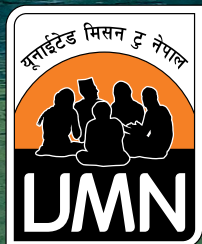


2019-2020 Annual Report



Fullness of life for all, in a transformed Nepali society

CONTENTS

- 2 Note from Board Chair
- 3 ED's Letter
- 4 Bajhang
- 6 Dhading
- 8 Dhading Disaster Relief Project
- 10 Doti
- 12 Kapilvastu
- 14 Mugu
- 16 Nawalparasi
- 18 Rukum
- 20 Sunsari
- 22 Where We Work
- 24 COVID-19 & Cluster Changes
- 26 United Mission Hospital Tansen
- 27 Okhaldhunga Community Hospital
- 28 Education/Good Governance
- 29 Grant Management Unit/Health
- 30 Integral Development/Monitoring, Evaluation, Accountability and Learning
- 31 Peacebuilding/Sustainable Livelihoods
- 32 Cross Cutting Issues
- 34 Central Services
- 36 Finance
- 38 Board
- 40 National & Cluster Partners
- 41 Supporting Partners

Thank you to all who contributed stories and photographs for this Annual Report

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NOTE FROM BOARD CHAIR

We began our August Board teleconference remembering Paul's words in 2 Corinthians 4. Between COVID-19 and other demanding challenges currently being addressed, "Hard pressed on every side but not crushed; perplexed but not in despair" seemed a fair summary of UMN's world recently.

One item on our agenda was the regular review of evidence that UMN is achieving its purposes, one being "Fullness of Life". Does the Board see evidence that "People in the communities where UMN and its partners work, increasingly experience and move towards the fullness of life."? I read Bhawana's story.

Bhawana is a 15-month-old girl. She was brought, malnourished, to our Child Nutrition Rehabilitation Centre. It was also found that she had a deep burn from rolling into the kitchen fire 39 days previously, as a result of which she lost three toes. So, she was also referred to the United Mission Hospital in Tansen for burn management.

After 22 days in hospital receiving burn treatment and skin grafting, she returned to the nutrition centre for nutrition rehabilitation, staying there a further 49 days. Because little Bhawana is from a large and extremely poor family, her treatment was funded from the Medical Assistance Fund.

UMN's holistic approach meant that while Bhawana was recovering, her mum could be taught how to prepare nutritious meals with readily available food that they can find in their village. But the care didn't stop there. Her mum was one of Bhawana's dad's two wives in a family of 11 so mum was also given advice about family planning possibilities. Also it was found that Bhawana hadn't received any of her regular vaccinations so staff made arrangements for her to get up-to-date with and complete these immunisations, involving her local health post.

I discovered that the name 'Bhawana' can be translated "feelings of love" and I found it humbling and inspiring that when she and her mum returned home, they'd encountered God's love in action. And as a family, through the treatment, vaccinations and learning, they'd taken a meaningful "move towards the fullness of life".

So, to the original question facing the Board, the answer was a 'yes', and, on reflection, I reckon that was the most straightforward, and the most inspiring decision of our teleconference!

ALEX SWARBICK

Board Chair





ED'S LETTER

Dear Friends,

For the first several months of this year, UMN was preparing plans for our next five-year strategy period. The second half of the year has of course thrown almost all of those plans into question.

We have had to adapt our participatory development approaches to a new context in which community groups cannot safely meet, our staff cannot reliably visit, and the people we serve are grappling with new, enormous risks to their lives, families and livelihoods. UMN's hospitals, having spent years moving away from reliance on foreign funding onto 'sustainable' patient income, have now been grappling with a major drop in that income due to lockdowns and fear of contagion.

A decade ago, at the time when 'resilience' was becoming a major new development buzzword, I was working for an INGO as a global Disaster Risk Reduction Advisor (though my title soon changed to Resilience Advisor). Part of the appeal of the buzzword was that 'resilience' took us beyond what we normally described as disasters. Its core insight was that communities needed to strengthen themselves against many interconnected shocks and stresses, not just natural hazards, and not just against known threats, but against the unknown, unexpected disruptions that push so many people back into poverty.

Today the world's resilience is being gravely tested, as is Nepal's. We cannot call the COVID-19 pandemic wholly unexpected, but it is an unprecedented shock to our interconnected globe, and one for which no country was fully prepared. The resilience of organisations like UMN and our partners is also on trial; how quickly can we shift into new ways of working when so many of the old ones have had to be indefinitely suspended?

Resilience to unusual and uncertain shocks requires the capacity to adapt. Assets like land and money can help, but they are not the full story; some of the richest countries in the world have been among the most vulnerable to this virus. Effective governance, access to reliable information, strong networks, high levels of social trust, institutions that help us experiment and innovate, as well as plan and prepare: all of these are vital when it comes to resilience-building.

UMN has worked for years to try to build these qualities in the communities we serve. This report brings together stories from before and during the coronavirus pandemic to highlight the different ways we have worked to increase people's resilience—not always under projects bearing that label, but as part of an overall holistic strategy to make people less vulnerable, and better able to reach for fullness of life.

I am more grateful than ever to UMN's individual and institutional supporters around the world, that global network of trust and prayer that makes us more resilient for the work to which Christ has called us. Thank you for your support through these times of trial!

JOEL HAFVENSTEIN
Executive Director

BAJHANG

UMN's work in Bajhang district is focused on improving quality education, food security, mental health, maternal and child health, women's group empowerment and community-based rehabilitation of people with disability. The cluster had three local partners and one cooperative partner (now phased out) this year.

Sixteen schools in Masta Rural Municipality (RM) received Child-Friendly Teaching Learning training to improve their teaching and learning environment through UMN's Far Western Education project. Through this we have seen the improvement in learning achievement from 49% to 59% and the attendance from 76% to 92%. The provincial government also declared one of the schools as a model school for the district.

Farmers from 104 households of Masta RM increased paddy (rice) production contributing to 10 more days in their annual food sufficiency. Similarly, introducing improved wheat varieties in four locations in our project site increased the yield to 50% higher than they used to get from the local wheat varieties. The awareness of the nutritional importance of food has increased in families along with the trend of vegetable cultivation and consumption. Farmers involved in vegetable cultivation now earn around NPR 10,000 – 20,000 (USD 83-167) from one harvest.

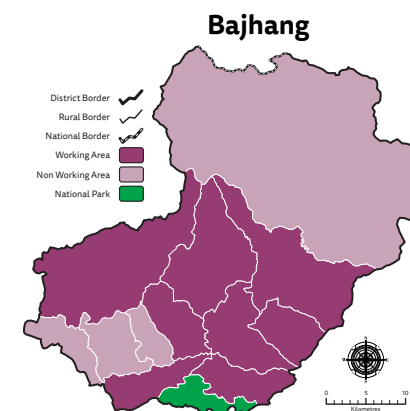
A successful project of Bajhang cluster is the Harmful Traditional Practice project which has for the last five years enabled community groups to successfully challenge the norms that form the basis of Chhau shed (Menstrual Hut)¹ and other gender discriminatory practices. As a result, 137 women have left Chhau sheds and are living in their homes being safe and taking nutritious food during menstruation. Most women and girls shared that they have now begun to include dairy products in their diet during menstruation, which was forbidden before. The focus has shifted from this traditional practice to personal hygiene and sanitation awareness. In Sunikot for example, the baseline survey showed that 46% of women/girls stayed in Chhau sheds during menstruation but the end-line survey results showed a big decrease to 14.6%.

Three schools have been made disability-friendly by modifying the toilets and constructing ramps. We have also been able to provide treatment and surgical correction which has brought about a positive change in the children's lives, improved their mobility and daily living and above all



helped them to access their right to inclusive and quality education. It is common for children with disability to be kept at home and away from schools or social activities in many parts of Nepal.

In response to the COVID-19 pandemic, Bajhang Cluster supported 60 families (single women and people with disability) and 12 local quarantine centres by providing food items, bedding and hygiene materials.



¹ Chhaupadi is a social tradition in the western part of Nepal for Hindu women which prohibits a woman from participating in normal family activities during menstruation because they are considered impure. The women are kept out of house and have to live in a shed.



EMERGENCY FUND FOR SAFE DELIVERIES

"Last time, there weren't any complications on the delivery day; our daughter arrived safe and sound. I was expecting the same this time too," shares Sabita BK. Born in Bastoli, a remote village in Bajhang District, she married at 15 and had her first child after a year.

During her second pregnancy, after learning in a mothers' group meeting about the importance of antenatal care (ANC) visits, Sabita decided to complete the four visits. She found that the services in the nearby Bhatekhola Health Post had improved a lot since her last delivery. She further shares, "Sister Deepa (an Auxiliary Nursing and Midwife) was very gentle and kind, informing me about the need for iron and deworming tablets, TD vaccine and good nutrition during pregnancy. With her encouragement, I completed my ANC visits on time. When it was time for my delivery, I wasn't worried at all."

When her first contraction started, her husband managed to take her to the health post. She expected to deliver her child in the next few hours. But she was wrong; the very painful contractions lasted long hours, and she still couldn't deliver. After more than 16 hours of labour, Deepa told Sabita's husband that she had to be taken to the district hospital instead. "We didn't have enough money to hire a vehicle or for all the hospital costs. Fortunately, Sister Deepa told us that she could provide NPR 8,000 (USD 67) from an emergency fund available at the health post. We happily accepted this financial help. After a few more hours, I safely delivered my second daughter."

Now, as she looks back and remembers the incident, she feels so grateful to Sister Deepa for helping them out at their time of need. "I feel like I have got a new life," shares Sabita.

Realising the need for funds during obstetric and child health emergencies, UMN with its local partner PYS established this fund in five health facilities. It is able to give timely help in emergencies and save many lives like Sabita's.

DHADING: 2005–2020

We wrapped up Dhading and Sunsari clusters in June 2020 after 15 years working in community transformation. We are very thankful to our long-standing partners and the support we have received from everyone in this enriching journey of learning, sharing and building each other up. From the many projects and their success, in this *Annual Report* we share some of the key achievements. Closing of a cluster does not however mean the community stops dreaming, achieving and changing. There are many partners who are now strong and independent of UMN, who will carry on the good work.

Self-Reliant Groups (SRGs)

The self-reliant groups in communities of Dhading have truly succeeded in positively influencing, helping and building each other up. This has particularly been true for many women who gain social recognition, acceptance and support when they are a member of the group. Through SRGs, individuals have been able to save and also access loans from cooperatives for livelihood options, children's education and other needs.

Mental Health

UMN worked for five years in various communities of Dhading to address the wrong concepts of mental health issues and stigma attached to it. After many years of counselling, teaching and lobbying with local government bodies, we have finally seen changes. The local government now has a yearly budget allocated for mental health, psychosocial groups have been formed, local health facilities offer basic mental health services, awareness level has increased in the community and, of course, we see many lives where people have overcome mental illness and been healed.

Integral Development

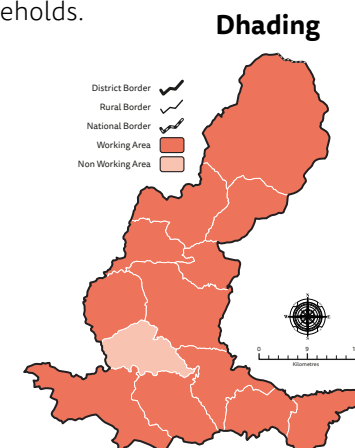
Another strong transformation Dhading Cluster has witnessed is in the Integral Development work in local churches. Earlier, the churches did not understand and stayed away from development work in their communities. They did not understand the dynamics of government funds and local politics, thus didn't see possibilities of how mutual cooperation could benefit both parties. Today we see churches take initiatives towards community development work, tap funds from the government for community needs and join hands with other local groups on common issues. A local faith-based NGO called Dhading Christian Society (DCS) was formed which has



become an umbrella organisation of all the local churches of the district.

Dhading Disaster Response Programme (DDRP)

Following the 2015 major earthquakes, UMN's DDRP began restoration and reconstruction work through 10 different projects in Northern and Southern Dhading. DDRP's many achievements include: training masons on earthquake-resistant building, constructing new classrooms, repairing foot trails and constructing community water supply schemes to provide access to safe drinking water for many households.



JOYOUS JUNU

For Junu Chepang from Charudi village in Dhading, education was just limited to theory. But after being exposed to UMN's *Sangsangai* (Church and Community Mobilisation) two-year training, she learned about practical ways to help the community. She has been actively working as a facilitator in the *Sangsangai* process.

Despite financial problems, Junu's parents had made sure their four children received an education to improve their future prospects, and Junu continued to secondary school. But she explains: "I was studying just to get good grades to pass in school. But I didn't learn the practical part of how to work collaboratively in family and community," shares Junu.

Junu's life and her perspectives towards family and community changed dramatically after her involvement with *Sangsangai*: "Through it, I developed positive feelings for my family and community and it has motivated me to act in my community." She found a purpose in life.

Since then she has been supporting families, groups, and community activities. "Our group has also grown closer to God through the training programmes and outreach. Groups and communities are learning together and implementing tasks such as helping the needy, maintaining hygiene in the community and doing road maintenance," she explains.

Together she and her four friends were also able to raise NPR 6,000 (USD 50) for an old man she met at the village who was alone, couldn't move around and faced financial problems. They supported him with food and other items.




Junu is very grateful for how *Sangsangai* has made a lasting impact on her life and on those around her. She continues to implement her learning and joyfully reaches out in whatever ways she can to make a difference in her family, church and wider community.






DHADING DISASTER RESPONSE PROGRAMME (DDRP)

The following were achieved under UMN through the Dhading Disaster Response Programme (DDRP) during 2019-2020. The work of DDRP will finish in March 2021.


Schools Related Achievements:

-  **17** school blocks with **51** classrooms constructed in **7** schools this year.
-  **3** drinking water schemes and **3** toilets (gender, children and disability-friendly) constructed in schools which helped regular supply of water and maintaining hygiene at school.
-  **44** classrooms of **6** schools were equipped with child-friendly learning materials.



Drinking Water Supply Related Achievements:

-  Drinking water quality of the community water source was tested to ensure the quality of water.
-  **3** community water supply schemes constructed, and **360** households benefitted from access to safe drinking water supply.
-  Survey, design, and estimation of one community water supply scheme carried out.

Capacity-Building events:

-  A proposal-writing and anti-corruption training programme and a conflict-sensitivity review meeting were conducted with partner organisations and UMN staff.

COVID-19 Response:

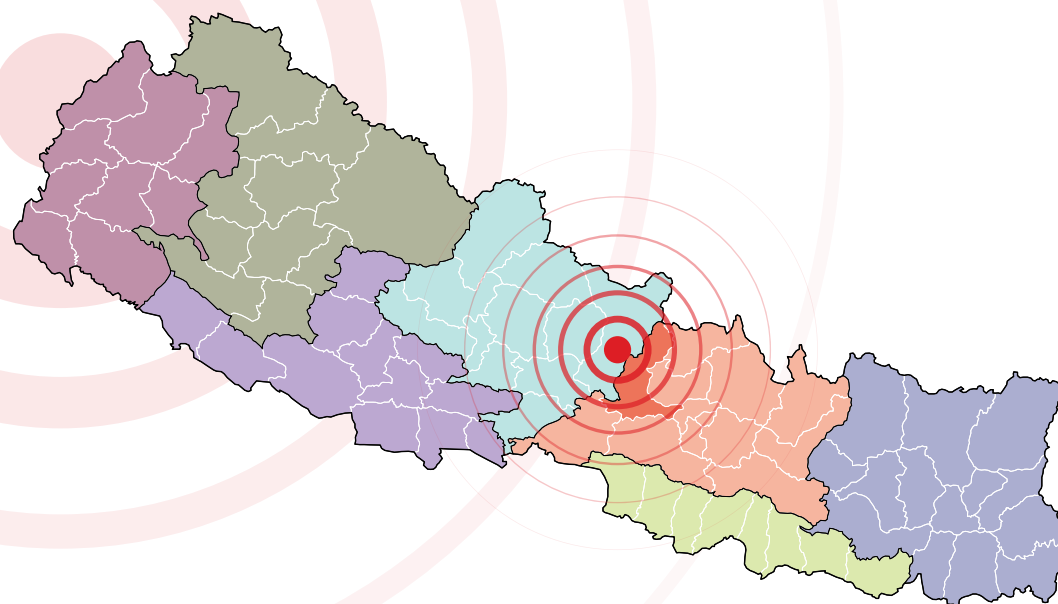
-  Personal Protective Equipment (PPE) and hygiene and sanitation related materials were provided to health posts, the rural municipality office, ward offices and police station of Ruby Valley RM.
-  Isolation centres of Galchhi RM and Nilakantha Municipality were supported with beds, hand-washing stations, PPE and leaflets, posters and audio announcements for awareness-raising and public service announcements in response to COVID-19.



Newly constructed school block at Lapa Secondary School.



Community Water Supply handover to the community at Sertung.





User-friendly school toilet of Timla Basic School at Lapa.



School children showing learning material which they have made at Lapa Secondary School.



Teacher and pupils enjoying active learning after the ECD training.



Students studying inside newly constructed school blocks at Dongdendevi Secondary School, Tipling.



Reservoir tank of Thading Water Supply Scheme under construction at Tipling.



Providing community contribution in the pipeline excavation and pipe laying for the construction of Ruptung Water Supply Scheme at Lapa.

DOTI

This year 10,104 people have directly benefitted from 14 projects implemented through three local partners in Doti. The Maternal Neo-natal Child Health (MNCH) project was successful in seeing provision of quality 24-hour services for maternal and child health in Jorajal Rural Municipality (RM) and Sikhar Municipality. Diagnostic services for pregnant women have become available at the local health facilities through our work. Previously women had to travel a long way for these services, so they are very grateful for this development. Meanwhile, the Sushasan project was able to strengthen both the duty-bearers and communities to be accountable in quality service provision and to enjoy their entitlements.

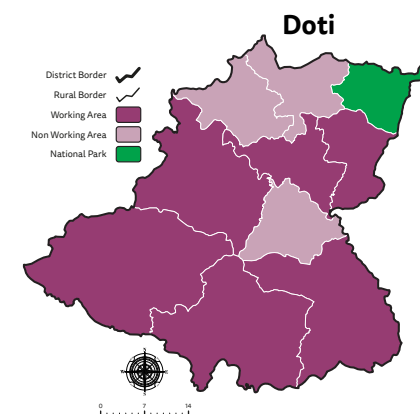
Huge successes in promoting trade and cultivation of turmeric (a local spice) in Ghagal, Badikedar RM through the SEEATT² project were seen and highly appreciated by the local community. An irrigation (800m canal) facility created through the project enhanced the potential for successful cultivation. The cultivation area and the production of turmeric has increased sevenfold (baseline survey 7%, endline 51%). One hundred and fifty farmers and their households have benefitted from turmeric tuber (seed) support, several training sessions have enhanced their knowledge and capacity, technical support on turmeric production and processing along with material/equipment. Interaction meetings between traders and farmers also enabled them to agree on producing *Sutho* (dried turmeric powder, which has more value) and to decide on its market contact points and fair value, so that the farmers get a better price.

During this year, two of our projects, MNCH and SEEATT phased out and were handed over to their respective local governments. Two new projects started in January 2020, working with excluded communities for good local governance and with marginalised ethnic groups and landless people living in disaster prone areas.

The COVID-19 pandemic also affected the work of Doti – field movement was halted and work had to be done virtually. In addition, thousands of labour migrants returned to their home from India. More than 600 people were found to be COVID-19 positive by the end of the reporting period



in the district and it is an increasing trend. However, Doti Cluster had an opportunity to support local health facilities, quarantine centres and the District Administration Office with health and safety items and equipment along with awareness-raising activities to prevent or minimise COVID-19 infection through local FM radio, banners and posters. More than 700 people benefitted from the support.



² Sushasan and Sustainable Economic Enhancement Through Appropriate Technology Transfer Project.

SEEING OUR COMMUNITY IN A MIRROR

"This community selection process is good," expressed Kalpana BK, an elected member for a local government ward, after participating in a village appraisal, "because we have prepared a map of the community and discussed about individual settlements regarding different issues like availability and access to facilities from local government and other service institutions, water, sanitation, and hygiene. This process is helpful to the ward and Rural Municipality (RM) as well."

UMN's Saksham³ Project started in Bogtan Fudsil Rural Municipality of Doti District from January 2020 in partnership with CEAD. In the targeted communities, our project staff facilitated the active engagement of local residents for the settlement screening process. Local residents began to draw a social map of the settlement by indicating number of houses, available local resources such as drinking water facilities, paths, electricity, community groups, primary health care, outreach clinics, clubs, schools,

government services, sanitation, etc. They then classified settlements into three categories based on the availability and accessibility of resources.

At the end of the appraisal process, community people were able to classify their community's settlements by themselves and were happy to know their community better. Durga Bam, a local woman, shared, "We had never practised and participated in this process before and nobody had analysed our communities in this way. We gained so much knowledge of our settlements through this. There are different conditions in the settlements even though we live in the same community and the process helps us to know these things just like looking at a mirror." Govinda Raj Binadi, from another community, shared, "Using this participatory tool before implementing programmes helps us to reach needy and marginalised communities and people without any biases. It is a new process for us, like a voting system with the purpose of selecting settlements in the presence of the respective community's people."

The local people and ward representatives are committed to supporting every step of the project intervention towards uplifting the living standards of community people.



³ Meaning 'empowered'.

KAPILVASTU

The year 2019/20 was the year of establishment, developing a cluster strategy, working alongside three local partners in capacity building and managing projects, and fighting the COVID-19 pandemic.

This year, Kapilvastu Cluster started off by building a conducive work environment. Firstly, we moved to a new office location with ample space and good ambiance. We also organised team-building events to help new colleagues settle well into the team.

To help us develop our strategy we consulted all our stakeholder groups of the two rural municipalities we work in, as we believe the inputs received from the grassroots level are key to a good strategy that will guide us for the next five years.

The Kapilvastu Cluster continues to enhance and build up the capacity of its partner organisations to implement, monitor, and deliver expected project outputs. The joint efforts of our three partners and the cluster team have been meaningfully transforming lives of people through our projects on good governance, peacebuilding, education, livelihoods, and women empowerment.

In 61 Self-Help Groups, 1,130 women have started weekly saving. In addition, they are actively involved in civic education sessions on gender, economic empowerment, and political participation. Another 461 households have earned an average NPR 45,700 (USD 381) from farm as well as off-farm businesses during this year through the SECURE project. Among them, 112 had an annual profit of more than NPR 50,000 (USD 416).

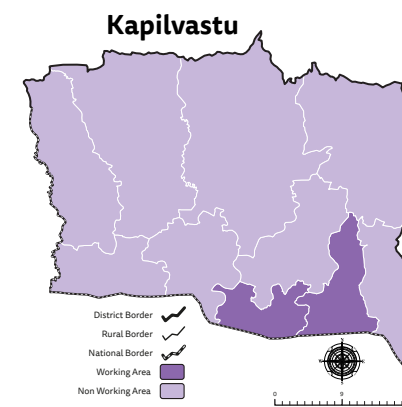
The child sponsorship programme included 1,400 children this year and also gave an orientation to 3,500 women from 76 settlements on social and economic empowerment. Yashodhara Rural Municipality was declared a child-marriage free zone by lobbying and mobilising Hindu, Muslim and Christian religious leaders on this issue. Twenty-six people (adults and children) living with disabilities have significantly improved in their activities of daily living through treatment and physiotherapy.

As the other clusters and teams have experienced, the work plans and projects were severely battered by the COVID-19 pandemic when the government of Nepal announced lockdown from the last week of March 2020. Since then, all the regular developmental work has been suspended.



But the cluster launched Emergency COVID-19 Response Projects to extend immediate support to strengthen the local health systems and reduce the suffering of people through relief distribution.

Despite the turbulent period coming just over a year after the cluster began, Kapilvastu cluster has thrived well, establishing good relationships with the beneficiaries, partners, and stakeholders, laying a strong foundation and paving the way to work effectively in the future.



THE CURSE THAT TURNED INTO A BLESSING

Seven-year-old Jahirum Islam was born with cerebral palsy in Kapilvastu District. Born with a disability in a Muslim community meant that many people believed this was a curse. For six years he stayed at home doing nothing but lying on his bed. Eventually his grandmother found out about the possibility for treatment through a UMN-supported project and they got him help. This changed Jahirum's future.

Jahirum had difficulties speaking or moving. His grandmother used to think that her grandson would never be able to move, walk or do any daily-living activities. The family also feared that if he went outside of the home his condition would get worse. So Jahirum spent his days lying on his bed at home with his grandmother.

One day Jahirum's grandmother found out about possible treatment for her grandson from someone in a mother's group. His grandmother then contacted the social mobiliser of UMN's partner DSDC and sought help. After going through the process to verify the case, Jahirum was referred to a specialist rehabilitation hospital in Butwal for further treatment. Jahirum was started off on physiotherapy exercises and was given a walker with shoes to help him walk. After he received physiotherapy, Jahirum was more mobile – he was able to move around in his room and the wider community. What a change from staying in bed all day! He's also able to have a social life now and plays with friends.

With the regular facilitation of the social mobiliser, Jahirum received the disability cards and gets NPR 600 (USD 5) each month.

Jahirum's family and community are amazed to see these changes in his life. His grandmother expresses her happiness, "We used to take our grandson as a curse and burden, but now we see him as a blessing," she says. "We get respect from the community and are invited to different programmes to represent him. My voice is heard because of him and I am proud to say that I'm Jahirum's grandmother."



MUGU

Mugu Cluster has had fulfilling achievements this year in disability work, improvements in school management, and also in addressing the COVID-19 pandemic situation.

This year, a total of 26 children with disability (13 boys, 13 girls) received support for treatment from UMN. Since then, they have better access and acceptance in society which has meant they are participating in different socio-cultural events and are active in their daily lives. The cluster was also involved with three local governments of Mugu District in developing Disability Identity Card guidelines which have been approved by the council of local governments.

Community Homestay training was conducted to 26 households (20 female, 6 male), after which 12 women have started homestay businesses in Mangri village. This creates a source of income and at the same time helps visitors who are looking for safe accommodation and a local experience.

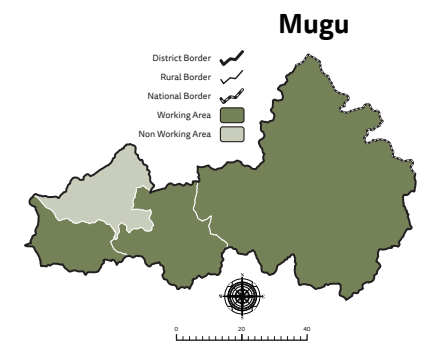
UMN simplified the School Social Audit Guidelines published by the government and provided orientation training to all 17 schools of Mugum Karmarong Rural Municipality; 15 of them conducted a school social audit this year. Community people are hopeful to see improvement in school operational management and to see the schools more accountable and transparent. One of the impacts and a rewarding result of our long-term partnership and work with Buddha Secondary School is that it has been declared as one of the best schools in Mugu from the Ministry of Education, Science and Technology.

Seventeen schools across our working locations have started a hygiene and sanitation campaign to raise the hygienic standards of their school and five of the schools now have a proper handwashing facility. Grade 1 of four schools were supported with training and materials to create a child-friendly teaching-learning environment.

Local leaders have been enabled to develop disaster risk reduction plans for the future. Vulnerability Capacity Assessment was conducted with two of UMN's partners in Soru and Mugum Karmarong Rural Municipalities through a joint effort of UMN, our partners and the two rural municipalities.



During the COVID-19 pandemic, 17 Dalit (so-called lower caste) households were helped by the distribution of food supplies. UMN also supported with the set up of three isolation centres and two quarantine centres in the district by providing materials needed for them. For areas beyond the reach of television or radio signals, UMN cluster helped our partners by purchasing 15 sound-system sets to broadcast the COVID-19 messages around the villages.



GREENER FIELDS



A major achievement of the Mugu Community Transformation project which ended in December 2019 was the construction of a 329m-long irrigation canal. Our partner KCDC gave NPR 200,000 (USD 1,655) to build the concrete canal. Community people contributed NPR 1,250,000 (USD 10,408) equivalent of labour. A reliable source of water to create well-watered land has been a blessing to 50 families who rely mostly on their harvest to feed the family.

The 329m canal is for the 50 households of Daura village of Mugu. In the past their food security only lasted for six months. "We had very little harvest earlier because of poor water supply. But now our harvest is good all through the year because of the new canal. We are also able to produce off-season vegetables" shares one local resident. Their previous canal was made of mud, so the water never reached the fields at the far end. But now this problem and source of conflict has been solved: another resident shares, "We used to have quarrels in the village because of poor water supply. This canal has ended the quarrels. Now every field has enough water."

Our partner KCDC describe themselves as a process-based development organisation: "We encourage community participation from the early stages of our projects. This ensures capacity-building of the community too. We don't believe in giving things ready-made to the community." This has been appreciated by the local community: "We tend to help each other more when we work together as a team. We learn from each other's problems."

This one canal has greatly increased food security, reduced local conflicts, helped the community to work together and learn from each other and may even reduce the need for migration out of this remote district. Our Greener Fields video features this canal, available to view at:

www.umn.org.np/videos/868.

NAWALPARASI

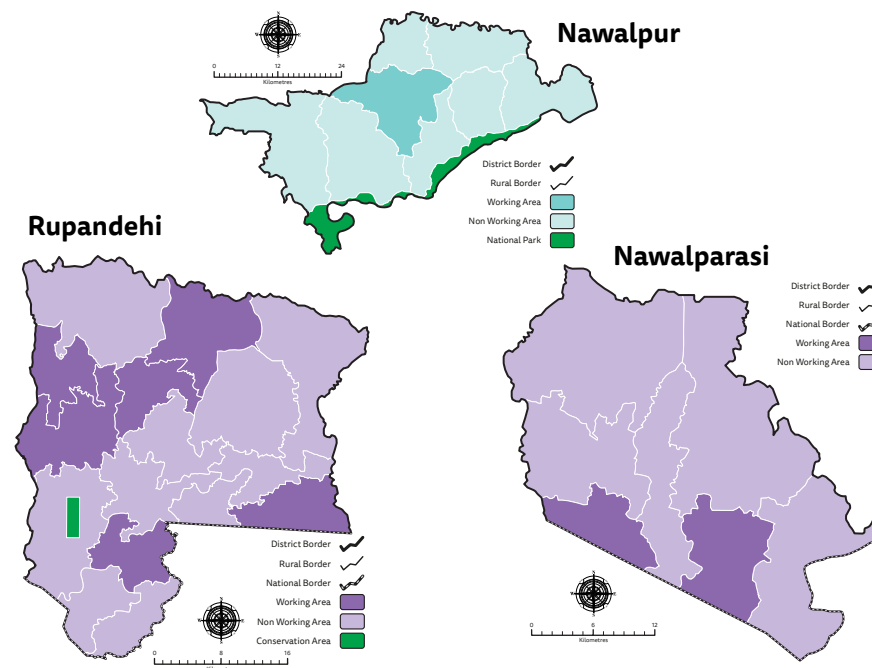
A highlight of the year has been supporting local governments to make various improvements in their health services, reaching thousands of needy people in our project areas.

The cluster has supported the local government to integrate basic mental health services in seven local health facilities: in two Rural Municipalities (RMs) in Nawalparasi District and in three RMs in Rupandehi District. The project provided clinical training and coaching for 24 health workers. This year, 221 people with mental illness (90 male and 131 female) received treatment and counselling from the local health facilities.

Two local partner organisations have technically supported the local government to establish Adolescent-Friendly Health Services (AFHS) in 11 local health facilities. Thirteen health workers were trained and two of the local health facilities have been declared as a certified AFHS provider by completing 90% criteria as per the government guidelines. A total of 6,116 adolescents (3,241 boys and 2,875 girls) received sexual and reproductive health services from these local health facilities. UMN has also worked closely with four birthing centres to upgrade them by providing necessary equipment. These birthing centres in Palhinandan and Pratappur RMs now offer a 24-hour service.

In response to the COVID-19 pandemic, the cluster provided health materials (PPE, masks, gloves, sanitiser, etc) to six RMs of three districts. Similarly, emergency relief support of food and non-food items as per the government standard were provided to 40 households of people living with HIV and AIDS. All these were done through UMN's local partners.

In the year 2019/20, Nawalparasi Cluster moved from Butwal to a new location in Nawalparasi District, which is closer to the working areas. Altogether thirteen different projects were implemented through five local partners, and seven projects finished during the period. The cluster developed a five-year strategic plan (2020 to 2025) in a participatory way with the involvement of the local government stakeholders and communities. But the effective implementation of the strategic plan has been disrupted because of the COVID-19 pandemic.



A CAREER CHANGE AT SIXTY!

Sixty-year-old Pitam Soti was a labourer in construction all his life and usually worked outside his home village of Jhate, in Hupsekot Rural Municipality. He was ageing and the physical masonry work was getting harder for him. So, over the last year he rarely left the village for work and instead engaged in subsistence-based agriculture at home. He was facing some financial crisis since his son was still at college, studying in Grade 11, and he needed to provide for his education.

During these difficult times, UMN's REWARD project brought a ray of hope as it gave him an opportunity to upgrade his farming skills and techniques. The project activities looked promising to Pitam and he got involved as a secretary in the Pragati Baba Agriculture Group. He attended all the training related to agriculture and was also an active member of the 'Integrated Pest Management' training.

Hard-working Pitam applied all his learning in his vegetable field. As a result, he is moving towards becoming a commercial farmer in his village. In around 0.2 hectares of land he is currently growing mustard and beans. He is also growing vegetables such as chilli, onion, garlic, tomato, aubergine, broccoli, spinach, radish and more in around 0.05 hectares of land. It is the first time that he has grown such vegetables and other crops on a large scale. Within a short time, he was able to sell chilli and spinach, earning NPR 40,000 (USD 333). The remaining vegetables and crops are yet to be sold in the market.

Pitam is very happy and optimistic with this outcome and is on the way to becoming a role model in his community. He shares, "I am farming on a large scale for the first time and the initial results seem satisfactory. I will do more in the coming days and wish to become a successful farmer."



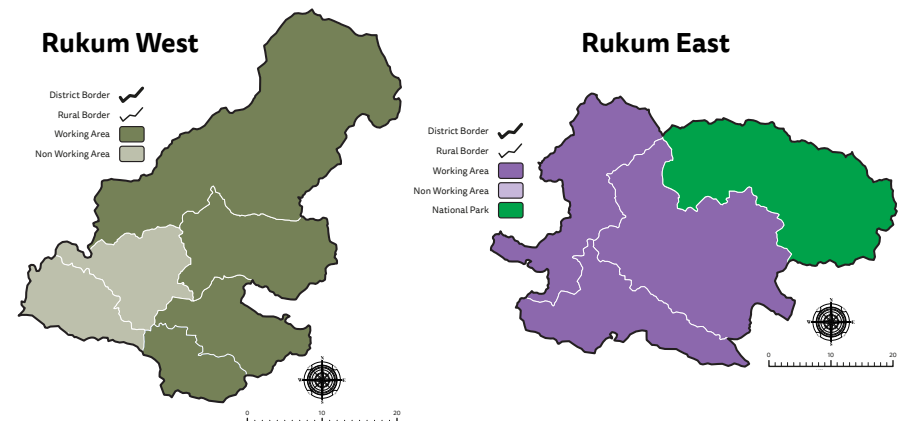
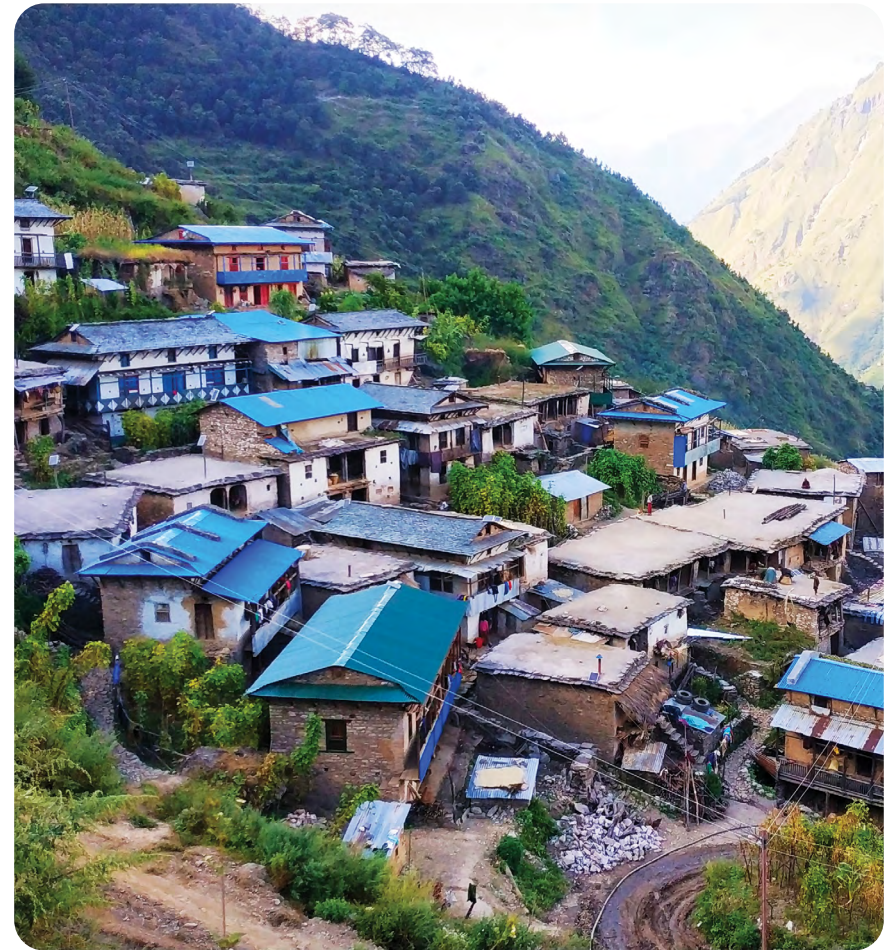
RUKUM

It is amazing to see that the child clubs of Khadi in Rukum West play a significant role in raising awareness and leading the community towards positive changes. 180 adolescents and children actively engaged in various social activities through the clubs. The local government has recognised them as a development partner from this year and invited them to planning meetings. The child clubs have been organising cleaning campaigns, public infrastructure maintenance, plantation and street dramas to raise awareness of different social issues.

Eighty-one families have been able to increase their monthly income by NPR 5,200 (USD 43) through entrepreneurship development support for 66 farming and 15 non-farming businesses. Moreover, 650 families are accessing micro financial services through our co-operative strengthening work in Baphikot Rural Municipality (RM) of Rukum West.

In addition, the cluster has supported essential equipment to 21 health facilities and provided essential materials to help five quarantine centres to respond to the COVID-19 situation. This has helped local health facilities and the local government to work against COVID-19 effectively. The schools were closed for over three months and the children have little or no access to internet or devices to connect with it. UMN's partner coordinated with the teachers who teach in Kham language (the native language) to motivate them to run classes through the radio. Students of Grade 1 to 3 now sit around the radio and learn in their mother tongue. Around 75 % of 1,610 targeted students from 25 schools in Putha and Bhume RMs of Rukum East have resumed their classes through the radio since the first week of July.

Tribeni RM of Rukum West have prepared and applied a Working Guideline for Mental Health in order to provide mental health services at local level, which is generally not available in many rural areas. Similarly, some of the local governments have been able to institutionalise changes at policy level: Baphikot RM has prepared and implemented a Natural Resource Conservation and Tourism Development Plan, Musikot Municipality has prepared a Disability Profile in order to identify the status of a 'Person with Disability' for the appropriate support and Ward 12 of Putha Uttarganga RM has prepared a Three-Year Strategic Plan on Sanitation and Hygiene.





ACTIVE AND AWARE PARENTS



On the whole, parents in the remote villages of Rukum East had little awareness about providing support and care to their children for their better future and education. Most parents took very little or no interest in their children's studies as they were not literate themselves and not aware of their responsibilities. They had their hands full with household chores and other work. Most were less alert to taking proper care of their children and also misused alcohol, which created an unpeaceful environment at home. Sometimes, when schools invited them for a meeting, most of the parents were absent and so they were neither consulted about nor contributing to their children's education.

To get the parents involved in their children's learning, UMN's partner MIC Nepal's project staff at first coordinated with the School Management Committee (SMC) to conduct a meeting with the parents. The SMC then orientated the parents in the meeting about the importance of a parent's role in their child's education. Only 10 parents participated in the first meeting and they were very passive. But the project continued to invite them. Seventeen attended the second meeting, and the numbers kept gradually increasing thereafter. It is helpful that this project promotes mother tongue use for the children's education; the parents found it more comfortable to discuss in their own language. After much consultation and discussion, now many parents have understood their roles in providing better education for their children. During the times of COVID-19, parents played a vital role in educating their children at home.

Dasarath Budha, School Headmaster of Jana Priya Basic School in Ghumlibang shares, "Parents have been supporting their children at their home for their studies during the lockdown." Now the project has been broadcasting radio classes for students in their mother tongue, allowing many students to resume their classes through radio.

One of the parents Laharpuri Budha shares, "We used to think that we can't help our children for their education. Now, through parenting education, we learnt ways to help our children for their education and we are very happy to support our children in their studies."

SUNSARI: 2004-2020⁴

Disability

We have seen amazing results in the area of disability. Some of the biggest impacts besides treatment and provision of assistive devices have been in the acceptance of children or people with disability in society by dealing with the discrimination children faced. With years of persistent lobbying, schools now not only accept them for admission openly but also have installed ramps and toilets which are disability-friendly. Committees have been formed in 40 schools to advocate for the rights of children with disability. People with disability are aware of their rights and understand and value their dignity. We see many of them now in colleges, handling good jobs, businesses and foreign employments. NCDWS⁵, one of our strongest partners in disability work, is well respected and appreciated for their commitment in the district.

Child-centred Community Development

Running for nine years, this project has succeeded in bringing transformation in the lives of children living in tough community settings. Social issues like the practice of child-marriage, child labour and discrimination between girls and boys in the family and the community have been reduced to almost zero. Children themselves have identified issues related to child rights and protection and have taken the initiative to spread awareness in the community. Through the project's activities, the children now see themselves as valued members of society and are aware of their rights.

HIV Home-based Care

For 12 years, with our partner NJSS⁶ UMN has grappled with the societal issues of HIV and AIDS in various communities of Sunsari. We have addressed the stigma attached to it, arranged treatment and home-based care to those who need it and offered counselling to the families. NJSS and other like-minded organisations established a referral system too, where one organisation refers to another to support multiple issues and needs of those affected. All the people living with HIV in UMN's working locations are now enrolled in health insurance.

Cross-border Safety

Sunsari Cluster has been appreciated and recognised at the district level for their contribution in the area of cross-border safety (India-Nepal). Through

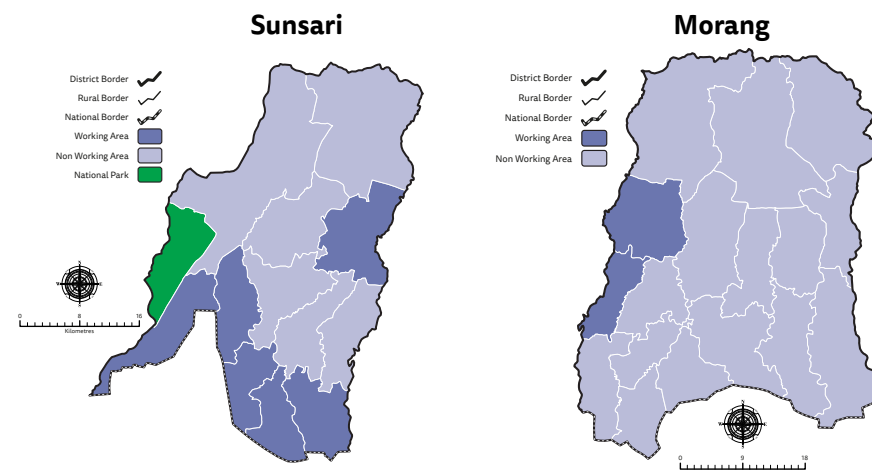
Our partner CMC⁷, by activating Local Peace Committees and working closely with security forces and civil society from both sides of the border, achieved a significant reduction in the cross-



border crimes and peacebuilding issues that have been troubling border communities for decades. There has also been an increase in interaction and cooperation between Hindu and Muslim communities of the project area, who seldom used to interact and work together in the past.

Trauma Healing Project

Communities faced serious challenges following the big flood of the Koshi river in 2007. Along with physical destruction, individuals and families were traumatised and distressed by the devastating event. In response, this five-year long project run by our partner⁸ has given the survivors a feeling that they have hope and control over their lives again. After a period of hearing their stories and therapeutic sessions we saw the communities moving beyond the trauma to better days ahead.



⁴ UMN left Sunsari in July 2020 (See Dhading on page 6).

⁵ Nepal Chelibeti Disabled Women Society

⁶ Nawa Jeewan Samaj Sewa

⁷ Chandra Mukhi Club

⁸ Participant Mobilisation Centre

MUSAHAR COMMUNITY TRANSFORMATION



In a community of 106 Musahar families in Sunsari district, no-one had a toilet or had their birth registered. Their landless situation combined with poor education (7.3% literacy; less than 50% of primary-age children in school) have traditionally forced these Tarai Dalits to be farm labourers, accepting very low wages due to their poor bargaining position. They depended on seasonal agricultural work and seasonal migration, with children working to contribute to the family income. They didn't have a reliable regular source of income and there were no reserves for hard times.

Over a period of three years we worked with 20 families. This started with forming a self-reliant group which gave teaching and coaching to increase skills in their vegetable production. Further intensive training was needed to increase confidence and entrepreneurial skills. They encountered challenges such as the landlord (from the higher Mehata caste) refusing to lease his land to them and other landlords banning Musahar farmers from walking through their land. However, with the help of the group they were able to negotiate with the landlords to allow access, while one Mehata lady who had a strong desire to uplift Musahar people made some land available for lease. The farming became possible. Justice came in the process of improving their well-being.

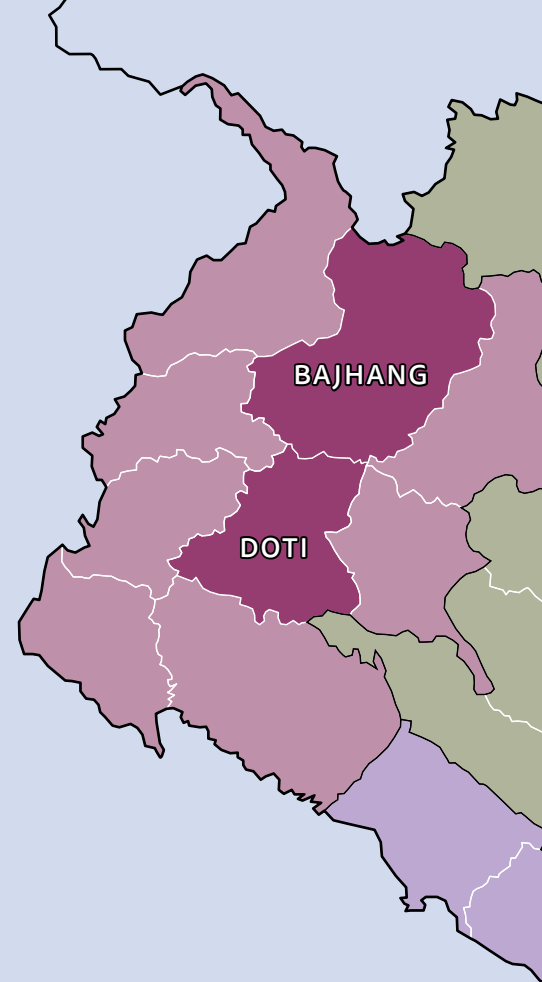
Our target group received help with market connections too. It was necessary to give extra support to facilitate vegetable traders as well as production. Three people then started trading, while 18 other Musahar families have also taken up vegetable cultivation.

The self-reliant group also created an environment to raise awareness of the importance of education, sanitation, hygiene and financial security. Today, of the 20 families, all children are enrolled in school and studying, all children have their birth registered and all families have a toilet. The practice of saving began. People are also starting to participate in life insurance.

Musahars previously were never included in different committees such as management of open-air markets, rural municipality consultation, road construction and local festivals. But after improving their economic and social status they are now consulted, valued and included in different committees of their community.

WHERE WE WORK

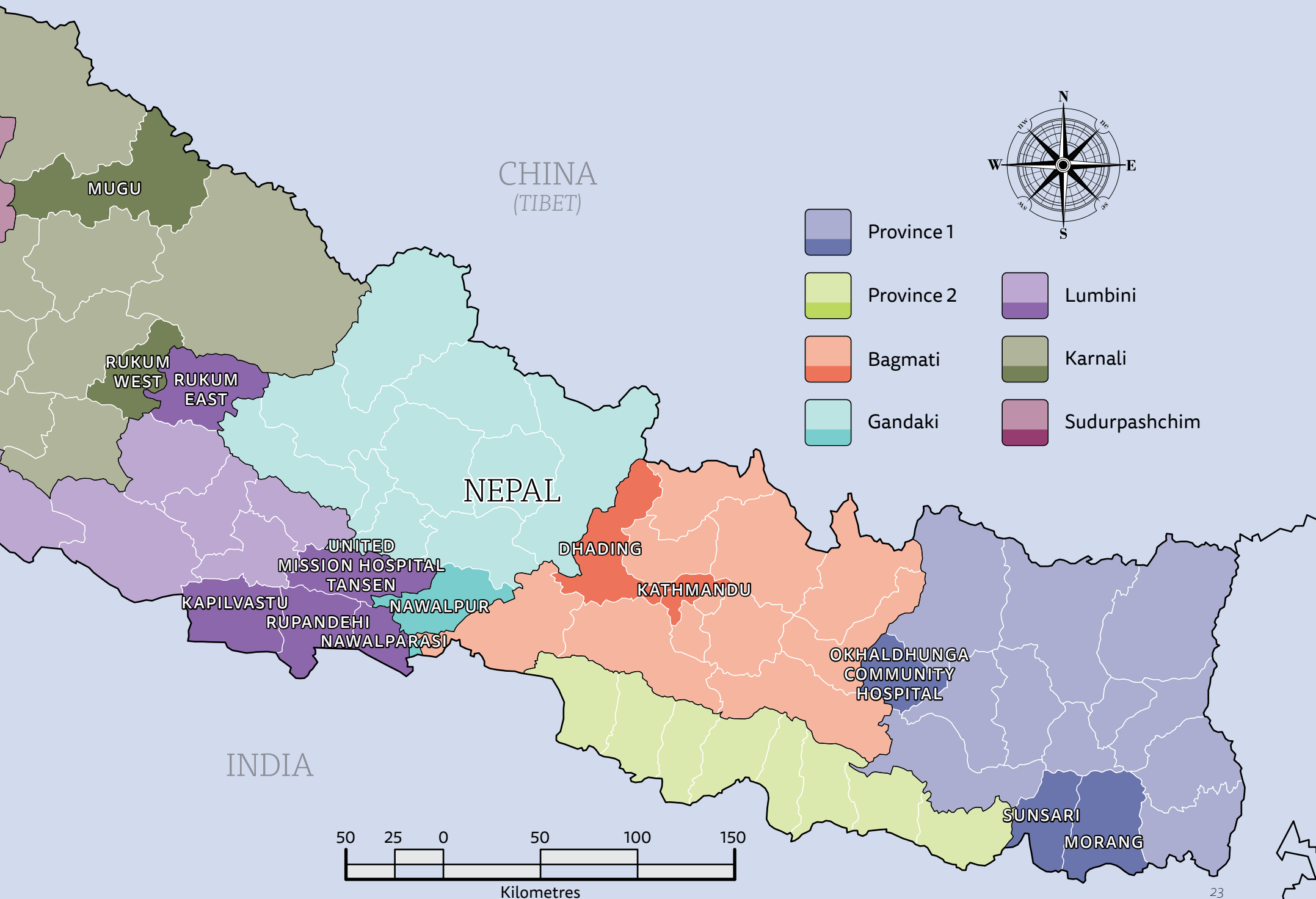
DISTRICT	POPULATION	BENEFICIARIES	PARTNERS	AREAS	WORKING AREAS
Bajhang	195,159	16,525	4	8	Bungal, Chabispalthivera, Durgathali, Khaptadchhanna, Masta, Talkot, Thalara, Surma.
Dhading ^{9,10}	336,067	9,083	6	6	Benighat Rorang, Gajuri, Galchi, Jwalamukhi, Rubi Valley, Thakre.
Doti	211,746	10,104	3	6	Badikedar, Bogtan Fudsil, Dipayal Silgadi, Jorayal, Purbichauki, Shikhar.
Kapilvastu	571,936	8,003	3	2	Mayadevi, Yashodhara.
Morang ¹⁰	965,370	5,445	2	2	Budhiganga, Sundarharalcha.
Mugu	55,286	3,818	3	3	Chhayanath Rara, Mugum Karmarong, Soru.
Nawalparasi	331,904	4,816	2	2	Palhi Nandan, Pratappur.
Nawalpur	311,604	4,551	1	1	Hupsekot.
Rukum East	53,018	10,749	2	3	Bhume, Putha Uttarganga, Sisne.
Rukum West ¹¹	154,272	7,826	2	4	Athbiskot, Baphikot, Musikot, Tribeni.
Rupandehi	880,196	7,625	2	6	Butwal, Gaidahawa, Kanchan, Kotahimai, Rohini, Sudhdhodhan.
Sunsari ¹⁰	763,500	7,096	3	6	Barju, Bhokraha, Dewanganj, Harinagara, Itahari, Koshi.
Total	4,675,786	87,815	33	44	



⁹ DDRP continues until March 2021.

¹⁰ UMN phased out working in these districts in July 2020.

¹¹ Rukum West will be phased out in December 2020.



COVID-19 & CLUSTER CHANGES

It was all running quite well until March 2020, when the COVID-19 pandemic impacted Nepal. Until then, the clusters had been implementing more than 40 projects, both short and long term with small and big budget volumes through 33 local partner organisations. It had also been a privilege to have more visitors in almost all clusters, including a DFAT¹² monitoring visit from the Australian Embassy, Nepal for the first time in Nawalparasi and Kapilvastu Clusters in November 2019. Bajhang, Doti, Kapilvastu, Mugu, and Nawalparasi clusters have moved their offices to new locations, and settled well.

Just before the lockdown on 24 March, all clusters were evacuated and the whole organisation was working from home for the rest of 2019-20. The lockdown period was used to equip the organisation to better serve the communities in responding to the new situation. The virtual meetings, developing remote monitoring tools and mechanisms, reviewing health and safety guidelines in response to COVID-19 infection, rapid needs assessment and capacity assessment of partner organisations, activating the Incident Management Team, enrolment and orientation on Feedback Response Mechanism across the clusters to be accountable and transparent in what UMN does, etc. were some of the initiations during the period. In addition, in response to the pandemic situation the majority of the ongoing projects were revised, a few were suspended, and a few phased out earlier than planned, including in Dhading and Sunsari which had to be exited a month earlier than planned. It was unexpected and sad to have to release some of the staff.

The Cluster Strategic Plans for the next phase (2020-2025) were almost finalised and ready to be launched but have had to go on hold - there has been a strategic shift to COVID-19 pandemic response, at least for two years. The Government of Nepal has also instructed development partners to focus on pandemic issues. Thus, the focus will be more on health, (including WASH¹³), education, protection, food security and socio-economic interventions.

The plan to open a new UMN cluster in Karnali Province by the end of 2020 has been put on hold for now. The effects of the pandemic and the organisational strategic shift prompted the leadership to this decision.

Thousands of migrant workers returned to Nepal, especially from India, to our working areas - they have lost their livelihoods and many of them contracted the infection while returning. UMN had several opportunities to support local governments to better equip quarantine, isolation and health centres with health and safety materials along with residential supplies. This helped health posts and the residential facilities to continue to provide regular services safely, comfortably and without fear. In addition we distributed food relief and livelihoods support to families. Communities became more aware of the positive role that UMN and its partners are willing to play.

In response to the lockdown, UMN also had the opportunity to join the Nepali government education project by compiling and printing a self-learning activities book for Grades 4 to 8, with other resources underway. These materials, compiled by UMN, have been shared with the AIN¹⁴ Education Working Group, UN Education Cluster and Government. Please see our clusters response page at www.umn.org.np/cluster-responses to know more about UMN's cluster COVID-19 response.

With all these, we are still grateful that God has sustained us, our partners and the communities we serve. Of course, it is challenging but we are hopeful for a new journey with new norms and opportunities.



DHANA LAMA
Programme Director

¹² Department of Foreign Affairs and Trade.

¹³ Water, Sanitation and Hygiene.

¹⁴ Association of International NGOs in Nepal.

URGENT SURGERY IN LOCKDOWN¹⁵

Mina Kumari (centre) was referred to us from Solukhumbu district, which is immediately to the north of Okhaldhunga, and stretches right up to the Tibetan border. Mt Everest lies on this border between Nepal and Tibet. The district hospital is at Phaplu which is a three-hour ride in a vehicle to Okhaldhunga Hospital. Her home is five hours walking (or two and a half hours by vehicle) from Phaplu.

She had had a medical termination of pregnancy about one month before. She developed some abdominal pain in the previous few days and at Phaplu hospital they diagnosed that she probably had a ruptured ectopic pregnancy, and sent her to Okhaldhunga Community Hospital. She was indeed very sick, and very anaemic. Ultrasound showed blood in the abdomen.

We conducted an urgent laparotomy. At operation, she had at least two litres of blood in her abdomen. The blood and clots were removed and the problem was discovered to be a ruptured uterus, where the early pregnancy had ruptured completely through the top of the uterus. The torn rupture site was still bleeding. It was repaired with some difficulty. She was transfused four units of blood.

She made an uneventful recovery from this life-threatening condition over the following week for which we are exceedingly thankful. Her husband and her family are grateful to still have a wife and mother.



¹⁵ Nepal's lockdown included a ban on public transport. But some people like Mina with serious conditions still reached our hospitals in Okhaldhunga and Tansen. You can read stories from both hospitals at www.umn.org.np/news and watch videos at www.umn.org.np/video-library.

HOSPITAL SERVICES OFFICE

The governance structure for the management of the hospital remained the same, with the Hospitals Leadership Team deciding policies and providing autonomy to hospitals for local-level management. During the process of renewing the existing hospital agreement, the Ministry of Health and Population (MoHP) asked UMN to register a new legal entity in Nepal for hospital management, and extended the existing agreement to allow the hospitals to continue working during this process. While renewing our hospital agreement they also changed the status of visa for expatriate volunteers to non-tourist from gratis and they are required to obtain work permits. However, the major event was the COVID-19 pandemic and the subsequent long, countrywide lockdown imposed by the government. This forced us to change our working pattern and strategy in many ways and has considerably delayed the agreement process.

UNITED MISSION HOSPITAL TANSEN

The COVID-19 pandemic and its effects were major issues during this reporting period. Though the first eight months were normal ones, the final four months, with lockdown, led to a sudden decrease in patients and very low income. Larger capital projects were put on hold, procuring only urgent equipment. Staff were put on furlough in rotation for two months on 50% salary, vacant posts were left empty and other staff encouraged to take longer leave without pay if they chose. Overtime was also decreased with less patient flow. With these measures and generous support of the UMN “Save our Hospitals Appeal” the hospital survived financially.

Along with a separate fever screening clinic and isolation ward for the management of COVID-19 cases (15 cases admitted), urgent non-COVID cases including life and limb-saving surgeries and maternity care services were conducted throughout the lockdown period. Regular in-service and pre-service training continued.

National Health Security Insurance System continued, and numbers increased to a whopping 97% from 43% in the previous year. This means

losses for the hospital were also expected to be high. As in the previous year, the hospital continued to provide Anti Retro Viral treatment, medicines for TB, Leprosy and Kala-azar¹⁶ and some heart medicines free of cost from the Nepal government. Similarly, the hospital provided free food to all inpatient children admitted in the children’s ward and free implants to the orthopaedic patients.

The Community Health Department (CHD) continued to be a voice for health promotion and prevention to the people of Palpa. Work continued in two remote rural municipalities in Eastern Palpa with support to 28 mothers’ groups for nine months. Nutritional monitoring was done for under-fives and children were screened, identifying cases of moderate malnutrition. Thirty stretchers were provided to all the mothers’ groups. Repairs were made to the town clinic and Child Nutrition Rehabilitation Centre (CNRC) premises. Funding for the Community Health Department finished in April 2020. Two Community Health Department staff were redeployed in other hospital departments.

The town clinic for Maternal and Child Health (MCH), run jointly with District Health Office staff, remained busy and the immunisation centre in UMHT provided immunisation for 290 children. The CNRC treated 18 malnourished children this year and 11 women benefitted from the maternal waiting home service for women with high-risk pregnancies who needed to stay near the hospital. CHD staff continued to support the satellite MCH clinics, where 275 women received antenatal checkups. Four beds and seven stools were provided to these clinics. Fifty-eight referrals were made by the MCH clinics and government health centres through the referral system.

Various capacity-building training programmes have been conducted in the two rural municipalities for the female community health volunteers, mothers’ groups and husbands, including nutritious food preparation demonstrations, family planning and gender issues. Sanitary kits were provided to mothers to encourage them to put into practice child hygiene teaching. ANC mothers received cloth to make a clean wrapper for their newborn.

¹⁶ A disease which is the second-largest parasitic killer in the world (after Malaria).

OKHALDHUNGA COMMUNITY HOSPITAL

On the clinical side, the hospital maintained its quality medical care to inpatients and outpatients. Besides operating a regular outpatient clinic, we continued essential lifesaving surgical procedures and maternity care services even after the arrival of COVID-19 and lockdown. The number of deliveries were more than last year. We restructured the lab department to make it a more user-friendly and added a Thyroid Function Test machine as a new service. During this reporting period, 1,786 people were managed under the National Health Insurance Scheme. We provided medicine during the lockdown to many patients with chronic diseases from distant rural municipalities through the insurance system, with the help of rural municipality health coordinators.

This year will be remembered for the COVID-19 pandemic, which required much additional planning to manage its adverse effects on our services. To function as a hybrid hospital, a separate location for screening the people coming to the hospital (fever clinic) and a separate isolation ward had to be prepared. One section of the outpatient building had to be converted to a corona care facility, which required relocating the general outpatient department and ultrasound room. Nursing school has been temporarily closed. During the reporting period, two suspected cases and four COVID positive cases were admitted and treated in the isolation unit. Thirty-two PCR swabs were sent from the hospital. A total of 226 patients received treatment in the fever clinic before the end of the year. No staff tested positive which suggests our PPE and infection control protocols are effective. The four-month long country-wide lockdown led to a sudden decrease in patient flow and directly affected the hospital revenue. Some precautionary measures were taken, like cutting costs by not filling some of the vacant posts, not procuring the budget capital items. With these measures and generous support of the UMN "Save our Hospitals Appeal" the hospital survived financially.

The Public Health Programme phased out in December 2019 and we started a new five-year Community Based Rehabilitation project funded by Normisjon in Molung and Khijidemba Rural Municipalities in January 2020.

UMHT AT A GLANCE

ITEM	2019/20	2018/19
Beds	169	169
Bed Occupancy	79%	79%
Outpatient Dept.	100,837	113,246
Inpatient Dept.	12,235	12,958
Surgeries	6,070	6,265
Deliveries	1,973	1,952
Emergencies	17,071	17,381
Total Income	NPR 432,331,098	NPR 537,644,731
Total Expenditure	NPR 432,331,098	NPR 499,484,138
Free Care	NPR 17,700,551	NPR 21,388,734

OCH AT A GLANCE

ITEM	2019/20	2018/19
Beds	50	50
Bed Occupancy	130%	134%
Outpatient Dept.	26,486	29,694
Inpatient Dept.	5,767	6,318
Surgeries	1,800	2,492
Deliveries	1,404	1,367
Emergencies	3,802	3,903
Total Income	NPR 136,137,985	NPR 253,695,984
Total Expenditure	NPR 144,312,378	NPR 232,700,134
Free Care	NPR 24,871,965	NPR 28,188,818

EDUCATION AT A GLANCE

- The child club networks in our project areas were reformed. Coaching and mentoring support was given to **20** community-based child clubs in Dhading where **1,368** children are involved in **68** child clubs. In Doti and Bajhang the child clubs and their networks were helped to develop a long-term plan with the participation of **355** child club members. In Kapilvastu, **1,152** children in **27** child clubs are involved in preparing annual plans and their implementation.
- The Self-Reliant Group (SRG) members were encouraged to deposit their earnings in the child saving fund in the cooperative. An increase of **34%** in the fund was seen this year. **57** families prepared a business plan following participation in a development training programme.
- Training on personal sanitation, hygiene and cleanliness was provided to **422** SRG members and their families (**2** boys, **4** girls, **14** male, **402** female).
- In this reporting period, **17** schools of Sunsari and Morang have conducted School Self Assessments.
- Child Protection Committees smoothly operated in **15** schools and held quarterly meetings in good coordination with the local level Child Protection Committees and the police if needed.
- Capacity-building activities were conducted with school leadership and local teachers where **34** teachers were trained on Child Protection Policy (CPP) formulation and committee formation. **15** schools have developed a CPP.
- **2,300** textbooks covering seven types of Mother Tongue Based Multilingual Education for Grades 1 and 2 were printed and distributed in **25** schools of Rukum East.
- **17** schools have started to use an Activities-Based Teaching-Learning method. Three Grade 1 classrooms in three schools of Bajhang now have a carpeted and child-friendly sitting arrangement. This has created a comfortable and child-friendly physical environment for **65** children, especially for winter months.

GOOD GOVERNANCE AT A GLANCE

- All **40** partners of UMN carried out a social audit involving **2,338** community people. They also fulfilled legal obligations on time and followed the internal control system.
- All **40** partners of UMN also had internal and external audits done to make their financial system transparent.
- Anti-corruption training was conducted in six clusters. All participating clusters and partners (**108** male, **41** female) made action plans after this training and are implementing them.
- **64** Self-Help Groups (SHGs) were formed under Hamro Pahunch project in Kapilvastu. Along with discussions on important social issues prevalent in their communities, the SHGs have started weekly saving in their groups too.
- **437** Self-Reliant Groups of UMN funded projects were affiliated with cooperatives and other similar entities. The remaining groups are in the process of affiliation and registration with the local government and relevant networks.
- **15** public institutions such as health posts, schools, wards and users' committees of three districts organised a public audit and used the Community Score Card (CSC) where they shared the facts among community people and other stakeholders.
- **933** civic education sessions were conducted in communities focusing on citizen rights, entitlements and social issues. These sessions were conducted to increase access to information regarding government services, benefits and processes.
- A women's leadership development training programme was conducted for **40** women who were potential group leaders or those who have been leading and facilitating their respective groups in communities.
- Education Enrolment Campaign was organised in Karan belt of Mugu under Mugu Community Transformation Project. As a result, **67** new students were enrolled in early child development centres.

GRANT MANAGEMENT AT A GLANCE UNIT

- Trained **76** participants from **25** exiting partner organisations and UMN staff of Sunsari, Dhading, Doti, Rukum and Rupandehi clusters.
- Reviewed and edited more than **90** annual, bi-annual and project-end reports of **45** projects.
- Worked closely with cluster and partner staff to develop **25** proposals including **17** new full proposals to submit to various supporting organisations.
- Assisted clusters to refine and revise plans and proposals considering the COVID-19 pandemic situation.
- Carried out Capacity Needs Assessment of programme staff.
- Developed training materials on 'proposal writing' and 'report writing'.
- Led to develop 'interim project agreement proposal' to submit to the Social Welfare Council
- Helped Human Resource team of UMN to establish a new 'leave recording' system.
- Developed an automated 'notification system' in UMN to remind responsible staff for timely submission of reports and proposals.
- Worked closely with Okhaldhunga Community Hospital and United Mission Hospital Tansen to design 'Save our Hospitals' project while also assisting the hospitals in design and development of **14** proposals and **8** reports to submit to various supporting organisations.

HEALTH AT A GLANCE

- Basic mental health training was given to **38** newly transferred health workers from Bajhang, Dhading, Doti, Rupandehi, Rukum and Nawalparasi. These health facilities served **235** new mental health cases and provided follow-up services to **293** existing cases.
- Virtual training on psychological first aid tailored to respond to the COVID-19 context was organised for **24** participants including **5** UMN staff and **19** health project staff.
- By the end of July 2020, **231** people (**132** male, **99** female) had received psychological first aid and focused psychosocial services through trained staff.
- This year **1,674** institutional deliveries have been conducted in **18** birthing centres of Doti, Bajhang and Nawalparasi that receive support from UMN.
- 41** women and children from marginalised communities could reach the hospitals for timely treatment through the emergency fund, after referral from local health posts.
- To provide access to long-acting family planning method (implant), UMN and the local partner coordinated with National Health Training Centre to provide skill-based training to health workers from **8** health facilities.
- Adolescent-friendly health services have been established in six local health facilities of Nawalparasi. This year, **4,271** adolescents, (**53%** male **47%** female,) have used this service from these health facilities.
- The Adolescent Sexual and Reproductive Health project being implemented in Rupandehi District phased out this year. The baseline (**17%**) and end line (**57%**) surveys showed a remarkable increase in ASRH knowledge among adolescents.
- The HIV project in Rupandehi and Sunsari was able to train and mobilise **97** church leaders and church youths (from **13** churches).
- In Rupandehi, **40** people living with HIV received relief support (food items) and hygiene materials during the COVID-19 relief distribution.

INTEGRAL AT A GLANCE DEVELOPMENT

- **324** people (**202** male, **122** female) in UMN clusters (Dhading, Rukum and Nawalparasi) trained in the concept and approaches of integral mission and Sangsangai. Of these, **30** Students completed a 10-week course in Integral Mission in Kathmandu colleges.
- **35** facilitators and community leaders (**23** male, **12** female), representing **14** different groups in Dhading, attended Sangsangai training and subsequently developed multiple community projects¹⁷, benefitting **977** households.
- **26** participants (**20** male, **6** female) in Dhading completed a two-day workshop on leadership and entrepreneurship. They learnt to develop business plans to support their families financially and continue engaging in their current role as community facilitators.
- Leadership training was given to the leaders of six faith communities in Rukum. In total **122** leaders (**65** male, **57** female) received training based on a manual developed by Global Discipleship Ministry to enable local church leaders to learn about leadership methods and manage their ministries in a holistic way.
- **92** leaders from East Rukum were provided orientation on the Sangsangai process. This is with a view to use the Sangsangai training course in community groups in coming years.
- In the village of Kol (East Rukum) a WASH¹⁸ committee has been formed to work for safe drinking water for the villagers. Now the committee is recognised as a local government structure.
- A team of five Nepali theologians completed the revision of the English language book on Integral Mission, for reprinting **2,000** copies of the second edition in November 2020.
- Ongoing meetings of the Integral Mission Forum (IMF) which brings together **19** faith-based NGOs and community groups to learn from one another about serving local communities.
- As a COVID-19 response, the Church and Community Transformation programme helped many needy individuals¹⁹ and their families (**4,589** direct and **24,572** indirect beneficiaries).

MEAL²⁰ AT A GLANCE

- MEAL team developed an overall Monitoring Framework for UMN's projects, programmes and strategies. We clarified the scope, objectives and content of the framework before the onset of the COVID-19 pandemic.
- As visiting project sites became difficult due to travel restrictions, we shifted to lead the design and orientation of UMN's Remote Monitoring Guidelines.
- MEAL team led the rapid assessment of the COVID-19 situation which provided useful information for subsequent COVID-19 response project designs.
- A Feedback Response Mechanism (FRM) was established in UMN Thapathali Office and activated in all Clusters.
- The 2019-2020 Carbon Emissions Report with data comparison over the last four years showed a significant decrease this year due to the suspension of travels following COVID-19.
- The tenth issue of UMN Learning Newsletter focused on the application of the Dhading Disaster Response Programme (DDRP) learning to the COVID-19 situation.
- In line with the use of Outcome Mapping as UMN's new preferred project management tool, MEAL has been building our skills in Outcome Harvesting as a participatory evaluation tool to reflect on significant project impacts.
- During the year, **9** partnerships and **15** projects were evaluated, **7** project surveys carried out, **2** research projects were undertaken and **7** projects were supported for proposal writing and monitoring framework development.

¹⁷ including people with disabilities, single parents, daily wage workers, the elderly and people residing in quarantine or isolation centres.

¹⁸ Water, Sanitation and Hygiene.

¹⁹ projects such as foot trail maintenance, joining community road building projects, sanitation and water source protection, school building construction, support to single women and elderly people in the community.

²⁰ Monitoring, Evaluation, Accountability and Learning.

PEACEBUILDING AT A GLANCE

- Trained mediators from five different faiths (Hindu, Muslim, Buddhist, Christian, and Jain) have been meeting regularly to share their experiences on mediation work. This year two intergroup and nine intragroup conflicts were resolved by these mediators.
- Reduced number of cross-border lootings were reported this year: **9** cases, down from **27** last year and **59** in 2017. Much of this resulted from the increased capacity of Local Peace Committee members on cross border and peacebuilding issues as part of UMN's Integrated Peace Building Project.
- Increase in interaction and cooperation between Hindu and Muslim communities was seen this year through increased interactions between Hindu and Muslim families. **56** positive interactions were reported this year compared to **32** last year and only **7** in 2017-18.
- Raising awareness and informing community members on Anti Human Trafficking (AHT) issues continue. Two girls were saved from being trafficked this year as a result of timely action taken by community group members.
- Seven cases of domestic violence, **37** cases related to gender discrimination including *Chhaupadi*²¹, and five cases related to the exclusion of women from government resources have been identified this year. Right actions were taken, this was not a usual practice in the past.
- Youth group members who were trained on conflict analysis tools and strategies have resolved **24** community-level conflict cases related to polygamy, land partition, community forest, gender and domestic violence.
- Trained civil society members have been working together to promote peace both at the local and national levels. **19** such events were organised this year across four of our clusters to promote peace in their local context.

²¹ Chhaupadi is a banned social tradition still practiced in some parts of Nepal which prohibits a Hindu woman from participating in normal family and religious activities during menstruation because they are considered impure. The women are kept out of the house and have to live in a shed.

SUSTAINABLE LIVELIHOODS AT A GLANCE

- Disaster Management Programmes, through communities, churches and schools, have raised more than NPR **2,500,000** (USD **20,816**) to support survivors from local disasters.
- 4** churches helped to setup four handwashing corners in their villages of Nawalparasi District and oriented more than **700** people on preventive measures for COVID-19.
- 32** Self-Help Groups (SHG) were empowered focusing on economic, social, and environmental components for sustainable and resilience changes and conducted the project's group-level review and audit process.
- 364** farmers were supported with turmeric tubers through government partnerships²². Within a year, the cultivation area increased by seven times (baseline **7%**, endline **51%**).
- 12** COVID-affected ultra-poor families received support to start up micro-enterprises. As a result, four new entrepreneurs have started earning NPR **300** to **1,500** per day (USD **2.50** to **12**).
- Farmers and farming groups have been linked with the local market which has allowed **313** SHG members to receive helpful support from the Agriculture and Veterinary Unit.
- 3,025** fodder crops, fruits and some soil erosion-controlling species have been planted in Nawalpur. **700** apple and **300** walnut saplings were planted in Bajhang to establish a community orchard.
- 2** villages in Nawalparasi District have been oriented about the importance of groundwater recharge and prepared **31** small pits for the infiltration of rainwater.
- 99** participants received training on natural resources including pond management, adaptation and mitigation strategies for climate change and inclusive disaster risk reduction.
- 782** students now have access to safe drinking water with the installation of water purifier (UV) plants in two schools of Kapilvastu.

²² in partnership with the rural municipality and Krishi Gyan Kendra (a unit of Ministry of Agriculture and Livestock Development)

CROSS CUTTING ISSUES

ENVIRONMENT AND CLIMATE CHANGE

Three gabion walls were constructed on Thuligad River in Doti District for the protection of Bewara village settlement from flood. The reinforcement will provide a safety net to 100 ropani of land (12.57 acre) and 5 houses. An orientation programme was also conducted at Bewara and 20 participants (11 female, 9 male) were oriented about climate change, its impacts and adaptation options.

An additional 135 Improved Cooking Stoves (ICS) have been installed in two villages of Hupsekot Rural Municipality of Nawalpur District. These villages have been declared as a complete ICS-using village.

A training cum practical session helped 301 adolescent girls and women to make biodegradable, eco-friendly, washable sanitary pads using local material.

Two of our local partner organisations in Nawalparasi and the community members have planted 4,625 plants to control river cutting and topsoil erosion.

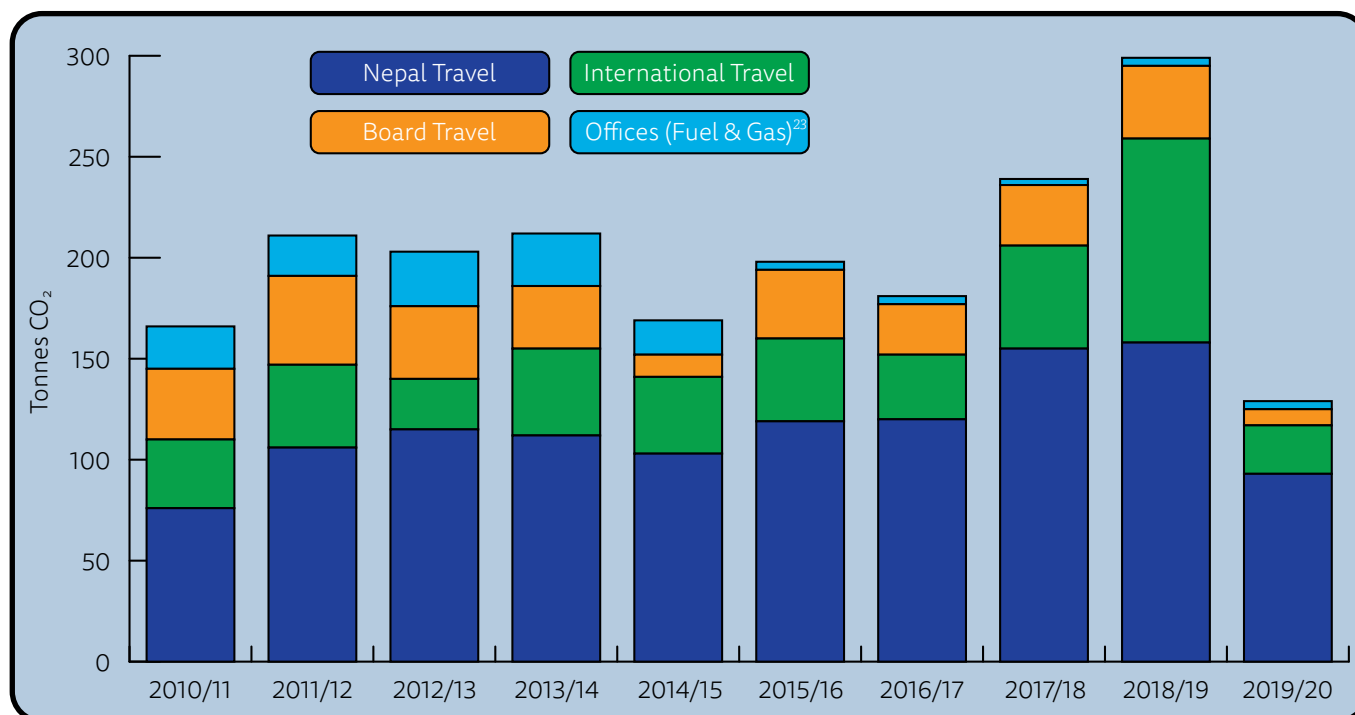
31 small pits of 3x3 metres in size have been prepared for a groundwater recharge system. Further, a pond of size 12x8x1.5 meters has been constructed to replenish the groundwater in the aquifers in Nawalpur District.

UMN'S CARBON FOOTPRINT

Due to the COVID-19 pandemic and worldwide lockdown, many trips were shut down for a long period of time. The UMN Board also travelled only once this year compared to two trips last year.

Due to this, the result of UMN Carbon Footprint calculation has also been affected significantly. The total carbon footprint for this year has decreased by 57% from last year. Among the four major areas of carbon emission in UMN's calculation, there has been a considerable decrease in three areas, namely, national travel (41%), international travel (76%) and Board travel (78%). However, the figure of the Offices (fuel and gases) shows that it has remained the same, and actually it has even increased because the data this year only covers about seven months as there was a lockdown for about five months due to COVID-19.

Overall, the result of UMN's carbon footprint of this year is significantly lower compared to the last four years.



²³ Fuel (petrol and diesel) and Gas used in the office in both clusters and Thapathali.

CONFLICT SENSITIVITY

UMN's Conflict Sensitive policy which was revised in 2018 was further strengthened by adding a guideline to mainstream conflict sensitivity in the organisation and its programmes. Orientations on the revised policy and guidelines were provided to relevant staff and members from the local partners in our clusters. These orientations led the partners to review their own existing guidelines.

Twenty community groups in Bajhang were helped to understand and analyse the conflict issues experienced by the group members. It led to greater unity, co-operation, mutual respect and stronger relationships among them. As a result, five groups were successful in resolving seven cases of conflict. Achievements from this experience were shared with relevant staff from all clusters for encouragement and learning.

An assessment of the changing context of conflict due to COVID-19 in the project areas was conducted using a Rapid Conflict Assessment tool in all clusters, and the findings were used to adjust the existing programmes to minimise the conflict risks. A guideline for mainstreaming conflict sensitivity in the COVID-19 response programmes was also developed, and UMN staff were orientated on it.

DISABILITY

Disability Inclusion was established as a new cross-cutting area in UMN since 2019. It will be implemented in our clusters in two ways, firstly by implementing targeted and disability specific projects and secondly by mainstreaming disability issues at the organisational and programme level.

Orientation about the disability inclusion plan was provided to all UMN staff at the learning review workshop. A short training session was also provided to Bajhang cluster team members. Both the orientation and training helped staff have a substantive understanding about disability inclusion and mainstreaming. To address the COVID-19 pandemic situation, a basic guide for disability inclusion was prepared and oriented to a pool of programme staff in UMN. The objective of this guide is to help UMN and its partners to ensure the inclusion of disability issues in all projects and programmes developed in response to COVID-19 crisis and needs. Disability mainstreaming was practiced effectively in three newly developed projects with the bottom-up approach in Doti, Mugu and Nawalparasi.

GENDER

During the year, Participatory Action and Reflection process for gender equality was emphasised. It is a continuous process of awareness raising on gender equality and the unequal situation of gender relations and norms for communities, local partners and UMN as change agents.

A sexual violence risk reduction education event was organised for all staff of UMN which helped in raising their awareness on sexual violence and learning self-defence skills.

Two separate sessions for women and men were conducted for all staff of UMN. Their experiences around organisational culture, behaviour, attitudes, policies, and practices were gathered, prioritised and shared. Action points and commitments were developed to address specific negative experiences and build a more gender-equal, inclusive and respectful organisation and interpersonal relationships.

A gender guide was developed in the context of COVID-19 to integrate gender issues, perspectives and analysis while designing projects. Moreover, Community Risk Communication has been adjusted in the existing projects to provide COVID-19 information, so that communities can make informed decisions to prepare for and protect themselves and others through adoption of safe attitudes and practices.



CENTRAL SERVICES

FINANCE

100% of the project-implementing local partner organisations are successfully connected with the UMN data server to record the financial transactions of UMN funded projects. Read-only access to financial information regarding the projects has been given to all relevant project managers/officers and those who have project monitoring responsibility. These developments facilitate prompt and easy monitoring of the projects' financial affairs.

FUNDING

Funding management related systems and processes have been transitioned in line with UMN's change process.

There was a reduction in the year's income mainly because of the inability to carry out field activities due to COVID-19 pandemic and in a few cases due to the reduction in funding from financial partners. UMN's budget for 2019/20 was 24% less compared to 2018/19. However, UMN did not have to cut any staff due to funding shortfall. We are grateful to all our partners for their support to fund our 'survival cost' even during the pandemic time.

BOARD

The overall governance and direction for UMN is the responsibility of the UMN Board of Trustees, who are elected by the supporting partner organisations. This is a skills-based board that sets the top-level policy framework regarding organisational goals and the acceptable parameters on Leadership Team (LT) decision-making.

LEADERSHIP TEAM

UMN's LT is led by the Executive Director, Joel Hafvenstein, and consists of 14 members. Nine of these members meet regularly to manage UMN's development work in clusters; similarly, eight members meet regularly to manage UMN's hospitals. The entire LT meets together at least once a year to address common issues that affect all of UMN's work and to further develop areas of synergy between clusters and hospitals.

ITS

We upgraded 100 computers to Windows 10, servers to Server 2016 and facilitated working from home for all staff by implementing Microsoft Teams, VPN access to UMN's network and arranging 15 laptops for Thapathali Office based desktop users. We followed up 294 support calls from staff this year.

We installed an Automatic Transfer Switch to ensure safety from power failure, developed policy and guidelines for hardware disposal, researched replacement of call and asset management systems and started entry of staff information in UMN Information System.

COMMUNICATIONS

We initiated and co-ordinated UMN and Nepal's first ever 10k run for Mental Health Awareness in October 2019 in Kathmandu (*see photo on page 35*), with separate runs through the clusters, Okhaldhunga and other groups (over 300 participants in Nepal, 20-30 abroad). This raised awareness of Nepal's mental health needs and our work in this area. We produced several short videos on UMN projects including Multi-lingual Education, Child Marriage Prevention and our work in Mugu. A Communications Advisor joined the team in August 2019 bringing experience and skills to support the team in our achievements and new developments.

To support UMN's COVID-19 response we launched the Save our Hospitals Appeal, set up an appeal page on the website and published regular videos, stories and mass mails, prompting a rapid, generous response from around the world. By July 2020 it had raised around USD 500,000, with half the amount from larger partners and the rest from individual donors or churches. Among the many ongoing website updates, changes to the country donate buttons were key to assist tax-efficient giving from individual donors. Mailchimp was widely used to manage email contacts and send mass mails.

UMN's regular news publications, reports and products were designed and published alongside several Nepali publications for use in schools and communities.



STAFF FIGURES

AT A GLANCE

- 151 total staff
- 122 Nepali staff 87 male, 35 female
- 65 Thapathali, 57 clusters
- 7 new Nepali staff 32 Nepali staff left
- 29 Expats 15 male, 14 female
- 15 Thapathali, 14 hospital
- 7 new expats 7 expats left

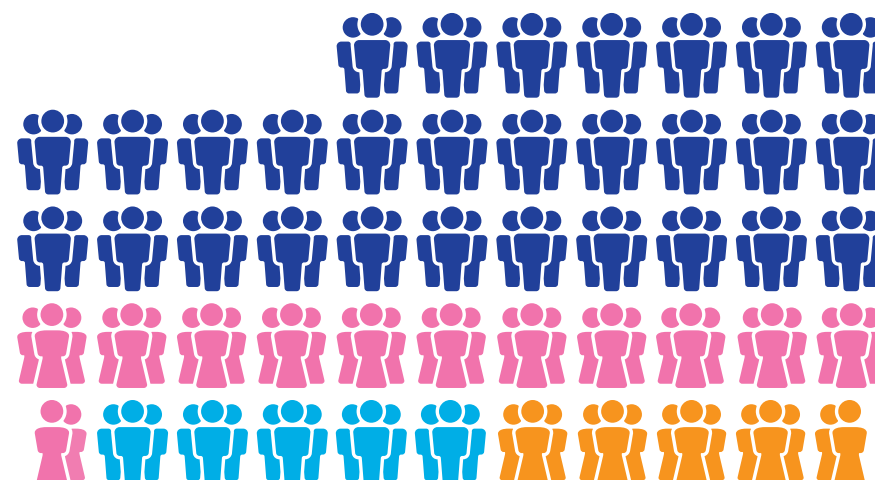
HUMAN RESOURCES

We carried out a full salary review to set a fairer and less hierarchical salary scale for UMN staff (reduced from 51 to 15 job levels) and to maintain our relative position in the market. 23 senior managers in team leading positions completed the Ignite Leadership Development course consisting of 8 modules over two years. We assisted in the recruitment of Hospital Director and other positions for OCH, while 24 Visa posts were renewed for expat staff to continue their work in UMN.

We (with ITS) introduced and expanded our SharePoint-based Intranet, in which staff can find information about our organisation, staff related matters, services and facilities, including the COVID-19 Portal.

We implemented the use of Microsoft Teams throughout UMN for collaboration and communication and to allow staff to work from home due to COVID-19, we developed and implemented COVID-19 Health and Safety Guidelines for UMN staff, and set up four quarantine rooms for UMN staff in Thapathali, which will be used for UMN staff who come from out of the valley during the COVID-19 pandemic.

 Nepali male staff
  Nepali female staff
  Expat male staff
  Expat female staff



FINANCE

In the year ending 15 July 2020, UMN's consolidated income was USD 8,072,527 and consolidated expenditure was USD 8,873,826. The consolidated accounts of UMN include the full accounts of the Tansen and Okhaldhunga hospitals and the Hospital Services Office, Dhading Disaster Response Programme (DDRP) and UMN's COVID-19 response. UMN's accounts have been prepared using guidance from the Accounting Standards Board of Nepal and Nepal Accounting Standard for Not for Profit Organisations 2018. UMN has adopted this standard from this financial year.

INCOME

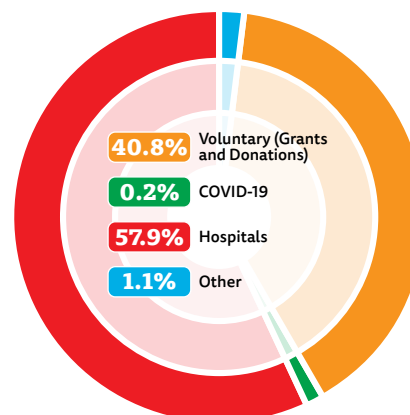
Consolidated Income was USD 8,072,527 a decrease of 28.2% on the prior year (USD 11,240,849²⁴). The hospitals' income was USD 4,675,845 accounting for 57.9% of overall income. Grants from institutions and donations for UMN's clusters work and COVID-19 amounted to USD 3,396,682.

In the year 2019/20 the designated fund received from donors for running projects have been recognised as Grant Liability and recorded as income as and when expensed.

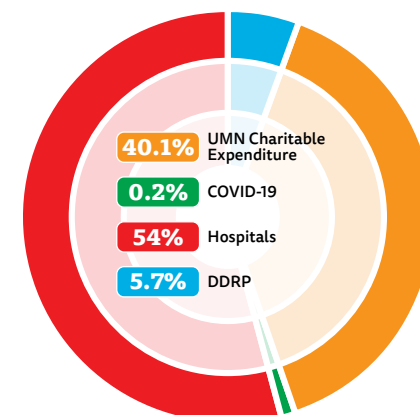
EXPENDITURE

Consolidated Expenditure was USD 8,873,826 a decrease of 21.0% on the prior year (USD 11,235,374²⁵). The hospitals' expenditure was USD 4,790,666 accounting for 54.0% of overall expenditure. Thapathali and clusters charitable expenditure was USD 4,083,160 accounting for 46.0% of overall expenditure. Charitable expenditure includes Dhading Disaster Response Programme USD 509,649 and COVID-19 response for USD 12,420. During the year, many project activities were revised and COVID-19 related expenditures were booked under respective thematic projects. No support costs were allocated to the hospitals.

INCOME 2019-20



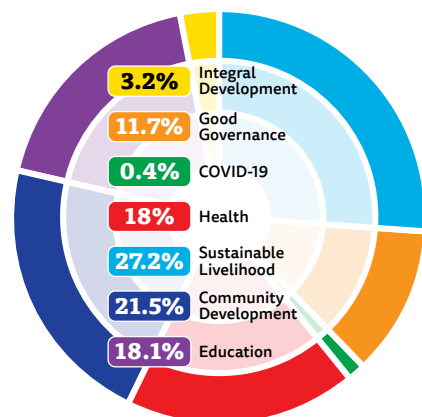
EXPENDITURE 2019-20



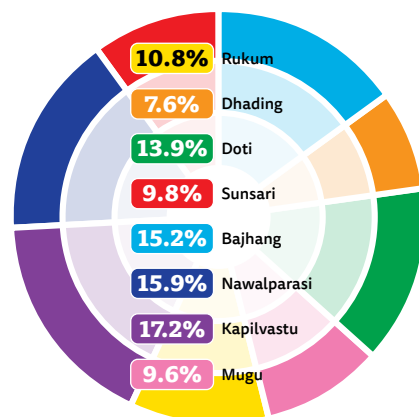
BREAKDOWN OF AT A GLANCE GRANT INCOME

DONOR	USD \$	%
Transform Aid International (TAI)	\$1,015,061	30.7%
PMU Interlife	\$310,162	9.4%
HimalPartner	\$283,616	8.6%
Interact	\$249,283	7.5%
Tearfund UK	\$223,105	6.7%
Bread for the World	\$201,255	6.1%
Normisjon	\$148,795	4.5%
Tear Australia	\$129,037	3.9%
Kindernothilfe	\$116,156	3.5%
UMN Support Trust	\$107,721	3.3%
ICCO	\$75,436	2.3%
Finnish Evangelical Lutheran Mission	\$73,877	2.2%
Mission Alliance	\$63,374	1.9%
United Methodist Church USA	\$57,873	1.7%
Evangelical Lutheran Church	\$56,538	1.7%
Other Donors	\$197,192	6.0%
Total Grant Income	\$3,308,478	100%

CHARITABLE EXPENDITURE 2019-20



CHARITABLE EXPENDITURE BY LOCATION 2019-20^{25, 27}



Dhading Disaster Response Programme expenditure totalling USD 509,649 represents 5.8% of UMN's total expenditure²⁶ this year. UMN's expenditure for its clusters work totalled USD 3,596,689.

The 2019/20 charitable expenditure of UMN is broken down in the locations below:^{26, 27}

Kapilvastu, Nawalparasi and Bajhang were the locations in which the highest proportion of UMN's charitable expenditure was spent. Technical support is provided to clusters from Thematic Leads based in Kathmandu in order to ensure the quality and effectiveness of UMN's work.

BREAKDOWN OF CHARITABLE EXP.²⁶

AT A GLANCE

DONOR		% OF TOTAL EXPEND.	% OF CHARITY EXPEND. ²⁵
Hospitals	\$4,790,666	54.7%	0.0%
DDRP	\$509,649	5.8%	0.0%
COVID-19	\$12,420	0.1%	0.4%
Good Governance	\$402,256	4.6%	11.7%
Education	\$623,838	7.1%	18.1%
Health	\$622,433	7.1%	18.0%
Community Dev.	\$742,006	8.5%	21.5%
Sustainable livelihood	\$938,306	10.8%	27.1%
Integral Development	\$109,444	1.3%	3.2%
Total	\$8,751,017	100%	100%

Exchange rate: USD 1 = NPR 120.10

²⁴ Since all financial reports are denominated in NPR, for comparative reasons we have recalculated last year's figures with this year's exchange rate.

²⁵ Excluding Hospitals.

²⁶ Including Hospitals.

²⁷ Figures are given excluding Dhading Disaster Response Programme to allow comparison with previous years.

BOARD OF TRUSTEES



ALEX SWARBICK

(Chair)

Alex lives and works in Singapore as Regional Director for leadership development organisation Roffey Park. During the 1990s, Alex worked in Nepal as Personnel Director for the International Nepal Fellowship.



GRACE KHALING *(Vice-Chair)*

Grace is an active member of the Nepali Isai Mandali Lalitpur Church, where she serves as an Elder, as well as in several volunteer roles. She has been working with the Asian Development Bank for nearly 30 years, and has considerable work experience with other international organisations. She also serves as a Board member for other para-church organisations.



SAMUEL GROSZ

Samuel is a lawyer who is based in the United States. His practice focuses on business, tax, and international law. He also has experience in real estate development and managing small businesses. Samuel spent significant time growing up in Nepal when his parents served with UMN.



HOM KHATRI

Hom worked with World Vision International Nepal as Finance Director, and previously as an Internal Auditor. He also served as a Board Chairman for Bethel Saving and Credit Cooperative Ltd. As a member of Nepal Isai Mandali, he has been providing support in financial management as a finance committee member. He also previously worked for seven years with Nepal Bible Society as Finance and Admin Officer.



RUPA PRADHAN

Rupa is a psychologist and has worked in direct anti-sex trafficking interventions and aftercare with International Justice Mission, Kolkata. Rupa currently serves as Program Manager for the Justice Ventures International project of Torrent Consulting in Nepal. She also teaches a course in the Masters in Psychology in Crisis Management programme at Tribhuvan University, Nepal.



SUBASH PRADHAN

Subash is an ordained minister who served as the principal of Nepal Baptist Bible College for eight years. He now serves as one of the revisers in the Revision Team at Nepal Bible Society. Currently, he is on the board of the Living Baptist Church, and also serves as a Board member for other NGOs.



DAVID RODGERS

David and his wife Sandra live in Northern Ireland. They have three children. David first visited Nepal as a medical student in 1986. He returned for a visit in 1990 and met Sandra, who was working in Tansen Hospital at that time. After getting married back in Ireland they served together, with UMN, in Amp Pipal from 1995 to 2001. David, a retired GP, is also a trustee of UMN Hospitals' Endowment Trust.



LALBIAKHULUI ROKHUM

Kuki, as she is more popularly known, is currently the Director of Training and Mobilisation of EFICOR, India where she has worked since 2002. Kuki is passionate about issues of justice and is involved in teaching about issues such as HIV and AIDS, creation care and climate change.



AJAY SHARMA

Ajay has been working in community development and transformation since 2002. He is a Director of WACT, an NGO working in the far western region of Nepal. He has served on the board of different local and national level NGOs in Nepal. He has experience in conducting evaluations of development projects and organisational assessment of NGOs.



NASTU SHARMA

Nastu is a registered physician and has a long history of working with the Nepal government's health system, multilateral and bilateral donor agencies, and non-governmental organisations. Nastu Sharma has served as the hospital director of UMN Okhaldhunga Hospital, administrative director, and as a Chief Executive Officer of Kathmandu University Teaching Hospital.



HEIDI WESTBORG STEEL

Heidi is based in Oslo, Norway and has a background in leadership, organisational development and geography. She had her upbringing in Asia and Africa and has worked for Blue Cross Norway, with alcohol and drug related problems in Southern Africa. She was previously the head of HimalPartner, one of UMN's partner organisations. She is now working for ICDP (International Child Development Programme) and taking a masters in leadership and global mental health.



FELICITY WEVER

Felicity is based in Sydney, Australia, and has a background in international aid and development. She is currently the Head of International Programmes for UNICEF Australia. Felicity previously worked for Baptist World Aid Australia, helping to establish UMN's Child-Centred Community Development programmes.

NATIONAL & CLUSTER PARTNERS

NATIONAL

Micah Network Nepal	NGO
BAJHANG	
Dalit Sahayog Samaj (DHS)	NGO
Ekikrit Bikash Manch	NGO
Mahila Kalyan Bachat Tatha Rin Sahakari Samstha Ltd.	Co-op
Pragatishil Yuwa Samaj (PYS)	NGO
DHADING	
Chandrajyoti Integrated Rural Development Society	NGO
Dhading Christian Society (DCS)	NGO
Himalaya Community Salvation Society (HIMS)	NGO
Jagat Jyoti Community Development Centre (JCDC)	NGO
Namaste Gramin Bikas Samaj (NRDS)	NGO
Prayatnasil Samudayik Bikas Samaj (Prayas Nepal)	NGO
DOTI	
Centre for Equal Access Development Nepal (CEAD Nepal)	NGO
Disabled Service Organisation (DSO)	NGO
Rural Community Development Centre (RCDC)	NGO
KAPILVASTU	
Dalit Social Development Centre (DSDC)	NGO
Kapilvastu Institution Development Committee (KIDC)	NGO
Sunshine Social Development Organisation (SSDO)	NGO

MUGU

Disabled Rehabilitation & Rural Development Organisation (DARRDO)	NGO
Gramin Samudayik Sanstha (GSS)	NGO
Karani Community Development Centre (KCDC)	NGO
NAWALPARASI ²⁸	
Indreni Social Development Forum (INDRENI)	NGO
Isai Samaj Nawalparasi (ISN)	NGO
Lumbini Christian Society (LCS)	NGO
Sunawal Community Development Centre (SCDC-S)	NGO
Sungabha Community Development Centre (SCDC-R)	NGO
RUKUM ²⁹	
Christian Society Development Campaign (CSDC)	NGO
Nepal Disable Protection Forum (NDPF)	NGO
Nepal Magar Society Service & Information Centre (MIC Nepal)	NGO
Nepal People Awakening Forum (NPAF)	NGO
SUNSARI ³⁰	
Community Development Forum (CDF)	NGO
Chandra Mukhi Club (CMC)	NGO
Naba Jiwan Samaj Sewa (NJSS)	NGO
National Community Development Centre (NCDC)	NGO
Nepal Chelebeti Disabled Women Society (NCDWS)	NGO

NGO = Non-governmental organisation

Co-op = Co-operative

²⁸ Nawalparasi Cluster includes Nawalpur and Rupandehi districts.

²⁹ Rukum Cluster includes Rukum East and Rukum West districts.

³⁰ Sunsari Cluster includes Sunsari and Morang districts.

This year, UMN phased out partnerships with 16 local partners, mostly related to clusters phasing out in Dhading, Rukum West and Sunsari.

SUPPORTING PARTNERS

AUSTRALIA

Transform Aid International
Tearfund Australia

FINLAND

Finnish Evangelical Lutheran Mission

GERMANY

Gossner Mission

IRELAND

Presbyterian Church in Ireland

THE NETHERLANDS

Tear Netherlands
ICCO & Kerk in Actie

NORWAY

Normisjon
HimalPartner
Mission Alliance

SWEDEN

InterAct
PMU Interlife

UNITED KINGDOM

BMS World Mission
Church of Scotland
Tearfund

UNITED STATES OF AMERICA

Evangelical Lutheran Church in America
World Mission Prayer League

MULTI-NATIONAL BODIES

Interserve
Global Ministries of The United Methodist Church



UMN is also grateful to the following organisations for their support this year

Bread for the World-Protestant
Development Service, Germany
CEDAR Fund, Hong Kong
Church Mission Society, UK
EduTech, Nepal
Forum Wiednest, Germany
Kindernothilfe, Germany
Lloyd George Asia Foundation, UK
Medic Assist International, UK
Presbyterian Church of Canada
Presbyterian Church World Mission, USA
Samaritan's Purse, Canada
SIM
Smyrna Church, Sweden
UMN Support Trust, UK
United Methodist Committee on Relief (UMCOR), USA
United Methodist Women, USA
ViiV Healthcare, UK

UMN is also grateful to many individuals, groups and churches around the world who provide faithful support to UMN.





*Fullness of life for all,
in a transformed Nepali society*

UNITED MISSION to NEPAL

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