

# **A Mapping of INGOs Contributing to Health Sector in Nepal**

**Effort towards reaching MDGs and NHSP II**



**Association of International NGOs in Nepal, AIN**

**2011**

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Ramshahpath, Kathmandu  
Nepal

Date: 15. September. 2011

## Message

It is my pleasure to note that the Association of International Non-Governmental Organization (AIN), since its formation in 1996, has collaborated with Ministry of Health and Population (MoHP). AIN has made remarkable contribution to health sector by providing technical assistance for different health sector programmes which has been prioritized by the sector.

The GoN, MoHP, has developed the Nepal Health Sector Program-II (2011-2015) and AIN been an active member to develop this national document through various thematic group. Active involvement of AIN Health Working Group members in health sector improvement and the work AIN members in various essential components of health including HIV/AIDS, Child Health, Nutrition, WASH, Family Planning, National Immunization Programme are noteworthy.

I hope mapping of the health resources and technical expertise of INGO working in Nepal would create a synergy among the organization and also with MoHP to meet health related MDG by 2015.

I would like to thank all who were involved in preparation and publication of this mapping.

Dr. Praveen Mishra

Secretary

Ministry of Health and Population

## Foreword by AIN Chairperson

I am pleased to introduce the report on **“Mapping of INGOs Contributing to Health Sector in Nepal: Effort towards reaching MDGs and NHSP II”**, prepared by Association of International NGOs in Nepal, AIN.

The AIN with its stronghold of nearly hundred member INGOs promotes mutual understanding, exchange of information and sharing experiences and learning of member organisations' work in Nepal for reinforcing collaboration and coordination. It gives me immense pleasure to mention that almost half of the AIN Members work in the health sector.

This compilation presents an up-to-date mapping of INGOs who have contributed in the health sector depicting program areas, components of successful interventions, financial support along with the districts the INGOs have covered. Despite of several efforts for the improvement in public health aspects in the country, many lapses are seen in the health support system across the regions. Thus there is an urgent need of efficient planning and launching effective health sector strategies and programs to be implemented at all levels. Together, we need to reach out and accomplish more!

We hope that this publication will be a step forward in helping to deal successfully with the health challenges in Nepal and those to come. I would like to heartily appreciate all the members, Health Working Group Coordinator Dr. Ashish K.C. and Ms. Reshma Shrestha for their kind cooperation and commendable effort in publishing this useful compilation. This report is expected to serve as a handy advocacy tool for outlining health services and interventions. We encourage the practitioners and professional engaged in the public health issues to benefit from this report in bringing out positive changes in people's lives. The intent is to map out AIN's Health Programme that will provide rich information and learning of the INGOs in Nepal.



With Best Compliments

**Achyut Luitel**

Chairperson AIN

## Message from the Health Working Group Coordinator

As Nepal ushers into a new paradigm of socio-economic transformation through the constitutional drafting process to ensure and institutionalize the right for health to all, the International Non-Government Organisation has pledged to support the state's vision-health for all. The Association of International NGOs with its core of 97 members have come together to promote mutual understanding and experience sharing such that a catalytic investment takes place. Since its inception in 2007, the AIN Health Working Group (HWG) has been quite active as a responsive advocate for health within all the AIN members, recommending them on best practices and models on public health policies and thus establishing synergies in the health efforts, minimizing unnecessary duplication and overlapping.

The Government of Nepal has impressively recognized the role of NGO and Civil Society Organisation to accomplish the objectives of the Nepal Health Sector Program II 2010-2015. The AIN HWG is keen to go hand in hand with the Government of Nepal to achieve the targets.

As a continual effort to showcase and document the amount of technical and financial resource invested by the AIN members in health and nutrition, through the Mapping of INGOs contributing to Health Sector in Nepal in 2009. This report is the second in line to map the contribution of INGOs working in Health.

I would like to take this opportunity to thank AIN Steering Committee Members, Health Working Group Members, Immediate Past Coordinator Mr. Om Gautam and AIN Secretariat Program Coordinator Ms. Reshma Shrestha for their contributory support to make this effort successful.



**Dr. Ashish K.C.**

Health Working Group Coordinator

2011

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<b>Organisation Information</b>	ActionAid is an international anti-poverty agency whose aim is to fight poverty worldwide. It adopts a human rights-based approach to development and social justice initiatives across the 42 countries it works in Asia, Africa, Australia, Europe and the Americas. ActionAid is committed to improving the quality of life of the poor and excluded people so that they can live a life of dignity.
<b>Name of Organisation</b>	<b>ActionAid International Nepal (AAIN)</b>
<b>Address / Telephone</b>	Apsara-Marg, Lazimpat, Kathmandu, Nepal. Tel: 977-1-4436477
<b>Contact Person / Designation</b>	<b>Mona Sherpa</b> Acting Team Leader- Policy and thematic support team/ Women's rights theme leader
<b>Email</b>	mona.sherpa@actionaid.org
<b>Major Health Program Focus</b>	Health services promotion and prevention.
<b>Program Components</b>	Focused to Reproductive Health and Safe Motherhood.
<b>Implementation Approach</b>	Community group and Reflect circle mobilization with coordination and interaction for accountability.
<b>Activity Details</b>	<ul style="list-style-type: none"> <li>• Orientation to right holders on free health policy;</li> <li>• Interaction between right holders and service providers on health rights issues;</li> <li>• Lobbying for Social audit and Public hearing in health sector;</li> <li>• Advocacy for allocation of budget for health services from VDC and DDC;</li> <li>• Establishment and mobilization of emergency fund to ensure decision making of pregnant women.</li> </ul>
<b>Partners</b>	AAIN does its health work through its Local Rights Program (LRP) at various districts and some of the partners are: DJKYC, Siraha, SODEP, DSS, MBMAN, NBS, Chelibeti Club, NESPEC, Deurali Society and DAS, MSN, NAF, ECARDS, HURADEC, DYC, AYC, SC, CWES, VDRC, MMBKS, ISDF, RDC, JJA, ENPRED, SEPH, HNN, NMES, BCDO, EDC, SSD, BSS, RDN, CSG, RDN, HRC, PW, RKJS, KDB, BASE, BG, NMSBCK, CWD, DWO, NPI, HURON, HR, SEED, BCD, SEDA, RDGP, SSSDC, SAHAJ, MAHURIH, JASC, KIDC, RL, SRDCN, WWA and CRM.
<b>Geographical Coverage (District and VDC coverage)</b>	350 VDCs and 6 municipalities of 30 district (Siraha, Dhanusha, Udayapur, Morang, Jhapa, Tehrathum, Rasuwa, Dolakha, Parsa, Kaski, Nawalparasi, Chitwan, Bara, Myagdi, Parbat, Kathmandu, Lalitpur, Bhaktapur, Baitadi, Doti, Kanchanpur, Kailali, Bajura, Bardiya, Banke, Dang, Jumla, Kapilvastu, Rupandehi, Palpa)

<b>Budget for Health Sector 2011</b>	Around NRs. 4,500,000/-
<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	<ul style="list-style-type: none"> <li>• Advocacy and Campaign for enforcement of free medicines and health services to increase the access of right holders.</li> <li>• Making HFMC and monitoring committee accountable and functioning.</li> <li>• Safe motherhood and women’s reproductive health.</li> </ul>
<b>How can AIN HWG Contribute to effective health sector strategy implementation?</b>	<ul style="list-style-type: none"> <li>• Orientation and dissemination of health policies in the community to increase the knowledge, skill and practice.</li> <li>• Advocacy to improve health governance and also for the proper functioning of HMC.</li> <li>• Bring all agencies together to avoid duplication on health work and also to facilitate to bring all CSOs together.</li> </ul>
<b>Documents, Manuals, Research Reports and other papers produced by the organisation</b>	<ul style="list-style-type: none"> <li>• Facilitators Guide book on health for REFLECT Participants</li> <li>• Action Research for policy brief about access to reproductive health facilities by Muslim Women.</li> </ul>



<b>Organisation Information</b>	<p>The Adventist Development and Relief Agency (ADRA) is a global humanitarian of the Seventh–Day Adventist Church that demonstrates God’s love and compassion.</p> <p>ADRA works with people in poverty and distress to create positive change and justness through empowering partnerships and responsible action.</p>
<b>Name of Organisation</b>	<b>ADRA Nepal</b>
<b>Address / Telephone</b>	PO Box: 977-1-5555913/914, Fax: 977-1-5554251
<b>Contact Person / Designation</b>	<b>Simon Lewis</b> Country Director
<b>Email</b>	simon.lewis@adranepal.org
<b>Major Health Program Focus</b>	Reproductive Health
<b>Program Components</b>	<ul style="list-style-type: none"> <li>• Safe motherhood</li> <li>• SGBV</li> <li>• VCT</li> <li>• Screening of Uterine Prolapse (UP)</li> <li>• UP surgery</li> <li>• Health Education</li> </ul>
<b>Implementation Approach</b>	<ul style="list-style-type: none"> <li>• Coordination and collaboration with GoN Health program and partnership VDC of mid and far western region</li> </ul>
<b>Activity Details</b>	<ul style="list-style-type: none"> <li>• Treatment and counseling of general ailments</li> <li>• Antenatal Care (ANC) and Prenatal Care (PNC) check-up and treatment</li> <li>• Symptomatic Treatment of STI/RTIs and counseling</li> <li>• Basic diagnostic laboratory services</li> <li>• Family planning services including counseling</li> <li>• Screening of uterus prolapse, insertion and removal of ring pessary, and referral for surgery as detailed in scope of work and as appropriate</li> <li>• Surgical treatment of UP</li> <li>• Identification of suspected fistula</li> <li>• ASRH services including counseling</li> <li>• Health and nutrition education and counseling</li> <li>• Provide screening, counseling and referral services to SGBV victims</li> </ul>

	<ul style="list-style-type: none"> <li>• Provide voluntary confidential counseling and testing services for HIV &amp; AIDS and treatment of STI through syndromic approach</li> <li>• Integrated Education and Communication (IEC) and BCC on key topics</li> <li>• Onsite coaching to public sector service providers.</li> </ul>
<b>Partners</b>	<ul style="list-style-type: none"> <li>• District Health Offices/District Development Offices/Women and Children Development Offices</li> <li>• Lord Buddha Academy Institute Pvt. Ltd., Nepalgunj Medical College Teaching Hospital, Kohalpur Banke</li> <li>• HDCS, Team Hospital Dadeldhura</li> <li>• Biratnagar Hospital and Research Center Pvt. Ltd., Biratnagar</li> </ul>
<b>Geographical Coverage (District and VDC coverage)</b>	<p>Eastern Region: Saptari/Siraha                      Central Region: Mahottari/Dhanusha/Rautahat                      Western Region Kapilvastu                      Mid western Region: Dang/Bardia/Mugu                      Far western Region: Baitadi/Darchula/Dadeldhura/Achham/Bajura/Kanchanpur</p>
<b>Budget for Health Sector 2011</b>	US\$: 1,069,069
<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	<ul style="list-style-type: none"> <li>- Prevention and Treatment of Uterine Prolapse</li> <li>- Health Education on Reproductive Health</li> <li>- Onsite Coaching to the Local Health Service Providers</li> <li>- Free mobile RH camps with free medicine distribution and laboratory services</li> </ul>
<b>How can AIN HWG Contribute to effective health sector strategy implementation?</b>	<ul style="list-style-type: none"> <li>- Lobbying with donors to seek health findings</li> <li>- Coordinating with GoN/Partners and Donors</li> </ul>
<b>Documents, Manuals, Research Reports and other papers produced by the organisation</b>	<ul style="list-style-type: none"> <li>- Peer Education Manual (Nepali)</li> <li>- Final report on Mobile Health Projects</li> </ul>

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>The Britain Nepal Medical Trust (BNMT)</b>
<b>Address / Telephone</b>	PO Box: 20564, Lazimpat, Kathmandu, Nepal
<b>Contact Person/ Designation</b>	<b>Dr. Bhanu B. Niraula and Sadhana Shrestha</b> Co-Country Directors
<b>Email</b>	cd_po@bnmt.org.np, cd_era@bnmt.org.np
<b>Major Health Program Focus</b>	
<b>Program Components</b>	Tuberculosis (TB), Child Health, Livelihood & Gender Based Violence, Primary & Public Health, Community Health Assistance, Food Safety/Nutrition, Malaria, Infection Control, Support for School Health & Nutrition Programme, Capacity Building of the Health Care Personnel & Institutions, Environment Health/Drinking water/Sanitation, Advocacy Issues in Health: Essential Health Care for the disadvantaged groups, Safe Motherhood, HIV/AIDS & Other priority issues that directly affects the disadvantaged communities.
<b>Implementation Approach</b>	Partnership and Participatory
<b>Activity Details</b>	
<b>Partners</b>	Government Line Agencies, Private Companies, National and Local NGOs and CBOs
<b>Geographical Coverage (District and VDC coverage)</b>	More than 35 districts across all development regions
<b>Budget for Health Sector 2011</b>	Approx. NRs. 300 million
<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	Advocate in issues related with HRH Strengthen the capacity of health service provider Advocate and lobby issues that have a positive impact on the health and livelihood of marginalized communities
<b>How can AIN HWG Contribute to effective health sector strategy implementation?</b>	By organizing regular meeting, By facilitating coordination between Department of Health and Member organisation, Seeking funding and sharing learning and developing allies for advocating Health policies
<b>Documents, Manuals, Research Reports and other papers produced by the organisation</b>	Progress Reports, Bi-annual report and KAP Survey

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>CARE International Nepal</b>
<b>Address/Telephone</b>	PO Box: 1661, Krishna Galli, Pulchowk, Lalitpur
<b>Contact Person/ Designation</b>	<b>Nirmala Sharma</b> Health Program Coordinator
<b>Email</b>	nirmala@np.care.org
<b>Major Health Program Focus</b>	MNH (as per MOHP's plan in red Book), SRH, HIV and AIDS, governance, equity, inclusion, accountability
<b>Program Components</b>	Maternal health, Child health, and Neonatal health; Reproductive health, HIV and AIDS, prevention, care, support. In addition to technical health support to MOHP, our health programs revolve around Health governance, gender & social inclusion, women empowerment. Number new models, techniques are being tried out under various components of MNCH program.
<b>Implementation Approach</b>	We use Rights Based Approach, and community mobilization (SATH) through FCHVs, Mother's Groups. In HIV and AIDS program, we use Peer Educator and "five friends" approach.
<b>Activity Details</b>	Maternal Health: BPP, Institutional deliveries, misoprostal implementation, upgrading and strengthening birthing centers Neonatal Health: Te MOHP package of CB-NCP Child Health: MOHP package of CB-IMCI RH: prevention and treatment of Uterine prolapsed, Family planning, etc. HIV and AIDS: Awareness creation using Peer Educators, CHBC, PLHIV's livelihood support through income generation
<b>Partners</b>	Primary Partners: D/PHOs, RHD on all technical health interventions NGOs on community based activities including women empowerment, GESI, community mobilization One NGO per district/project MNH project: Source Nepal/Doti FAYA Nepal/Kailali HIV and AIDS program: NNDSW/Dadeldhura NRCS/Doti FAYA Nepal/Kailali Samajik Samanata Abhiyan, Kanchanpur Gangotri Rural development Center/Achham PEACEWIN/Bajura Saiphali Youth Club/Bajhang

<b>Geographical Coverage (District and VDC coverage)</b>	MNH Program: Doti and Kailali: full coverage HIV and AIDS: Bajhang, Bajura, Achham, Doti, Dadeldhura, Kailali Kanchanpur: Altogether 70 VDCs as direct program areas
<b>Budget for Health Sector 2011</b>	Need to obtain from Finance Department
<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	Strengthening supply side: adequate medicine, human resource, and equipment supplies especially for the delivery, neonatal care PLHIV's nutrition shortage, cost of PLHIV's ART (Including Transportation to ART center), employment generation for Excluded groups including PLHIV
<b>How can AIN HWG Contribute to effective health sector strategy implementation?</b>	By promoting member organisation's proven models of quality service delivery, and community's increased demand of health services, minimizing the government's dependency on donors for major/national programs such as CB-NCP, Misoprostol and essential supplies in Health Facilities
<b>Documents, Manuals, Research Reports and other papers produced by the organisation</b>	Project's baseline, Mid term, Final evaluation (MNCH, HIV/AIDS) Operation researches on various topics (MNH) Case story publication (MNH) Video documentary (RH/Uterus prolapsed) Training manuals in series (HIV AIDS) Vulnerability study report (HIV and AIDS) Video documentary on Adolescent's RH Photo Book on RH, Water and Sanitation Geeti cassette on immunization (Polio, MNH)

<b>Organisation Information</b>	CBM South Asia Regional Office, India
<b>Name of Organisation</b>	<b>Nepal Association for the Welfare of the Blind (NAWB)</b>
<b>Address / Telephone</b>	GPO Box: 3255, Central Office, Tripureshwor, Kathmandu Tel: 977-1-4260583
<b>Contact Person/ Designation</b>	<b>Kumar Thapa</b> Chairperson, NAWB
<b>Email</b>	nawbnepal@gmail.com
<b>Major Health Program Focus</b>	Eye screen/low vision
<b>Program Components</b>	Social Rehabilitation, Education Rehabilitation, Economic Rehabilitation, Medical Rehabilitation
<b>Implementation Approach</b>	Community Based/co-ordination with community or local NGO
<b>Activity Details</b>	CBR Program, Integrated Education, Income Generating Program, Low Vision, DAISY Talking/Braille Books Production, National Braille Library etc.
<b>Partners</b>	CBM, Germany; THKA, Japan, TRIFC, USA
<b>Geographical Coverage (District and VDC coverage)</b>	14 Districts (Sunsari, Morang, Jhapa, Bara, Kavre, Kathmandu, Lalitpur, Bhaktapur, Tanahun, Syangja, Kaski, Siraha, Dang, Kailali)
<b>Budget for Health Sector 2011</b>	NRs. 110,000/-
<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	Meeting with health sector personalities for quality program development.
<b>How can AIN HWG Contribute to effective health sector strategy implementation?</b>	Networking, Workshop, Training, Meeting, Program Supporting, Financial Support etc.
<b>Documents, Manuals, Research Reports and other papers produced by the organisation</b>	Annually progress report

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>CCS Italia centro cooperazione sviluppo onlus</b>
<b>Address / Telephone</b>	Chundevi Marg, Kathmandu, Nepal. Tel: 977-1-4720048
<b>Contact Person/ Designation</b>	<b>Chanda Rai</b> Country Director
<b>Email</b>	chanda.raai@ccsitaly.org
<b>Major Health Program Focus</b>	
<b>Program Components</b>	School Health and Nutrition
<b>Implementation Approach</b>	Partnership with Local NGO and Coordination with government authority from centre to grass root level
<b>Activity Details</b>	School Health and Nutrition Services, Healthful School Environment, Life Skills Based and Behavior Centre Health Education and Community Support and Policy Environment
<b>Partners</b>	Centre for Development and Cooperation Nepal, Educational Resource Centre and Development Nepal, Nepal Little Flower Society, Prisoners Assistance Nepal, Karuna Bhawan, Peoples Dental College and Hospital
<b>Geographical Coverage (District and VDC coverage)</b>	Kavre District-7 VDCs, Chitwan-2 VDCs, Makwanpur-3 VDCs and Kathmandu Valley
<b>Budget for Health Sector 2011</b>	€ 50,000
<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	CCS is involved very much on advocacy work on school health, HIV AIDS through CCM, AIN and working in different task force formed by MOHP
<b>How can AIN HWG Contribute to effective health sector strategy implementation?</b>	AIN should work closely with MOHP. AIN HTG needs to be more active in advocacy, Policy level work in health sector
<b>Documents, Manuals, Research Reports and other papers produced by the organisation</b>	KPC Survey, Mid-term review, Annual Report, School Health & Nutrition Policy, Leaflet on oral Health

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>CPCS International Child Protection Centers and Services International</b>
<b>Address / Telephone</b>	Baluwatar, Kathmandu, Nepal. Tel: 977-1-6224660/4414394
<b>Contact Person/ Designation</b>	<b>Inge Bracke/Arjun Mohan Bhattarai</b>
<b>Email</b>	cpcs_int@yahoo.com, cpcs_nepal@yahoo.com, ingebracke@hotmail.com
<b>Major Health Program Focus</b>	General health and hygiene for street children and children at risk
<b>Program Components</b>	General health check up, Hospital referral, Prevention from HIV Hepatitis, TB Medication and Treatment for cut, Injuries Burn, Fractures and Chest Infection, ENT etc. Ambulance Services, General Health check up program in outreach areas
<b>Implementation Approach</b>	Street Field Programs, Rehabilitation Center, Day Care Center, Clinic and Emergency Line for Street Children
<b>Activity Details</b>	
<b>Partners</b>	Chabahil Pashupati Child Shelters (CPCS)
<b>Geographical Coverage (District and VDC coverage)</b>	Kathmandu Metropolitan City Lalitpur, Sub Metropolitan City
<b>Budget for Health Sector 2011</b>	NRs. 6 millions approx.
<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	Health awareness for children and parents in 21 districts Health awareness classes for street children
<b>How can AIN HTG Contribute to effective health sector strategy implementation?</b>	Networking with other organizations involved with healthcare services. Participating in Health Programs and activities.
<b>Documents, Manuals, Research Reports and other papers produced by the organization</b>	Research street children of Kathmandu abuses of children in Kathmandu, Children Homes in Nepal, HIV Poster, Glue Sniffing Poster, Anti-begging Campaign.



<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>CWS – Child Welfare Scheme</b>
<b>Address / Telephone</b>	Indrapuri Marg, Nagdhunga, Pokhara-8, Nepal. PO Box: 399 Tel: 061-530002
<b>Contact Person/ Designation</b>	<b>Hridaya Raj Devkota</b> Health Department Manager
<b>Email</b>	hridaya@cwsuk.org, health@cwsuk.org
<b>Major Health Program Focus</b>	Maternal & Newborn; Child & Adolescent; Public Health Priority for poor, Marginalized 'hard to reach' populations
<b>Program Components</b>	Safe Motherhood; Newborn care; Urban maternal & paediatric primary care development; Children's rights in health settings Appropriate technologies for indoor air pollution; Primary care and community level interventions Strengthening access to care; Strengthening systems and quality of care; Strengthening community level capacity for action;
<b>Implementation Approach</b>	<ul style="list-style-type: none"> <li>• Facilitating service development-not a service provider</li> <li>• Capacity builder-service delivery organisations and community/primary care level</li> <li>• Input to emerging policy level</li> </ul>
<b>Activity Details</b>	Urban and rural primary health services; clinical systems development; community services systems development; specialized services; outreach services; quality assurance, assessment and support to improving children's rights in health settings; women's groups; community mobilization and strengthening; facilitating emergency funds and emergency transport systems; monitoring and evidence support; child protection training and policy development; lobbying and advocacy
<b>Partners</b>	PHASE Nepal; CWSN; Namuna; HHES; Kanti Children's Hospital; PCCI; Currently expanding partner base for new districts
<b>Geographical Coverage (District and VDC coverage)</b>	Gorkha; Lamjung; Kaski; Rupandehi; Solukhumbu
<b>Budget for Health Sector 2011</b>	US\$ 900,000 approx.

<p><b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b></p>	<p>Urban primary health care; Promoting the implementation and realization of the UNCRC in health settings; Equity of access and practical strategies for remote areas and hard to reach populations.</p>
<p><b>How can AIN HWG Contribute to effective health sector strategy implementation?</b></p>	<p>Supporting a strengthened evidence base of effective modalities and interventions Consistent and unified approaches to advocacy and policy development Support to effective strategies for government policy implementation</p>
<p><b>Documents, Manuals, Research Reports and other papers produced by the organisation</b></p>	<p>KAP Study in context of HIV/AIDS among out-of-school street based children in Kathmandu &amp; Pokhara – CWS, UNESCO &amp; Sath Sath Community research profiles, evaluations, health needs assessment reports and baseline studies of remote or rural communities and populations in Gorkha, Solukhumbu, Kaski, Lamjung, Rupandehi.  Baseline and post intervention studies in urban poor and slum populations. Baseline and post intervention and community research profiles of rural and urban poor populations; sexual health and well being of street based and working children.</p>

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>Finnish Evangelical Lutheran Mission (FELM-NEPAL)</b>
<b>Address / Telephone</b>	Jhamsikhel, Lalitpur, Nepal. GPO Box: 8975, EPC 2250 Tel: 977-1-5529271
<b>Contact Person/ Designation</b>	<b>Markus Hemmila</b> Resident Representative
<b>Email</b>	felmnepal@felm.org, markus.hemmila@felm.org
<b>Major Health Program Focus</b>	
<b>Program Components</b>	Child Mental Health, Community Mental Health, Psychosocial Support, Primary Health Care and Community Health Program
<b>Implementation Approach</b>	FELM usually fund the project, FELM works in constant contact with its partners and monitors the project throughout the project period with midterm and final evaluations required for each project.
<b>Activity Details</b>	Teachers training on child mental health, training to Doctors and paramedical staff, psychosocial promotive materials distribution, Health awareness and strengthening local health facilities, Drinking water and sanitation activities, conduct outreach trainings, Quality antenatal and postnatal. Examination by nursing staff, Family planning counseling and services, HIV/AIDS pre and post test counseling and HIV screening test for pregnant mothers.
<b>Partners</b>	CMC-Nepal, Shanti Nepal, and Tansen Mission Hospital
<b>Geographical Coverage (District and VDC coverage)</b>	Dolakha (19), Kavre (17) and 2 Municipality, Makwanpur (6), Dhading (13), Ilam (2) & 1 Municipality, Surkhet (4), Mugu (4), Bajhang, Morang, Nawalparasi, Rupandehi, Palpa, Gulmi, Syangja, Parbat, Baglung, Gorkha, Okhaldhunga, Lalitpur (8)
<b>Budget for Health Sector 2011</b>	NRs. 25,270,274/-
<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	Decrease suffering of children and adults from stress, trauma and mental illness in selected schools and locations around Nepal, To improve health status of poor and Marginalized people.
<b>How can AIN HTG Contribute to effective health sector strategy implementation?</b>	It can help to implement program in effective way.
<b>Documents Research Reports and other papers produced by the organization</b>	Annual Progress Reports, Booklets

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>FHI 360 Nepal</b>
<b>Address / Telephone</b>	GPO Box: 8803, Gopal Bhawan, Anamika Galli, Baluwatar, Kathmandu Tel: 977-1-4437173, Fax: 977-1-4417475
<b>Contact Person/ Designation</b>	<b>Satish Raj Pandey</b> Country Director
<b>Email</b>	spandey@fhi360.org
<b>Major Health Program Focus</b>	Health, HIV and AIDS, TB, Children, Institutional Development, Surveillance and Research, Support to Policy making, Capacity Building, Infection Control in TB, Health Care Waste Management
<b>Program Components</b>	<ul style="list-style-type: none"> <li>• HIV prevention for most at risk populations (MARPs) and people living with HIV (PLHIV)</li> <li>• Care, support and treatment for PLHIV and children infected and affected by AIDS (CABA)</li> <li>• Research and surveillance</li> <li>• TB case detection among migrants and hidden, hard-to-reach, vulnerable populations and contacts through outreach and clinical services</li> <li>• Assessment of infection control in TB and development of training curriculum for and conducting training of trainers (ToT) on infection control in TB</li> <li>• Safe health care waste management through HIV Program</li> <li>• Strengthening capacity of Government of Nepal and civil society</li> <li>• Coordination and collaboration</li> </ul>
<b>Implementation Approach</b>	<ul style="list-style-type: none"> <li>• Evidence-based decision-making to guide program development and revision</li> <li>• Promotion of appropriate positive behavior change and maintenance using the abstinence, being faithful and correct and consistent condom use (ABC) approach</li> <li>• Community and peer based outreach</li> <li>• Provision of or linkages with services</li> <li>• Maximizing population coverage and impact</li> <li>• Capacity-building for long-term sustainability</li> <li>• Localizing the response</li> <li>• Coordination with all partners to maximize scale and national impact</li> <li>• Support meaningful involvement of PLHIV (MIPA) and MARPs</li> </ul>

<p><b>Activity Details</b></p>	<ul style="list-style-type: none"> <li>• Strategic behavioral communication through community and peer based outreach education, drop in center (DIC) operation, condom promotion and distribution and referral and follow up for STI diagnosis and treatment, HIV counseling and testing, care, support and treatment and other services.</li> <li>• Provision of quality integrated health services including diagnosis and treatment of sexually transmitted infection (STIs), HIV counseling and testing, essential package of health care for (PLHA)</li> <li>• Provision of community and home based care services (CHBC) to PLHA</li> <li>• Positive prevention (Positive Health, Dignity and Prevention) program among PLHA</li> <li>• Outreach with migrants and hard-to-reach and vulnerable populations and contacts for TB screening and referral</li> <li>• Identification of active TB case including contact tracing and enrollment for TB treatment</li> <li>• Carry out research and surveillance related activities</li> <li>• National support for systems development in laboratory, HIV M&amp;E, DACC strengthening, HIV surveillance system, HIV human resource development and infection control in TB</li> <li>• Capacity building activities</li> <li>• Supportive supervision and monitoring</li> <li>• Coordination and collaboration both at district and local level</li> </ul>
<p><b>Partners</b></p>	<p><b>41 partners in 30 districts</b>  <i>(along the Mahendra Highway, Pokhara, Kathmandu Valley, Achham, Doti, Surkhet, Syangja, Baglung, Kavre and Nuwakot)</i></p> <ol style="list-style-type: none"> <li>1. Association of Medical Doctors of Asia</li> <li>2. Asha Kiran Pratisthan</li> <li>3. Community Action Center</li> <li>4. Community Development Forum</li> <li>5. Community Welfare Center</li> <li>6. Child and Women Empowerment Society Nepal</li> <li>7. Chhahari Mahila Samuha</li> <li>8. Dang Plus</li> <li>9. Dharan Positive Group</li> <li>10. Dhaulagiri Positive Group</li> <li>11. Dristi Nepal</li> <li>12. Federation of Sexual and Gender Minorities</li> </ol>

	<ol style="list-style-type: none"> <li>13. Gangotri Rural Development Forum</li> <li>14. General Welfare Pratisthan</li> <li>15. Institute of Community Health</li> <li>16. International Nepal Fellowship/Paluwa</li> <li>17. Junkiri</li> <li>18. Lumbini Plus</li> <li>19. Namuna Integrated Development Council</li> <li>20. National Association of PLHA in Nepal</li> <li>21. New Era</li> <li>22. National Federation of Women Living with HIV and AIDS</li> <li>23. Naulo Ghumti</li> <li>24. Nepal National Social Welfare Association</li> <li>25. Nepal STD and AIDS Research Center</li> <li>26. Recovering Nepal</li> <li>27. Rural Development Foundation</li> <li>28. Sahara Nepal</li> <li>29. Sahavagi</li> <li>30. Sakriya Plus Nepal</li> <li>31. Sneha Samaj</li> <li>32. Social Awareness Center Nepal</li> <li>33. Society for Empowerment-Nepal</li> <li>34. Society for Positive Atmosphere and Related Support to HIV and AIDS</li> <li>35. Society for Women's Awareness in Nepal (Nari Chetana Samaj)</li> <li>36. STD/AIDS Counseling and Training Services</li> <li>37. Student Awareness Forum</li> <li>38. Syangja Support Group</li> <li>39. Thagil Social Development Association</li> <li>40. Trishuli Plus</li> <li>41. Youth Vision</li> </ol>
<b>Geographical Coverage (District and VDC coverage)</b>	<b>30 districts</b> (Kailali, Kanchanpur, Doti, Achham, Surkhet, Dang, Bardiya, Banke, Kaski, Rupandehi, Kapilvastu, Syangja, Baglung, Nawalparasi, Dhanusha, Mahottari, Sarlahi, Chitwan, Parsa, Bara, Rautahat, Kathmandu, Makwanpur, Kavre, Nuwakot, Lalitpur, Bhaktapur, Sunsari, Jhapa and Morang)
<b>Budget for Health Sector 2011</b>	US\$ 4,690,586 for FY 2011

<p><b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b></p>	<ul style="list-style-type: none"> <li>• Development and implementation of the national curriculum, guidelines and standard operating procedures as decided and approved by National Centre for STD and AIDS Control (NCASC). This includes development of National HIV and AIDS Strategic Plan (2011-16), revision of HIV Laboratory, CHBC, VCT, ART, PMTCT and STI guidelines as well as contribution to National M&amp;E and Surveillance Plan</li> <li>• Implementation of Community Based Pilot Project in Achham moving forward to replicate in other districts</li> <li>• Reducing stigma and discrimination of the marginalized and vulnerable people who are infected and affected by HIV and AIDS</li> <li>• National training curriculum development on infection control for TB</li> </ul>
<p><b>How can AIN HWG Contribute to effective health sector strategy implementation?</b></p>	<ul style="list-style-type: none"> <li>• Planning and implementing programs through collaborative approach to support government priorities, Exchanging experience, information and organisational learning</li> <li>• Exchanging best practices across AIN members</li> </ul>
<p><b>Documents, Manuals, Research Reports and other papers produced by the organisation</b></p>	<ul style="list-style-type: none"> <li>• Stigma and discrimination reduction toolkit</li> <li>• Training manual on outreach and peer education</li> <li>• Training manual on drop-in center operation</li> <li>• Training manual on community mobilization for HIV prevention, care, support and treatment</li> <li>• Cross sector HIV and AIDS training manual for USAID partners</li> <li>• Training manual on negotiation skills</li> <li>• Training manual on positive prevention</li> <li>• Treatment literacy training manual</li> <li>• Guidelines and standard operating procedures for HIV prevention, positive prevention, HIV counseling and testing, sexually transmitted infection management, essential package of care and community and home based care</li> <li>• Integrated bio-behavioral surveillance (IBBS) survey among female sex workers, truckers, migrants and spouse of migrants, injecting drug users reports</li> <li>• Information, education and communication (IEC materials) <ul style="list-style-type: none"> <li>- Toolkits for outreach educators, community mobilizers including various games</li> <li>- Bihaniko Aagaman (photo novella)</li> <li>- Song of hope music CD and music video (Sayapatri and Manis Sanga Manis Mile)</li> </ul> </li> </ul>

- Video films (Left Right, Aasha, Janepachhi, Maya Lagchha, Guru ji ra Antare, Jeevan ko Geet, Jeevanko Uphar)
- Care and support booklet series
- HIV prevention, care, support and treatment related 13 different types of brochures
- Materials for children (play group, coloring book, you are special booklet)
- Love garden
- Litmus test
- Risk assessment cards
- HIV & AIDS flip chart
- Puzzle
- Success story booklet (part 1-6)
- CHBC photo journal (1-4)
- Katha vitraka Kathaharu (photo journal and video documentation)
- Working in Partnership: Family Health International Implementing Agencies in Nepal (Jan 1994-Dec 2004)
- FHI Interventions: Initiating Best Practices, Providing Comprehensive Services and Monitoring Impact in Nepal (Jan 1994-Dec 2004)
- FHI Responds: Expanding Prevention, Care and Mitigation Programs during a Decade of Work in Nepal (Jan 1994-Dec 2004)
- Attitudes and Beliefs Towards People Living with HIV/AIDS - Nepal (2004) (Summary) (English and Nepali)
- Women and HIV/AIDS: Experiences and Consequences of Stigma and Discrimination-Nepal 2004 (Summary in English and Nepali)
- Stigma & Discrimination Study in Nepal: Community Attitudes & the Forms & Consequences for People Living with HIV/AIDS 2004 (Summary in English and Nepali and Full report)
- Assessment and Recommendation for National Rollout Plan, HIV/AIDS Treatment care and support in Nepal, October 2004-September 2005



<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>Fida International (Health related work done by partner NGO Rescue Nepal)</b>
<b>Address / Telephone</b>	Royal Thai Embassy Road, Maharajgunj, Bansbari, Kathmandu, Nepal Tel: 977-1-4378788
<b>Contact Person/ Designation</b>	<b>Päivi Leppänen CR</b>
<b>Email</b>	paivi.leppanen@fidadevelopment.fi
<b>Major Health Program Focus</b>	<ul style="list-style-type: none"> <li>a. Health Screening Camps in working area communities</li> <li>b. Awareness on preventive health care and good hygiene practices</li> </ul>
<b>Program Components</b>	Holistic Community Development -project/Health Services-component
<b>Implementation Approach</b>	<ul style="list-style-type: none"> <li>a. Being acknowledged, networking and cooperating with DPHOS and other NGOs working in same sector</li> <li>b. Work done through CBOs</li> <li>c. In services priority to people living with HIV, disability, elderly people</li> <li>d. Organize one day health camps</li> <li>e. Mobilize qualified health personnel to run the health camps</li> <li>f. Get volunteers involved in organizing health camps</li> <li>g. Community contribution NRP 35 per person/screening</li> </ul>
<b>Activity Details</b>	<ul style="list-style-type: none"> <li>a. General health check up by a doctor</li> <li>b. Lab tests</li> <li>c. General medicine distribution</li> <li>d. Counsel for more medical care (if needed)</li> <li>e. Teaching on preventive health care and good hygiene</li> </ul>
<b>Partners</b>	<ul style="list-style-type: none"> <li>a. Rescue Nepal</li> <li>b. Local CBOs</li> </ul>
<b>Geographical Coverage (District and VDC coverage)</b>	<ul style="list-style-type: none"> <li>a. 18 districts (Achham, Kanchanpur, Kailali, Dailekh, Surkhet, Bardiya, Rukum, Salyan, Dang, Kaski, Lamjung, Rupandehi, Makwanpur, Dhading, Chitwan, Sunsari, Okhaldhunga, Jhapa)</li> <li>b. 36 VDCs</li> <li>c. 36 communities (each with around 100 families)</li> </ul>
<b>Budget for Health Sector 2011</b>	NRs. 1,080,000/- for 36 Health Screening camps

<p><b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b></p>	<p>People don't know about the health facilities that have been provided by the government nor about the responsibilities of the government concerning the basic health care services. In some cases, the health officials are also ignoring their responsibilities. E.g. medicines are not distributed on time but they are thrown to garbage since they got expired. At the same time people complain they didn't get medicines, not even a single tablet of Paracetamol for fever. Another problem is that people are not able to meet the health officials even at office time.</p> <p>All above mentioned areas could be advocacy issues that could support to Government's Quality Health Program.</p>
<p><b>How can AIN HWG Contribute to effective health sector strategy implementation?</b></p>	<p>Maybe AIN could help the I/NGOs working in health sector in certain area to know about each other.</p> <p>Also, AIN could develop/distribute a general Health Camp form which will help all the actors organizing Health Camps to follow certain standards.</p>
<p><b>Documents, Manuals, Research Reports and other papers produced by the organisation</b></p>	<p>No documents have been produced.</p>

<b>Organisation Information</b>	German Nepalese Help Association (GNHA) is a non-profitable social and charitable organisation working as an International Non-Governmental Organisation (INGO) in Nepal.
<b>Name of Organisation</b>	<b>German Nepalese Help Association</b>
<b>Address / Telephone</b>	104 Jit Jung Marga, Thapathali Height, Kathmandu, Nepal
<b>Contact Person/ Designation</b>	<b>Kamal Rupakheti / Country Representative</b> <b>Kedar Tamang / Program Coordinator</b>
<b>Email</b>	gnhanepal@wlink.com.np/dispensarydnh@gmail.com
<b>Major Health Program Focus</b>	Medical equipment supply to Community & Government Hospitals Direct medical supplies to poor and needy patients
<b>Program Components</b>	Dispensary unit for poor patients Medical equipment supplies
<b>Implementation Approach</b>	Support upon request of Government Hospitals Scrutinizing poorest of the poor for medical supplies
<b>Activity Details</b>	<ul style="list-style-type: none"> <li>• Running free Dispensary at Bir Hospital</li> <li>• Equipment supplies for Nephrology Unit Bir Hospital</li> <li>• Equipment supplies for ENT Unit Bir Hospital</li> <li>• Equipment supplies for Dhulikhel Hospital, Dhulikhel</li> <li>• Equipment supplies for Patan Hospital, Lalitpur</li> <li>• Equipment supplies for TUTH Teaching Hospital</li> <li>• Equipment supplies for Western Regional Hospital, Pokhara</li> <li>• Charity to poor patients</li> </ul>
<b>Partners</b>	Dhulikhel Hospital Patan Hospital Bir Hospital Western Regional Hospital TUTH Teaching hospital
<b>Geographical Coverage (District and VDC coverage)</b>	Kathmandu Lalitpur Kavre Kaski & all over Nepal (Through service of GNHA, Dispensary at Bir Hospital)
<b>Budget for Health Sector 2011</b>	€ 73,000

<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	No Advocacy, direct service delivery
<b>How can AIN HWG Contribute to effective health sector strategy implementation ?</b>	Collaboratively working within the framework of Government for service delivery as well as health awareness raising in the field level.
<b>Documents, Manuals, Research Reports and other papers produced by the organisation</b>	Annual Report of GNHA Dispensary

<b>Organisation Information</b>															
<b>Name of Organisation</b>	<b>Good Neighbors International</b>														
<b>Address / Telephone</b>	Mahalaxmasthan, Lalitpur, Nepal. Tel: 977-1-5538758														
<b>Contact Person/ Designation</b>	<b>Dilli Prasad Dotel</b> Admin. Manager														
<b>Email</b>	goodnn@wlink.com.np/gnnepal@gmail.com/dilli.dotel@gmail.com														
<b>Major Health Program Focus</b>															
<b>Program Components</b>	Basic Nutrition, Basic Health Care, Health Education, Health Facilities, Medical/Disability AIDs, Surgery Support, Portable Water, Toilet Installation, Housing and Environment Improvement														
<b>Implementation Approach</b>	Community Development Approach														
<b>Activity Details</b>	Feeding, Food Aid, HIV/AIDS, Other Diseases, Medical Treatment, Health Checkup, Medicine Supports to HIV/AIDs, Malarias, and others, Health Education for Child, Health Education for Adult, Construction and Expansion of Health Facilities, Medical Support, Well Development, Water Purifier Support, Repairing and Remodeling the Housing, Garbage and Disposal Management and others.														
<b>Partners</b>	Asal Chhimeki Nepal														
<b>Geographical Coverage (District and VDC coverage)</b>	<table border="0"> <tr> <td><b>Districts</b></td> <td><b>VDCs</b></td> </tr> <tr> <td>Kathmandu</td> <td>Sangla, Kavresthali, and Phutung</td> </tr> <tr> <td>Lalitpur</td> <td>Badikhel, Godawari, Chapagaun, Lele &amp; Chhampi</td> </tr> <tr> <td>Kailali</td> <td>Pathraiya, Tikapur, Durgauli, Baliya, Kotatulsipur</td> </tr> <tr> <td>Bardiya</td> <td>Daulatpur, Palbazar, Manau and Rajapur</td> </tr> <tr> <td>Mugu</td> <td>Ruga, Rowa, Jima, Kalali and Seri</td> </tr> <tr> <td>Humla</td> <td>Darma, Mimi, Shreemasta, Melchham and Kharpunath</td> </tr> </table>	<b>Districts</b>	<b>VDCs</b>	Kathmandu	Sangla, Kavresthali, and Phutung	Lalitpur	Badikhel, Godawari, Chapagaun, Lele & Chhampi	Kailali	Pathraiya, Tikapur, Durgauli, Baliya, Kotatulsipur	Bardiya	Daulatpur, Palbazar, Manau and Rajapur	Mugu	Ruga, Rowa, Jima, Kalali and Seri	Humla	Darma, Mimi, Shreemasta, Melchham and Kharpunath
<b>Districts</b>	<b>VDCs</b>														
Kathmandu	Sangla, Kavresthali, and Phutung														
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Bardiya	Daulatpur, Palbazar, Manau and Rajapur														
Mugu	Ruga, Rowa, Jima, Kalali and Seri														
Humla	Darma, Mimi, Shreemasta, Melchham and Kharpunath														
<b>Budget for Health Sector 2011</b>	US\$ 167,311														
<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	Making pre-consensus about the health habits, promoting the primary health care, and providing the necessary health care and medication; Making aware of environmental degradation and water and sanitation management.														
<b>How can AIN HWG Contribute to effective health sector strategy implementation?</b>	It can contribute as the complimentary and coordinating role for the promotion of health section while implementing health programs.														
<b>Documents, Manuals, Research Reports and other papers produced by the organisation</b>	Baseline Survey of Badikhel VDC in Lalitpur District-2006 (Focused to Health)														

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>Handicap International</b>
<b>Address / Telephone</b>	Tel: 977-1-4378482
<b>Contact Person/ Designation</b>	<b>Florent Milesi</b> Country Director
<b>Email</b>	director@hi-nepal.org
<b>Major Health Program Focus</b>	<ul style="list-style-type: none"> <li>• Physical Rehabilitation</li> <li>• Preparedness of health services to respond to major crisis</li> </ul>
<b>Program Components</b>	<ul style="list-style-type: none"> <li>• Physical Rehabilitation</li> <li>• Set up of a roster of health and rehabilitation professionals for early deployment in case of major earthquake or other crisis</li> </ul>
<b>Implementation Approach</b>	<ul style="list-style-type: none"> <li>• Consortium with WHO, Merlin and Oxfam</li> <li>• Long-term partnerships with 9 Nepali rehabilitation service providers in 4 regions of Nepal and with the National Federation of Disabled Nepal for advocacy</li> <li>• Close coordination with Ministry of Health and Population, Ministry of Women, Children and Social Welfare, Ministry of Local Development, Ministry of Peace and Reconstruction, National Planning Commission</li> </ul>
<b>Activity Details</b>	<p>Support provided to Nepali partners for:</p> <ul style="list-style-type: none"> <li>• Delivery of physical rehabilitation services at 5 physical rehabilitation centres, 3 satellites units, through mobile camps and in communities.</li> <li>• Resource mobilization for disability</li> <li>• Strengthening the rehabilitation sector at national level</li> <li>• Set-up of a roster of 80 surgeons, 80 physiotherapists, 450 nurses for early deployment to respond to major crisis</li> </ul>
<b>Partners</b>	<p>Physical rehabilitation centers</p> <ul style="list-style-type: none"> <li>• Community Based Rehabilitation, Biratnagar</li> <li>• Prerana, Sarlahi</li> <li>• Nepalgunj Medical College, Nepalgunj</li> <li>• NNSWA, Kanchanpur</li> <li>• National Disabled Fund, Kathmandu</li> </ul> <p>Satellite Units</p> <ul style="list-style-type: none"> <li>• Community Development Programme, Sindhuli</li> <li>• Human Welfare and Environmental Protection Center, Dang</li> <li>• Mid-west Regional Hospital, Surkhet</li> </ul> <p>Preparedness of health services</p> <ul style="list-style-type: none"> <li>• Army Rehabilitation Center, Kathmandu</li> </ul>

<b>Geographical Coverage (District and VDC coverage)</b>	Morang (22 VDCs), Sarlahi (44 VDCs+1 Municipality), Banke (6 VDCs), Bardiya (6), Kanchanpur (8 VDCs), Kathmandu (22+ selected wards of Metropolitan city), Lalitpur (2 VDC+ selected wards of Sub-metropolitan city), Bhaktapur (selected wards of sub-metropolitan city), Sindhuli (23 VDCs + 1 Municipality), Dang (11 VDCs), Surkhet (29 VDCs + 1 municipality), covered by DDW: Salyan, Pyuthan, Rolpa, Kailali, Darchula, Doti, Jhapa, Rautahat and other districts where the surgeons, physiotherapists and nurse are located for early deployment to respond to major crisis
<b>Budget for Health Sector 2011</b>	NRs. 22,645,133/-
<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	<ul style="list-style-type: none"> <li>• Need for enhanced governance and sustainability of the physical rehabilitation sector in Nepal</li> <li>• Need for mainstreaming disability in the health system from national to community level, with a focus on prevention, nutrition, safe motherhood, early detection of disabilities, and specific support to the most vulnerable amongst persons with disabilities and data collection / monitoring.</li> <li>• Need to set up a roster of Nepali health and rehabilitation professionals for early deployment after crisis, under the leadership of MoHP and MoHA</li> </ul>
<b>How can AIN HWG Contribute to effective health sector strategy implementation?</b>	<ul style="list-style-type: none"> <li>• By opening the AIN THG to above mentioned advocacy issues and reinforcing to MoHP their leadership responsibility for the same</li> </ul>
<b>Documents, Manuals, Research Reports and other papers produced by the organisation</b>	<ul style="list-style-type: none"> <li>• Victim Assistance Handbook</li> <li>• Profiling of Surgical Capacities of Regional Hospitals</li> <li>• Assistive Devices Information Manual (Guide and Directory of Assistive Devices Available in Nepal)</li> <li>• Referral Guide and Directory of Specialist of Services</li> </ul>

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>HealthRight International</b>
<b>Address / Telephone</b>	Oasis 49 Dhara, 403, 4th Floor, Patan Dhoka, Patan Tel: 977-1-5528843, Fax: 977-1-5520897
<b>Contact Person/ Designation</b>	<b>Hari Rana</b> Training Coordinator
<b>Email</b>	hari.rana@healthright.org
<b>Major Health Program Focus</b>	Maternal and Child Health
<b>Program Components</b>	CB NCP, Maternal and Neonatal Care Quality Improvement, Strengthening Health Facility Operation and Management Committee, Support to Health Facility to initiate MNC services, Maternal and neonatal verbal autopsy, Distribution of Misoprostal tablet to pregnant women through FCHVs to prevent PPH, Positive Deviance, Family Planning
<b>Implementation Approach</b>	<ul style="list-style-type: none"> <li>- Partnership with Local NGO, District Health Offices and CBOs</li> <li>- Community Mobilization</li> <li>- Capacity building of health workers and stakeholders</li> </ul>
<b>Activity Details</b>	<ol style="list-style-type: none"> <li>1. Government endorsed CBNCP training to all health workers to DCHVs in Arghakhanchi and Kapilvastu District.</li> <li>2. Maternal and Neonatal Care Quality Improvement training to nurses and doctor of delivery service sites (Arghakhanchi)</li> <li>3. Health Facility Operation and Management Committee training to HFOMC members (Arghakhanchi)</li> <li>4. Maternal and verbal autopsy training to health workers (Arghakhanchi)</li> <li>5. Health Workers and FCHVs training on distribution of Misoprostal tablet to pregnant women through FCHVs to prevent PP (Arghakhanchi and Kapilvastu)</li> <li>6. Positive Deviance (Kapilvastu)</li> <li>7. Integrating Family Planning and Maternal Neonatal Health (Arghakhanchi)</li> </ol>
<b>Partners</b>	<ul style="list-style-type: none"> <li>- Mother Infant Research Activities (MIRA)</li> <li>- DHO Arghakhanchi</li> <li>- DHO Kapilvastu</li> </ul>



<b>Geographical Coverage (District and VDC coverage)</b>	Arghakhanchi – 42 VDCs Kapilvastu – 77 VDCs
<b>Budget for Health Sector 2011</b>	US\$ 235,734
<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	Communication Campaign to raise awareness on key MNC services Day celebration for mass campaign for Family Planning and Maternal and Neonatal Health services
<b>How can AIN HWG Contribute to effective health sector strategy implementation?</b>	- By sharing best practices and lesson learned that each AIN member is doing
<b>Documents, Manuals, Research Reports and other papers produced by the organisation</b>	- Baseline Report - Annual Report

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>Helen Keller International</b>
<b>Address / Telephone</b>	PO Box: 3752, Green Block, Ward No. 10, Chakupat, Lalitpur, Nepal
<b>Contact Person/ Designation</b>	<b>Pooja Pandey Rana</b> Director of Programs
<b>Email</b>	ppandey@hki.org
<b>Major Health Program Focus</b>	
<b>Program Components</b>	Nutrition (Action against Malnutrition Through Agriculture)
<b>Implementation Approach</b>	<ul style="list-style-type: none"> <li>- Partnership with Local NGO, District Health Offices and CBOs</li> <li>- Community Mobilization</li> <li>- Capacity building of health workers and stakeholders</li> </ul>
<b>Activity Details</b>	Essential Nutrition Actions/Behavior Change Communication (Capacity building of health staffs and volunteers, major focus Breast feeding, complementary feeding, maternal nutrition, care of sick children) and homestead food production (focus on availability of micronutrient rich vegetables and animal food)
<b>Partners</b>	NNSWA in Kailali, Snehi Mahila Jagaran Kendra in Baitadi, Women Development Munch in Bajura and NTAG
<b>Geographical Coverage (District and VDC coverage)</b>	Kailali: All 42 VDCs Baitadi: 21 VDCs Bajura: All 27 VDCs
<b>Budget for Health Sector 2011</b>	US\$ 650,000
<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	<p>Integrated approach and multisectoral involvement to address the malnutrition issues. (active involvement of MOAC and MOHP at central and district level)</p> <p>Promotion of and increase access of micronutrient rich vegetables and animal source food production, behavior change communication and improved in micronutrient rich food consumption behavior among highly vulnerable groups especially in 1000 days period (Pregnancy to children under two years) through active participation of women and community volunteers</p>
<b>How can AIN HTG Contribute to effective health sector strategy implementation?</b>	Strengthening coordination and collaboration among the developmental stakeholders including government, by arranging the sharing forum of best learning's

**Documents, Manuals,  
Research Reports and other  
papers produced by the  
organisation**

Household Food insecurity and nutritional status of children aged 6-23 months in Kailali district of Nepal

Household food insecurity is highly prevalent and predicts stunting among preschool children and Anemia among their mothers, in Baitadi district of Nepal

Breast feeding and complementary feeding practices are less than adequate among mothers of children 12-23 months in the Baitadi district of Nepal

Designing context specific behavior change strategy to improve key infant and young child feeding practices in Kailali and Baitadi district of Nepal

Kathmandu Urban slums' nutrition bulletin

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>INF Worldwide</b>
<b>Address / Telephone</b>	PO Box: 1230, Kathmandu, Nepal. Tel: 977-1-5521183
<b>Contact Person/ Designation</b>	<b>Shital Subedi</b> Liaison Officer
<b>Email</b>	liaison.officer@world.inf.org
<b>Major Health Program Focus</b>	<ul style="list-style-type: none"> <li>• TB</li> <li>• Leprosy</li> <li>• HIV/AIDS</li> <li>• Spinal Cord Injury</li> <li>• Disability</li> <li>• Nutrition</li> <li>• Specialty health camps for Gynecology, ENT, Dental and Plastic surgery)</li> </ul>
<b>Program Components</b>	<ul style="list-style-type: none"> <li>• Awareness raising</li> <li>• Treatment</li> <li>• Care and rehabilitation of the clients with above health problems</li> <li>• Capacity building of Government health system</li> </ul>
<b>Implementation Approach</b>	Implemented by local NGO – INF Nepal in close coordination with DDC, DPHO, District and Regional Hospitals
<b>Activity Details</b>	<ul style="list-style-type: none"> <li>• Specialized Hospitals             <ul style="list-style-type: none"> <li>- Green Pastures Hospital in Pokhara</li> <li>- Nepalgunj TB Referral Centre, Nepalgunj</li> <li>- Leprosy Referral Centre Surkhet</li> <li>- TB/Leprosy Referral Centre Jumla</li> <li>- TB Leprosy transit clinic in Dang</li> </ul> </li> <li>• Nutrition Referral Centre Jumla</li> <li>• Community Health awareness raising and other technical support to target communities</li> <li>• Support in running of ANC/PNC/MCH, HPMC, SHPMC</li> <li>• HIV and AIDS prevention and care; Counseling, VCT services, awareness raising</li> <li>• Organizing different kind of Medical and Surgical camps in remote areas of Western, Midwestern and Far western regions</li> </ul>

<b>Partners</b>	<ul style="list-style-type: none"> <li>• INF Nepal</li> <li>• Ministry of Health, National Health Training Centre</li> <li>• Ministry of Health, National TB Centre</li> </ul>
<b>Geographical Coverage (District and VDC coverage)</b>	<p>Based in</p> <ul style="list-style-type: none"> <li>• Kaski</li> <li>• Baglung</li> <li>• Kapilvastu</li> <li>• Dang</li> <li>• Banke</li> <li>• Surkhet</li> <li>• Jumla</li> <li>• Mugu</li> </ul> <p>and supporting clients from Western, Mid-western and Far-western regions</p>
<b>Budget for Health Sector</b>	NRs. 102,091,200/-
<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	<ul style="list-style-type: none"> <li>• Health Post and Sup-health Post Management Committees activated in our working VDCs.</li> <li>• Capacity building of local health system through workshop and training to the stakeholders.</li> <li>• Support to Hospital Management Committees by being member of the Hospital Board and regional and district health committees.</li> <li>• Advocacy and Lobbying on behalf of poor and marginalized to have better access to quality health services</li> <li>• Interaction among community members and HP/SHP, HP/SHP committees and DPHO and DDC.</li> <li>• Advocacy for allocation of budgets and distribution of medicine.</li> </ul>
<b>How can AIN HWG Contribute to effective health sector strategy implementation?</b>	Lobbying and influencing the central government for smooth and enough manpower and resources allocation in remote areas.
<b>Documents, Manuals, Research Reports and other papers produced by the organisation</b>	<ul style="list-style-type: none"> <li>• Progress reports</li> <li>• Annual reports</li> <li>• Evaluation Reports (external and external)</li> <li>• HIV/AIDS Policy Paper (Internal)</li> <li>• Disability Guidelines and Reports</li> <li>• Partnership Guideline (internal)</li> </ul>

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>Interplast Germany Foundation e.V. (Sushma Koirala Memorial Hospital)</b>
<b>Address / Telephone</b>	Salambutar, Sankhu, Kathmandu, Nepal. Tel: 977-1-4450826
<b>Contact Person/ Designation</b>	<b>Dr. Jaswan Shakya</b> Medical Director
<b>Email</b>	skh@wlink.com.np
<b>Major Health Program Focus</b>	Plastic and Reconstructive Surgery
<b>Program Components</b>	Equitable Socially Inclusive Access Burn patient
<b>Implementation Approach</b>	
<b>Activity Details</b>	To provide the Health Services to Nepalese people, Dental and general Medical Checkup.
<b>Partners</b>	NNSWA Kanchanpur, HWEPC Dang, NDF Kathmandu, Prerana Lalitpur, CBR-Biratnagar, CBR-Palpa, INF-Banke, DHO, DEO, PNGO
<b>Geographical Coverage (District and VDC coverage)</b>	Terai, Hill and Mountain Region District: Banke, Salyan, Rolpa, Pokhara, Palpa, Butwal, Chitwan, Saptari, Sunsari, Biratnagar, Jhapa, Bhaktapur, Kathmandu, Lalitpur, Dolkha, Ramechhap, Sindhuli, Mahaguwa, Rasuwa, Nuwakot, Kailali, Kanchanpur.
<b>Budget for Health Sector 2011</b>	€ 300,000
<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	Equitable access to health services for poor, vulnerable & socially excluded, Responsive & accountable Service delivery by peripheral health facilities, Discrimination with respect to gender, Caste & ethnicity
<b>How can AIN HTG Contribute to effective health sector strategy implementation?</b>	By organizing regular meeting, By facilitating coordination between Department of Health and Member organisation, Seeking funding and sharing learning and developing allies for advocating Health policies
<b>Documents, Manuals, Research Reports and other papers produced by the organisation</b>	Health Education and Basic

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>The ISIS Foundation</b>
<b>Address / Telephone</b>	Budhanilkantha, Kathmandu, Nepal, GPO Box: 8974, CPC 222
<b>Contact Person/ Designation</b>	<b>Pralhad Kumar Dhakal</b> Nepal Country Manager
<b>Email</b>	pralhad.dhakal@isisgroup.org
<b>Major Health Program Focus</b>	
<b>Program Components</b>	<ol style="list-style-type: none"> <li>1. Mobile Medical Team</li> <li>2. Disability Services</li> <li>3. Child Nutrition</li> <li>4. Safe Drinking Water and Hygiene</li> <li>5. Infant/ Maternal Morality</li> <li>6. Health Post Improvement</li> <li>7. Environment Protection and Waste Removal</li> <li>8. Discretionary Fund Support</li> <li>9. Tibetan Herbal Medical Service</li> <li>10. Medical Care Free Clinics in Kathmandu</li> </ol>
<b>Implementation Approach</b>	<ol style="list-style-type: none"> <li>1. Infrastructure Support</li> <li>2. Human Resource Support</li> <li>3. Medicine and Material Support</li> <li>4. Community and Management Committee Mobilization</li> </ol>
<b>Activity Details</b>	<ol style="list-style-type: none"> <li>1. Mobile Clinic in Humla to increase local awareness and the use of both allopathic and Tibetan medical treatment options</li> <li>2. Providing free consultation, free medicines, free treatment and free diagnosis of the disease to disadvantaged and financially constrained people</li> <li>3. Dental Check-ups</li> <li>4. Treatment of Hepatitis B children</li> <li>5. Free Health Camp</li> <li>6. Ventilated Improved Toilet</li> <li>7. Nutrition Super Porridge</li> <li>8. Smokeless Metal Stove</li> <li>9. Drinking Water-Slow Sand Water Filter</li> </ol>
<b>Partners</b>	<ol style="list-style-type: none"> <li>1. ISIS Children's Foundation</li> <li>2. Himalayan Medical Foundation</li> <li>3. Community Based Organisation in Humla</li> </ol>

<b>Geographical Coverage (District and VDC coverage)</b>	Humla District-Dharapori, Chaughanphya, Kholsi, Lama Kholsi, Kermi, Yalbang, Yangar, Challa, Simikot, Hepka, Tangin, Gadapari, Pamtathun, Dandafaya and Tulin
<b>Budget for Health Sector 2011</b>	NRs. 3,447,448/-
<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	We don't have any direct advocacy initiatives
<b>How can AIN HWG Contribute to effective health sector strategy implementation?</b>	1. By sharing information about successful projects health service delivery in rural parts of Nepal
<b>Documents, Manuals, Research Reports and other papers produced by the organisation</b>	Some research papers



<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>Karuna Foundation</b>
<b>Address / Telephone</b>	753 Narayan Gopal Marg, Lazimpat, Kathmandu, Nepal Tel: 977-1-4410687, 4413340
<b>Contact Person/ Designation</b>	<b>Kimat Adhikari</b> Program Manager
<b>Email</b>	kimat@karunafoundation.com
<b>Major Health Program Focus</b>	Childhood Disability Prevention and Community Based Rehabilitation
<b>Program Components</b>	Scaling up essential health care services and strengthening of health system, training and capacity development of health workers, community based health insurance, Livelihood
<b>Implementation Approach</b>	
<b>Activity Details</b>	Organisational development, community based health insurance, Upgrading of health facilities, health promotion and childhood disability prevention, training and capacity development of health workers, PHC/ ORC strengthening and birthing centre establishment and support, community based rehabilitation, National, district and local level advocacy and lobbying for the rights of CWDs and their families
<b>Partners</b>	District Health Office; Health facility operation and management committee; Help for change, Nepal (HCN); PHECT Nepal, CBR Biratnagar, HRDC, Dhulikhel hospital, Kathmandu Model Hospital and BPKIHS for the treatment, surgery, assistive devices and referral services to CWD; CBR District Coordination Committee; Village Disability and Rehabilitation Committee
<b>Geographical Coverage (District and VDC coverage)</b>	Sunsari, Kavre, Rasuwa; 17 VDCs of 3 program districts
<b>Budget for Health Sector</b>	NRs. 26,427,157/- for 2010 / NRs. 34,607,215/- for 2011
<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	Equitable access of health care services to the marginalized, vulnerable people, CWD ; Inclusion and mainstreaming of CWD and their families
<b>How can AIN HWG Contribute to effective health sector strategy implementation?</b>	Can support in strategy development for the implementation of policy and strengthening collaboration of like minded organisations; out sourcing fund for the improvement of health sector
<b>Documents, Manuals, Research Reports and other papers produced by the organisation</b>	Disability Resource Book 2011, Annual Report, Baseline survey reports, Project evaluation reports, ToP manuals

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>Leprosy Mission Nepal</b>
<b>Address / Telephone</b>	Ward No. 9, Tikabhairav, Lele VDC, Lalitpur, Nepal
<b>Contact Person/ Designation</b>	<b>Shovakhar Kandel</b> Executive Director
<b>Email</b>	shovakhark@tlmnepal.org
<b>Major Health Program Focus</b>	Leprosy and leprosy like problems
<b>Program Components</b>	Base Hospital   Mycobacterial Research Laboratory   Training and Technical Support   Socio Economic Rehabilitation   Community Empowerment, Development and Rehabilitation
<b>Implementation Approach</b>	
<b>Activity Details</b>	Leprosy Care (Reconstructive surgery, physiotherapy, supportive devices, reaction management, ulcer care etc.), Primary Health, Community Based Rehabilitation, Safe Motherhood, Pre Natal Health Care, Capacity Building of Basic Health Services (BHS) personnel and institutions (all PHC, HP & SHP staff), Health Education, Orthopaedic Services, Dermatology, Research
<b>Partners</b>	Network of Leprosy NGOs (NLN), DHO, Leprosy Control Division
<b>Geographical Coverage (District and VDC coverage)</b>	Ramechhap (55), Dolakha (51), Rautahat (96), Bara (98), Parsa (82), Makwanpur (43), Chitwan (36), Dhading (50), Nuwakot (62), Rasuwa (18), Kathmandu (66), Lalitpur (41), Bhaktapur (16), Kavre (87), Sindhupalchowk (79)
<b>Budget for Health Sector 2011</b>	NRs. 36,064,523/-
<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	Engagement and participation of leprosy affected and marginalized people
<b>How can AIN HTG Contribute to effective health sector strategy implementation?</b>	AIN can facilitate to establish close coordination among various NGO partners within the country and with Department of Health Services of Government of Nepal.
<b>Documents, Manuals, Research Reports and other papers produced by the organisation</b>	Annual Report, Quarterly Leprosy Newsletter, Research papers in scientific journals

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>The Lutheran World Federation Nepal</b>
<b>Address / Telephone</b>	PO Box: 3330, Kathmandu, House No. 217, Chundevi Marg-4 Maharajgunj, Kathmandu, Nepal. Tel: 977-1-4720152, 4721271 Fax: 977-1-4720225
<b>Contact Person/ Designation</b>	<b>Dr. Surendra Thapa</b> Livelihood Development Coordinator
<b>Email</b>	sldc@lwf.org.np
<b>Major Health Program Focus</b>	Advocacy on right to health, Awareness raising (sanitation, hygiene, reproductive health, HIV and AIDS) and health facility improvement
<b>Program Components</b>	Health governance improvement, Safe motherhood promotion CLTBCHS promotion, WASH promotion, Capacity building on health and hygiene promotion, HIV and AIDS education and Peer educator mobilization
<b>Implementation Approach</b>	Right Based Approach (RBA) and integrated and collaborative approach. Partnership with Local NGO and Coordination with government authority from centre to grass root level
<b>Activity Details</b>	Right to health survey; mass media mobilization; sensitization to duty bearers; safe motherhood campaign; Interaction/workshops on sexual and reproductive health education; drinking water and latrine construction; orientation and campaign on CLTBCHS; training on total sanitation, safe motherhood, health rights and health governance, advocacy for health rights, HIV & AIDS, life skills and sexual/reproductive health; peer educator mobilize; HIV and AIDS campaign; advocate for PLHA rights; and interactions/workshops on HIV & AIDS.
<b>Partners</b>	Women Empowerment and Action Forum (WEAF), Society of Local Volunteer's Effort Nepal (SADG), Rastriya Haliya Mukti Samaj Federation (RHMSF), Freed Kamaiya Women Development Forum (FKWDF), Kamaiya Pratha Unmulan Samaj (KPUS), Development Project Service Center (DEPROSC), Community Organisation Development Center (CBODC), Everest Club (EC), Social Network for Justice and Development Nepal (SNJD)
<b>Geographical Coverage (District and VDC coverage)</b>	Dailekh-6 VDCs, Morang and Jhapa (mass awareness-Program not focused by VDC), Ramechhap-5 VDCs, Kailali-5 VDCs, Dadeldhura, Baitadi, Darchula, Bajhang, Bajura, Kanchanpur, Doti, Kailali, Bardiya (5,667 households of Freed kamaiya and Haliya-not specific to VDCs)
<b>Budget for Health Sector 2011</b>	US\$ 119,300

<p><b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b></p>	<p>LWF Nepal is actively involved in right to health advocacy campaigns, health rights monitoring and health governance improvement. Specifically, LWF Nepal is working jointly with AIN HWG, AIN HIV and AIDS working groups, IASC health and WASH clusters for advocacy actions at national level. LWF Nepal is also involved in health rights monitoring and health governance improvement activities at district and regional levels. Major focus area are safe motherhood, WASH, and HIV and AIDS.</p>
<p><b>How can AIN HWG Contribute to effective health sector strategy implementation?</b></p>	<p>Close coordination and collaboration should be established with government ministries and related health institutions at national level. Focus should be given on policy analysis and advocacy and develop consensus among AIN HWG members for health governance improvement as well as health rights monitoring.</p>
<p><b>Documents, Manuals, Research Reports and other papers produced by the organisation</b></p>	<p>Baseline study of Dailekh district (3 working VDCs), Quarterly Monitoring Reports, Annual Report.</p>

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>Medecins Du Monde–France (MDM–France)</b>
<b>Address / Telephone</b>	Sanepa, Lalitpur, Nepal. Tel: 977-1-5013023, 5521215
<b>Contact Person/ Designation</b>	<b>Laxmi Bhattarai Lama</b> Medical Coordinator
<b>Email</b>	medco.mdmnepal@gmail.com
<b>Major Health Program Focus</b>	Safe Motherhood
<b>Program Components</b>	Safe Motherhood and Neonatal Health, Health Education and Microfinance
<b>Implementation Approach</b>	<p>(a) Program implementation in close coordination with District Health Office Sindhupalchowk.</p> <p>(b) Program implementation through Community Development and Environment Conservation Forum (local NGO) mainly in Health Education and Microfinance activities with the technical assistant from CMF (Center for Microfinance) in the microfinance part of the program</p> <p>(c) Strengthening of Health Facilities by MDM</p>
<b>Activity Details</b>	<p>Health Facilities</p> <ul style="list-style-type: none"> <li>• Infrastructure support</li> <li>• Equipment and Drug support</li> <li>• Skill Birth Attendant Training</li> <li>• FCHV training</li> <li>• On site Training</li> <li>• Appreciative Inquiry Workshop</li> <li>• Health education in out reach clinic</li> </ul> <p>Community</p> <ul style="list-style-type: none"> <li>• Training to Community Facilitators in health education and microfinance activities</li> <li>• Health education to microfinance group members</li> <li>• Community awareness activities</li> <li>• Distribution of clean home delivery kit to all pregnant women of the program VDCs</li> <li>• Establishment of Obstetric Emergency Fund in the VDC</li> <li>• Distribution of Revolving fund</li> <li>• Establishment of cooperative and training to cooperative's concern authorities in the management of cooperative</li> </ul>

<p><b>Partners</b></p>	<ul style="list-style-type: none"> <li>• Community Development and Environment Conservation Forum (local NGO)</li> <li>• Center for Microfinance (CMF) for technical assistance of Microfinance part</li> <li>• District Health Office for technical assistance, supervision and monitoring of the program</li> </ul>
<p><b>Geographical Coverage (District and VDC coverage)</b></p>	<p>(1) 10 new VDCs of Sindhupalchowk district namely Sunkani, Selang, Nawalpur, Lisanku, Thokarpa, Sagachowk, Fupingdada, Batase, Baramche, Golche</p> <p>(2) Jalbire and Melamche. These two old VDCs of same district where program was implemented during 2007 to 2010</p>
<p><b>Budget for Health Sector 2011</b></p>	<p>NRs. 2,20,00,000/-</p>
<p><b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b></p>	<p>(1) Health facilities in the community are own by the community people. Therefore community people and management committee members should involve and active for the management of health facilities. This includes use of VDCs fund, repair of infrastructure, collection of fund for the improvement of health facilities</p>
<p><b>How can AIN HWG Contribute to effective health sector strategy implementation?</b></p>	<p>Sharing lesson learned and experiences among AIN HTG and present constraints/problem and solution collectively to the concern authority for implementation</p>
<p><b>Documents, Manuals, Research Reports and other papers produced by the organisation</b></p>	<p>At present we have started to implement new project from July 2011. Following documents are from the previous project implemented from May 2007 to December 2010 in 12 VDCs of Sindhupalchowk district.</p> <ul style="list-style-type: none"> <li>• Mid-term and Final Evaluation of the program conducted by Social Welfare Counsel</li> <li>• Capitalization Workshop Report: This includes experiences and lesson learned during the implementation of the project</li> <li>• Mid-term and Final evaluation of the Microfinance activities conducted by PlaNet Finance</li> <li>• Project end Report</li> <li>• Health Facilities Assessment Report of 12 VDCs</li> </ul>

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>Medical Emergency Relief International (Merlin)</b>
<b>Address / Telephone</b>	Kupondole -1, Lalitpur, Nepal
<b>Contact Person/ Designation</b>	<b>Catherine Whybrow</b> Country Director
<b>Email</b>	cd@merlin-nepal.org
<b>Major Health Program Focus</b>	DHO Capacity Support; Human Resources for Health; Mass Casualty Management Disaster Preparedness
<b>Program Components</b>	Surgical camps; Disaster Preparedness; Sanitation and Hygiene; Human Resources for Health; Mass Casualty Management Preparedness.
<b>Implementation Approach</b>	Working in partnership with local NGOs, as well as National, Regional and District health authorities and Local Communities, toward strong health response, recovery and resilience.
<b>Activity Details</b>	Surgical camps and UVP operation follow up Latrine construction and hygiene promotion Disaster Contingency Planning and Health Contingency Planning (District and VDC level) Operational research in human resources for health Human resources in health policy support to MOHP CSO capacity support for human resources in health Mass Casualty Management contingency planning Hospital earthquake preparedness Community earthquake preparedness (first aid/light search and rescue)
<b>Partners</b>	RRN, SOLID, NRCS, NSET
<b>Geographical Coverage (District and VDC coverage)</b>	Rolpa and Pyuthan Districts (surgical camps, WASH, disaster preparedness) Kathmandu District (earthquake preparedness) 15 sample districts for HRH operational research.
<b>Budget for Health Sector 2011</b>	Approximately NRs. 60,000,000/-
<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	Human resources in health: The current Operational Research will identify gaps and constraints in health staffing across the country. Merlin will advocate that the evidence gathered through this process will be feed into MOHP HRH policy.
<b>How can AIN HWG Contribute to effective health sector strategy implementation?</b>	Helping to ensure the INGO community “speak with one voice” when advocating for health sector reform.
<b>Documents, Manuals, Research Reports and other papers produced by the organisation</b>	Earthquake Response Lessons Learned and the Applicability to Kathmandu (August 2011) Operational Research on HRH (December 2011)

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>The Micronutrient Initiative</b>
<b>Address / Telephone</b>	C/O Canadian Cooperation Office, Lazimpat, Kathmandu, Nepal Tel: 977-1-4415193
<b>Contact Person/ Designation</b>	<b>M. R. Maharjan</b> Director
<b>Email</b>	mi@canadanepal.org, mmaharjan@micronutrient.org
<b>Major Health Program Focus</b>	
<b>Program Components</b>	Nutrition (Micronutrients)
<b>Implementation Approach</b>	N/A
<b>Activity Details</b>	<ul style="list-style-type: none"> <li>• Intensification of Maternal and Neonatal Micronutrient Program (Iron Folic Acid Supplementation to pregnant and postpartum women)</li> <li>• Zinc and ORS Treatment of childhood diarrhoea</li> <li>• Wheat flour Fortification at Roller Mills</li> <li>• Cereal Flour Fortification at Small Scale Mills</li> <li>• National Vitamin A Program</li> <li>• Distribution of Multiple Micronutrient Powder</li> </ul>
<b>Partners</b>	Child Health Division/Department of Health Services, Department of Food Technology and quality Control
<b>Geographical Coverage (District and VDC coverage)</b>	<ul style="list-style-type: none"> <li>• Intensification of Maternal and Neonatal Micronutrient Program- all the VDCs of 60 districts</li> <li>• Zinc and ORS Treatment of childhood diarrhoea- all the VDCs of 3 districts (Sankhuwasabha, Gorkha and Bajura)</li> <li>• Wheat flour Fortification at Roller Mills- Most VDCs and Municipalities of all districts accessible by motorable roads</li> <li>• Cereal Flour Fortification at Small Scale Mills- 10 VDCs of Lalitpur district</li> <li>• National Vitamin A Program (Capsule supply through UNICEF)- All VDCs and municipalities of 75 districts</li> <li>• Distribution of Multiple Micronutrient Powder (commodity supply for a randomized control trial)- one district</li> </ul>
<b>Budget for Health Sector 2011</b>	US\$ 350,000



<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	Strengthening of monitoring and supervision system of health facilities
<b>How can AIN HWG Contribute to effective health sector strategy implementation?</b>	AIN may carry out a comprehensive SWOT analysis on Health Management Information System (HMIS) and Logistics Management Information System (LMIS) of Department of Health Services.
<b>Documents, Manuals, Research Reports and other papers produced by the organisation</b>	Nepal Micronutrient Status Survey 1998, Nepal Iodine Deficiency Disorders Status Survey 2005, Evaluation reports of various interventions supported by MI

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>Mission East</b>
<b>Address / Telephone</b>	Jawalakhel, Lalitpur, Nepal. Tel: 977-1-5538416, 5538668
<b>Contact Person/ Designation</b>	<b>Christophe Belperron</b> Country Representative
<b>Email</b>	christophe.belperron@missioneast.org
<b>Major Health Program Focus</b>	
<b>Program Components</b>	Water Supply and Hygiene and Health Promotion
<b>Implementation Approach</b>	Through local partner
<b>Activity Details</b>	<ul style="list-style-type: none"> <li>• Water Supply with establishment of sustainable community based structure (i.e. Trained Water users group, care taker/plumbers) with operation and maintenance fund</li> <li>• Trainings for Female Community Health Volunteers (FCHVs) to strengthen their capacity</li> <li>• Trainings for Traditional Healers (THs) in provision of services according to Western Medicine and referral to government health facilities</li> <li>• Trainings for Teachers, Child Clubs, Community Health Volunteers (CHVs) and Hygiene &amp; Health promoters (HHPs) on hygiene and health related issue</li> <li>• Awareness activities through drama, puppet show, contest, exchange visit, school health program (including HIV &amp; AIDS, nutrition, hygiene and sanitation) by mobilization of child clubs, Health promoters, Community Health Volunteers, mothers group, men's group</li> <li>• Organizing ear health camp for reducing disaster risks to person with disability</li> </ul>
<b>Partners</b>	Karnali Integrated Rural Development and Research Centre (KIRDARC)
<b>Geographical Coverage (District and VDC coverage)</b>	<ul style="list-style-type: none"> <li>• Humla (Darma, Gothi, Melcham, Jaira, Saya, Kalika, Shreenagar, Lali, Raya, Chhipra, Syada and Madana)-12 VDCs</li> <li>• Kalikot (Thirpu, Ramnakot, Nanikot, Khina and Dhaulagha)-5 VDCs</li> </ul>
<b>Budget for Health Sector 2011</b>	<ul style="list-style-type: none"> <li>• EUR 88,594 for project "EUROPEAID- Sustainable water supply, hygiene and health improvements for highly vulnerable communities in Humla District"</li> <li>• EUR 348,500 for project "ECHO- Safe drinking water, improved sanitation and hygiene behaviours in remote areas of Kalikot district"</li> </ul>

<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	<ul style="list-style-type: none"> <li>- Matching fund especially for most emergency health services</li> <li>- Facilitation, support and strengthen for Sub/Health post and Hospital Management Committee</li> <li>- Track on EWARS ( Early Warning System)</li> <li>- Strengthen and capacity building for government health service provider</li> </ul>
<b>How can AIN HTG Contribute to effective health sector strategy implementation?</b>	<ul style="list-style-type: none"> <li>- Advocacy and Lobby to lunch integrated health programs with local government</li> <li>- Implement Health related activities based on Government health policy</li> <li>- Research on health related issues</li> </ul>
<b>Documents, Manuals, Research Reports and other papers produced by the organization</b>	<ul style="list-style-type: none"> <li>• Feasibility and Pre-KAP survey reports, training reports (not-published externally), CHV training manual (jointly with KD)</li> <li>• District Disaster Preparedness and Response Plan for Humla an Kalikot, 2011 (we are planning to publish it in UN web platform shortly)</li> </ul>

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>Nepal Leprosy Trust (UK)</b>
<b>Address / Telephone</b>	Tutepani-14, Satdobato, Lalitpur, Nepal. Tel: 977-1-5521622, 5523322
<b>Contact Person/ Designation</b>	<b>Kamal Shrestha</b> Chief Executive
<b>Email</b>	nlt@mail.com.np
<b>Major Health Program Focus</b>	On leprosy
<b>Program Components</b>	Hospital Services, Research, Capacity Building, Community Development Work (SER, VAP: Village Alive Project, Awareness etc.) and Income Generating
<b>Implementation Approach</b>	Both need and rights based approach
<b>Activity Details</b>	
<b>Partners</b>	Nepal Leprosy Trust/Nepal, DHO, Self help Groups, DDC etc.
<b>Geographical Coverage (District and VDC coverage)</b>	Kathmandu Valley and 4 districts of Terai Region of the Central Development Region (Dhanusha, Mahottari, Sindhuli and Sarlahi)
<b>Budget for Health Sector 2011</b>	NRs. 40,000,000/- (US\$ 563,380)
<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	Not Enough
<b>How can AIN HWG Contribute to effective health sector strategy implementation?</b>	<ul style="list-style-type: none"> <li>• Co-ordinate to bring all the INGOs who are working in health sector in one platform.</li> <li>• Facilitate to have a situation analysis of health issues and give priority and plan accordingly.</li> <li>• Sharing the information among the institutions.</li> <li>• Lobbying for new policy formulation.</li> </ul>
<b>Documents, Manuals, Research Reports and other papers produced by the organization</b>	<ul style="list-style-type: none"> <li>• Annual Reports.</li> <li>• TENLEP (Treatment of Early Leprosy Neuropathy in Leprosy) Research being implemented.</li> <li>• Final evaluation has just completed and report is submitted to SWC.</li> </ul>

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>Netherlands Leprosy Relief (NLR)</b>
<b>Address / Telephone</b>	New Baneshwor, Kathmandu, Nepal. Tel: 977-1-6227564
<b>Contact Person/ Designation</b>	<b>Dr. K.P. Dhakal</b> CR
<b>Email</b>	kpdhakal2001@yahoo.com
<b>Major Health Program Focus</b>	
<b>Program Components</b>	Leprosy Control, TB Control, Disability Management (CBR)
<b>Implementation Approach</b>	Through financial and technical support to GoN and Local NGOs
<b>Activity Details</b>	
<b>Partners</b>	MoHP, LCD, Regional Health Directorates of eastern and Far western regions, all 25 DHOs/DPHOs of eastern and Far western regions, NFDN, CBR organisations, Local NGOs and CBOs
<b>Geographical Coverage (District and VDC coverage)</b>	All districts and VDCs of eastern and Far western regions
<b>Budget for Health Sector 2011</b>	NRs. 39,015,125/-
<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	Advocate for patient centered quality service by providing evidence based best practices and providing expertise support to the program We provide the support to the GoN program by strengthening system from inside through financial support and capacity building
<b>How can AIN HWG Contribute to effective health sector strategy implementation?</b>	AIN HTG can contribute to effective health sector strategy implementation through multifold support: <ul style="list-style-type: none"> <li>• Direct support to programs by individual members</li> <li>• Technical expertise in strategy development</li> <li>• Complimenting to the GoN services</li> </ul>
<b>Documents, Manuals, Research Reports and other papers produced by the organisation</b>	<ul style="list-style-type: none"> <li>• Program handbooks</li> <li>• Research reports</li> <li>• Training guidelines</li> <li>• Program reports</li> <li>• Patients' handbooks</li> </ul>

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>Nepal Youth Foundation (NYF)</b>
<b>Address / Telephone</b>	Bhanimandal, Ekantakuna, Lalitpur, Nepal. Tel: 977-1-5000118, 5000276
<b>Contact Person/ Designation</b>	<b>Som Paneru</b> Executive Director
<b>Email</b>	som@nepalyouthfoundation.org.np
<b>Major Health Program Focus</b>	Nutrition
<b>Program Components</b>	Nutritional Rehabilitation Homes (NRH), Nutritional support to HIV & AIDS affected children, Community Nutrition Awareness Camps
<b>Implementation Approach</b>	Through partnership with local NGOs, hospitals
<b>Activity Details</b>	Clinical rehabilitation of malnourished children, Educating caretakers in nutrition, Health & Hygiene, Treatment, Care & Support to HIV infected children & Imparting knowledge & Skills on Diet management to the caretakers.
<b>Partners</b>	Kathmandu Vally-Friends of Needy Children, (FNC) Mehi (Bhadrapur)-Nepal Community Development Centre (NCDC) Koshi (Biratnagar)-Friends of Needy Children, (FNC) Sagarmatha (Rajbiraj)-Women Environment & Rural Development Organisation (WERDO) Janakpur (Janakpurdham)-Community Family Welfare Association (CFWA) Narayani (Birgunj)-Bidharthy Jagaran Munch (BIJAM) Gandaki (Pokhara)-Good Neighbourhood Service Society (GONESA) Bheri (Nepalgunj)-Saathi Bheri Surkhet-Rural Women Development & Unity Centre (RUWDUC) Seti (Dhangadi)-Rural Women Development & Unity Centre (RUWDUC) Mahakali (Kanchanpur)-Rural Women Development & Unity Centre (RUWDUC) Dhading (Maidi VDC)-Nutrition Promotion and Consultancy Services (NPCS)
<b>Geographical Coverage (District and VDC coverage)</b>	Kathmandu-Baluwatar, Lalitpur-Tikhedewal Jhapa-Bhadrapur, on the premises of Mechi Zonal Hospital Morang-Biratnagar, on the premises of Koshi Zonal Hospital Saptari-Rajbiraj, on the premises of Sagarmatha Zonal Hospital Dhanusha-Janakpurdham, on the premises of Janakpur Zonal Hospital Parsa-Birgunj, on the premises of Narayani Sub-Regional Hospital

	<p>Kaski-Pokhara, on the premises of Western Regional Hospital  Banke-Nepalgunj, on the premises of Bheri Zonal Hospital  Surkhet-Kalagown, on the premises of Mid-western Regional Hospital  Kailali-Dhangadi, on the premises of Seti Zonal Hospital  Kanchanpur-Mahendranagar, on the premises of Mahakali Zonal Hospital</p> <p><b>Community Nutrition Awareness Camps</b>  Dhading: Maidi VDC  Doti: Sanagown VDC  Sindhupalchowk: Thulosirubari  Dhading: a. Chhatre Deurali, b. Mahadev Basi, c. Thakre  Kavre : a. Chalal VDC, b. Baluwa VDC Kaskot  Nuwakot: a. Kagatigown b. Aapchour VDC  Chitwan: Chhandi Bhanjyang  Lalitpur: Dukuchhap  Bhaktapur: Tathali (Brick factory)</p>
<b>Budget for Health Sector 2011</b>	US\$ 303,497 (Budget for July 2010-June 2011)
<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	All of these projects have been formulated and implemented in close coordination with Child Health Division of Ministry of Health. In addition to providing nutritional support and medical care to malnourished as well as HIV infected children, these projects aim to provide knowledge on nutritional values on locally available food stuffs, introducing proper feeding skills/habits and maintaining hygiene to the caretakers. The care takers are trained to disseminate the acquired knowledge to other mothers in their neighbors up on their return home.
<b>How can AIN HWG Contribute to effective health sector strategy implementation?</b>	Suggesting aid agencies to address the need more directly, avoid too much of red tape and image promotion while designing projects and giving grants to local partners. Also need based projects should be promoted rather than donor guided or guided by 'so called' 'restricted funds'. Projects should be design to 'solve the problem' no matter how long does it take not just to 'spend the grant' in a given period. Organizing regular sharing meetings definitely helps to disseminate the best practices and avoid duplication.
<b>Documents, Manuals, Research Reports and other papers produced by the organisation</b>	Nutritional Rehabilitation Home- Operation Manual, IEC materials

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>Oxfam GB Nepal</b>
<b>Address / Telephone</b>	Jawalakhel, Ward No. 20, Lalitpur GPO Box: 2500, Kathmandu, Nepal
<b>Contact Person/ Designation</b>	<b>Anthony Scott Faiia</b>
<b>Email</b>	afaiia@oxfam.org.uk, oxnepal@oxfam.org.uk
<b>Major Health Program Focus</b>	
<b>Program Components</b>	Water and sanitation, Public health promotion, Advocacy for improved access to health services for poor and marginalised groups
<b>Implementation Approach</b>	Partnership, Awareness raising, Capacity building, Policy advocacy and linkage building, Service delivery, Community-based DRR, Women leadership development.
<b>Activity Details</b>	<p><b>a) Humanitarian Programme (ongoing):</b> Water, Sanitation &amp; Hygiene promotion for Disaster Preparedness and Emergency Response. Activities Include:- Awareness raising on safe hygiene behaviours, Hand washing; protection and promotion of water source; promotion of raised latrines and hand pumps; support the development of District Disaster Preparedness and Response Plan including health cluster plans; lobbying with local government bodies to allocate fund for disaster preparedness and mitigation at village and district levels; support government volunteers (FCHVs) for their capacity building in hygiene promotion; support Water Supply and Sanitation Division Office in developing WASH strategy etc. <b>b) Public Health and Basic Livelihoods Support Programme (ongoing):</b> Public health and sanitation promotion including drinking water supply and latrines, and awareness raising on safe hygienic behaviours at the community level and in schools; capacity support for Drinking Water and Sanitation Users Committee. <b>c) Advocacy and campaign programme (ongoing):</b> awareness raising among the main stakeholders on key issues regarding delivery of health services to the poorest &amp; socially excluded groups. Capacity strengthening of civil society to advocate for, monitor and support implementation of health policies. Develop models for health services in remote areas.</p>
<b>Partners</b>	RECPHEC, FEDWASUN, IDeS, EDS, SuDEC, RUDES, KVS, CDM, BWSN, NRCS, SYC



<b>Geographical Coverage (District and VDC coverage)</b>	Public Health and Basic Livelihoods programme (ongoing): Surkhet, Dailekh, Baitadi, Dadeldhura, Darchula Humanitarian Programme: Saptari, Rautahat, Nawalparasi, Sarlahi Advocacy Programme: Dailekh, Surkhet, Bardiya, Arghakhanchi, Makwanpur
<b>Budget for Health Sector 2011</b>	GBP 500,000 (approximately)
<b>Advocacy issues in health supporting to promote quality health program of the Government</b>	<ul style="list-style-type: none"> <li>a) Effective implementation of International Health Partnership [IHP] and involvement of civil society</li> <li>b) Effective implementation of Free Health Service policy in Sub/health posts in remote areas</li> <li>c) Promotion of WASH for Disaster Preparedness and Emergency Response</li> </ul>
<b>How can AIN HWG Contribute to effective health sector strategy implementation?</b>	Close coordination with government, strong networking/coordination among organisations working in the health sector and lobby/advocacy for making government, donor and I/NGOs accountable to their commitments.
<b>Documents, manuals, research reports and other papers produced by the organisation</b>	Serve the Essentials: what government & donors must do to improve South Asia's essential services [2006]. Poster/flip charts on Public Health. Free Health Service. A Rhetoric or Reality? Case Study on Effectiveness of Free Health Service in Nepal.

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>Plan Nepal</b>
<b>Address / Telephone</b>	Shree Durbar, Pulchowk, Lalitpur, Nepal. Tel: 977-1-5535580, 5535560
<b>Contact Person/ Designation</b>	<b>Sher Bahadur Rana/Nabin Pradhan</b>
<b>Email</b>	sherbahadur.rana@plan-international.org nabin.pradhan@plan-international.org
<b>Major Health Program Focus</b>	Community based maternal and newborn health; prevention of HIV from mother to child transmission; awareness among migrant workers; and prevention, treatment and rehabilitation of children with disability; water and improved sanitation
<b>Program Components</b>	Training, follow up, supervision and monitoring, management from central to community level, behavioural change communication among pregnant women group, local health governance strengthening program, community mobilization
<b>Implementation Approach</b>	Immersing itself in the worlds of children and their communities; increasing the capacity of both right holders and duty bearers; promoting advocacy at all levels; integrating initiatives on fundamental principles of social inclusion, gender equity and child participation in health and WASH programs; integration of program and sponsorship; and monitoring, evaluation and research
<b>Activity Details</b>	<p>Support to establish birthing centers in government health facilities and skill birth attendants' training; develop knowledge and skill of health workers and female community health workers maternal and newborn health programs and prevention of HIV from mother to child transmission; strengthen the capacity and inclusiveness of village level health facility management committees to plan for, implement and monitor activities in these programs; and prevention, treatment and rehabilitation of children with disability organizing health and rehabilitation camps at rural areas and raising awareness on it.</p> <p>Improved water supply establishing community managed piped drinking water; promotion on treatment of drinking water and appropriate waste management technologies; support to establish low cost drains and sink pits, kitchen gardening, and micro-irrigation; scaling up of community led total sanitation program; support government's water and sanitation at school and community level</p>

<b>Partners</b>	Ministry of Health and Population, well experienced and professional national and local nongovernmental organisations (NGO), District Development Committees and Village Development Committees, District Health Coordination Committees at district level and Health Facility Management Committee, Water and Sanitation Users Committee and other community based organisations-health mothers groups, pregnant women groups, youth groups, and child club
<b>Geographical Coverage (District and VDC coverage)</b>	Morang, Sunsari, Rautahat, Makwanpur, Sindhuli, Banke and Bardiya
<b>Budget for Health Sector 2011</b>	NRs. 158,333,000/-
<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	<ol style="list-style-type: none"> <li>1. Prevention, treatment and rehabilitation of children with disability</li> <li>2. Inclusion of pregnant women group for effective behavioral change communication approach in maternal and child health program</li> <li>3. Introduction of prevention of HIV from mother to child transmission at community and family level</li> <li>4. Advocacy for increased budget for sanitation</li> </ol>
<b>How can AIN HWG Contribute to effective health sector strategy implementation?</b>	Making provision of forum for sharing best practices, supporting for advocacy on new approach of sustainable community health program, and knowledge management with research and action among AIN members.
<b>Documents, Manuals, Research Reports and other papers produced by the organisation</b>	<ol style="list-style-type: none"> <li>1. Helping children who are blind 2007 (Translated into Nepali)</li> <li>2. Apangamaitri batawaran awarodh neunikaran nirdeshan pustika 2065</li> <li>3. Bidyalaya swasthya tatha poshan ratriya rananiti, Nepal (Nepali translation)</li> <li>4. Bidyalaya swastha tatha poshan karyakram sahayogi pustika 2065, (Nepali translation)</li> <li>5. Bahira balbalikalai sahayog garnuparema 2009 (Nepali translation)</li> <li>6. Patheghar khasne samasyako roktham tatha byawasthapan sambandhi prasikshyak prasikshyan nirdeshika 2066</li> <li>7. Country Strategic Plan July 2010-June 2015</li> <li>8. The changed lives, Stories of change: Because I am a girl 2010 (English &amp; Nepali)</li> <li>9. Prayash –Bi-annually</li> </ol>

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>Population Services International/Nepal</b>
<b>Address / Telephone</b>	Budhanilkantha, Kathmandu, Nepal Tel: 977-1-4377471, 4377472
<b>Contact Person/ Designation</b>	<b>Andrew Boner</b> Country Representative
<b>Email</b>	andrew@psi.org.np
<b>Major Health Program Focus</b>	I. Malaria Prevention and Control II. Women's Health Program (WHP) III. Regional HIV Program [focusing on men who have sex with men (MSM) and Transgender (TG) populations] IV. Water Guard
<b>Program Components</b>	<p><b>Malaria Prevention and Control</b></p> <ul style="list-style-type: none"> <li>- Long Lasting Insecticide-Treated Nets (LLINs) Distribution</li> <li>- Behavior Change Communication including School based BCC</li> <li>- Training to Private Sector Health Service Providers</li> </ul> <p><b>Women's Health Program (WHP)</b></p> <ul style="list-style-type: none"> <li>- Long term methods of Family planning, specifically IUCDs.</li> <li>- Increasing access to safe medical abortion services</li> </ul> <p><b>Regional HIV Program (MSM/TG)</b></p> <ul style="list-style-type: none"> <li>- Strengthening of regional and national country partners for effective HIV program implementation</li> <li>- Provide capacity building support and overall grant oversight</li> <li>- Improve the delivery of HIV services for TG populations, including strengthening of Civil Society and BDS institutional Development</li> <li>- Improving the policy environment with regards to MSM/TG and HIV related issues</li> </ul> <p><b>Water Guard</b></p> <ul style="list-style-type: none"> <li>- Social Marketing of hypochlorite solution for water disinfection</li> </ul>
<b>Implementation Approach</b>	<p><b>Malaria Prevention Control</b></p> <ul style="list-style-type: none"> <li>- Public-Private Partnership through the mobilization of local NGOs and Community Based Organizations (CBOs)</li> </ul> <p><b>Women's Health Program (WHP)</b></p> <ul style="list-style-type: none"> <li>- Social Marketing</li> <li>- Strengthening of private sector to provide quality health care services related to long term methods of family planning.</li> <li>- Total market approach</li> </ul>

	<p><b>Regional HIV Program (MSM/TG)</b></p> <ul style="list-style-type: none"> <li>- Strengthening of regional and national country partners for effective HIV program implementation</li> <li>- Provide capacity building support and overall grant oversight</li> </ul> <p><b>Water Guard</b></p> <ul style="list-style-type: none"> <li>- Social Marketing</li> </ul>
<b>Activity Details</b>	<p><b>Malaria Prevention Control</b></p> <ul style="list-style-type: none"> <li>- Long Lasting Insecticide-Treated Nets Distribution: LLINs distributed for free to people living in high risk malaria districts (medium to high-risk districts) to improve the coverage and quality of preventive measures</li> <li>- Behavior Change Communication (BCC): To increase the utilization of malaria preventative and curative services through behavior-change interventions at household and community level. The program also targets school-children (class 5 and above).</li> <li>- Training to Private Sector Health Service Providers: Private Sector Health Service Providers of target areas (mostly chemists) imparted with trainings on malaria (as per National Malaria Treatment Protocol) and LLIN-usage</li> </ul> <p><b>Women's Health Program (WHP)</b></p> <ul style="list-style-type: none"> <li>- Training of private providers on long term method</li> <li>- IPC and Demand generation</li> <li>- Advocacy</li> <li>- Social marketing</li> <li>- Provision of IUCD insertion services</li> <li>- Medabon Services for SAS</li> </ul> <p><b>Regional HIV Program (MSM/TG)</b></p> <ul style="list-style-type: none"> <li>- Capacity building of MSM/TG CBOs for improved HIV prevention, care and treatment services; policy and advocacy to reduce the impact of HIV on MSM and TG; research to improve strategic knowledge on the impact of HIV on MSM and TG populations</li> </ul> <p><b>Water Guard</b></p> <ul style="list-style-type: none"> <li>- Distribution and promotion</li> <li>- Free distribution for emergency response</li> </ul>
<b>Partners</b>	<p><b>Malaria Prevention Control</b></p> <ul style="list-style-type: none"> <li>- Ministry of Health and Population (MoHP)/ Department of Health Services (DoHS)/Epidemiology and Disease Control Division (EDCD)</li> <li>- District Public Health Offices (DPHOs)</li> </ul>

	<ul style="list-style-type: none"> <li>- Non Government Organizations (NGOs)/Community Based Organizations (CBOs)</li> <li>- Private Sector Enterprises</li> <li>- Media Houses</li> </ul> <p><b>Women’s Health Program (WHP)</b></p> <ul style="list-style-type: none"> <li>- Family Health Division (FHD), Department of Health Services (DoHS), Ministry of Health and Population (MoHP)</li> <li>- National Health Training Centre (NHTC), Department of Health Services (DoHS), Ministry of Health and Population (MoHP)</li> <li>- District Public Health Services (DPHS)</li> </ul> <p><b>Regional HIV Program (MSM/TG)</b></p> <ul style="list-style-type: none"> <li>- Blue Diamond Society (BDS)</li> <li>- Ministry of Health and Population (MoHP)/National Centre for AIDS and STD Control (NCASC)</li> <li>- Regional Country Partners</li> </ul>
<p><b>Geographical Coverage (District and VDC coverage)</b></p>	<p><b>31 districts for Malaria</b></p> <ul style="list-style-type: none"> <li>• 13 high-risk districts: Ilam, Jhapa, Morang, Dhanusha, Mahottari, Sindhuli, Kavre, Nawalparasi, Banke, Bardiya, Kailali, Kanchanpur, Dadeldhura</li> <li>• 18 medium-risk districts: Dhankuta, Panchthar, Siraha, Udayapur, Sunsari, Saptari, Chitwan, Sarlahi, Makwanpur, Bara, Parsa, Rautahat, Sindhupalchowk, Rupandehi, Kapilvastu, Dang, Surkhet, Doti</li> </ul> <p><b>46 districts covered for Women’s Health Program (WHP)</b></p> <p>Panchthar, Ilam, Jhapa, Morang, Dhankuta, Sunsari, Sankhuwasabha, Udaypur, Saptari, Siraha, Dhanusha, Mahottari, Sarlahi, Rautahat, Bara, Makawanpur, Parsa, Chitwan, Kavre, Dolakha, Sindhupalchowk, Nuwakot, Dhading, Kathmandu, Bhaktapur, Lalitpur, Nawalparasi, Rupandehi, Kapilvastu, Palpa, Tanahu, Syangja, Parbat, Lamjung, Kaski, Baglung, Rolpa, Salyan, Jumla, Achham, Doti</p> <p><b>Regional HIV Program (MSM/TG)</b></p> <p>BDS program districts (25): Kathmandu, Lalitpur, Bhaktapur, Chitwan, Parsa, Dhanusha, Rautahat, Mahottari, Sarlahi, Bara, Makwanpur, Morang, Jhapa, Sunsari, Saptari, Siraha, Kaski, Rupandehi, Nawalparasi, Kapilvastu, Dang, Banke, Bardiya, Kailali, Kanchanpur</p> <p><b>Water Guard</b></p> <ul style="list-style-type: none"> <li>• All over Nepal</li> </ul>

<b>Budget for Health Sector 2011</b>	<table> <tr> <td>Malaria</td> <td>2011-2013</td> <td>US\$ 22,903,437</td> </tr> <tr> <td>WHP</td> <td>2011-2012</td> <td>US\$ 5,797,514</td> </tr> <tr> <td>Regional HIV/MSM/TG :</td> <td>2011-2012</td> <td></td> </tr> <tr> <td>- BDS</td> <td></td> <td>US\$ 461,122</td> </tr> <tr> <td>- PSI Nepal</td> <td></td> <td>US\$ 2,603,340</td> </tr> <tr> <td>Water Guard</td> <td>2011-2012</td> <td>US\$ 60,000</td> </tr> </table>	Malaria	2011-2013	US\$ 22,903,437	WHP	2011-2012	US\$ 5,797,514	Regional HIV/MSM/TG :	2011-2012		- BDS		US\$ 461,122	- PSI Nepal		US\$ 2,603,340	Water Guard	2011-2012	US\$ 60,000
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Water Guard	2011-2012	US\$ 60,000																	
<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	<p><b>Malaria Prevention Control</b></p> <ul style="list-style-type: none"> <li>- Working in collaboration with the Government in achieving National Malaria Control Goals and pre-elimination</li> </ul> <p><b>Women's Health Program (WHP)</b></p> <ul style="list-style-type: none"> <li>- Building positive perception of long term family planning methods.</li> <li>- Expanding access to safe abortion services.</li> </ul> <p><b>Regional HIV Program (MSM/TG)</b></p> <ul style="list-style-type: none"> <li>- BDS under Regional Grant: National and district level advocacy for equal access to and availability of health services at GoN health institutions without stigma and discrimination (formation of national and district level working groups on MSM &amp; TG, national MSM and TG human rights advocacy meetings etc.)</li> <li>- BDS under other grants: Orientation to different government offices and officials at national, district and local level on various issues related to sexual and gender minorities; regular meeting with DACC; regular reporting to NCASC and DACC on progress; different media campaigns to convey advocacy messages both aimed at the government and non-government level; coordination, partnering and participation in different government organized events and meetings; involvement in the CCM and MSM thematic groups at HIV/AIDS &amp; STD Control Board.</li> </ul>																		
<b>How can AIN HTG Contribute to effective health sector strategy implementation?</b>	<ul style="list-style-type: none"> <li>- To support and collaborate with different INGOs for effective implementation of the Plan and Program.</li> <li>- For Policy guidelines</li> <li>- For further fund raising</li> </ul>																		
<b>Documents, Manuals, Research Reports and other papers produced by the organization</b>	<p><b>Malaria Prevention Control</b></p> <ul style="list-style-type: none"> <li>- Malaria TRaC Study Evaluating LLIN Use among General Population and Children under 5 Years of Age in 13 High-Risk Districts of Nepal (published in 2006, 2007, 2008, 2009 and 2010). Available on <a href="http://www.psi.org">www.psi.org</a></li> </ul> <p><b>Women's Health Program (WHP)</b></p> <ul style="list-style-type: none"> <li>- Development of different manuals of IUCDs</li> </ul> <p><b>Regional HIV Program (MSM/TG)</b></p> <ul style="list-style-type: none"> <li>- Sub-recipient Management Manual, including Standard Operating Procedures (SOPs) for Finance and M&amp;E</li> </ul>																		

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>Restless Development Nepal</b>
<b>Address / Telephone</b>	Jwagal, Kupondole, Lalitpur, Nepal. Tel: 977-1-5538242
<b>Contact Person/ Designation</b>	<b>Ravindra Shakya</b> Country Director
<b>Email</b>	ravindra@restlessdevelopment.org
<b>Major Health Program Focus</b>	SRH, HIV/AIDS
<b>Program Components</b>	SRH, HIV/AIDS, Nutrition, Sanitation & Hygiene
<b>Implementation Approach</b>	In partnership with Local NGOs, youth clubs In Coordination with government in National and District level
<b>Activity Details</b>	<ul style="list-style-type: none"> <li>• School Health and nutrition services</li> <li>• Healthful School environment-sanitation and hygiene</li> <li>• Life skills based SRH teaching curriculum in school</li> <li>• HIV/AIDS awareness activities in school and community level</li> </ul>
<b>Partners</b>	<ul style="list-style-type: none"> <li>• Community Development center (CDC)-Doti</li> <li>• Namuna Integrated Development Council-Rupandehi</li> <li>• Indreni Forum for Social Development-Nawalparasi</li> <li>• Union for Culture Human and Environment Protection-Sunsari</li> <li>• Prayatnashil Community Development Society-Dhading</li> </ul>
<b>Geographical Coverage (District and VDC coverage)</b>	Doti-Far Western Development Region Rupandehi and Nawalparasi: Western Development Region Sunsari: Eastern Development region Dhading and Kathmandu: Central Development region
<b>Budget for Health Sector 2011</b>	NRs. 3,200,000/- (Doti, Dhading and Kathmandu)
<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	<p>Restless development is also involved in advocacy to raise awareness amongst school students and rural young people regarding their health as well as empower them with the knowledge, skills and confidence required to make life-changing decisions about themselves and we also lobbying with MOYS to implement youth policy.</p> <p>Description of working area/activities</p> <ul style="list-style-type: none"> <li>• Coordination meetings among the stakeholders at placement level</li> <li>• Radio Program/media coverage</li> <li>• Support to develop action plan to school</li> </ul>



	<ul style="list-style-type: none"> <li>• Green Club district level bi-monthly meeting</li> <li>• Establish resource centre and provide information</li> <li>• Identification of Issues and Support to develop action plan</li> <li>• Support Green Clubs to organize exposure visit of its members to various service delivery organisations and develop linkages eg. Health Post, DPHO, DEO</li> <li>• Training and development</li> </ul>
<b>How can AIN HWG Contribute to effective health sector strategy implementation?</b>	By building network and coordination among the organisation working in health sector
<b>Documents, Manuals, Research Reports and other papers produced by the organisation</b>	KAP Survey, Mid-term review report, Annual Report, Life Skill based School health Curriculum, school based SRH manual, Baseline and end line survey report, Programme quality compendium Manual, Peer educator training manual

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>Save the Children International</b>
<b>Address / Telephone</b>	Nepal Country Office, JDA Complex, Bag Darbar, Sundhara GPO Box: 3394, Kathmandu, Nepal. Tel: 977-1-4258140, 4222271
<b>Contact Person/ Designation</b>	<b>Dr. Ashish KC</b> Program Manager, Health and Nutrition
<b>Email</b>	ashish.kc@savethechildren.org
<b>Major Health Program Focus</b>	Adolescent Health, Maternal, Newborn, Child Health and Nutrition Human Resource For Health
<b>Program Components</b>	Adolescent Sexual and Reproductive Health Community based Newborn Care Program Human Resource For Health Integrated Management of Childhood Illness Program Integrated Nutrition Program Nepal Family Health program School Health and Nutrition Program Skilled Birth Attendant training
<b>Implementation Approach</b>	Partnership with Local NGO Government authority from centre to grass root level
<b>Activity Details</b>	School Health and nutrition services System support to enable health workers and volunteers to deliver newborn care and management of sick child System support to enable community health worker to manage malnutrition in the community
<b>Partners</b>	Indreni Service Society, Bhawani Integrated Development Centre, Kalika Sunshine BASE NNSWA CDC PEACEWIN RSDC CDS SCDC SDF RSDC District Health Office

<b>Geographical Coverage (District and VDC coverage)</b>	Siraha, Kapilvastu, Pyuthan, Bardiya, Nawalparasi, Rukum, Banke, Kailali, Kanchanpur, Rolpa, Sunsari, Saptari, Achham, Doti, Bajura NFHP through-Jumla, Dailekha, Surkhet, Dang, Kalikot, Salyan, Sindhuli, Sarlahi
<b>Budget for Health Sector 2011</b>	NRs. 173,950,000/-
<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	Health System Strengthening through strengthening Human Resource for Health
<b>How can AIN HWG Contribute to effective health sector strategy implementation?</b>	AIN HTG can develop a joint commitment to Ministry of Health and Population for Nepal Health Sector Program II (2010-2015)
<b>Documents, Manuals, Research Reports and other papers produced by the organisation</b>	KPC Survey, Mid-term review, Annual Report, Country Annual Plan, Country Strategic Plan, End of Project Report

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>Terre des hommes</b>
<b>Address / Telephone</b>	Jhamsikhel, Lalitpur, PO Box: 2430, Kathmandu, Nepal
<b>Contact Person/ Designation</b>	<b>Jason Squire</b>
<b>Email</b>	jason.squire@tdh.ch
<b>Major Health Program Focus</b>	Disability and Food Safety/Nutrition
<b>Program Components</b>	Disability, Nutrition
<b>Implementation Approach</b>	<ul style="list-style-type: none"> <li>• Community-based rehabilitation for disabled children</li> <li>• Enhancing the nutritional and health status of malnourished children through a community-based approach</li> <li>• Reducing the number of malnourished children from urban and rural marginalized communities significantly by enabling mothers and caretakers to ensure access to micronutrient-rich food 'Sarbottom Pitho Plus ( SP+)'</li> </ul>
<b>Activity Details</b>	<ul style="list-style-type: none"> <li>• Support to community-based rehabilitation for disabled children</li> <li>• Addressing the nutrition status of antenatal and postnatal mothers and children under the age of three, improve their health and nutrition status</li> <li>• Production and ensuring access of micronutrient-rich food to the malnourished children from urban and rural marginalized communities</li> </ul>
<b>Partners</b>	DHO and PNGO (Hospital and Rehabilitation Center for Disabled Children, Chhimeki Sanstha Nepal)
<b>Geographical Coverage (District and VDC coverage)</b>	<ul style="list-style-type: none"> <li>• 26 Districts for Disability Program</li> <li>• 11 wards of Kathmandu Metropolitan City (9, 12, 13, 14, 18, 19, 20, 30, 34 &amp; 35) and three VDCs (Naubasta, Rajhena and Kohalpur) in Banke for Nutrition Programme</li> </ul>
<b>Budget for Health Sector 2011</b>	NRs. 14,660,000/-
<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	Treatment and Rehabilitation of children with disability and their rights and inclusion; Highlighting importance of health practices including nutritional health; Reduction of malnutrition through fortified flour (sarbottom pitho)

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<b>How can AIN HWG Contribute to effective health sector strategy implementation?</b>	Developing strategic document for health sector, health management system, developing mass communication materials for public awareness programme, assuming role in international community, out-sourcing fund for improvement of health sector
<b>Documents, Manuals, Research Reports and other papers produced by the organisation</b>	In the process of finalizing the nutrition survey conducted in the project area in Kathmandu

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>United Mission to Nepal</b>
<b>Address / Telephone</b>	Thapathali, Kathmandu, Nepal Tel: 977-1-4228118, 4268900, Fax: 977-1-4225559
<b>Contact Person/ Designation</b>	<b>Netra Prasad Bhatta</b> Health Team Leader
<b>Email</b>	netraprasad.bhatta@umn.org.np
<b>Major Health Program Focus</b>	
<b>Program Components</b>	Maternal and Newborn Health, Adolescent Sexual and Reproductive Health, Water Sanitation and Hygiene, Food Security and Nutrition, Community Health, HIV and AIDS, Child to Child Health Program.
<b>Implementation Approach</b>	Capacity building of local NGOs and community people to empower women and children through their participation in health program towards their fullness of life.
<b>Activity Details</b>	Community focused health program including women empowerment, Maternal and newborn health including birth preparedness package, Adolescent Sexual and Reproductive health including life skills development, Food security and nutrition including positive deviance hearth, kitchen gardening promotion program, HIV and AIDS including care and support to PLHA, Water Sanitation and Hygiene including sanitary toilet promotion, School Health Education, Health System Strengthening and Quality of Care and improvement.
<b>Partners</b>	17 local NGOs and District Health Offices
<b>Geographical Coverage (District and VDC coverage)</b>	Districts: Mugu, Bajhang, Rupandehi, Rukum, Dhading, Doti, Sunsari, Kapilvastu, Nawalparasi and Morang. Majority of the prioritized and needy VDCs of the targeted districts are covered by the program
<b>Budget for Health Sector 2011</b>	NRs. 30,810,322/-
<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	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.

<p><b>How can AIN HWG Contribute to effective health sector strategy implementation?</b></p>	<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>
<p><b>Documents, Manuals, Research Reports and other papers produced by the organisation</b></p>	<p>Christian Life Education Manual, Audio-visual of “Saving mothers and babies”, UMN health strategy booklet, Annual reports. etc.</p>

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>WaterAid in Nepal (WAN)</b>
<b>Address / Telephone</b>	Kupondole, Lalitpur, GPO Box: 20214, Kathmandu, Nepal Tel: 977-1-5552764
<b>Contact Person/ Designation</b>	<b>Om Prasad Gautam</b> Social Development Adviser
<b>Email</b>	omprasadgautam@wateraid.org; wateraidnepal@wateraid.org
<b>Major Health Program Focus</b>	
<b>Program Components</b>	<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"> <li>• Support communities, defined as per the criteria for choosing such communities, to demand and exercise WASH rights</li> <li>• Enhance access of poor and vulnerable communities to safe, affordable, equitable, inclusive and sustainable WASH facilities</li> <li>• Strengthen the capacity of partners to effectively deliver WASH services</li> <li>• Support government and relevant sector stakeholders to help address WASH sector key blockages to meet the national targets</li> <li>• Drive WASH as a bedrock intervention in health, education, livelihoods, and influence other relevant sectors to prioritise WASH as an integral part of their development discourse</li> </ul>
<b>Implementation Approach</b>	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.
<b>Activity Details</b>	<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"> <li>• A stronger emphasis on sanitation and hygiene to achieve ODF status in communities we work in</li> <li>• An explicit focus on E &amp; I and on affordable WASH services for the poor</li> <li>• A practice of totality concept for achieving universal access/ coverage in our working areas</li> </ul>



	<ul style="list-style-type: none"> <li>• M &amp; E for advisory/decision support: a more robust and user-friendly M&amp;E data system</li> <li>• A focus on water security management (i.e. water resource management, and water quality and water safety plans)</li> <li>• Amplification of grassroots and community voices for practice and policy changes</li> <li>• A renewed focus on low-cost technological innovations</li> <li>• Developing cross-sectoral linkages of WASH with health, local development, education sectors</li> <li>• A focus on WASH as it pertains to child rights</li> <li>• Interventions in small towns' WASH issues: rights, access, governance, etc.</li> <li>• Partnership with youth groups for advocacy work</li> <li>• Engagement with the media and the private sector for collaboration to spread awareness</li> <li>• Disaster risk management and climate adaptation work</li> <li>• Mitigation/mediation of conflicts with regard to sources of water</li> </ul>
<b>Partners</b>	Nepal Water for Health (NEWAH), Lumanti Support Group for Shelter (Lumanti), Environment and Public Health Organisation (ENPHO), Center for Integrated Urban Development (CIUD), Urban Environment Management Society (UEMS), NGO Forum for Urban Water and Sanitation (NGO Forum) and Federation of Drinking Water and Sanitation Users in Nepal (FEDWASUN)
<b>Geographical Coverage (District and VDC coverage)</b>	Udayapur, Siraha, Gorkha, Morang, Sunsari, Chitwan, Dhading, Baglung, Sindhuli, Makwanpur, Syangja, Bhojpur, Kavre, Sankhuwasabha, Kathmandu, Bhaktapur, Lalitpur, Ilam, Dhankuta, Ramechhap, Gulmi, Pyuthan, Dang, Baitadi, Doti, Surkhet, Darchula, Dadeldhura
<b>Budget for Health Sector 2011</b>	£ 2.1 million (overall WAN budget)
<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	<ul style="list-style-type: none"> <li>• Mainstreaming WASH as an integral part of health promotion to reduce WASH associated diseases burden in Nepal.</li> <li>• Promote hygiene and sanitation in conjunction with other essential health care services to mainstream hygiene and sanitation promotion. Adopt key performance indicators for behaviour change toward improved hygiene practices</li> <li>• Establishment of Water Quality Surveillance system in Nepal</li> <li>• Identification of focal division / centre to deal with WASH in Health initiatives</li> </ul>

	<ul style="list-style-type: none"> <li>• Initiation of Stop Diarrhoea campaign or integration of WASH in Health campaigns</li> <li>• Strengthen cross-sectoral collaboration &amp; coordination between Health and WASH sector</li> </ul>
<b>How can AIN HWG Contribute to effective health sector strategy implementation?</b>	Strategic engagement and policy support in any health related interventions. Dissemination of NHSP-II among INGOs community and ensure support for its implementation at various level. 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 organisations 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 and NHSP-II. Feature some issues and support both technically and financially.
<b>Documents, Manuals, Research Reports and other papers produced by the organisation</b>	Country Strategy (2010-2015), hygiene promotion comprehensive package, stages of hygiene monitoring paper, access to WASH for people living with HIV/AIDS paper, equity and inclusion in WASH sector paper, diarrhoea outbreak prevention and management tools, menstrual hygiene management paper, Health and Hygiene Promotion Training Manual, The water and sanitation millennium development targets in Nepal, Water Laws in Nepal, Money down the pan, Community based water resource management, community led total sanitation, sanitation position paper, local financing, long term sustainability monitoring etc.
<b>How can these be available to AIN Members?</b>	Yes (up-on formal official request letter / e-mail)

<b>Organisation Information</b>	World Education is an INGO working in Nepal since last 30 years. World Education is dedicated to improving the lives of the disadvantaged through economic and social development programs.
<b>Name of Organisation</b>	<b>World Education, Nepal</b>
<b>Address / Telephone</b>	Ratopul, Kathmandu, Nepal. Tel: 977-1-4422385
<b>Contact Person/ Designation</b>	<b>Shyam Shrestha</b> Project Coordinator
<b>Email</b>	shyam@wei.org.np
<b>Major Health Program Focus</b>	Maternal and Child Health
<b>Program Components</b>	Integrated Health Literacy and life skills
<b>Implementation Approach</b>	Enhancing community efficacy by a) building the capacity of female Community Health Volunteers (FCHVs) to facilitate health education and outreach activities and b) involving youths in promoting healthy practices and use of services available through local health facilities.
<b>Activity Details</b>	<ul style="list-style-type: none"> <li>a) Health Education and Adult Literacy (HEAL) Class</li> <li>b) Small Grant Support program</li> <li>c) Youth Learning Circles</li> <li>d) Girls Access to Education (GATE)</li> </ul>
<b>Partners</b>	<p>The program is run in partnership with the Ministry of Health and Family Planning at the national and district levels, Village Development Committees, local NGOs, mother groups, health facility operations and management committees.</p> <p><b>List of Local NGO partners:</b></p> <ol style="list-style-type: none"> <li>1. Bagmati Welfare Society Nepal (BWSN) - Sarlahi</li> <li>2. Development Concern Society (DECOS) - Rolpa</li> <li>3. Local Development Training Center (LDTC) - Mahottari</li> <li>4. Mahila Upakar Munch (MUM) - Banke</li> <li>5. Samudayik Digo Bikash Karyakram (SADIKA) - Salyan</li> <li>6. Sindhuli Integrated Development Service (SIDS/Nepal) - Sindhuli</li> <li>7. Social Welfare Committee (SWC) - Dang</li> <li>8. Women Association For Marginalized Women - Surkhet</li> </ol>
<b>Geographical Coverage (District and VDC coverage)</b>	Rolpa, Salyan, Surkhet, Banke, Dang, Sarlahi, Mahottari, Sindhuli
<b>Budget for Health Sector 2011</b>	US\$ 331,665

<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	General awareness raising regarding good health practices among the poor and marginalized groups of people Integrated literacy package for young women and Adolescent girls, which focuses on good health practices and behavior changes
<b>How can AIN HWG Contribute to effective health sector strategy implementation?</b>	Advocate the importance of health education Capacity building of local NGOs
<b>Documents, Manuals, Research Reports and other papers produced by the organisation</b>	Several teaching/learning materials.

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>World Neighbors</b>
<b>Address / Telephone</b>	62 Docha Marg, Baluwatar, Kathmandu, Nepal Tel: 977-1-4417272, 4414715
<b>Contact Person/ Designation</b>	<b>Dr. Shibesh Chandra Regmi</b> Regional Associate Vice President, Asia
<b>Email</b>	infoasia@wn.org
<b>Major Health Program Focus</b>	
<b>Program Components</b>	Primary Health, Public Health, Safe Motherhood, Prenatal Health Care, Family Planning and Reproductive Health Care, Food Safety/Nutrition, Health Education Services/School Based Health Centers, Capacity Building of the Health Care Personnel and Institutions, Environment health/ Drinking Water/ Sanitation
<b>Implementation Approach</b>	Using door to door visits to disseminate information as well as health services; providing 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; help the community to carry out a holistic approach to identify and analyze their asset base and needs/problems, build their collective plan, take actions to fulfill their vision; reinforcing the community's ability to sustain their self-development; facilitating the community to disseminate their results and learning to other I/NGOs, donors, government, research institutes, academia for the multiplication of results and widen impact; helping the community to engage with networks, coalitions, forums, social movements and other like minded organisations for influencing policies and practices at various levels
<b>Activity Details</b>	n/a
<b>Partners</b>	Baudha Bahanupati Project (BBP) Pariwar, Ecology, Agriculture & Rural Development Society (ECARDS), Chetana (Awareness), Dhanusha Sewa Samiti (DSS), Integrated Rural development Society (IRDS), Rural Community Development Service Council (RCDSC), Rural Women Upliftment Association (RWUA), Sindhuli Integrated Development Service (SIDS), Tamakoshi Sewa Samiti (TSS), Women Cultural Development Center (WCDC) and Women Group Coordination Committee (WGCC)
<b>Geographical Coverage (District and VDC coverage)</b>	Sarlahi (7 VDCs), Dhanusha (6), Mahottari (25), Sindhuli (3), Chitwan (4), Dolakha (9), Kavre & Sindhupalchowk (19)

<b>Budget for Health Sector 2011</b>	NRs. 3,869,309/-
<b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b>	Safe abortion. Safe delivery, awareness & treatment (HIV/AIDS), access of reliable, efficient and affordable health services to rural women and other poor, marginalized and excluded people
<b>How can AIN HWG Contribute to effective health sector strategy implementation?</b>	By engaging with concerned government ministries, departments to advocate for pro-poor health policies which allow poor people, inclusive of women and the marginalized groups, to have access to regular, reliable and affordable health services (both community and reproductive)
<b>Documents, Manuals, Research Reports and other papers produced by the organisation</b>	Annual Reports, Compilation of successful Case Studies & Brochures

<b>Organisation Information</b>	
<b>Name of Organisation</b>	<b>World Vision International Nepal (WVIN)</b>
<b>Address / Telephone</b>	Jhamsikhel, Lalitpur-3, GPO Box: 21969, Kathmandu, Nepal Tel: 977-1-5013570/5547177, Email: info_nepal@wvi.org <a href="http://nepal.wvasiapacific.org">http://nepal.wvasiapacific.org</a>
<b>Contact Person/ Designation</b>	<b>Min Raj Gyawali</b> Technical Specialist MCH-N
<b>Email</b>	min_gyawali@wvi.org
<b>Major Health Program Focus</b>	
<b>Program Components</b>	Maternal Child Health and Nutrition, HIV & AIDS, Water Sanitation and Hygiene (WASH)
<b>Implementation Approach</b>	Coordination with GoN at different level Partnership with communities, local government and local NGOs
<b>Activity Details</b>	<ul style="list-style-type: none"> <li>• Awareness raising on health and nutrition, WASH, HIV &amp; AIDS; birthing center promotion</li> <li>• Supporting GoN campaign (MCHN related)</li> <li>• Capacity building of HWs on MCHN issues</li> <li>• Nutrition promotion and ANC, delivery and PNC</li> <li>• Coordination, advocacy and help GoN and the communities to promote access and demand</li> <li>• Establish and sustain Community Based (CB) Growth Monitoring in coordination with DDC and DHO; strengthening CB-IMCI, CB-NCP</li> <li>• Help GoN in referral and treatment of severe malnourished</li> </ul>
<b>Partners</b>	World Vision International Nepal working with the communities and local government at the impact areas (with Area Development Program-ADPs). 27 local NGOs are working in MCH-N, WASH and HIV & AIDS
<b>Geographical Coverage (District and VDC coverage)</b>	12 Districts, 3 Municipalities and 83 VDCs
<b>Budget for Health Sector 2011</b>	NRs. 150,511,104/- (32% of total budget)

<p><b>Advocacy Issues in Health supporting to promote Quality Health Program of the Government</b></p>	<p>Reducing child mortality through strengthening child health programmes (Child Health Now Campaign to achieve MDG 4)</p>
<p><b>How can AIN HWG Contribute to effective health sector strategy implementation?</b></p>	<p>It can support for the strategy development of policy and strengthening collaboration by coordinating among development organisations. Information sharing and dissemination can also contribute for effective implementation</p>
<p><b>Documents, Manuals, Research Reports and other papers produced by the organisation</b></p>	<p>BCC materials on MCH and Nutrition, Survey Reports on Community Nutrition, Global Manual on MCH Nutrition 7-11 Approach, Global Manual on Water &amp; Sanitation</p>