplejung, Sindhupalchowk)</p> <p>Call center- 75 districts CSM-65 districts</p>
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	<p>2013 - NRs. 320, 000,000 (NRs.32 crore) 2014 -NRs. 290, 000,000 (NRs.29 Crore)</p>
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	<ul style="list-style-type: none"> • Task shifting on VSC and Safe Abortion services • Media (Newspaper) are not clear on SRH issues thus need to streamline them within our advocacy program
How can AIN HTG Contribute to effective health sector strategy implementation?	<ul style="list-style-type: none"> • By coordinating with GoN/Partners for developing health policies to help marginalized communities • By collaborating with Government and partners on implementing health awareness program and service delivery • To take Initiation to involve NGOs/INGOs in Joint Annual Review meeting
Documents, Manuals, Research Reports and other papers produced by the organization	<div data-bbox="565 1283 847 1405" style="text-align: center;">  <p>सुनौलो परिवार नेपाल</p> </div> <p>MSI Nepal 2013 Client Exit Interview Report-“Assessing client satisfaction & perception of quality with services received from Marie Stopes Centres”,</p> <p>Mariprist (Medical Abortion Pill) Leaflet, Poster and Mariprist insert.</p>

Organization Information	
Name of Organization	Medecins du Monde _France(MDM _France)
Address/ Telephone	Kupondole Height, Lalitpur, Tel: 977-1-5552994,5012023
Contact Person/ Designation	Sita Ram Wagle, Program Coordinator
Email	comco.mdmnepal@gmail.com
Major Health Program Focus	Safe Motherhood
Program Components	Maternal and Neonatal Health, Sexual and Reproductive Health Education and Microfinance
Implementation Approach	<ul style="list-style-type: none"> • Program implementation in close coordination of District Health Office (DHO), Sindhupalchowk. • Program implementation through a local NGO, Community Development and Environment Conservation Forum (CDECF) mainly in Sexual and Reproductive Health Education and Microfinance Activities with the technical assistance of Centre for Microfinance (CMF) in microfinance component. • Strengthening of the health facilities
Activity Details	<p>Health facility strengthening</p> <ul style="list-style-type: none"> • Infrastructure support • Equipment support • Skill birth attendant training to HF staff • FCHV training • Onsite training to health facility staff • Appreciative inquiry workshop • Health education in PHC/ORC clinic <p>Community level activities</p> <ul style="list-style-type: none"> • Organize women into saving and credit centers with health education related activities. • Provide specific microfinance related trainings to microfinance group members and cooperatives • Animate monthly meetings in the women centers with health education sessions, financial literacy trainings and saving- and credit activities • Raise awareness of family decision makers (namely husbands and mothers-in-law) through health education sessions in the monthly meetings with active participation of family decision makers • Peer education training for family decision makers • Biyearly health campaigns in every supported VDC for the whole community • Conduct a community sensitization program on the Obstetric Emergency Funds and governmental reproductive health policy • Establish Saving and Credit Cooperatives • Provide Revolving Fund (RF) to cooperatives • Provide Obstetric Emergency Funds (OEF) to the cooperatives.

Partners	<ul style="list-style-type: none"> • Community Development and Environment Conservation Forum (CDECF), Sindhupalchowk to implement community level activities. • District Health Office (DHO), Sindhupalchowk for coordination and monitoring of the project.
Geographical Coverage (District and VDC coverage)	<ul style="list-style-type: none"> • Ten VDCs of Sindhupalchok district (Selang, Lisankhu, Nawalpur, Sunkhani, Baramchi, Batase, Golche, Thokarpa, Sangachowk and Fulpingdanda) for full implementation of the project. • Melamchi and Jalbire PHCCs from previous project (2007 to 2010) for strengthening and networking as referral center.
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	<ul style="list-style-type: none"> • NRs. 25,439,000 – expenditure of 2013 • NRs. 19,000,000- planning for January to June 2014
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	Activation of Health Facility Operation and Management Committee (HFOMC) by means of training and workshop to mobilize local resources for sustainable health service management owned by the community.
How can AIN HTG Contribute to effective health sector strategy implementation?	Coordination and networking to government agencies in all levels that every projects result can be achieved through combined effort of government and external development partners.
Documents, Manuals, Research Reports and other papers produced by the organization	<ul style="list-style-type: none"> • Baseline KAP survey report • Mid-term evaluation report by SWC • Mid-term evaluation report of microfinance component by PlaNet Finance • Annual Progress Report • Reproductive health education and financial literacy education manuals to community facilitators to provide education in the microfinance groups. • Health Facilities Assessment Report of 79 VDCs

Organization Information	
Name of Organization	The Micronutrient Initiative
Address/ Telephone	Uttar Dhoka Marg, 424/2 2 nd Floor, Lazimpat, Kathmandu
Contact Person/ Designation	M. R. Maharjan, Director, Nepal
Email	mmaharjan@micronutrient.org
Major Health Program Focus	Nutrition (Micronutrients)
Program Components	<ul style="list-style-type: none"> • Intensification of Maternal and Neonatal Micronutrient Program • Zinc and ORS in the treatment of childhood diarrhea • Improving the integration of micronutrient supplementation within the health system • Wheat flour fortification with iron and vitamins at roller mills • Cereal flour fortification with iron and vitamins at small scale mills
Implementation Approach	Implementation of projects in partnership with government, NGOs, private sector etc.
Activity Details	<ul style="list-style-type: none"> • Refresher workshops to strengthen Intensification of Maternal and Neonatal Micronutrient Program • Facilitation of FCHV meetings and awareness creation for strengthening Zinc and ORS in the treatment of childhood diarrhea • Initiate a pilot project for Improving the integration of micronutrient supplementation within the health system • Provide technical backstopping support to roller mills to ensure smooth fortification of wheat flour with iron and vitamins • Provide monitoring support to continue cereal flour fortification with iron and vitamins at small scale mills
Partners	Department of Health Services, Department of Food Technology and Quality Control, Nepal Flour Mills Association, Imagine Lalitpur, Youth for World Nepal (YWN), and other NGOs
Geographical Coverage (District and VDC coverage)	<ul style="list-style-type: none"> • Intensification of Maternal and Neonatal Micronutrient Program- all VDCs and Municipalities of 10 priority districts (2013-2015) • Zinc and ORS in treatment of childhood diarrhea- all VDCs of 30 priority districts (2014-2015) • Improving integration of micronutrients within health system- all VDCs of three districts-Ilam, Chitwan and Humla (2014-2015) • Wheat flour fortification with iron and vitamins at roller mills- most VDCs and Municipalities of all districts accessible by motorable roads (2013-2015) • Cereal flour fortification with iron and vitamins at small scale mills- ten VDCs of Lalitpur district (2013-2015)

Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	<u>Health Sector</u> Expenditure in 2012/13- NPR 8,990,200 Estimated Budget in 2013/14- NPR 39,212,000
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	Strengthening health system for better implementation of national level health interventions resulting in sustained impact
How can AIN HTG Contribute to effective health sector strategy implementation?	AIN HTG can significantly contribute in implementation of nutrition specific and nutrition sensitive interventions of multi-sector nutrition plan of Nepal government.
Documents, Manuals, Research Reports and other papers produced by the organization	Nepal Micronutrient Status Survey 1998, Nepal Iodine Deficiency Disorders Status Survey 2005, Situation Analysis and Evaluation Reports of various micronutrient related interventions

Organization Information	
Name of Organization	Nepal Youth Foundation (NYF)
Address/ Telephone	Bhanimandal, Ekantakuna Lalitpur. Tel. 5000118, 5000059
Contact Person/ Designation	Som Paneru, President
Email	som@nepalyouthfoundation.org
Major Health Program Focus	Nutrition
Program Components	Nutritional Rehabilitation Homes (NRH), Nutritional support to HIV & AIDS affected children, Community Nutrition Awareness Camps, Diet Management Training.
Implementation Approach	Through partner (local) NGOs and with Govt. Hospitals.
Activity Details	Clinical Rehabilitation of malnourished children, Educating care-takers on Nutrition, Health & Hygiene, Reproductive health, Treatment, Care & support to HIV infected children & imparting knowledge & skills on diet management.
Partners	Kathmandu valley- Nepal Youth Foundation-Nepal (NYF-Nepal) Bhadrapur- Nepal Community Development Center (NCDC) Biratnagar-Friends of Needy Children (FNC) Rajbiraj – Women Environment & Rural Development Organization (WERDO) Janakpur- Community Family Welfare Association (CFWA) Birgunj – Bidharthy Jagaran Munch (BIJAM) Bharatpur – Diyalo Pariwar Pokhara – Good Neighbour Service Association (GONESA) Nepalgunj – Saathi Surkhet – Rural Women Development & Unity Center (RUWDUC) Dhangadi - Rural Women Development & Unity Center (RUWDUC) Kanchanpur - Rural Women Development & Unity Center (RUWDUC) Baglung – Chartara Yuwa Club (CYC) Dang – Nepal Youth Foundation-Nepal (NYF-Nepal) Butwal – Lumbini Zonal Hospital Dailekh – Dailekh District Hospital
Geographical Coverage (District and VDC coverage)	Nutrition Rehabilitation Homes: Kathmandu vally- Sunakothi Lalitpur Bhadrapur – Jhapa Biratnagar – Morang Rajbiraj – Saptari Janakpur – Janakpurdham, Dhanusha Birgunj – Parsa Bharatpur – Chitwan Pokhara –Ramghat, Kaski

	<p>Nepalgunj – Banke Surkhet – Kalagown Surkhet Dhangadi – Kailali Kanchanpur – Mahendranagar Kanchanpur Baglung – Baglung bazar Baglung Dang – Ghorahi Dang Butwal – Rupendahi Dailekh</p> <p>Community Awareness Camp: Dhading- Maidi VDC Doti – Sanagown VDC Bardiya - Gulariya Kavre – 1. Chalal VDC, 2. Kaskot Balawa VDC, 3. Patelakhet VDC, 4. Dhunkharka VDC Nuwakot –1. Kagatigown Okharpauwa VDC, 2. Aapchour VDC Chitwan- Chhandi Bhyangang Kathmandu -1. Talkuchour Kathmandu 2. Orchard Gardeen School Dhading – Maidi VDC, 2. Mahadev Basi, 3. Jogimara, 4. Tharke 5. Chhatradeurali, 6. Mahadevsthan, 7. Tharke Sindhupalchowk – Thulosirubari Lalitpur – Dukuchhap 2. Bagdol 3. Bhardeu 4. Devichour 5. Techo Health post. Bhaktapur – Tathali (Brick Factory) 2. Biruwa Dadhikot VDC</p>
<p>Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014</p>	<p>Expenditure: (July 2012- June 2013) Rs. 43,413,798.84 Budget for July 2013- June 2014 Rs. 37,507,626</p>
<p>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</p>	<p>All these projects have been formulated and implemented in close coordination with Child Health Division of Ministry of Health and Population. These projects provide nutritional support and medical care to malnourished as well as HIV infected children. Beside this it aims to provide knowledge on nutritional values of locally available foodstuffs, proper feeding habits and maintaining hygiene to the caretakers. The Caretakers are trained to disseminate the acquired knowledge to other mothers in their community</p>
<p>How can AIN HTG Contribute to effective health sector strategy implementation?</p>	<p>Suggesting aid agency to provide grants to need base projects rather than donor guided. Organizing regular sharing meetings to disseminate best practice and avoid duplication.</p>
<p>Documents, Manuals, Research Reports and other papers produced by the organization</p>	<ol style="list-style-type: none"> 1. Nutritional Rehabilitation Home- Operation Manual. 2. Handouts on Poshan Ek Jankari 3. Handouts on Diet Management in Malnutrition

Nepalgunj – Banke	
Surkhet – Kalagown Surkhet	Netherlands Leprosy Relief, Nepal (NLR, Nepal)
Dhangadi – Kailali	Anamnagar, Kathmandu, Tel: 016227564
Contact Person/ Designation	Dr K P Dhakal, Country Representative
Email	Kpdhakal2001@yahoo.com;
Major Health Program Focus	
Program Components	Leprosy Control, TB Control, Disability Management
Implementation Approach	Financial, Technical and Logistic support through GON and NGOs
Activity Details	Direct patient management, Capacity development, Logistic supplies, Awareness raising and empowerment, Coordination, Research etc
Partners	MoHP, LCD, NTC, Regional Health Directorates, District Health Offices, Zonal Hospitals, NFDN, CBR Organizations, DPOs, NGOs and CBO
Geographical Coverage (District and VDC coverage)	All districts and VDCs of Eastern and Far Western Regions of Nepal
Budget (Expenditure) for Health Sector 2013	2013: NPR. 3,57,49,656.00
Estimated Budget for Health Sector 2014	2014: NPR. 3,52,00,000.00
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	Advocate for patient centered quality services in health, disability, rehabilitation. Empowerment of right holders to make them capable of claiming their rights. Support to government program by providing expertise, capacity building, logistics and funds.
How can AIN HWG Contribute to effective health sector strategy implementation?	<ul style="list-style-type: none"> • Direct support to programs by individual members • Technical expertise in strategy development • Complementing to GON services • Sharing of experiences and best practices • Coordination and Cooperation
Documents, Manuals, Research Reports and other papers produced by the organization	<ul style="list-style-type: none"> • Program Handbooks • Training Manuals • Research Reports • Program progress reports • Patients' Handbooks

Organization Information	
Name of Organization	One Heart World Wide, Nepal
Address/ Telephone	PO Box 3764, House No. 496, Dhara Marg, Maharajgunj, Kathmandu, Nepal Phone no: +977-1- 4416191/ 4417547
Contact Person/ Designation	Surya Bhatta / Program Director
Email	sbhatta@oneheartworld-wide.org
Major Health Program Focus	
Program Components	Maternal and Child Health
Implementation Approach	Partnership with local NGOs, Department of Health Services, DHO, CBOs and HFOMC and community
Activity Details	<ul style="list-style-type: none"> -Government endorsed Community Based New Born Care Program -Government endorsed Birth Preparedness Package with Misoprostol component to prevent PPH -Birthing Center Support and Upgrade Program -Skilled Birth Attendance Support Program (Baglung and Dolpa) -Mobile health pilot project (4 VDCs Baglung) -Pelvic Organ Prolapses (POP) (2 VDCs Dolpa and 5 VDCs Baglung) -Innovative project on PPH Management _NASG and Balloon Temponade - A project on Neonatal Jaundice treatment
Partners	<p>Baglung: Social Welfare Association Nepal (SWAN)</p> <p>Dolpa: Dharma Karma Society (DKS)</p>
Geographical Coverage (District and VDC coverage)	<p>Baglung and Dolpa (entire VDCs)</p> <p>59-VDCs Baglung</p> <p>23-VDCs Dolpa</p>
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	<p>Total Expenditure in 2013: 20,972,940.67 nrp</p> <p>Estimation for 2014: 35,000,000.00 nrp</p>
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	<ul style="list-style-type: none"> • Equitable access of health services for the unreached people • Integration of new technology and innovation in existing health programs • Reduce the stigma and increase awareness to the women living with pelvic organ prolapse and preventive approach should be integrated in exciting MCH program • Respectful maternity care should be provided to each mother • Each baby should get free health care services

How can AIN HTG Contribute to effective health sector strategy implementation?	Sharing the best practices Coordination and liaison with INGOs/government counterpart Prepare common ground for INGO to work with stakeholders and benefices
Documents, Manuals, Research Reports and other papers produced by the organization	<ul style="list-style-type: none"> • Baseline report • Annual report • Quarterly newsletter • Pilot project evaluation report • Program evaluation report (External) • Pelvic Organ Prolapses self-care program manuals, protocol and BCC materials • Safe sim/Mobile health KUJUWA software and user toolkits

Organization Information	
Name of Organization	Plan Nepal
Address/ Telephone	Shree Durbar, Pulchowk, Lalitpur, Nepal. Tel: 977-1-5535580, 5535560
Contact Person/ Designation	Sher Bahadur Rana, Country Health Coordinator
Email	sherbahadur.rana@plan-international.org
Major Health Program Focus	Maternal and Newborn Health; and Childhood Disability Services
Program Components	Strengthening institutional delivery; updating knowledge and case management skills of health workers; strengthening health system related to maternal and child health; and building capacity of community and family for their healthy practices and utilization of health services
Implementation Approach	Building the capacity of duty bearers and right holders, promoting advocacy at all levels for innovative health program initiatives, integrating initiatives on fundamental principles of social inclusion and gender equity in health programs. integration of program and sponsorship, monitoring, evaluation and research
Activity Details	Training of health workers and female community health volunteers; skill birth attendants training; follow up, supervision and monitoring support; behavioral change communication sessions among pregnant groups, husbands and mother-in-laws; birthing centers and placenta pit constructions in Health Facilities; and medicines and equipment support; training to health facility management committee members; parenting education on maternal, newborn, child health, nutrition and water and sanitation
Partners	Department of Health Services (Central level to community level e.g. Family Health Division, Child Health Division, National Health Training Center at central level; District (Public) Health Office at District level; and Health Facilities and Health Facility Operation Management Committee at community level), well experienced and professional National and local NGOs.
Geographical Coverage (District and VDC coverage)	Morang, Sunsari, Rautahat, Makawanpur, Sindhuli, Banke and Bardiya
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	Fiscal Year 2013: Expenditure Budget Rs. 40,320,365 Fiscal Year 2014: Estimated Budget Rs. 67,520,020

Advocacy Issues in Health supporting to promote Quality Health Program of the Government	None
How can AIN HTG Contribute to effective health sector strategy implementation?	Building alliance for the advocacy so that mothers and children from disadvantaged and marginalized population will have better accessible and available of health services for their better utilization
Documents, Manuals, Research Reports and other papers produced by the organization	<ol style="list-style-type: none"> 1. Assessment on country progress on childhood disability services during last one decade 2012. 2. Pregnant women group(PWG) study in Bara, Makawanpur and Sunsari 2013

Organization Information	
Name of Organization	Population Services International/Nepal
Address/ Telephone	Naya Bato, Dhobighat, Sanepa Lalitpur, Nepal GPO Box: 21976 Tel: 977-1-5553190
Contact Person/ Designation	Shazina Masud Country Representative
Email	shazina@psi.org.np
Major Health Program Focus	I. Women's Health Project (WHP) II. Malaria Prevention and Control Program
Program Components	<p>Women's Health Project</p> <ul style="list-style-type: none"> ▪ Increasing availability and use of long term methods of family planning services, specifically IUCDs ▪ Increasing access to safe medication abortion services <p>Malaria Prevention and Control Program</p> <ul style="list-style-type: none"> ▪ Long Lasting Insecticides Treated Nets (LLINs) distribution ▪ Behavior change Communication including school based BCC ▪ Training to Private Sector Health Service Providers
Implementation Approach	<p>Women's Health Project</p> <ul style="list-style-type: none"> ▪ Social marketing of IUCDs and safe medication abortion drugs (Medabon) ▪ Social Franchising model to strengthen the private sector to deliver sustainable, high-quality and affordable health care services related to long term family planning methods ▪ Interpersonal Communication (IPC) and Provider Behavior Change Communication (PBCC) ▪ Total Market Approach (TMA) <p>Malaria Prevention and Control Program</p> <ul style="list-style-type: none"> ▪ Private Public Partnership (PPP) through the mobilization of national NGO's and community based organizations (CBOs)

<p>Activity Details</p>	<p>Women's Health Project</p> <ol style="list-style-type: none"> 1. Social Marketing of IUCDs and safe MA drugs: <ul style="list-style-type: none"> - Increase availability of IUCDs in the private sector at subsidized rates - Increase access to safe MA drugs in Government certified Safe Abortion Service Centers 2. Social Franchising: <ul style="list-style-type: none"> - PSI's social franchising model strengthens health systems in the private sector to increase client's access to high quality, sustainable and affordable FP and RH services (IUCD and safe MA drugs) 3. Demand Generation: <ul style="list-style-type: none"> - Increasing awareness and educating women (and men) on family planning methods and safe abortion services through IPC and mass media activities - PBCC approach to uncover individual provider needs, motivations and barriers related to the adoption of a certain behavior to ensure providers are consistently offering high quality FP and RH services to the clients 4. Capacity building of private sector providers through training on long term FP method, Medical abortion, STI, IP; <ul style="list-style-type: none"> - Mapping and assessment of the health facility in the operational district using a standard tool for selection - Listing of the providers for training in IUCD - Coordinate with NHTC to provide 4 days competency based training to the eligible providers i.e. ANM or staff nurse on IUCD - Supportive supervision and on site coaching by the clinical trainer for 25 IUCD insertion or until there is a 25 competent IUCD insertion - Provide Continuous Medical Education (CME) to providers on Infection Prevention (IP), Balanced Counseling Skills (BCS) and Sexually Transmitted Infection (STI) - Training to non network providers on CTS, MA TOT and PPIUCD - Strengthen and upgrade of the IUCD and MA training sites in Nepal 5. Quality Assurance of service: <ul style="list-style-type: none"> - One of the greatest strengths of PSI/Nepal is the quality assurance system which is functional to a greater extent. There are set standard operating manuals for clinical service days, coaching, quality assurance visit, infection prevention with tools for assessment as well as feedback. An auditing of the quality assurance is done by the technical person proficient in IUCD on a monthly basis during the QA to assess the quality of QA as well as to provide feedback - Established referral system consisting of private / public hospitals for management of complications
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	<p>6. Total Market Approach:</p> <ul style="list-style-type: none"> - To meet public health needs in the most sustainable way, PSI applies a total market lens to increase availability and use of IUCD and MA services in the public sector health facilities. <p>Malaria Prevention and Control Program</p> <ol style="list-style-type: none"> 1. Long Lasting Insecticides Treated Nets (LLINs) distribution: <ul style="list-style-type: none"> - LLINs distributed for free to people living in malaria affected districts (medium to high- risk VDCs of Malaria affected districts) to improve the coverage and quality of preventive measures 2. Behavior change Communication including school based BCC: <ul style="list-style-type: none"> - To increase the utilization of malaria preventive and curative services through behavior change interventions at household and community level. The program also targets school children (class 5 and above) 3. Training to Private Sector Health Service Providers: <ul style="list-style-type: none"> - Training to Private Sector Health Service Providers of target areas imparted with trainings on malaria (as per National Malaria Treatment Protocol) and LLINs usage
Partners	<p>Women's Health Project</p> <ul style="list-style-type: none"> ▪ Ministry of Health and Population , Department of Health Services, Family Health Division (FHD) ▪ Ministry of Health and Population , Department of Health Services, National Health Training Center (NHTC) ▪ Ministry of Health and Population , Department of Health Services, National Education Information and Communication Center (NHEICC) ▪ Regional/ District Public Health Offices (RHD/DPHO) <p>Malaria Prevention and Control Program</p> <ul style="list-style-type: none"> ▪ Ministry of Health and Population , Department of Health Services, Epidemiology and Disease Control Division (EDCD) ▪ Regional Health Directorate ▪ District Public/Health Offices (D/PHO) ▪ World Health Organization (WHO) ▪ Non Government Organizations (NGOs)/ Community Based Organizations (CBOs) ▪ Private sector Enterprises ▪ Media Houses

<p>Geographical Coverage (District and VDC coverage)</p>	<p>50 districts for WHP</p> <ul style="list-style-type: none"> ▪ Dhankuta, Ilam, Jhapa, Morang, Saptari, Siraha, Sunsari, Udayapur, Teharathum, Solukhumbhu, Chitwan, Makwanpur, Parsa, Bara, Rautahat, Sarlahi, Mahottari, Dhanusha, Sindhuli, Banke, Bardiya, Dang, Kailali, Kanchanpur, Surkhet, Achham, Salyan, Rolpa, Jumla, Doti, Dadeldhura, Dailekh, Bhaktapur, Dhading, Kathmandu, Kavre, Lalitpur, Nuwakot, Sindhupalchowk, Baglung, Kapilbastu, Kaski, Lamjung, Nawalparasi, Palpa, Parbat, Rupandehi, Syangjha, Tanahun, Gulmi <p>31 Districts for Malaria Prevention and Control Program</p> <ul style="list-style-type: none"> ▪ Ilam, Jhapa, Morang, Dhanusha, Mahottari, Nawalparasi, Pachathar, Dhankuta, Udayapur, Sunsari, Saptari, Chitwan, Kavre, Makwanpur, Sindhupalchowk, Rupandehi, Kapilbastu, Dang, Banke, Bardiya, Surkhet, Kailali, Kanchanpur, Dadeldhura, Doti, Sindhuli, Siraha, Rautahat, Sarlahi, Bara, Parsa ▪ 255 VDCs of 31 medium and high-risk malaria districts as identified by micro stratification 2013 report
<p>Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014</p>	<p>Women's Health Project</p> <ul style="list-style-type: none"> ▪ Expenditure up to Nov 2013: \$1,936,262 ▪ Estimated Budget for 2014 : \$3,401,187 <p>Malaria Prevention and Control Program</p> <ul style="list-style-type: none"> ▪ Expenditure from Jan 16, 2011 to July 15, 2013: \$2,676,595 ▪ Estimated budget for 2014 : \$571,974
<p>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</p>	<p>Women's Health Project (WHP)</p> <ul style="list-style-type: none"> ▪ Improve IUCD and MA service provision in the public sector ▪ Building positive perception of long term family planning methods ▪ Expanding access to safe MA services by developing private sector friendly guidelines and policies <p>Malaria Prevention and Control</p> <ul style="list-style-type: none"> ▪ Working in collaboration with government of Nepal in achieving the National Malaria control Goals and pre-elimination.
<p>How can AIN HTG Contribute to effective health sector strategy implementation?</p>	<ul style="list-style-type: none"> ▪ Collaborate and support with different INGOs for effective implementation of program activities ▪ For closely coordinate with Government agencies at all the levels ▪ Development of policy guidelines ▪ For further fund raising

Documents, Manuals, Research Reports and other papers produced by the organization	<p>Women's Health Project (WHP)</p> <ul style="list-style-type: none">▪ Longitudinal study with PSI network providers, 2012• Mystery client survey with MA chemist, 2013• Mystery client survey with IUCD providers, 2013▪ Family planning determinants and use among MWRA in WHP area, 2013
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Organization Information	
Name of Organization	Restless Development
Address/ Telephone	Jwagal, Kupondole, lalitpur, Nepal. Tel: 01-5538242
Contact Person/ Designation	Ravindar Shakya, Country Director
Email	ravindra@restlessdevelopment.org
Major Health Program Focus	SRH, HIV/AIDS
Program Components	SRH, HIV/AIDS, Sanitation and Hygiene
Implementation Approach	In Partnership with Local NGO's, Youth clubs and likeminded organizations. In coordination with government in national and district level.
Activity Details	<ul style="list-style-type: none"> • School Health and Sanitation • Life skill based SRH teaching curriculum in school. • HIV/AIDS awareness activities in school and community level. • Young people accessing youth friendly services regarding SRHR.
Partners	<ul style="list-style-type: none"> • We Inspire Nepal(WIN), Kathmandu • Community environment education and public awareness association for rural development(CEEPAARD), Dolakha • Ministry of Youth and Sports(MoYS), Nepal • Youth TV, Kathmandu • Women's without Roof(WWF), Kathmandu
Geographical Coverage (District and VDC coverage)	<ul style="list-style-type: none"> • Dolakha- Centra Development Region • Kathmandu, Bhaktapur, Lalitpur- Central Development Region. • Morang, Surkhet, Dadeldhura, Kaski, Makwanpur Districts • Achham, Bajura, Mugu, Humla, Dhanusha, Saptari
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	<ul style="list-style-type: none"> • NPR.1,95,00,000.00

<p>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</p>	<p>Restless Development is involved in advocacy to raise awareness amongst school students and rural young people regarding their health as well as empower them with their knowledge, skills and confidence required to make life changing decisions about themselves and we are lobbying with MoYS to implement policy.</p> <p>Description of working area/activity:</p> <ul style="list-style-type: none"> • Coordination meeting with stakeholders at placement level • Radio/TV Programme and media coverage. • Support to develop action plan to school. • Green club district level bi-monthly meeting. • Establish resource centre and provide information • Identify issues and support to develop action plan. • Support Green clubs to organize exposure visits of its members to various service delivery organizations and develop linkage eg. DPHO, Health post, DEO, DDC. • Training and development
<p>How can AIN HTG Contribute to effective health sector strategy implementation?</p>	<p>By building network and coordination among the organization working in health sector.</p>
<p>Documents, Manuals, Research Reports and other papers produced by the organization</p>	<p>KAP survey, Mid-term review report, Annual Report, life skill school health curriculum, school based SRH manual, Baseline and end line survey report, Programme quality compendium Manual, Peer educator Training manual.</p>

Organization Information	
Name of Organization	Save the Children International
Address/ Telephone	Save the Children Nepal Country Office Airport Gate, Shambhu Marga Kathmandu, Nepal Office Tel: +977-1- 4468128
Contact Person/ Designation	Raj Kumar Mahato Programme Manager – Health and Nutrition, Nepal Country Program
Email	rajkumar.mahato@savethechildren.org
Major Health Program Focus	Reproductive, Maternal, Newborn & Child Health and Nutrition Health System Strengthening
Program Components	<ul style="list-style-type: none"> • Adolescent Sexual and Reproductive Health • Community Based Newborn Care Program • Integrated Management of Childhood Illness • Strengthening/upgrading Birthing Centers – renovation, construction, medical equipments and essential supplies support • Skill Birth Attendant Training • Family Planning Research and Training • School Health and Nutrition Program • Integrated Nutrition Program • Infant and Young Child Feeding • Community Based Growth Monitoring • Scaling Up Nutrition to support in Multi-Sector Nutrition Plan • Human Resources for Health
Implementation Approach	<ul style="list-style-type: none"> • Collaboration with government authority from center to grass root level for supply side interventions • Partnership with local NGO for social mobilization and demand side interventions • Works both at policy/strategy support at national level and implementation support at sub-national levels
Activity Details	<ul style="list-style-type: none"> • Scale up of evidence based high impact interventions (AFS, CB NCP, IYCF, IMCI, SBA, FP trainings) of reproductive, maternal, newborn and child health interventions endorsed by government of Nepal, Ministry of health and population • Renovation/construction of birthing centers and health facilities • Medical equipment, essential supplies support • Operational and formative researches • Social mobilization and Behavior Change Communication • Program Review and Reflection support to GoN from center to grass root levels • Intensive monitoring of MNCHN program interventions

Partners	<p>MoHP, DoHS as government counterparts at national level DP/HOs, HF, HFOMC as Government counterpart at district and community level Partner NGOs at district and community level</p> <ul style="list-style-type: none"> • Indreni Service Society • Bhawani Integrated Development Center • Save the Saptari • SOLID Nepal • Kalika Self Reliance Social Center • Sunshine Social Development Organization • Kalika Development Center Nepal • PNGOs in MWRO and FWRO for two projects yet to be selected
Geographical Coverage (District and VDC coverage)	<p>Baitadi, Bajura, Banke, Rolpa, Kalikota, Kapilvastu, Pyuthan, Sankhuwashabha, Lalitpur, Darchula, Siraha, Saptari,</p> <p>Some initiatives are at regional and national levels</p>
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	<p>Reaching the Unreached Population to Reduce Health Inequities in Nepal through developing national strategy with costed action plan and implementation guideline</p>
How can AIN HTG Contribute to effective health sector strategy implementation?	<p>AIN HTG can develop a joint commitment to Ministry of Health and Population for Nepal Health Sector Program II (2010 – 2015)</p>
Documents, Manuals, Research Reports and other papers produced by the organization	<p>LQAS survey report, Mid-term Review report, Final evaluation report, Annual Report, Country Annual Plan, Country Strategic Plan, End of Project Report, Research Reports, Case Studies Book, Articles published in national and international Index Journals, National Situation Analysis Report, Policy Briefs, Conference Report</p>

Organization Information	
Name of Organization	The Swedish Organization for Individual Relief (SOIR-IM), Nepal
Address/ Telephone	Pragatinagar-3, Nawalparasi, Phone: 078-575536
Contact Person/ Designation	Keshab Prasad Bhattarai (Country Director)
Email	gramin_keshab@yahoo.com, soir_im@ntc.net.np
Major Health Program Focus	Eye Health
Program Components	Preventive awareness and Cure (including Eye surgery)
Implementation Approach	Partner based (Community Eye Center is within District hospital in Mustang)
Activity Details	<ul style="list-style-type: none"> • Running a full time clinic in Mustang • Cataract screening camp in Mustang • School screening program in Mustang • Satellite Clinic
Partners	Nepal Eye Program (Tilganga Institute of Ophthalmology)
Geographical Coverage (District and VDC coverage)	Mustang District , including some parts of Manang & Dolpa
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	Nrs: 160 7000 (2013) Nrs: 172 5000 (2014)
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	Eye health
How can AIN HTG Contribute to effective health sector strategy implementation?	AIN can contribute to effective health sector strategy implementation by sharing information and experiences among AIN members and also by coordinating the government health agencies at the central level.
Documents, Manuals, Research Reports and other papers produced by the organization	Evaluation and reports

Organization Information	<p>Terre des hommes Foundation, Lausanne (Tdh) is a leading Swiss non-government organisation who has been in Nepal since 1985 working in varying child protection risks. Tdh aims to make lasting improvements to the situation of vulnerable children, particularly in the domains of healthcare and child protection through direct support, by building the capacities of communities and institutions to organise and respond to difficulties, through effectively advocating children's rights among the relevant authorities.</p> <p>Tdh is financed by individual and institutional donors, with 87% of funding directly benefiting programs and the children Tdh works with. All of Tdh's work and commitments with governments, communities and children is provided without any religious, political or racial bias.</p> <p>Tdh Lausanne has been present in Nepal since 1985. Its current areas of programming include: mother and child health, children with disabilities, child labour, anti-trafficking, WASH and child protection.</p>
Name of Organization	Terre des hommes (Tdh)
Address/ Telephone	Harihar Bhawan, Pulchowk, P.O. Box: 2430, Kathmandu Nepal
Contact Person/ Designation	Jason Squire / Country Representative
Email	jason.squire@tdh.ch
Major Health Program Focus	<ul style="list-style-type: none"> • Maternal and Child health (MCH) and Nutrition • Child disability • Adolescents Health
Program Components	<ul style="list-style-type: none"> • Community-based rehabilitation for disabled children • Water, Sanitation and Hygiene (WASH) • Adolescents sexual and Reproductive Health • Health System improvement support (equipments, medicine etc) • Promotion of IYCF
Implementation Approach	<ul style="list-style-type: none"> • Multi-sectoral and horizontal Approach • Integrated Approach (MCH, WASH and Child Protection) • Case management Approach • Partnership with Local NGOs • Working in line with GoN health systems and policies

Activity Details	<ul style="list-style-type: none"> • Support GoN in referral and treatment of Severely Malnourished Children through case management approach • Establish and/or activation of Emergency Safe motherhood funds among mothers group in ward level • Supporting GoN MCH campaigns through community mobilization • Capacity building training for FCHVs, HWs and HFOMCs • Support community groups to carry-out safe motherhood initiatives • Effective communication training for health worker • Nutritional support to moderately malnourished children • Orientation on MCH/ Nutrition to different community groups to identify early signs • Orientation to Traditional Healer on MCH and WASH • Periodic General Health Camps • Orientation and Demonstration session for Pregnant and Lactating mothers
Partners	<ul style="list-style-type: none"> • Nepal Red Cross Society, Salyan • The Himalayan Innovative Society (THIS), Humla • Urban Environment and Development Society (UEMS) • Friends of Disabled (FoD)/ Hospital and Rehabilitation Center for Disable Children (HRDC)
Geographical Coverage (District and VDC coverage)	<ul style="list-style-type: none"> • Child disability Program (Saptari, Siraha, Bara, Parsa, Rupandehi, Nawalparasi, Tanahun, Lamjung, Baitadai, Dadeldhura, Darchula, Kanchanpur, Jhapa, Udaypur, Dolakha, Kavre) • Salyan (Kajeri, Chhayachetra, Lekhpokhara, Bame, Mulkhola and Devasthal VDCs) • Humla (Simkot, Raya, Chhipra) • Lalitpur Districts (Jharuwarashi and Badikhel VDC)
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	<ul style="list-style-type: none"> • Yearly budget for health sector 2013: NRs. 14,307,483 • Estimated budget for Health Sector 2014: NRs. 29,517,633
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	<ul style="list-style-type: none"> • Prevention, Treatment and rehabilitation of children with disability • Maintain Balance between Demand and Supply Side for creating access to quality MCH services • Empower/ capacitate to FCHV's and Mother's Group for early detection of danger signs
How can AIN HTG Contribute to effective health sector strategy implementation?	<ul style="list-style-type: none"> • Coordination and collaboration with different INGOs for effective implementation • Strong networking for knowledge sharing and avoid duplication
Documents, Manuals, Research Reports and other papers produced by the organization	<ul style="list-style-type: none"> • Annual reports • Tdh MCH and WASH thematic policies

Organization Information	
Name of Organization	United Mission to Nepal
Address/ Telephone	Thapathali, Kathmandu, Nepal. 4-228118, 4-268900, fax no. 4-225559
Contact Person/ Designation	Netra Prasad Bhatta, Health Team Leader
Email	Netraprasad.bhatta@umn.org.np
Program Components	<ul style="list-style-type: none"> • HIV and AIDS • Community health • Mental Health • Maternal and Newborn Health • Adolescent Sexual and Reproductive Health • Water Sanitation and Hygiene • Food security and Nutrition • Child to Child health program.
Major Health Program Focus	
Implementation Approach	Capacity building of local NGOs and community people to empower women and children through their participation in health program towards their fullness of life.
Activity Details	<ol style="list-style-type: none"> 1. Community focused health program which includes women empowerment, Maternal and newborn health including birth preparedness package, 2. Adolescent Sexual and Reproductive health which includes life skills development and promotion of their sexual and reproductive health 3. Food security and nutrition which includes positive deviance hearth, kitchen gardening promotion program, 4. An HIV and AIDS related program includes care and support to PLHA, 5. Water Sanitation and Hygiene Includes sanitary toilet promotion, School Health Education 6. Health System Strengthening including quality of Care through improved birthing centers and health facility management committees. 7. Mental health including National Mental Health Network strengthening and community based mental health programming
Partners	19 local NGOs and District Health Offices.

Geographical Coverage (District and VDC coverage)	<p>Majority of the prioritized and needy VDCs of the targeted districts are covered by the program. Program Districts are as follows:</p> <ul style="list-style-type: none"> • Mugu, • Bajhang, • Rupandehi, • Rukum, • Dhading, • Doti, • Susari, • Kapilvastu, • Nawalparasi • Morang.
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	<p>Rs. 33,891,354.00</p> <p>Approximately equal amount for upcoming year 2014.</p>
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	<p>UMN is involving in advocacy for providing quality health care through community participation and closely working with the government counterparts. UMN is following the quality assurance strategy of the government to strengthen the District Quality Assurance Working Group and Village Quality Assurance Working Groups towards quality health program. UMN is leading the advocacy work in the area of Mental health through various activities by its separate program in the area of mental health as well as through supporting National Mental Health Network Nepal.</p>
How can AIN HTG Contribute to effective health sector strategy implementation?	<p>AIN HWG should work closely with the government counterpart and promote advocacy for engaging policy makers to act especially for policy updates and its effective implementation.</p>
Documents, Manuals, Research Reports and other papers produced by the organization	<ul style="list-style-type: none"> • Christian Family Life Education Manual, • Audio-visual of “Saving mothers and babies”, • UMN health strategy booklet, Annual reports • Technical guidance notes: in different issues • Picture card folder for HIV AIDS training to peer educators at school • Course book for student of grade 8,9 and 10 in HIV and AIDS • Mental Health baseline survey (conducted in 5 district) report • Food security baseline and end line survey reports

Organization Information	
Name of Organization	VSO Nepal
Address/ Telephone	5541469
Contact Person/ Designation	Smriti Bhattarai/Programme Manager
Email	smriti.bhattarai@vsoint.org
Major Health Program Focus	Maternal/Sexual Reproductive Health
Program Components	A/Y SRH, Safe Motherhood, STIs, HIV & AIDS, Prolapsed Uterine
Implementation Approach	Partnership, collaborative and Right based approach
Activity Details	<ul style="list-style-type: none"> i) Technical support (training, workshops, coaching and mentoring) through long term international volunteer placement ii) Strengthening community referral and linkages by strengthening community health outreach iii) Small grant support for innovative initiatives to strengthening quality and access to M/SRH services
Partners	Women Empowerment Action Forum, DHO/District Hospital Dailekh, DHO/Mugu Hospital, Karnali Technical School
Geographical Coverage (District and VDC coverage)	Mugu, Jumla, Dailekh
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	GBP 200,000
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	A research base is being developed for creating a position paper in "Valuing Health Worker"
How can AIN HTG Contribute to effective health sector strategy implementation?	
Documents, Manuals, Research Reports and other papers produced by the organization	

Organization Information	
Name of Organization	WaterAid Nepal
Address/ Telephone	Kupondole, Lalitpur, GPO Box:20214, Kathmandu, Nepal Telephone:977-01-5552764
Contact Person/ Designation	Ashutosh Tiwari/ Country Representative
Email	ashutoshtiwari@wateraid.org; wateraidnepal@wateraid.org
Major Health Program Focus	
Program Components	<p>Access to safe water, improved hygiene and sanitation facilities (WASH) to poor, marginalized and vulnerable communities with the following objectives:</p> <ul style="list-style-type: none"> • Support communities, defined as per the criteria for choosing such communities to demand and existence WASH rights. • Enhance access to poor and vulnerable communities to safe , affordable, equitable, inclusive and sustainable WASH facilities • Strengthen the capacity of partners to effectively deliver WASH services • Support government and relevant sector stakeholders to help address WASH sector key blockages to meet the national targets. • Drive WASH as a bedrock intervention in health, education, livelihoods, and influence other relevant sectors to prioritize WASH as an integral part of their development.
Implementation Approach	<p>Programmatic approach with focus on safe water, improved sanitation and hygiene promotion (WASH). Implementation through partnership approach, equity and inclusion approach, pro-poor approach focusing on marginalized, vulnerable, disadvantages, socially excluded and hard to reach area/ peoples. Integrated water resource management approach, water safety plan, total sanitation approach and comprehensive hygiene promotion. Advocacy and campaigning.</p>
Activity Details	<p>Providing access to safe and adequate drinking water, improved hygiene and sanitation facilities with explicit focus on the following areas:</p> <ul style="list-style-type: none"> • A stronger emphasis on sanitation and hygiene to achieve ODF status in communities we work in • An explicit focus on E & I and on affordable WASH services for the poor • A practice of totality concept for achieving universal access/ coverage in our working areas • M & E for advisory/ decision support: a more robust and user friendly M& E data system • A focus on water security management (i.e. water resource management, and water quality and water safety plans)

	<ul style="list-style-type: none"> • Amplification of grassroots and community voices for practice and policy changes • A renewed focus on low-cost technological innovations • Developing cross-linkages of WASH with health, local development, education sectors • A focus on WASH as it pertains to child rights • Interventions in small town's WASH issues: rights, access, governance, etc • Partnership with youth groups for advocacy work • Engagement with the media and the private sector for collaboration to spread awareness • Disaster risk management and climate adaptation work • Mitigation/mediation of conflicts with regard to sources of water
Partners	Nepal Water for Health (NEWAH), Lumanti Support Group for Shelter (Lumanti), Environment and Public Health Organization (ENPHO), Center for Integrated Urban Development (CIUD), Urban Environment Management Society (UMES), Federation of Drinking Water and Sanitation Users in Nepal (FEDWASUN), and Feminist Dalit Organization (FEDO)
Geographical Coverage (District and VDC coverage)	Illam, Khotang, Udayapur, Sunsari, Morang, Siraha, Baglung, Gulmi, Kapilbastu, Pyuthan, Makwanpur, Dhading, Dang, Doti, Baitadi, Surkhet, Sankhuwasabha, Gorkha, Sindhuli, and Kavre.
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	Expenditure: Around NRs 363700/- ; Estimation: Needs to be confirmed by Multi Year Planning and Budgeting.
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	<ul style="list-style-type: none"> • Engagement in Nepal Health Sector Programme (NHSP)-III to promote WASH issues and preventive health care to which WASH is critical. • Finalization of Water Quality Surveillance guideline and its establishment in Nepal • Active engagement in Environment Health Taskforce • Ensure Hygiene promotion activities in Expanded Programme Immunization program • Ensure WASH component in Community Based-Integrated Management of Childhood Illness and Community Based-Neonatal Care Package • Introduction of WASH indicator in HMIS reporting tool • Ensuring WASH facilities in Birthing Center establishment • Coordinate with National Health Education Information and Communication Centre (NHEICC) in relation to WASH work • Engagement in Multi-sector Nutritional Plan 2013-2017 • Strengthen cross-sectoral collaboration and coordination between Health and WASH sector

<p>How can AIN HTG Contribute to effective health sector strategy implementation?</p>	<p>Strategic engagement and policy support in any health interventions. Ensure collective support both technical and financial to health sector. Close and effective coordination with government particularly with Health sector on “WASH in Health” initiatives. Strong linkages and coordination among organizations working in Health sector and other sector related to health directly/ indirectly. Regular meeting, lobbying to prioritize health sector strategies based on current epidemiological transition.</p>
<p>Documents, Manuals, Research Reports and other papers produced by the organization</p>	<p>Country Strategy (2010-2015); Dataset: District and municipal wise ranking according to access to sanitation, Health and WASH; The state of school sanitation in Nepal; ODF toolkit, Menstrual Hygiene Matters, Menstrual hygiene in South Asia- A neglected issue for WASH (water, sanitation and hygiene) programmes; Access to water, sanitation and hygiene for people living with HIV and AIDS: A cross sectional study in Nepal; Water quality standards and testing policy; Construction of ecological sanitation latrine; Rain water harvesting for recharging shallow ground water; Water source conflict in Nepal: A right to water perspective</p>

Organization Information	
Name of Organization	World Neighbors
Address/ Telephone	62 Docha Marg, Baluwatar, Kathmandu, Nepal Tel: 977 – 1 - 4417272
Contact Person/ Designation	Ms. Srijana Karki Thapa Area Representative for South Asia
Email	infoasia@wn.org
Major Health Program Focus	Community and Reproductive Health
Program Components	Public Health; Community Health; Reproductive Health (Primary Health, Safe Motherhood, Pre / Ante natal health care , family planning, food safety / nutrition, health education services, capacity building of health care personnel and institution, drinking water schemes, sanitation, construction of water sealed toilets, respiratory diseases, Urinary Tract Infection, Sexually Transmitted Infection)
Implementation Approach	Partnership with community, partner NGOs, local line agencies; Awareness raising; Capacity building at different levels; Networking; Service Delivery; Advocacy; Volunteerism ; Local ownership
Activity Details	<ul style="list-style-type: none"> • Door to Door visits to disseminate information as well as health services; • General and Reproductive health services through local health clinics and hospitals operating under the leadership of partner NGOs; • Strengthening communities' capacity to identify, analyze and solve health problems themselves; • Health Camps; • Awareness sessions on health related various issues pertaining to community and women including Nutrition, hygienic practices and HIV/AIDS • Support in construction of water sealed toilets • Support in awareness, construction, maintenance of drinking water schemes
Partners	Baudha Bahunpatii Pariwar (BBPP); Ecology, Agriculture and Rural Development society (ECARDS) and Women Group Coordination Committee (WGCC)
Geographical Coverage (District and VDC coverage)	Sindhupalchok (8 VDCs); Kavre (6 VDCs); Chitwan (7 VDCs) and Dolkha (4 VDCs)
Budget (Expenditure) for Health Sector 2013	NPR 1,085,877.55

Estimated Budget for Health Sector 2014	NPR 1,401,284.22
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	<ul style="list-style-type: none"> • Safe abortion, Safe delivery, awareness and treatment (HIV/AIDS), access of reliable, efficient and affordable health services to rural women and other poor, marginalized and excluded people • Entitlement of government paid allowance to all the women for delivering in any birthing centers and not only to women delivering in governmental birthing centers (in case of rural areas)
How can AIN HTG Contribute to effective health sector strategy implementation?	By engaging with concerned government ministries, departments to advocate for pro-poor health policies which allow poor people including women, marginalized groups, to have access to regular, reliable and affordable health services(both community and reproductive)
Documents, Manuals, Research Reports and other papers produced by the organization	Annual Report; Brochures; Compilation of Success Stories; Thematic Flyers; Statement of Capability and Experience

Organization Information	
Name of Organization	World Vision International Nepal
Address/ Telephone	Jhamsikhel, Lalitpur – 3, GPO Box: 21969, Kathmandu, Nepal Tel: 977-1-5013570/5547177, Email: info_nepal@wvi.org http://nepal.wvasiapacific.org
Contact Person/ Designation	Shanti Upadhyaya National Specialist - MCHN
Email	Shanti_upadhyaya@wvi.org
Major Health Program Focus	Improved nutritional status of U5 children Increased access to essential health services among children and their caregivers Improved childhood illness prevention and management Improved sanitation and hygiene situation in community
Program Components	Maternal Child Health and Nutrition (MCHN) Water Sanitation and Hygiene (WASH)
Implementation Approach	Coordination with government at different level Partnership with communities, local government and local NGO
Activity Details	<ul style="list-style-type: none"> • Raising awareness/education to families, particularly mothers/caregivers, husband and in-laws but also adolescents in schools and child clubs • Promoting antenatal/Post-natal care, delivery by skilled birth attendants, micronutrients and nutritious diets to pregnant and lactating women and reducing workload. • Promotion of birthing centers and skilled birth attendants. • Positive Deviance Hearth program • Support to outreach clinics and community to strengthen growth monitoring of children under the age of 5. • Identify cases of malnutrition in communities and support local level health center to refer those children to district level rehabilitation centers. • Capacity-building of staff and community health workers about key child health issues. • Awareness raising of key stakeholders on prevention and household management of diarrhea and pneumonia • Awareness to community on government provision and services and strengthening coordination with government and other stakeholders in promoting access to health services at local health facilities. • Local level advocacy to strengthen existing local level health system. • Support for ODF (Open Defecation Free) declaration.

Partners	<p>World Vision International Nepal works with community and local NGO at the impact area (Area Development Program). List of partner NGO is as follows:</p> <ol style="list-style-type: none"> 1. Humanitarians Trust for Children Nepal (HTC Nepal) 2. Society for Youth Activity (SOYA) 3. Terai Development Forum Nepal, Bhairahwa, Rupandehi 4. Siddartha Samudayik Samaj, Bhairahawa, Rupandehi 5. Center for Equal Access Development (CEAD) Nepal 6. Development Group Nepal (DGN) 7. Social Awareness and Development Academy (SAADA) Nepal 8. Ekata Samaj , Shreepur 9. Nepal National Dalit Social Welfare Organization, Kailali 10. KMC 15 ward CDC 11. Center for Integrated Urban Development (CIUD) 12. Rural Institution For Com. Development (RICOD) 13. Women Self-Help 14. Disable Protection Society 15. Dalit Welfare Organization 16. Water Environment and Life (WEL) 17. Youth Creation for Fullness of Life (Youth Creation) 18. Peace Society Centre (PESOC) , Udayapur 19. Human Rights and Environment Development Centre 20. Social access development and yeoman service for awareness legalised center Nepal 21. Welfare Association for Children Tikapur(WACT) 22. Human Right and Environment Development Center.
Geographical Coverage (District and VDC coverage)	Kathmanu (4 ward of KMC and 3 VDC), Lalitpur (8 VDC), Bhaktapur (10 VDC), Kaski, Morang, Sunsari (6 VDC), Jumla(9 VDC), Lamjung (9 VDC), Butwal (8 VDC) , Kailali(15 VDC) , Doti (14 VDC), Udayapur (13 VDC), Achham (15 VDC) Sindhuli (8 VDC),
Budget (Expenditure) for Health Sector 2013 Estimated Budget for Health Sector 2014	<p>Expenditure for health sector in 2013: WASH: NPR. 18837418 MCHN: NPR. 33670951 For 2014 budget yet to be finalized.</p>
Advocacy Issues in Health supporting to promote Quality Health Program of the Government	Reducing Child Mortality through strengthening child health programs (Child Health Now Campaign)
How can AIN HTG Contribute to effective health sector strategy implementation?	<ul style="list-style-type: none"> • Information sharing and dissemination among the organizations. • Capacity building of local NGO. • Advocacy for strengthening existing health system.
Documents, Manuals, Research Reports and other papers produced by the organization	BCC materials on maternal child health and nutrition, Child marriage in Nepal research report, global manual on MCHN 7-11 approach,