Fullness of life for all, in a transformed Nepali society
Dear friends,

We saw Sagarmatha (Everest) from our roof in Kathmandu the other day. Tiny, scarcely distinguishable from the Himal in front of it. But with barely any cars playing the roads and most businesses shut down, the coronavirus lockdown has left the valley skies clearer than they have been in decades. For the first time since our arrival in 2015, the hundred miles between us and Sagarmatha aren’t thick with haze.

It’s a metaphor for how the Covid-19 pandemic has changed our situation in extraordinary ways that we would never have predicted at the beginning of the year. A few – very few – are positive. But in general, like so much of the rest of the world, we are grappling with once-in-a-century challenges and risks.

As I’ve written in this letter, Nepal has confirmed 6,591 cases of coronavirus and has had 19 deaths. These numbers have been kept low (on the global scale) at great cost. Since late March, lockdowns have forced millions of Nepalis who rely on day labour or small businesses to survive without their normal livelihoods. Villages all over the country are packed with migrant labour returnees who have come back to the stigmas of being possible virus vectors, and a paralyzed job market.

As for UMN, our Hospitals are struggling to fill a revenue gap left by reduced patient numbers, and Cluster teams are stuck far from the people we want to be serving. This issue describes all these challenges in more detail.

And as we work, plan, and struggle, the newly clear skies over Kathmandu call to mind Psalm 121: “I lift up my eyes to the mountains – where does my help come from? My help comes from the Lord, the Maker of heaven and earth.”

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Life and work for people all over the world have changed significantly and with Covid-19 and the same is true for UMN. Ever since the Government of Nepal imposed a lockdown, UMN staff are learning to adapt with new cultures of working from home. UMN project activities have come to a standstill for now, excluding relief work, but meanwhile plans and assessments are being made (see IMT box).

Here are some of the major changes we had to make to our programme and cluster work:

The cluster exit plan and preparations have suddenly changed with Covid-19. Exit from Sunsari and Dhanilkuwad Clusters took place at the end of May as opposed to the original plan of July. A proper farewell and celebration are not possible in these two clusters where we have worked for so long (see page 8).

The plan to open a new UMN cluster in Karnali province has been put on hold for now. The continuous extension of lockdown has made it impossible to carry out planned activities. Furthermore, redirection of funds as the supporting partners and donors themselves face a economic crisis in their own countries prompted the leadership for these decisions. So now UMN will continue with six clusters instead of seven.

With IMT’s support, HR measures have been put in place for the wellbeing of staff including provision of flexible working hours and reallocation of rooms in our headquarters for self-quarantine of office travelers. This is a very important measure for staff who will be rejoining family members who are vulnerable or elderly.

To conclude with, UMN’s work is significantly affected by Covid-19. However, we are learning to navigate through the situation and are committed to make our way through to respond to the needs of the poorest people living in poverty whose lives are impacted the most by this pandemic.

JOEL HAFVENSTEIN Executive Director
THE LOCKDOWN EXPERIENCE

Nawalparasi

The deadly coronavirus has been spreading all over the world. Hundreds and thousands of returnees from India are entering Nepal through the border area. The risk of spreading the coronavirus in our working area is very high. Our working situation is turned upside down due to the global pandemic and the community. At the time of evacuation, we were in the middle of some training programmes; bills were left to be paid, materials were piled up in the fields which were waiting to be constructed into sheds, ponds, and walls. With a promise to return as soon as the lockdown was lifted, the Kaplivastu team retreated from the cluster office.

From an opposite time zone

On 17th March, I left Nepal intending to go to a meeting in the USA, celebrate my father’s 70th birthday and return 10 days later. No luck! By the time my flight landed in the USA, Nepal had started requiring a Covid-19 PCR test to re-enter and before I could get one, the airport closed. These days I eat dinner with my parents and then get on Skype at 8:15pm to join 9am meetings in Nepal. I continue to be amazed by the way the pandemic has impacted staff members around the world. The month of April and May were very busy months for revising existing projects, designing new projects in the light of the Covid-19 situation. All the revision and designing works have been accomplished through online meetings and discussion which we have experienced for the first time in our job. Our working situation is turned upside down due to the global pandemic and crisis. Let us pray and hope for the best in coming days.

KATHERINE PARKER

Advisor with Monitoring, Evaluation and Learning Team

from the red zone clusters & separated expatriate staff

Kaplivastu

In early March our cluster colleagues of Kaplivastu were aware of the pandemic slowly sneaking into the country, yet the regular work was going on with some caution. The government’s decision of banning long-distance travel to curb the contagion of Covid-19 on March 22 and then full lockdown two days later, was an unexpected work. With a promise to return as soon as the lockdown was lifted, the Kaplivastu team retreated from the cluster office.

At the time of evacuation, we were in the middle of some training programmes. Staff members were kept to be techno friendly. The whole working situation has totally interrupted due to the pandemic and lockdown. Our frequent meetings with the local communities until further notice. All the staff members were safely evacuated from the cluster’s working areas of Rupandehi and Nawalparasi districts border India and Nepal. Kaplivastu staff are connected online for meetings and sharing. Staff members experienced a fear when their phone, see them in web-based platforms now and then, and keep hoping, waving plans and promisings to return soon. Still, these episodes go on and on. The wait does not seem to end.

Sanepa!

PETER FLEMING

Integral Development Advisor

Nepal or Ireland?

We are all in our minds and debating for days on the question to stay or to leave. Many of Jayne’s colleagues in KISC (Kapilvastu International School part-founded by UMN) were returning to their home countries, and Jayne had a few health concerns. For me there was a strong feeling of wanting to live in solidarity with my Nepali colleagues who did not have opportunity to leave. The opportunity to fly came about rapidly, and so the decision was taken for Jayne to leave and me to stay. She has been teaching remotely from the front room of our flat in Sanepa! It has not been easy for either of us, this is the longest we have been apart from each other, but we are so grateful for WhatsApp! One of the most important lessons for me in this experience is to have a greater understanding of our UMN Staff who are working in clusters and spend many weeks in the year away from home and loved ones. In my dealings with them I always had sympathy, but it is greater and more personal now.

SANMAY SHARMA

Integral Development Advisor

KATHY WHEELER

Head of Programmes

Key decisions were made and a plan was developed to ensure that the most vulnerable people in the community had access to the basic necessities such as food, clean water, and sanitation. The team also worked closely with the local authorities to ensure that the community was informed about the measures being taken to prevent the spread of the virus. Despite the challenges, the team continued to provide essential services to the community and make sure that those in need received the support they required.

From an opposite time zone

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Now, instead of delivering goods to project locations, we offer consultation virtually to our distant colleagues in despair. Likewise, instead of traveling through the lanes of the communities, we are cruising through pages on digital screens—of plans, strategies and promises of the new normal.

ROH KUMAR BK

Team Leader, Kaplivastu

KATHERINE PARKER

Advisor with Monitoring, Evaluation and Learning Team
JAPANA’S transformation

Japana B.K. was not confident. A grade 10 student at Himalaya Secondary School in Rukum, she was shy and didn’t like speaking in front of others. She was also doing poorly in her studies. But when she became a member of a child club, her life started to change for good.

She is now the vice chairperson of Srijansil child club formed under UMN’s CAN project in support of partner Christian Society Development Campaign (CSDC). Joining the child club was a great experience for her. The board committee selected her as a child to child (CtC) facilitator and she was trained how to lead sessions on topics such as the importance of hand washing, cleanliness and sanitation, kitchen gardening, effects of child marriage, domestic violence etc. Because of this she became more active and started conducting sessions effectively. Japana was also elected by students as the vice chairperson of the child club.

With two responsibilities on her plate, she became more active in advocating for children’s rights and started to speak out. She also led an initiative to clean the community road and get involved in social events highlighting the dangers of child marriage and discrimination against daughters in favour of sons.

Japana noticed the change in her life. “I transformed,” says Japana. “And this helped me to teach others.” Her teacher noticed that she improved in both social studies and health at school which has even inspired Japana to become a teacher one day.

POULTRY perseverance ays off

Abandoned by her husband when he remarried, Gita Dwel encountered hardship and sorrow, struggling to survive without the income he used to send from working in India. Her land of 0.2 hectares (0.5 acres) in Bajhang couldn’t sustain her three children, so she started daily wage labour for neighbours. Gita thought her life was worthless.

But joining a group started through UMN – the Bhirajini Community Empowerment Centre - brought her new hope. She started saving through the group and expressed her interest to start income-generating activities. UMN’s local partner Ujikrit Bikash Manch (EBM) helped her to start poultry rearing, arranging for her to receive 22 chicks, starter rations and technical assistance from a veterinary advisor.

She prepared the poultry cage and reared the chickens by feeding locally available feed like maize, wheat, grass and allowing the chickens to roam around the homestead. But she encountered a lot of problems in chicken rearing. Although the regular monitoring and timely technical support helped to control disease, three chicks died within a week of receiving them and another five died in a duration of three months.

Despite these losses, she persevered and has started to receive an income from her poultry farming. Selling eggs and three cocks has brought in NPR 10,500 (USD 90) so far. The earning has been helpful to provide education for her children, food and clothing for her family. Currently, she has 11 chickens (five cocks and six hens) and plans to hatch chicks in order to continue her business and expand its scale.

Gita (38) is just one of hundreds of women and families who have gained security and dignity in their lives since 2016 when we launched Community Empowerment Centres in our clusters of Bajhang, Doti, Dhading and Rukum.
Many thoughts and emotions went through my mind as I was reflecting on the 15 years and three months of my work in Sunsari and Rupandehi Cluster. I started off in Rupandehi in March 2005, then in 2008 I moved on to Sunsari.

Firstly, I see it as a huge and a humble privilege, to have been a part of God’s plan, that He chose me to serve the needy communities of Rupandehi and Sunsari in this way. My reflection focuses more on Sunsari cluster as I worked 12 years with 17 partners and 16 staff over the years when community projects were in full swing. UMN was like my second home and Sunsari team like family members. We have been together through many thick and thins, challenges and achievements. I can confidently say that committed teamwork was our strength.

In the community, UMN is known as an organisation which achieves more with less budget, gives a lot of warmth and care to others in the way they live when they are in the community is concerned so much about building capacity of staff, community people and partner NGOs, is honest and works with integrity (local partners have also respected and learned this).

It would be so good and useful to document the work and achievements of UMN in Sunsari. I think this would be a valuable UMN resource to archive UMN’s work in the eastern region of Nepal. It would indeed be wonderful to make it work.

One thing we were looking forward to in June 2020 was the formal closing celebration in Sunsari. It is natural to feel disappointed that we have not been able to properly celebrate the achievements with a community gathering where we could meet, acknowledge work done, say farewell and hand over formally to the government. This was what staff and partners deserved. But I take heart by looking at the extraordinary achievements we have made together in this long journey. However, we still rejoiced in sharing soft copy certificates and letters of appreciation on virtual farewell.

Thank you to every single person that has been a part of this long journey with me to transform lives. What gives me real happiness is the smile in the faces of people when I visit the community. It is so real and genuine. The majority of our partners have spread their networks and developed a sustainable strategy. This is when I feel satisfied, this is what I see as my success and team achievement.

I thank God for the rich experiences in my life that I have enjoyed so much. I am excited to see what the Lord has in plan for me in the next phase of my life.
The Association of International NGOs in Nepal (AIN) handed over a UMN's Dhading Disaster Response Programme provided 18 medical supplies including PPE sets, safe delivery kits, infrared thermometers, water and air-proof aprons among others. The support is active in Ruby Valley RM.

Personal Protective Equipment (PPE) sets, safe delivery kits, infrared thermometers, N-95 masks, surgical masks, handwash etc. to protect their communities (see page 4 also). These are being used to manage all the quarantine posts and check posts of Covid-19. In addition, Community Development Centre, and Isai Samaj Nawaparasi distributed food aid and essential supplies to ultra-poor families in each (300 families in total) were selected from one of these groups:

- People with disability and their families (doing day to day labour work to sustain their family).
- Pregnant women and new mothers (where their family are very poor).
- Single women and older people (who have no one to support them at home).
- Ultra-poor labourers (landless people, working for daily wages).
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In Dhading, the Dhading District Disaster Management Committee (DDMCC) supported Badikedar Rural Municipality in mid-May with medical equipment such as IR thermometer, N-95 masks, surgical gloves, PPE set, sanitizer, disinfectant spray alongside other materials to support the quarantine management such as blankets, tarps, etc. These are being used to manage all the quarantine centers and check points of Dhading.

In Okhaldhunga, our five-year Community Based Rehabilitation (CBR) project, which was just launching to support people with disabilities, has revised its activities and reallocated budget for the current global Covid-19 pandemic season. In conjunction with the local government we recently purchased rice, lentils, oil, salt and soap for ultra-poor people who are unable to get food to survive in our current lockdown situation (see photos). In our CBR working areas of Malung and Khijidhama Rural Municipalities, 150 families in each (300 families in total) were selected from one of these groups:

- People with disability and their families (doing day to day labour work to sustain their family).
- Pregnant women and new mothers (where their family are very poor).
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We also reached 150 people with Covid-19 awareness sessions during this distribution – through community orientation sessions and door to door visits messages into local languages for broadcast over the radio, reaching remote villagers in their own mother language. A radio program was also made using microphone and speakers.

In connection with the United Nations (UN) Education Cluster we are involved in creating several self-learnings resources in Nepal – for children in Early Child Development and throughout Primary grades. Some are based on government textbooks and curriculum; some require no books. These resources could also be used by students for self-study in any other future pandemic or disaster situation when they are unable to gather to attend school. We are involved in three groups of resources:

- Early Childhood Development (ECD) for the youngest age group. UMN will be involved. The materials produced will be available in the department of education.

- Grade 3 – the UN Education Cluster is to develop home-based learning activities for children of the youngest age group. UMN will be involved. The materials produced will be available in the department of education.

- Grade 6 - The UN Education Cluster has asked UMN to lead the development of distance-learning education material for grade 6, as part of a national plan to develop self-learning materials based on the government’s textbooks and curriculum for each unit and lesson from grade 4-8. It is a major responsibility and very positive that UMN’s education work has been valued in this way. The materials will help schools across the country, including community schools in our clusters, to cover the disruption to education caused by Covid-19.

In Nawalparasi, for Pulhinand, Protopappu and Huspewal Rural Municipalities, our partners Isai Samaj Nawaparasi distributed health and safety materials including PPE sets to our hospitals in Tansen and Okhaldhunga.

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Food aid and essential supplies to ultra-poor families in Doti was in the Far West, our partner Rural Community Development Centre (RCCD) supported Badikedar Rural Municipality in mid-May with medical equipment such as IR thermometer, N-95 masks, surgical gloves, PPE set, sanitizer, disinfectant spray alongside other materials to support the quarantine management such as blankets, tarps, etc. These are being used to manage all the quarantine centers and check points of Doti.

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Okhaldhunga update

Okhaldhunga, our smaller hospital with 85 beds, is however the largest hospital not only in the district but for the neighbouring districts of Darchula, Jhapa and Rolpa. trekking, receiving patients who travel on journeys of several hours or even days.

While making preparations for protecting against the spread of coronavirus – PPE, fever clinic tent, isolation beds, training staff – the hospital realised with a heavy heart that the Maternity Waiting Home could not provide adequate self-distancing measures and therefore would have to close. This is usually a very communal place where up to 25 women and their husbands share cooking facilities, live in close quarters and receive health teaching and daily counselling. The home would now have to be quarantined for a long period during labour or after complications. In an area with many remote villages this home can save the lives of mothers or babies when they would not be able to reach medical care in time. But for now, it has to close.

Like all educational institutions, the Nursing School is also currently closed while the new Community-Based Rehabilitation project is scaled down due to Covid-19 response and relief (See page 11) while still seeking to reach people with disabilities and their families. Caring for patients with serious, sometimes life-threatening conditions is still essential and our staff continue to use their skills to save lives and help patients amidst all the coronavirus upheaval. Here are two of several recent emergency cases.

A 42 year old woman was referred to us from a neighbouring district hospital. She was very sick, and very anaemic. Ultrasound showed blood in the abdomen. At operation, at least two litres of blood and clots were removed and the problem was discovered to be a ruptured uterus from an ectopic pregnancy. She received a transfusion of four units of blood. During lockdown numbers have fluctuated, but outpatient numbers dropped significantly at the beginning (to only 21% of the usual on the worst day) and then a local government website. In the community here and across Nepal, we daily continue to serve the sick, like so many around the world our plans would not be able to reach medical care in time. But for now, it has to close.

Looking ahead, the fever clinic needs to move into doors (before the monsoon rains) in the hospital is deciding how to reorganise the use of buildings. While the new Community-Based Rehabilitation project is scaled down due to Covid-19 response and relief (See page 11) while still seeking to reach people with disabilities and their families. Caring for patients with serious, sometimes life-threatening conditions is still essential and our staff continue to use their skills to save lives and help patients amidst all the coronavirus upheaval. Here are two of several recent emergency cases.

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Soon after lockdown began, UMN realised that our biggest financial need triggered by Covid-19 and lockdown wasn’t the need for PPE (around USD 90,000) but covering the immediate and drastic loss of hospital income due to the sudden drop in patient numbers. Even before lockdown patient numbers reduced through fear of contagion. After lockdown, Tansen outpatients was near empty, inpatients was down to about half and Okhaldhunga also saw a big drop in outpatients while inpatients was sometimes down by 50%. Initially, across both hospitals the drop was up to 80% - the hospitals, especially Tansen, were almost empty! Since 80% of hospital income comes from patient fees, this was an immediate challenge – how to keep the hospitals running, pay staff, maintain readiness for Covid-19 infections and continue to meet ongoing medical needs of the communities who rely on these rural hospitals.

On 3rd April we launched the Save our Hospitals appeal, with a video. Would friends of UMN around the world be willing to support our hospitals in their hour of need, even when your own countries (and hospitals) were suffering terribly from coronavirus cases and deaths and the ensuing economic shock? We felt wary to launch an appeal to those more affected by the disease, but our need was great. Your response was so quick and encouraging – we are so grateful. By now, hundreds of patients are returning, sometimes with more severe conditions because they have waited longer for treatment, due to both the fear of infection and the widespread lack of transport in lockdown. You can learn more of the current situation in the Tansen and Okhaldhunga areas. Looking at the year ahead (until mid-April 2021), with careful budget planning we are looking at a shortfall of over USD 1.5 million!

In the first week following lockdown, we saw a big drop in outpatients while inpatients was sometimes down by 50%. Initially, across both hospitals the drop was up to 80% - the hospitals, especially Tansen, were almost empty! Since 80% of hospital income comes from patient fees, this was an immediate challenge – how to keep the hospitals running, pay staff, maintain readiness for Covid-19 infections and continue to meet ongoing medical needs of the communities who rely on these rural hospitals.

We need to know the final extent of Covid-19, but we already know about the wave of poverty sweeping the country. This is resulting in hunger other illnesses and deaths, unemployment, disrupted education, domestic stresses and violence. Pray about all these troubles – each one of them has many human faces.

Our Mission Hospitals are facing growing challenges. The pandemic is increasing; the task of treating Covid-19 patients while protecting everyone else and continuing to treat other patients is difficult; the concerns about finance are real and we will see real impact. Your constant prayer and support is needed.

Our cluster teams are dealing with strong community pressures. The pandemic has closed offices and set everyone to working remotely. Yet ultimately we need people active on the ground and UMN’s cross-cultural teams provide opportunities for suitably skilled expatriates to work with Nepali colleagues, sharing technical skills and demonstrating God’s loving concern for all people, particularly the poorest and most vulnerable. Expatriate team members do not receive a salary or remuneration from UMN directly, but are self-supported volunteers, or supported by a sending mission or church in their home country. You are invited in any of these positions or if you would like to ask about other opportunities for service in UMN, please contact Feliphe Rocha at expat.recruitment@umn.org.np to learn more. Send your CV or resume with your email.

PRIORITY NEEDS

GRANT MANAGEMENT ADVISOR – KATHMANDU BASED: To play a key role in advising, providing hands-on technical support to, and building capacity of Cluster Teams and the Grant Management Unit, developing high quality competitive project grants/proposals in line with UMN’s strategy.

FINANCE ADVISOR – KATHMANDU BASED: To work alongside our Nepali professionals to ensure that sound financial practices are implemented, to properly manage the funds entrusted to us. A strong financial background, preferably with accountancy is required and experience in the not-for-profit sector would be an advantage.

FOR ALL DOCTORS, FLEXIBILITY, THE ABILITY TO WORK IN A RESOURCE-LIMITED SETTING AND AN INTEREST IN TEACHING AND MENTORING JUNIOR NEPALI DOCTORS ARE REQUIRED.

Please visit www.umn.org.np/corona-response where a collection of resources is available, alongside latest information and news on Nepal’s coronavirus situation and UMN’s response.
DO NOT BE ANXIOUS ABOUT ANYTHING, BUT IN EVERY SITUATION, BY PRAYER AND PETITION, WITH THANKSGIVING, PRESENT YOUR REQUESTS TO GOD.

Philippians 4:6