

Territarium minimum mi



Dear friends

I am again very happy to share the third issue of UMNews for this year. This issue focuses on good governance, its importance and UMN's joint efforts on demonstrating accountability and transparency in what we do. Good governance is an overarching agenda, and we have been advocating for it since we started the new way of working through clusters and our local partners. UMN has been investing a lot (time, effort and resources, etc.) to promote and strengthen good governance within and with our local partners. You will catch a glimpse of that work through the stories and articles highlighted in this issue. We are very grateful to God for all the provisions for these works and also for putting this agenda in our hearts.

This issue also contains the regular updates on hospital works and others. I am sure they will encourage you too. With all these achievements and highlights, we are also sad to bid farewell to some of our key staff who have contributed significantly: Dr Olak Jirel, who served for 40 years, and Peter Fleming, who served for 4 years. We are grateful to them not only for their commitment and significant contributions over these years but also for coaching and



mentoring their successors. They have truly blessed us. We wish them good health and a blessed life ahead.

I would like to take this opportunity to thank our supporting partners for all the support and prayers for the work we do and all the staff who have made this work happen.

Enjoy reading UMNews!

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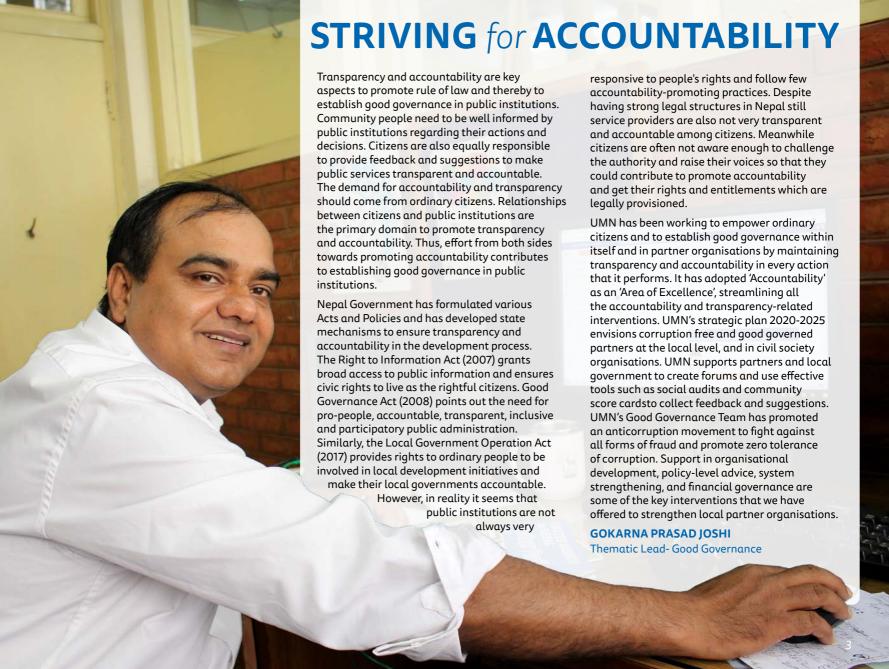
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Social Audit ke ho? (What is it?)

Social audits are a valuable tool for transparency and accountability. Since 2021, we (UMN) have been conducting them annually at a district level for our six clusters as well as helping our local partners, and sometimes local institutions, to conduct their own.

Why do we do them?

- For accountability and transparency in our work.
- To build relationships and trust.
- ⇒ A learning and sharing environment for the service provider and all participants.
- To raise the community's voice
- To build trust between rights-holders, service providers and stakeholders.

Whose audits?

- Our clusters at a district level.
- Our partner organisations at municipality or district level.
- Schools
- Health facilities and health posts.
- Local government rural municipalities, municipalities and wards

Who comes?

- Around 40-45 people at district level or 25-35 participants in Rural/Municipality level.
- Beneficiaries (including children)
- Partner organisations.
- Stakeholders
- Representatives from relevant departments or agencies like agriculture, health etc.
- Media



What happens in a social audit?

- Sharing facts from our organisation and work, such as information about our projects, activities and plans, budget and expenditure, targets vs achievements, lessons from both successes and failures, key issues and challenges.
- Receiving feedback from those attending questions, concerns, suggestions, and comments.
- Sharing testimonies from our work.
- Following up on previous social audit findings and feedback, recommendations, etc.

How does UMN help social audits to happen?

- By running our own social audits, we inspire other NGOs to do them for their work too.
- We help our local partners run their own social audits, which include both their work for us and their work for other donors.
- We sometimes train other institutions with whom we work to run their own.
- When needed, we train both facilitators and beneficiaries in running social audits, for example by running civic education sessions for beneficiaries so they have confidence to speak out and share their experiences.

Results

- Action plans for further improvement.
- Other organisations involving their beneficiaries.





Examples:

Nawalparasi West

This year, social audits were carried out at two health facilities in Pratappur with the support of UMN's project*. Health facilities' staff management committee and beneficiaries were present. They seemed very happy as they directly shared their problems in front of many people and received answers directly from duty bearers. The audit was accomplished very effectively as the health facilities have prepared action plans for improvement, and we will provide continued support to fulfil those plans.

* Integrated Rural Community Health

Doti

UMN is the only INGO that formally conducted a social audit with stakeholders in the district. The local government and stakeholders highly appreciated our work and trusted us.

Bajhang

Last year, the Coordinator of the District Coordination Committee was excited to hear about a new agri-technology oil processing machine supported by the Srijana Project at Thalara, Bajhang, which was mentioned during a social audit. He wanted to know more about it and to observe this machine in operation. His reaction prompted the beneficiary to speed up the machine's implementation; the oil mill is now operating as a Cooperative.

First public audit for **ACCOUNTABILITY**

For the first time in the history of Jorayal Rural Municipality in Doti, with the support of UMN and its partner CEAD¹, the community conducted a public audit. "It has created momentum for accountability in Jorayal," shared Vice Chairperson Jamuna Bohara.

There were no formal accountability events held in Jorayal before this, so people were not informed about planning and budgeting processes and there was no platform to raise their voices and concerns. Through UMN's Sushasan Project in Jorayal and in collaboration with CEAD, people were educated on the importance of transparency and accountability in organisations along with receiving an orientation on public audits. Civic education sessions were also held in different communities to educate people on social issues, rights, and entitlements.

UMN and CEAD consulted with the rural municipality Chairperson, Vice Chairperson and Ward Chairperson asking that they organise a public audit and invite community members and stakeholders. After several meetings, local authorities decided to make this happen and eventually all the work led to a public audit in Jorayal.

Jorayal Rural Municipality and six wards within Jorayal all conducted public audits, increasing community participation. Jorayal is the first rural municipality to hold a public audit in Doti and people learnt the public audit process very well and are committed to continuing this process in the future. "We will conduct it regularly in the coming days," shared Ward Chairperson Nand Raj Bhatt.



Local leader uses TRANSPARENCY TRAINING

After being elected as the Ward Chairperson of Ward 3, Saraswatinagar of Doti, Dinesh Kumar Malla was determined to keep his ward transparent and accountable. But with little experience in community development, he was unsure of the best ways to do this, or how to involve community members in the development process.

Meanwhile, UMN and its partner CEAD were implementing the Sushasan Project in his ward which offered training and capacity-building interventions for elected members. Dinesh participated in one of the trainings on Right to Information (RTI). He learned that RTI in his role requires him to inform the community (rightsholders) about the budget, activities, and achievements of the ward office. Realising the importance of RTI, he put it into practice.

Following the training he arranged a notice board, citizen charter and complaint box in his ward office. Now, Dinesh updates the notice board if new information or decisions come through and as a result, people are more aware about ward activities and services provided. He has also informed and involved community members in the participatory planning and budgeting process.

As a result of the project Dinesh organised a Community Score Card², social and public audit to share information and get feedback from community members.

For any community meetings everyone including those who are poor and marginalised in his community are invited to hear about the ward's budget, activities and achievements. And going even further, Dinesh has formed a committee in his ward involving people from marginalised communities. This kind of initiation has restored broken relationships between the communities and ward office. "It's increased constructive communication between the ward and community people," shares Dinesh.



2 A feedback mechanism used by the community and the service provider for better performance.

Hear from our

LIVING OUT AND PROMOTING ACCOUNTABILITY & TRANSPARENCY

Here you can gain a flavour of our work on the ground to bring greater accountability and transparency, in our projects, local government and other service providers.

How have you been supporting local governments to promote accountability and transparency?

UMN's work with local government involves providing technical support to improve good governance and develop feedback response mechanism policies and committees. We support them to endorse and put these policies into practice. Frequently we also provide advice and support to ward offices and rural municipalities to conduct social audits (see pages 4 & 5) and community scorecards.

At a community level we assist with installing suggestion boxes in public offices/locations and information boards in public places.

Some examples which highlight this work include:

In Doti we conducted an orientation meeting on Child Friendly Local Governance for rural municipality bodies and other representatives.

Through our health security project in Nawalparasi West and Kapilvastu we improved access to information by helping to install digital notice boards at Palhinandan Hospital (Nawalparasi West) and Kapilvastu District Health Office. The boards disseminate information about regular health services available as well as awareness about COVID and vaccines.

All health facilities in the project locations now display citizen's charters and suggestions/complaint boxes are provided – 8 in Mayadevi (Kapilvastu) and 15 across Pratappur and Palhinandan (Nawalparasi West). These are regularly monitored by the local feedback response mechanism teams to effectively address any issues arising.

In Bajhang we facilitated a consultation meeting to address the gap in policy/guidelines and strategy, particularly the DRR guideline, Disaster Preparedness



Information boards in Rukum East.

and Response Plan of the local government. As a result it immediately re-formed the local-level Disaster Management Committee . In addition, the project team organised a Youth dream-sharing meeting. Local government and its wards provided information to young people about allocated budget and programs, and mobilised their agriculture and livestock technical staff to provide training. This increased the communities' access to technical services and financial support from the local government.

field staff...

In what ways do you see accountability improving in your working area as a result of UMN's work?

Inclusive budgets

Bogtan Fudsil Rural Municipality in Doti is now ensuring the participation of children and women during meetings and allocating budgets for women's groups. Local government in Bajhang has developed policy and programmes for this Fiscal Year which include gender responsive budget allocation. The budget is also more accountable towards people with disabilities and includes income generation support to single women and Dalits* and education support to children and minorities.

Education and Health

In Mugu the schools which were taught for only 1 to 2 months in a year (because the teachers did not attend regularly!) are now operating according to the Education Act. The health posts have been providing regular services. The schools' annual progress reports are reviewed and published. Through our work of advocacy, reviews and civic education, joint investment has been made in sectors such as drinking water, school development, health service promotion. Meanwhile in Rukum East, eight schools are practising social audits regularly and three health facilities conducted community scorecards while in Doti our project contributed to developing the School Improvement Plan for secondary-level schools.

Agriculture

As a result of the interaction meeting between the local-level agriculture unit and farmers which we facilitated in Rukum East, the agriculture unit has planned to conduct quarterly interactions with farmers and establish local-level farmers' networks. The unit head said: "such a time of interaction between farmers and our unit is fruitful to identify the gaps".

What challenges have you met in trying to achieve accountability?

We see low levels of education and awareness about accountability, even among local government representatives and executive members, where they are not fully aware about their rights, duties, accountability and transparency tools. So we face challenges as a result in implementation of guidelines.

Some specific examples of these challenges are outlined below:

In Mugu we sometimes see local government representatives acting from a political standpoint. They may pretend not to know about issues which have been raised and show little interest in workshops and training.

In Doti the issue is a prevailing gap in the necessary acts, plans, and policies. In the local development and planning process there is a low priority on women, children and other marginalised and deprived community members, including lower participation/representation and a lack of information shared with them.

Promoting an accountability system like the citizen's charter was new for rural municipalities in Rukum East, even though it is required by the government. The Citizen's Charter is a powerful instrument to improve the performance of local governance. Its implementation helps establish uniformity, standardisation, predictability, and neutrality in the provision of public services and reduce nepotism and favouritism in the system. To address this gap UMN conducted a series of meetings to promote the establishment and use of a Charter with the local government.

Bajhang experiences several challenges including frequent problems with telephone and internet connection and electrical supply, low education level and literacy rates. From a gender perspective it is evident that women lack sufficient time to participate in accountability activities - even those who are local government representatives, board members of partner organisations, female staff, representatives of civil society, and women in community groups and networks.

^{*} Members of the so-called low-caste community.

TANSEN AND OKHALDHUNGA

OKHALDHUNGA COMMUNITY HOSPITAL

Just recently Okhaldhuga Community Hospital has started services in mental health. A Psychiatric ward has been established and the hospital has recruited a nurse who is specialised in Psychiatric care. We look forward to giving holistic care to our patients like Kabita whose story is below:

6

6

A 25-year-old lady, Kabita (name changed) with epilepsy associated with intellectual disability came to our hospital's emergency room due to a burn. The doctor on duty gathered that due to her medical complications (she is also bedridden) she could not escape the disaster at her home. This lady was admitted to our hospital for treatment.

Like many people in Okhaldhunga, Kabita had health insurance, but her insurance could not cover all the hospital treatment bills. During her treatment, she had to stay in a hospital for a little over two months. Thankfully our social service charity fund was able to provide her with the needed financial support for her treatment and for food during

this time. Towards the end of the treatment, Kabita was healed and was content.

We are grateful to all the individuals who not only provide financial support but also regularly pray. As a result, people like Kabita receive care in our hospital even though she was not able to pay for her treatment.



Istock image

UNITED MISSION HOSPITAL TANSEN*

The hospital's Outpatients' Department (OPD), Emergency Room and wards have become very busy - just recently the maximum number of patients seen in the OPD in a single day reached 607, compared to an average of 450-500 patients a day! As the burden of COVID has waned a little, we are facing the rise of other infectious diseases: Dengue Fever and Scrub Typhus.

We need prayers to overcome the hurdles in starting Phase 2 of the Waste Water Treatment Plant (MBBR system), a hospital-community project with support of the Rotary Club. This is to treat wastewater not only from the hospital, but also from the nearby community. Meanwhile in staffing, quite a few senior surgeons are leaving or have left. We are in need of general and orthopaedic surgeons, either expatriate, Nepali or both. We hope and pray that for expatriate volunteers, the cumbersome visa and work permit processing will become easier - recently several families and couples had to leave their hospital work for over a week to do visa work in Kathmandu.



* This report is from September 2022.

Dr Olak Jirel

Celebrating 40 years of service with UMN!

We are privileged to recognise and celebrate the 40 years of service which Dr Olak Jirel has given to UMN and our hospitals as a surgeon and later in administration. Thapathali headquarters' staff gathered on 28 July in the garden with Dr Olak and his wife Jasmine to celebrate his contribution having served his whole career with UMN. Dr Olak officially finished with UMN on 18 July 2022.

Dr Olak's connection with UMN dates back to 1972 – 50 years ago! That year, he succeeded in gaining a UMN scholarship for his final years of school (+2/sixth form). In 1982 he then started at United Mission Hospital Tansen as a surgeon, where he continued for 23 years. He then continued to serve UMN's two hospitals (in Tansen and Okhaldhunga) in a different role before finally moving to UMN headquarters where he served as the Director of Hospital Services for 14 years.

We laughed at how Dr Olak was asked to stay one more year and then another year (beyond retiral age) to help the hospitals reach a more secure footing, ultimately with the UMN Medical and Development Trust formed in late 2020 and the hospitals' agreements with their provincial governments.

Many staff shared their appreciation of his humility, patience, and personal encouragement in their lives. We enjoyed the time of sharing in the garden and give grateful thanks to Dr Olak for completing four decades of service with UMN. God's blessings for your retirement!







Momentum against corruption

To raise awareness of UMN and partner staff on anti-corruption policy and internal control system, a series of anticorruption and internal control orientation workshops were organised from March this year. 354 participants including UMN headquarter staff, staff from five Cluster Offices and all of their 10 partner organisations participated.

The participants discussed and learned what it really is to fight fraud and corruption in an organisation - as well as understanding the concept of value for money and internal control system. UMN's 10 partner organisations developed plans of action based on what they learnt during the workshop. After sharing and discussing UMN's anticorruption policy, participants internalised and reflected the actual practices and situation of their respective organisation and identified areas to improve.

The workshop taught about different forms of corruption and fraud that may happen in civil society organisations. Participants improved their knowledge on anticorruption that helped to implement anticorruption and whistle blowing policy effectively throughout UMN and partners. To show group solidarity and support toward fighting-fraud, every workshop concluded with the group signing on a banner declaring "I won't do corruption, I will speak out against corruption, and I commit to zero tolerance of corruption."

The workshop has certainly created a momentum against corruption in UMN and its partner organisations. Staff have not only understood the concept, but these training sessions have also led the staff to question and reflect on their practices. There is a new sense of what is right and wrong and what is acceptable and not in their own team and offices.





UMN 2023 CALENDARS FOR SALE!



Good news, to give you the opportunity to have a beautiful UMN calendar, we will be posting them around the world from India this year – first come, first served!*

As always, it features beautiful photos from around Nepal, all taken by UMN staff and volunteers. You can enjoy the beauty of the people and life of Nepal with a bible verse for each month and Western and Nepali calendar dates.

Sample costs (including postage):

	1 calendar	5 calendars
AUD	10.00	48.00
CAD	9.50	45.50
EUR	7.00	32.50
GBP	6.50	31.00
USD	8.00	37.50

Please go to www.umn.org.np/store to order!

* We can't guarantee delivery before Christmas but will do our best!



WELCOMING NEWBORNS!

HELP US MAKE ROOM FOR MORE BIRTHS!

Very often we have to turn expectant mothers away from United Mission Hospital in Tansen (UMHT). They come wanting to give birth at our hospital but there's not enough room for them. They may even have travelled for hours on dangerous roads from a neighbouring district to ensure they had access to maternal services such as C-Section delivery. Instead, they have to try to find another hospital, which may not have space, be more expensive or sometimes have refused patients¹.

Even for those women who are admitted to our hospital, often they have to be moved to another ward, or have to be on visitor beds (see photo) or the corridor of the maternity ward. Every day around 4-5 women are referred from maternity to other wards in the hospital, with their babies, just because of lack of space!

Can you help us to make more space so UMN does not have to turn away pregnant women who want to give birth in our hospital? We are preparing to expand the maternity ward to a new area with 18 extra beds for post-natal patients. This will double our current maternity ward of 18 beds, but we still have a substantial funding gap to make this happen. (See table for annual figures.) Nepal continues to have persistently high rates of maternal mortality and neonatal mortality, and these indicators have been further exacerbated during the COVID pandemic. Our ability to serve more expectant mothers will reduce these risks for mothers and their habies.

Could you or an organisation you know help more babies to be welcomed into the world safely in our hospital? You can bring relief, security and joy to families as well as to our staff!

Whatever you contribute will go towards the maternity ward expansion.

For more information see www.umn.org.np/maternity

1 COVID-positive expectant mothers were sometimes refused by other hospitals during the pandemic, making us extra busy.



How many births at UMHT?



No. of women served per year		
Current Capacity	2,500 to 2,700	
Estimated additional births following expansion project	500-1,000*	

*Based on 60% occupancy

HOW TO DONATE:











To give online, arrange a bank transfer or send a cheque in your own country, please go to www.umn.org.np/give

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PRAY

- Pray that the value of integrity will be upheld in all the work of UMN and its partners. May we be a living witness to the importance and strength of this foundation
- Pray that as social audits of our work are conducted, both Government and communities will see UMNs willingness to be open to scrutiny and to respond to the advice of others.
- Pray that UMN will be a model of good partnership, always valuing the participation of others - especially those who are often ignored.
- Pray that UMN will be strong in demonstrating the love and eservice of Jesus as we work for his glory





Here are the priority needs for expatriate volunteers. For more details on these - and many other opportunities! - please visit www.umn.org.np/page/opportunities-expat or contact us at expat.recruitment@umn.org.np

Note: For Nepali staff vacancies see umn.org.np/vacancy

PRIORITY NEEDS - URGENT

EXPATRIATE COORDINATOR - Kathmandu based

Responsible for supporting all expatriates in their roles, liaising with Sending Agencies, to overseeing expatriate recruitment, advising on HR matters for all UMN expatriates, and co-ordinating the Language & Orientation Programme.

TUTORIAL GROUP TEACHER (Primary)

Okhaldhunga Community Hospital

Needed to start a tutorial group for us, initially for one family serving in the hospital but others maybe be added. An exciting opportunity to live and serve a hospital in the hills of Eastern Nepal.

OTHER PRIORITY NEEDS

MEDICAL SUPERINTENDENT (starting in 2023)

Okhaldhunga Community Hospital (OCH)

Potential candidates for this position are experienced medical doctors in rural general practice / family medicine, preferably with some procedural skills.

SURGEONS - United Mission Hospital Tansen (UMHT)

Note: Expatriate team members do not receive a salary or remuneration of any kind from UMN directly, but are self-supported volunteers or supported by a 'sending mission organisation' or church in their home country. A Masters degree or equivalent and at least five years of relevant work experience is required for all posts. 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.



This year UMN ran a short summer campaign, Gift a Kit appeal. **Thank you** to our generous donors and supporters, it was a real joy to be together with you in this.

Starting June this year, over a span of three months we received enough donations to prepare hygiene kits for 225 adolescent girls to help them better understand and manage their menstruation. The kits prepared were distributed in two schools in Kapilvastu to girls from Grade 7 to 10 after a workshop on menstruation and menstrual hygiene given by our Kapilvastu health staff with our health thematic lead.

With this kit they will have the necessary sanitary supplies to manage their periods and stay in school without embarrassment and without worrying about money for sanitary products.

Click here to watch the making and distribution of the hygiene kits **www.umn.org.np/kitvideo**

"We will never be the same again!"

In January 2018 we arrived in Kathmandu with lots of baggage, plans and hopes. What an amazing four and a half years it has been - some of the greatest experiences of our lives.

Moving from one culture to another we have

learned so much. We are so thankful for UMN. Staffed by colleagues who are patient, committed, innovative and also generous toward us. Behind everything there was a higher purpose. We had our plans and ideas, but time and again we learned, "Many are the plans in a person's heart, but it is the Lord's purpose that prevails" (Proverbs 19:21). There were often restrictions and delays that seemed pointless, but time and again we saw enough to convince us that God has a purpose, and we can trust him even when we cannot see the reason. We have a God who is both in control and loving.

This was very relevant whether it was UMN adapting its work through the 'change process' or having to work under the restrictions of the pandemic. Coming toward the close of our time in Nepal it has been so good to see the Integral Development team growing again and making progress in stimulating the Church to engage in serving the whole community.

We have made so many special friends. We will never be the same again. We will continue to pray that fullness of life will come to everyone in Nepal.

PETER FLEMING

Integral Development Advisor (2018-2022)

His wife Jayne served at KISC (an international school started in partnership with UMN).

THE INTEGRITY OF THE GUIDES THEM, BUT UNFAITHFUL ARE DESTROYED THEIR DUPLICITY.



Proverbs 11:3

Fullness of life for all, in a transformed Kepali society

UNITED MISSION to NEPAL

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