

UMN News

Issue 44 | August 2014



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#Celebrate60

Fullness of life for all, in a transformed Nepali society

Dear friends,



To the blasts of narsiha (Nepali trumpets) and the throbbing of drums, a colourful procession snaked its way through the cobbled streets of Tansen. A decorated HiLux led the way, but this wasn't a wedding – it was a birthday. United Mission Hospital Tansen was celebrating its 60 years of service to the people of Palpa District.

With the white of nurses' uniforms and doctors' lab coats interspersed with the vibrant colours of Nepali ethnic costumes, the procession circled the town. It was a moving experience to march with them, knowing that the many on-lookers were probably remembering family members who owed their health, and possibly their lives, to this hospital perched on a hill. They would all be familiar with the motto painted about the gates: We serve, Jesus heals.

Sixty years ago, Dr Carl Friedericks, his wife and children made the long walk up from Butwal into the hills to their new home, where they established a clinic in the bazaar. Eight months later they were joined by Ragnar and Karla Elfgaard, then Ingeborg Skjervheim and Dr Marjory Foyle (1955). Since those early days, the hospital has grown to a 165-bed facility and won multiple awards; a Nursing School has been established in collaboration with the Government, and the Palpa Community Health Project has served the district from 1958 to 1997.

It was great to have Dr Marjory, at the ripe old age of 93, with us for the celebrations. "Syabaash!" she said. "Well done! I have been to many hospitals all around the world, and I think this is one of the very best hospitals I have been to."

Congratulations, UMHT. Well done, from all of us at UMN. May God go with you as you continue to serve and heal, in Jesus' name.

Mark Galpin
Executive Director

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HERE'S TO HEALTH!

It's 7 January, 1954. Outside an ordinary brick house in the narrow street at Bhatgaon, a small crowd is milling about, mainly women and children. Inside, a couple of Indian nurses are laying out clean instruments and sorting medicines. A large white woman, wearing a white lab coat, her head crowned with a thick plait of silver hair, steps into the street with a smile.

The crowd draws back nervously. "Who's first?" asks the Nepali helper at her side. "Who wants to see the doctor?" Bare feet shuffle on the dirty ground. Children peer cautiously out from behind their mothers. No-one wants to take that step forward.

The white woman waits, still smiling. At last an elderly woman elbows her way to the front. Below her dirty sari are skinny, wrinkled ankles. Her chola is stained. Pus is dripping out of both her eyes. "I'm first!" she says. She is the local midwife.¹

When Dr Bethel Fleming opened that clinic in Bhatgaon in 1954, she could never have guessed how UMN would grow and make a huge contribution to health care in Nepal. She couldn't have foreseen the five hospitals, the many health clinics, the community health projects and the specialist units that would emerge from a mission not even fully formed at that time. She would be amazed to meet the thousands of doctors, nurses, community health workers and birth attendants who owe at least some of their training and skills to UMN.

Here are just a few of the contributions UMN has made to health services in Nepal:

- **Hospitals:** at Tansen (1954-present), Shanta Bhawan (1956-1983), Bhatgaon (1960-1974), Amp Pipal (1958-2001), Okhaldhunga (1961-present) and Patan (1983-2008).
- **Nurse training:** first at Shanta Bhawan, and then at Lalitpur Nursing Campus. UMN also helped with the establishment of the Tansen Nursing Campus.
- **Nutrition:** Sarbottam Pittho (excellent flour) has saved the lives of many Nepali children. See page 4.



Dr Bethel sees patients in one of the early UMN clinics in the Kathmandu Valley.

- **Mental Health:** UMN's Mental Health Unit (1984-2005) trained health post staff and health professionals, getting mental health on the national agenda. See page 6.
- **Oral Health:** UMN's Oral Health Unit (1986-2008) successfully lobbied for the introduction of fluoridated toothpastes in Nepal. See page 10.
- **HIV & AIDS:** The Sakriya Unit (1996-2005) was one of the first organisations to work on awareness-raising and prevention of HIV. Sakriya is now an independent organisation.
- **TB:** UMN secondees worked to establish TB NET, which used emerging technologies to share information and treatment options (1994-2003). UMN Hospitals and Health Programmes pioneered the Directly Observed Therapy - Short Course (DOTS) approach.
- **Oral Rehydration:** Bet you didn't know that Nepal was probably the first developing country to make and market its own oral rehydration mixture, Jeevan Jal! San Ruohonieminen introduced the recipe to Royal Drugs Ltd in 1972, and production started in 1973.

UMN continues to build on this tradition, working with partners to train health personnel, support local health posts and birthing centres, teach families about health, hygiene and sanitation, and promote good nutrition. UMN's two hospitals provided nearly NRP 200M (USD 230,000) worth of free care last year (2012-2013).

So, charge your glasses and raise a healthy, unsweetened fruit juice toast to UMN. Here's to health!

¹ The story is adapted from "The Fabulous Flemings of Kathmandu", by Grace Nies Fletcher, 1964.

FOOD GLORIOUS FOOD

“During the last year,” wrote Miriam Krantz in 1990, ***“about 725,000 mothers have given birth. Ideally, the families looked forward to receiving these infant sons and daughters into their homes. However, more than 93,000 of these children did not live to celebrate their first birthday. For each of these children, for each mother, for each family, we mourn.”***

“Runche”, it’s called in Nepal. The tiredness, grumpiness, general un-wellness of small children who won’t eat, won’t play, just cry all the time. So many mothers have seen their “runche” babies decline rapidly, into apathy, sickness and death. These days, we’d call it the first stage of malnutrition.

In the early 1970s, around one in four babies born alive died before their first birthday. Diarrhoea carried many away, but malnutrition was also a big factor, especially when weaning began. UMN health workers were concerned. How could they stop this terrible waste, this sorrow of mothers and bereavement of families? Miriam and her team embarked on extensive research into feeding patterns and nutritious foods readily available in Nepal. The result was “Sarbotam Pitho”.

“Sarbotam Pitho was developed as a food that most rural families can provide for their children using their own home-grown products (two grains and soyabeans or another pulse) and their own traditional cooking methods,” explained Dr Mona Bomgaars in 1976. ***“The idea arose from the traditional pattern of serving a roasted, ground cereal preparation called ‘sathu’ to elderly folk without teeth, and to infants in other communities.”***

Sarbotam Pitho has since become a widely used nutritious food for young children, and has saved the lives of countless Nepali infants and toddlers. UMN’s Nutrition Unit promoted it widely, with staff travelling to remote districts to teach mothers how to provide good food for their children. These days, it is available in most markets and bazaars throughout the country. Mothers in UMN-supported nutrition groups continue to learn about its benefits, and how to make it themselves.

Lyn Jackson
Communications Director

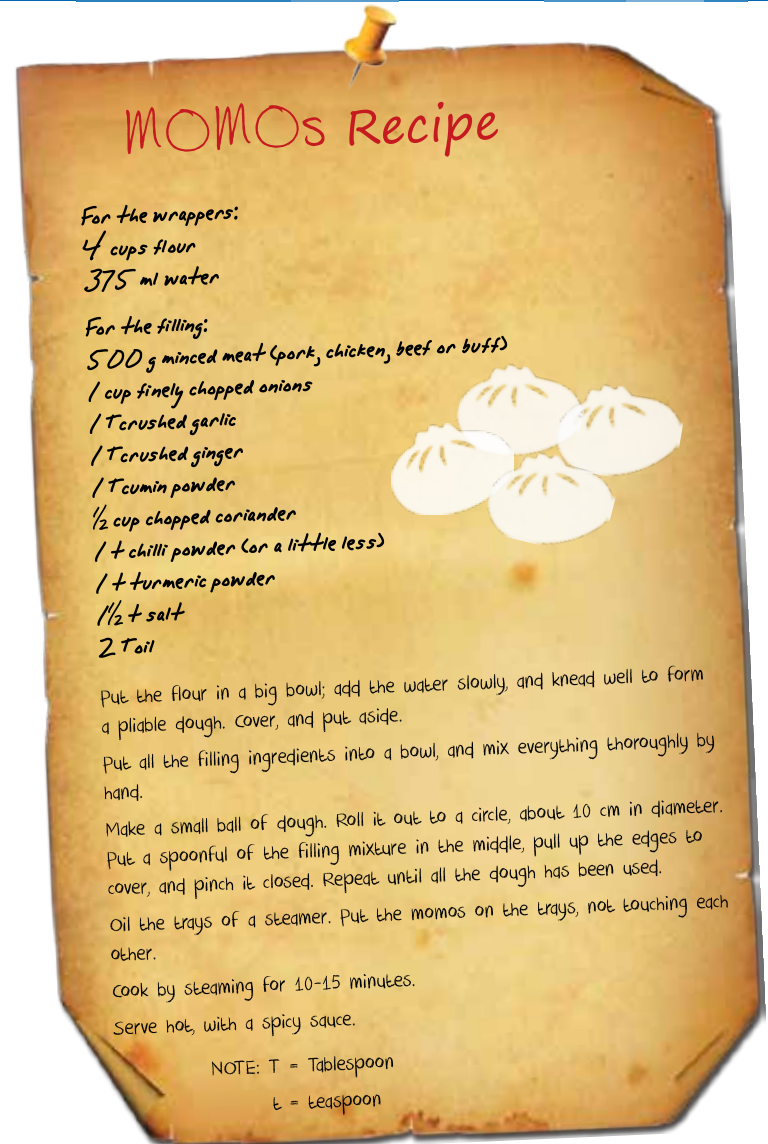


Sanu Babu was just one of the children whose lives were saved by Sarbotam Pitho. He was close to death when his mother, Chini Maya, brought him to the UMN Nutrition Rehabilitation Centre at Chapagaon. After 17 days, he was normal weight for height, and on his way home in the arms of his delighted mother. Sanu Babu’s story was featured on a nutrition poster, illustrating how the right food and lots of love can transform a life.

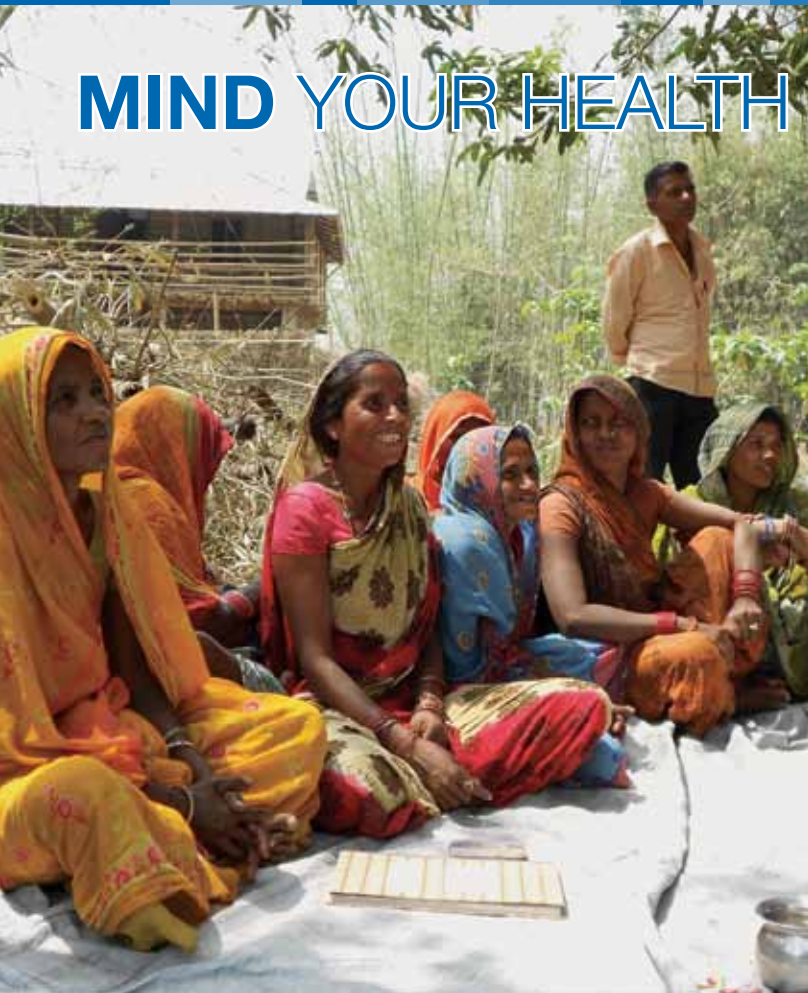


Many organisations have been working in Doti district, but none of them have focused on nutrition. UMN's Doti team identified the need for a nutrition programme in the community, and has started with a small intervention at the community level. Positive Deviance Hearth (PD – Hearth) aims to improve the health status of malnourished children through locally-available foods. There are 56 malnourished children enrolled in the nutrition centre, categorised as moderately and severely malnourished. A nutrition centre like this runs for nine months in three villages. There is one facilitator in the centre, who runs classes for 18 days a month, and for the rest of the days visits households to support mothers and monitor their use of nutrition knowledge in their daily lives. In the centre, mothers are taught the importance of a balanced diet, how to make Sarbottam Pitho, and the importance of nutritious food for young children.

According to the Department of Health, in 2011-12 the proportion of malnourished children under five years of age of Doti district was 7.9%, making it one of the top five districts for malnourished children.



MIND YOUR HEALTH



UMN's partner PMC has had great success with Circle Process Meetings among people traumatised by their experiences in the terrible Koshi Flood. The meetings helped people deal with their bad memories, and empowered women especially to take up leadership at a community level.

“Thousands of severely mentally ill people spend their lives locked-in under extremely difficult situations in their homes,” wrote Dr Chris Wright, who helped establish UMN’s Mental Health Programme in 1984. “If the family cannot cope with the situation, they are often sent to jail, because there is no other place to keep them.”

UMN’s involvement in mental health began with this realisation – that thousands of people were not able to access even basic treatment for mental illnesses. Most people believed that the cause was spiritual, and only traditional healers (jhankaris) could do anything. In 1993, Dr Wright estimated that a quarter of patients coming to community health posts had psychological disorders, but their chances of being seen by someone with any mental health training was minimal.

UMN’s Mental Health Unit set out to provide that training, at all levels of the health system, from health post workers to doctors and psychiatric nurses. Skilled professionals were seconded to the Ministry of Health, the Institute of Medicine, the Teaching Hospital and the Mental Hospital. The UMN team also worked to get mental health on the national agenda. In 1996, the National Mental Health Policy was approved by the Government of Nepal and, in 2000, legislation was drafted to give legal protection to the mentally ill, due in part to UMN’s advocacy efforts.

A model for a community mental health programme was successfully piloted as part of the Lalitpur Community Development and Health Project, “visible proof of the possibility of mental health care in Nepal”.¹ This was extended to Kaski, and later Morang, and formed the foundation for the Institute of Medicine’s Western Region Mental Health Project. This ambitious project provided mental health services in 11 districts of the Western Region. Research as part of the Tri-Agency Partnership (now Regional Inter-Agency Partnership) resulted in a handbook for community-based trauma counselling, published in 2003.

In 2003, UMN staff formed the Centre for Mental Health and Counselling, Nepal – an independent organisation to carry on this important work. CMC-N is actively involved in a range of mental health activities, including training, service provision (especially in remote and rural locations) and resource development. Trauma counselling, needed as a result of the 10-year insurgency as well as because of disasters (like floods and landslides), has also been an important part of their work.

¹ UMN Annual Report, 1988-89



Still a long way to go!

Mental illness is still feared and misunderstood by many in Nepal. Those who have mental disorders are pushed aside to dark rooms, labelled as a curse, accused of possessing evil spirits and live lonely and abandoned lives. Through its partners, UMN runs Mental Health Programmes in Dhading, Rukum, Rupandehi, Doti, Bajhang and Sunsari, to spread the good news that mental illness can be managed.

Major areas of focus:

- Reduce stigma and discrimination and increase awareness surrounding mental health issues;
- Strengthen basic preventive and curative mental health services in Nepal;
- Develop organisational capacity in mental health;
- Produce and disseminate evidence about mental health issues in Nepal.

Current challenges:

- Unavailability of drugs in health centres;
- Inadequate number of trained mental health professionals;
- Numerous myths about mental illnesses and their causes.

Recently, a 19-episode radio programme called **Champa ko Aagan** produced by UMN was broadcast in all districts of Nepal through Radio Nepal. Issues of stigma, signs and symptoms, available treatment and management options along with myths regarding various mental illnesses like depression, epilepsy and hysteria were covered in this programme. The programme's popularity and the response to it were very encouraging.

National Mental Health Network

UMN helps to facilitate the National Mental Health Network, a group of 20 organisations involved in mental health services and advocacy. The group shares information and resources about mental health, and is currently lobbying for a National Mental Health Multi-Sectoral Action Plan and for mental health to be addressed in the new Health Policy/Act.




A LONG ROAD TO RECOVERY

Janaki Devi, from Bajhang, faces a long journey to recovery from mental health problems that have plagued her for years. But at least she is on that road, thanks to UMN's partnership with Pragatishil Yuwa Samaj, a local organisation that has trained local Health Post workers to recognise and provide basic treatment for mental illnesses. Janaki Devi is undergoing treatment at a rehabilitation centre in Kathmandu.



United Mission Hospital Tansen Celebrates 60!

Our vision is also to serve in
Community Health. From the
beginning, we have been trying
to provide holistic service to the
community. Physical treatment only
is not adequate, but we also care
for people spiritually and financially
through our Pastoral Care division.
RACHEL KARRACH
Hospital Director.



I would like to extend my sincere respect to contributors of the hospital and deep heartfelt thanks to those who passed away serving people. Among Nepali hospitals, the Mission Hospital is where patients get life even if they do not have money.

BHIMSEN KARKI

Chief Secretary of Palpa Chamber of Commerce and Industry.

The first word I am going to say is Syabaash (well done)! I have been to many many hospitals all around the world and I think this is one of the very best hospitals that I have been to. You have wonderful staff, wonderful strength, and you have patience when needed.

DR. MARJORY FOYLE

Served at the hospital 1955 -1960.

Oral Health



the work continues

UMN's Oral Health Programme (OHP) started in 1987 with the goal to improve oral health and to give the people of Nepal healthy and dignified lives.

After many years of lobbying and advocacy work, the National Strategic Plan for Oral Health was formulated in 2001. This was followed by the establishment of the Oral Health Focal Unit, headed by a dentist under the Department of Health, Ministry of Health & Population. This unit is responsible for carrying out oral health promotion activities and providing oral health services.

Over the years, OHP developed school oral health education programmes to promote oral health amongst children and teachers. Basic Oral Health Care training programmes for Primary Health Care Workers enabled them to provide preventive measures and basic treatment for pain relief, extractions and simple filling of cavities.

UMN's OHP played an important role in introducing and promoting fluoridated tooth pastes in Nepal - one of its major achievements. In 2001, popular and affordable toothpastes like Close Up and Pepsodent were fluoridated and brought into the Nepali market.

In 2003, the Oral Health Programme became an independent non-government organisation (NGO). Health & Development Society Nepal (HDSN) was formed to carry out oral health activities in the future. A community-based dental clinic runs under HDSN.

HDSN initiated a national oral health survey in 2004, following the WHO Pathfinder Survey guidelines, which provided a basis for the development of targeted oral health programmes.

The organisation is still actively involved in school oral health programmes and dental camps, and runs orientation programmes for school teachers, health workers and community volunteers. Together with Sparsha Nepal, HDSN's Oral Health Programme has also been treating and making research reports on the oral health condition of HIV patients.

...**disability** is not
a **curse**, and can
be **treated**



No more a curse

Lekhanta B.K. was born with a disability in Rukum. He had bilateral club feet. Sadly his parents abandoned him. He was seen as a curse in the family and was left unloved and unattended. He ended up staying in a hostel for children with intellectual disabilities in Khalanga Bazaar in Rukum. His distant aunt sometimes took him to her house, but most of the time the hostel was the only place he could call home.

The staff of UMN's partner Disabled Protection Forum (DPF) were informed about Lekhanta. He was selected for treatment and to be a part of the UMN "Rehab Ambassadors" programme in Rukum.

At almost eight years of age, he was sent to Banepa Hospital in Kathmandu for his first treatment. His accommodation and all the needed support was given by Sundar Dhoka Sathi Sewa (SDSS), a UMN partner in Kathmandu, where he stayed for three months during his treatment.

Now, Lekhanta is a happy 12-year-old boy studying in Grade 6. He can play, walk and run like other children, and has been able to make friends too. His treatment and improvement has given a message to the community that disability is not a curse, and can be treated. One of Lekhanta's teachers says: "I am very grateful to DPF and UMN for the support they gave Lekhanta. Look at the progress he has made! He has definitely got a new life."



Bindu's House

Bindu's husband died three years ago from AIDS, leaving her alone with a 13-year-old son to raise. To feed themselves and to keep him at school, Bindu has taken on labouring work. "These jobs are while I still have power in my muscles," she says. "Let's see how long that will last."

Because of trouble with her landlord over her HIV status, Bindu and her son became homeless. UMN's local partner, the local church and the community stepped in, and built a one-room house for her. Bindu contributed as much as she could. Her new house even has a toilet!

Bindu's physical and mental condition mean that life continues to be a struggle for her. She would like to be able to start her own small business, so that she can support herself even when she is not strong enough for labouring work. "This way, I could earn enough for our daily needs, and save some for my son's education," she says. "After all, I have to think about his future as well."

Helping someone like Bindu does not cost much, but it can make such a difference. Wouldn't it be wonderful to make someone happy, with just our small help?

Kripa Subedi

UMN Health Officer, Rupandehi





facebook.com/umnepal



Like

2,271



@umnepal #UMN #Celebrate60



youtube.com/umnepal

THREE CHEERS FOR GOVERNMENT SCHOOLS!

Two of UMN's partner schools recently won the prestigious International Schools Award, given by the British Council to schools which complete a demanding set of projects in collaboration with a partner school in another country. Dolbhanjyang HSS (Dhading) and Rampur HSS (Doti) were successful, the only two government schools out of the six receiving awards. In addition, Dolbhanjyang won the award for the best local curriculum design, for their work on Climate Change.

The project had involved the local community, mothers' groups, and parent and teacher groups. The students have made the school a plastic bag-free zone, installed taps for hand-washing, and planted trees. It's great to hear how a school without lots of resources can be inventive and creative.



HIV AND THE NEPALI CHURCH

Nine young people from churches across Nepal completed a semester-long study on HIV and AIDS, facilitated by Micah Network Nepal, on 8 June. This subject was a part of their four-year bachelor degree in theology (B Th). The study is based on the book *Hand in Hand*, published by Tearfund UK and translated into Nepali by UMN. The series of Bible studies in this manual are designed to equip pastors, youth leaders and the church congregation to have a deeper knowledge about HIV and see the issues surrounding it from a biblical perspective.

Shantikala Rai, a participant, says: "I grew up in a society where people with HIV and AIDS are seen as low and outcaste. I had similar views. This course has not only changed my perspective but has also put in me a desire to work with the HIV-affected people." Similarly, James Regmi says: "I am eager to take these teachings to my local church and tell them what the truth is, and what our responsibility is towards these issues of HIV and AIDS."



SHARE AND CARE GRADUATION

Share and Care runs diploma courses in Community Development Management. Recently on 13 June, twenty-three participants successfully graduated from the two-month-long residential training. The graduates were from 18 districts across Nepal. The training course emphasises transformation of self to be able to bring positive changes in the community. The course has built the participants' confidence to influence community development initiatives.



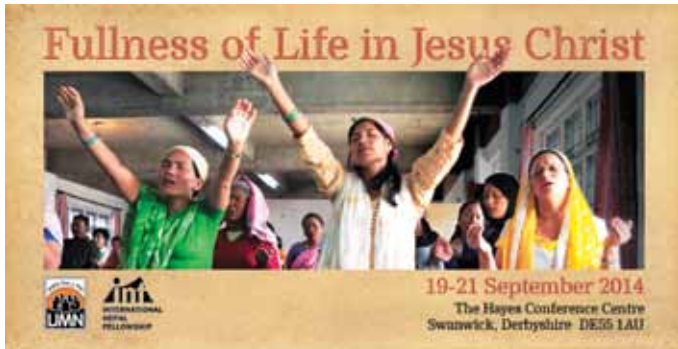
VALÉ DR BILL GOULD

With sadness, we report the death of Dr Bill Gould, who passed away on Sunday 13 July, 2014.

Dr Bill and his wife Margaret came to Nepal in 1965, and Bill served as a doctor at Tansen for many years. He served as Health Services Director from 1993 until leaving Nepal in 1998.

Bill helped set up the Hospitals Endowment Fund in Nepal, and later the UMN Hospital Endowment Trust in the UK.

Our deepest condolences to Margaret and the family.



REMINDER: INF/UMN Nepal Conference, UK.

19-21 September, The Hayes Conference Centre, Swanwick, Derbyshire.

Conference forms and information are on the UMN website:
www.umn.org.np/nepalconference2014

Contact Nepal Conference secretary on +44 0 121 472 2425 or email nepalconference2014@inf.org.uk

TIMELINE 60

Our fascinating interactive

Timeline 60 is now available on our website. The timeline takes you through the decades, and into the future. Hover over the timeline, and get glimpses of the past through photos.



Go to <http://www.umn.org.np/timeline60> for Timeline 60.

UMNEWS SURVEY

Have your say about **UMNews** and help us make it even better !

Go to <http://www.umn.org.np/umnews-survey>

Okhaldhunga – the centre of the world



“ We are thankful to God for taking us there! ”

For the last twelve years we have been working with United Mission to Nepal, ten of them in Okhaldhunga Community Hospital. Here we have learnt to see the truth in the Lord's words: “He has made clear to you, O man, what is good; and what is desired from you by the Lord: to do justice, to love kindness, and to walk humbly with your God.” (Micah 6.8)

UMN has been running health and developmental work in Okhaldhunga District for more than fifty years, based on “what is desired from us by the Lord”. It has been a good tradition for us to live and work in. It means meeting people as they are, with the needs they have of body and soul, and without regard to money, social rank, caste or religion. Kristin is working with Social Service and Nutrition, while Erik is a paediatrician and works as Medical Co-ordinator.

With the words of Dr. James Dick, its founder, Okhaldhunga Community Hospital was founded “in the part of East Nepal where we saw most people in need of health services, and no other services within reach”. It is remote, and people have felt isolated both during the civil war and afterwards. Here we have been taken into a tradition where hospital and community health work are closely and practically integrated, and make use of each other's services and resources. And where the local church, though fully independent and self-sustained, functions as the hospital's close ally, and offers a place of fellowship and mutual support for patients who want it. We have learnt a lot from being involved in this.

Seen from outside, Okhaldhunga may seem small and insignificant. Seen from inside, it is vast, the centre of the world. The Lord, who lives in our hearts, sees it from the inside. He was in Nepal before the mountains came, and will remain here long after we are gone. We are thankful to Him, and to UMN, for taking us here.

Kristin and Erik Böhler



pray



Although the National Health Policy includes mental health as an element in primary health care, mental health continues to have a low priority on the national health agenda. Individuals with mental disorders and their families are targets of stigma and discrimination. Mental illness in Nepal is higher among women, the poor and other vulnerable groups, which could be attributed to their low status in the community, unfair treatment and limited access to resources.

Please pray for a handful of organisations, including UMN, working for the well-being of the people who are suffering from mental illness and trauma.

UMN provides care and support to people living with HIV in Nepal, through its partners.

Some major concerns:

- Lack of access to treatment and test services in remote areas;
- Stigma and discrimination that people with HIV have to live with;
- Some schools deny admission to HIV-affected children;
- Participation of church leadership in raising awareness among those at risk, especially young people.

Please pray for these concerns, and for UMN's work for people living with HIV and AIDS in Nepal.

Malnutrition rates in Nepal are among the highest in the world. World Food Programme states that 41% of children under five years are stunted, 29% are underweight and 11% are wasted. Thirty-five percent of women of reproductive age and 48% of pregnant women are anaemic. UMN has a long history in Nepal in trying to improve these conditions and protect children and mothers from the ill effects of malnutrition. Please pray for this work to continue; for the much needed rain this monsoon so that crops would yield well, and that lives would be saved through UMN's joint effort with partners and government agencies.



join us

UMN's cross-cultural teams provide opportunities for suitably skilled expatriates to work with Nepali colleagues, sharing technical skills and demonstrating God's loving concern for all people, particularly the poorest and most vulnerable.

Expatriate team members do not receive a salary or remuneration from UMN directly, but are self-supported volunteers, or supported by a sending mission or church in their home country. If you are interested in any of these (two listed below) positions, or if you would like to ask about other opportunities for service in UMN, please contact Valerie Lockwood at expat.recruitment@umn.org.np to learn more. Send your CV or resumé with your email.

PRIORITY NEEDS

Surgeon – United Mission Hospital Tansen

General Surgeon with full postgraduate qualifications, currently registered with his/her own national regulating body. Work involves dealing with both elective and emergency general surgical cases and also teaching and mentoring junior Nepali doctors.

Education Advisor – Kathmandu, with travel to regional areas

A person able to support the Education Team in their aim to eliminate barriers, enable access to education for all, help communities recognise the value of education and promoting child rights. Experience in formal/non-formal education, teacher training or other education related areas is required.





tell others

At last! We've finally been able to negotiate our way through a maze of requirements, and can now offer regular monthly giving through credit/debit cards.

In this edition, we launch "Friends of UMN", a regular giving opportunity – see brochure, enclosed.

Please tell others.

- Pass the enclosed brochure on to your friends, after you've joined up, of course!
- Email us at communications@umn.org.np for more copies of the brochure to give to others.
- Put up a "Friends of UMN" poster in your church; download and print from umn.org.np/friends or email us for printed copies.

Let's be friends!

FRIENDS OF UNITED MISSION TO NEPAL



donate



UMN's 60th Anniversary Appeal

For sixty years, UMN has been serving the people of Nepal, in the name and spirit of Jesus Christ. Join us as we celebrate that milestone, conscious of God's presence with us over that time, and confident that He will continue to work through us in the future.

Give 60 - \$60, £60, €60 (or more!) - to help UMN's work with families and communities in Nepal that struggle with poverty.

Go to umn.org.np/give60 for more information about UMN's 60th Anniversary Appeal.

How to give:

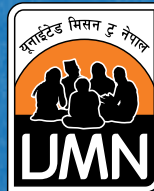
- Make out a cheque or money order payable to United Mission to Nepal. Make a note indicating how you would like your donation to be used. Post it! (to: UMN, PO Box 126, Thapathali, Kathmandu, Nepal)
- Use your credit or debit card and give via PayPal.
 - Go to umn.org.np/give60 and click on the **Donate Now** button below the area you wish to donate to.
 - You will be redirected to the PayPal page. Use your PayPal information to donate from your PayPal account.
 - Or click on **Don't have a PayPal account?** to make a payment using your Debit/Credit card.





“I BELIEVE THERE IS **SOMETHING** THAT CONTINUES TO **DRAW PEOPLE** TO SEEK HELP THROUGH UMN HOSPITALS AND COMMUNITY PROGRAMMES. THE **CARE**, THE **CONCERN**, AND THE **COMPASSION** WHICH PEOPLE EXPERIENCE WHEN THEY MEET PEOPLE INVOLVED IN UMN HEALTH SERVICES SELDOM FAIL TO IMPRESS.”

Dr Bill Gould, Health Services Director 1993-1998.



Fullness of life for all, in a transformed Nepali society

UNITED MISSION TO NEPAL

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