Annual Report
2016-17
Nepal Public Health Foundation
Annual Report of Nepal Public Health Foundation (fiscal year 2016/17) has vividly captured a whole year of intense and productive activities of the Foundation covering a full spectrum of Research, Policy dialogue and Project implementation. This year has certainly been an important milestone in the growth of NPHF as a developing institute. Its ability to deliver has increased substantially and its influence as research organization has crossed the boundaries of our country.

Our projects have mostly focused on restoration and strengthening of health system in earthquake affected districts, in marginalized and hard to reach communities: SPARSH-M in Chepang communities of Makwanpur, SAHaS Project in Dolakha, Ramechhap, Gorkha, Okhaldhunga, Solukhumbu, Kavre, Nuwakot, Dhading and Dhading are examples of such interventions. NPHF with GARP-Nepal has taken the lead in raising awareness and conducting research about Antimicrobial Resistance in human and animal population. Second phase of pesticide use and farmers health (FHEN) project has just begun. Alternative health Financing is looking into the alternative models of health financing experience of different communities in Nepal, and so on.

With these projects we have developed a strong working relationship with our partners such as UNICEF, Project HOPE, WHO and CDP. NPHF is in the executive board of South East Asian Public Health Educational Institution Network (SEAPHEIN) and also in the advisory board of Global Health Institute of China (Xian University). We are developing partnership with India (Thapar University), Bangladesh (ICDDR, B) and Canada (Sick kids), USA (Boston University). At the same time we are working closely with the governments in areas ranging from policy dialogues to flood related disaster management and prevention of epidemics. I also want to take note that since last year, NPHF has embarked Institutional Social Responsibilities, emphasizing on volunteerism for field work such as Bagmati cleaning campaign in capital city and school health and nutrition program in rural villages.

The fine tradition of NPHF Lecture on 30th June every year has continued, this time graced by Dr. Badri Raj Pande, founding member of NPHF in an inspiring lecture title “Switching to Public Health from Clinical Pediatrics-a reminiscence”. The Foundation has also taken an initiative for Continuing Public Health Education (CPHE) which aims to update knowledge and skills to improve overall public health practices and address real world challenges that professionals face day to day. Till date, three distinguished resource person has already delivered their lectures in their field of expertise.

With these words, once again I would like to thank all who have contributed in various ways in the activities of NPHF, particularly Ms. Nikita Pradhan, Ms. Neharika Karki and their team who have contributed in preparing the report. I am humbled and grateful to work alongside a group of exceptionally proficient executive board members and dedicated staffs for their determined efforts in taking NPHF to a new high.

Dr. Mahesh Kumar Maskey, Executive Chair
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<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>AFU</td>
<td>Agriculture and Forestry University</td>
</tr>
<tr>
<td>AGM</td>
<td>Annual General Meeting</td>
</tr>
<tr>
<td>AHF</td>
<td>Alternative Health Financing</td>
</tr>
<tr>
<td>AI</td>
<td>Appreciative Inquiry</td>
</tr>
<tr>
<td>AMR</td>
<td>Anti-Microbial Resistance</td>
</tr>
<tr>
<td>ANC</td>
<td>Antenatal Care</td>
</tr>
<tr>
<td>ASRH</td>
<td>Adolescence Sexual and Reproductive Health</td>
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<td>BPKIHS</td>
<td>B.P. Koirala Institute of Health Sciences</td>
</tr>
<tr>
<td>CBHI</td>
<td>Community Based Health Insurance</td>
</tr>
<tr>
<td>CDDEP</td>
<td>Centre for Disease Dynamics, Economics and Policy</td>
</tr>
<tr>
<td>CDP</td>
<td>Centre for Disaster Philanthropy</td>
</tr>
<tr>
<td>CPHE</td>
<td>Continuing Public Health Education</td>
</tr>
<tr>
<td>D(P)HO</td>
<td>District (Public) Health Office</td>
</tr>
<tr>
<td>DDA</td>
<td>Department of Drug Administration</td>
</tr>
<tr>
<td>DEPROSC</td>
<td>Development Project Service Centre</td>
</tr>
<tr>
<td>DRI</td>
<td>Drug Resistance Index</td>
</tr>
<tr>
<td>ECG</td>
<td>Electro Cardiogram</td>
</tr>
<tr>
<td>FCHVs</td>
<td>Female Community Health Volunteer</td>
</tr>
<tr>
<td>FHEN</td>
<td>Family Health and Environment – Nepal</td>
</tr>
<tr>
<td>FSP</td>
<td>Fulbright Specialist Program</td>
</tr>
<tr>
<td>GARP-Nepal</td>
<td>Global Antibiotic Resistance Partnership - Nepal</td>
</tr>
<tr>
<td>GDP</td>
<td>Gross Domestic Product</td>
</tr>
<tr>
<td>GPS</td>
<td>Geographic Positioning System</td>
</tr>
<tr>
<td>HFOMC</td>
<td>Health Facility Operation Management Committee</td>
</tr>
<tr>
<td>H-MG</td>
<td>Health Mother’s Group</td>
</tr>
<tr>
<td>HMIS</td>
<td>Health Management Information System</td>
</tr>
<tr>
<td>ICDDRB</td>
<td>International Centre for Diarrhoeal Disease Research, Bangladesh</td>
</tr>
<tr>
<td>IEC</td>
<td>Information Education Communication</td>
</tr>
<tr>
<td>INGOs</td>
<td>International Non-Governmental Organization</td>
</tr>
<tr>
<td>IOM</td>
<td>Institute of Medicine</td>
</tr>
<tr>
<td>KU</td>
<td>Kathmandu University</td>
</tr>
<tr>
<td>MG</td>
<td>Mother’s Group</td>
</tr>
<tr>
<td>MG-H</td>
<td>Mother’s Group for Health</td>
</tr>
<tr>
<td>MNCHN</td>
<td>Maternal, Neonatal, Child health and Nutrition</td>
</tr>
<tr>
<td>MOLD</td>
<td>Ministry of Livestock Development</td>
</tr>
<tr>
<td>NGOs</td>
<td>Non-Governmental Organization</td>
</tr>
<tr>
<td>NHEICC</td>
<td>National Health Education, Information and Communication Centre</td>
</tr>
<tr>
<td>NPHL</td>
<td>National Public Health Laboratory</td>
</tr>
<tr>
<td>OPD</td>
<td>Out Patient Department</td>
</tr>
<tr>
<td>PAHS</td>
<td>Patan Academy of Health Sciences</td>
</tr>
<tr>
<td>PHCC</td>
<td>Primary Health Care Centre</td>
</tr>
<tr>
<td>Abbreviation</td>
<td>Full Form</td>
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<tr>
<td>--------------</td>
<td>-----------</td>
</tr>
<tr>
<td>PNC</td>
<td>Postnatal Care</td>
</tr>
<tr>
<td>PO</td>
<td>Project Officer</td>
</tr>
<tr>
<td>Project HOPE</td>
<td>Health Opportunities for People Everywhere</td>
</tr>
<tr>
<td>SAHaS</td>
<td>Strengthening and Activating District Health System</td>
</tr>
<tr>
<td>SBA</td>
<td>Skill Birth Attendant</td>
</tr>
<tr>
<td>SDGs</td>
<td>Sustainable Development Goals</td>
</tr>
<tr>
<td>SM</td>
<td>Social Mobilizer</td>
</tr>
<tr>
<td>SPARSH-M</td>
<td>Better Access and service provision to improve Maternal, Neonatal Child Health Nutrition and Hygiene Service in Makwanpur</td>
</tr>
<tr>
<td>SPSS</td>
<td>Statistical Package for Social Sciences</td>
</tr>
<tr>
<td>TB</td>
<td>Tuberculosis</td>
</tr>
<tr>
<td>UHC</td>
<td>Universal Health Coverage</td>
</tr>
<tr>
<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
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<tr>
<td>VDC</td>
<td>Village Development Community</td>
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</table>
Introduction to NPHF

Nepal Public Health Foundation (NPHF) was established in April 2010 with a mission to have concerted public health action, research, and policy dialogue for health development, particularly of the socio-economically marginalized population.

Since its establishment, NPHF has taken initiatives to raise voices and advocate the relevant public health issues at national and regional level in a short span of time. NPHF has been able to be an umbrella organization in Nepal within a short duration. Its members have represented and participated in national as well as international forums and networks. They have been involved in policy related dialogues and have taken lead roles in advocating public health and service access issues in Nepal, especially concentrated to urban poor and rural marginalized people with special focus on health and nutrition.

NPHF board is represented by professionals from multiple disciplines. These include academicians, public health experts, clinicians and health rights activists. NPHF has established good linkages with academic institutions, civil society and different non-government organizations.

Vision, Mission, Goal and Focus of NPHF

**Vision**
Ensuring health as the right and responsibility of the Nepali people.

**Mission**
Concerted public health action, research and policy dialogue for health development, particularly of the socio-economically marginalized population.

**Goal**
Ensure Civil Society’s pro-active intervention in public health.

**Focus of NPHF**
- Health policy and Systems Research
- Human Resource Development
- Communicable Disease Control
- Non-Communicable Disease Control
- Nutrition Research
- Maternal and Child Health
- Disaster Prevention and Management
- Coordination, Advocacy and Communication
- Social Determinants for health
- Health Economics
- Health Technology Research
• Epidemiology, Biostatistics and Demography
• Health Promotion and Social Mobilization
• Environmental health and hygiene research

Objectives of the NPHF

• Engage public health stakeholders for systematic review and analysis of existing and emerging health scenario to generate policy recommendations for public health action; especially in the context of the changing physical and social environment, the increasing health gap between the rich and the poor, and the impact of other sectors on health.
• Prioritize public health action and research areas and facilitate pilot interventions in collaboration with national and international partnerships with special emphasis to building communities’ capacity.
• Strengthen health system through systems thinking for effectively responding to the problems of public health.
• Support / establish existing or new community based public health training institutions.
• Ensure continuing public health education (CPHE) by disseminating latest advancements in public health knowledge and research. Publish books, monographs, educational materials and self-learning manuals.
• Provide research fund for deserving researchers and public health institutions, with priority given to community-based institutions.

Objective of the Annual Report

The main objective of publishing the NPHF Annual Report of the 2073/074 is to compile and document all the major activities in a systematic order and to share information about research and different events and program activities carried out by NPHF during this fiscal year.
Major Activities
Conducted During Fiscal Year 2073/74
A. Projects

**Strengthening and Activating District Health System (SAHaS)**

The two major earthquakes, one on 25th April and the other on 12th May 2015, affected the whole country. Thirty one out of 75 districts were affected and fourteen of them were declared as ‘Crisis hit’ districts. Thus, in partnership with UNICEF, NPHF carried out Post Disaster Needs Assessments in 9 earthquake affected districts. After the earthquakes, the relevance of Health Mother’s Group (H-MG) meeting and regular meeting of Health Facility Operation and Management Committee (HFOMC) has increased. H-MG meeting is vital, not only to create more awareness and to increase the demand for services, but also to prevent the delinking of community and health system. Likewise, the substantial improvement in the community health is not possible with the weak local governance. Thus to strengthen the community mobilization and local governance, the mothers group meeting needs to be invigorated and health facility management committee needs to be regular.

For the purpose of strengthening and re-activating H-MG and HFOMC, project SAHaS is being implemented from August, 2016 in 72 VDCs of 9 earthquake affected districts (Lalitpur, Kavre, Dolakha, Dhading, Nuwakot, Gorkha, Ramechhap, Okhaldhunga and Solukhumbu). The objectives of SAHaS project are as follows:

- Capacity building of the FCHVs in order to strengthen the existing functional and re-activate the non-functional MG and HFOMC in 72 VDCs of 9 districts
- Re-activation of non-functional MG and HFOMC and strengthen the existing functional MG and HFOMC.
- Establish advocacy group for the advocacy and sustainability of MG and HFOMC.

**The main activities conducted are as follows:**

- Training for Project Officer (PO) and Social Mobilizers (SM) for implementation of the project.
- Orientation training to FCHVs of the respective VDCs.
- Mapping of MG and HFOMC Meetings.
• Regular coordination with District (Public) Health Office (D(P)HO) and UNICEF focal persons.
• Coordination with local level supporting persons for regular conduction of H-MG and HFOMC meeting.
• Participation in H-MG and HFOMC meetings.
• Provide refreshment cost to the FCHVs for each H-MG Meeting and Health Post In-charge for each HFOMC Meeting.
• Continuous coordination with Female Community Health Volunteers (FCHVs) and HFOMC members for conduction of H-MG and HFOMC Meetings.
• Formation of Advocacy group and conduction of Advocacy Group meetings in the districts as well as in respective VDCs.
• Conduction of 4th bi-monthly review meeting of all districts.
• Reformation of HFOMC in some VDCs after local body election.
• Participation of SMs in National Health events.
• Regular monitoring of the H-MG and HFOMC by SM, PO and from Central Level.

Target Groups
• Female Community Health Volunteers
• Health Facility Operation Management Committee
• Health Mothers Group
• Community Leaders
• Pregnant and lactating women
• Under 5 years children

Health Issues discussed during H-MG meeting
• Breastfeeding
• Family planning
• Institutional Delivery
• Pre-natal and Post-natal care
• Neonatal Care
• Nutrition/Malnutrition/Micro-nutrient product
• Uterine prolapse
- Immunization
- Diarrheal diseases
- Menstrual hygiene
- Non-communicable diseases
- Personal hygiene and environmental sanitation
- Pregnancy and danger signs in pregnancy

**Achievements**
- Regular Conduction of H-MG in all project implemented VDCs of 9 districts.
- Regular discussion of health topics in all H-MG after implementation of project.
- A total of 113 H-MG were reformed and 294 H-MG were reactivated after the implementation of SAHaS project.
- HFOMC meetings conduction has increased in comparison to the previous year.
- SMs participation in reformation of HFOMC after local body election of 2073.
Way Forward

- Fix the dates of HFOMC and H-MG meetings.
- Support for reformation of HFOMC after the local body election.
- Mid-term evaluation of the project in comparison with Health Management Information System (HMIS) indicators.
- Create flex poster in all Health Facilities regarding date and time of conduction of Health Mothers Group Meeting.
- Rigorous monitoring of H-MG meetings and supervision of SM by PO and Central level.
- Improve coordination with government staff in district as well as VDC level.

Better Access and service provision to improve Maternal, Neonatal Child Health Nutrition and Hygiene Service in Makwanpur (SPARSH–M)

After the catastrophic earthquake on 2015, whole country and its people were affected. Out of 75 districts, 31 were affected and 14 of them were declared as ‘crisis hit’ districts. Thus, in partnership with Government of Nepal, Ministry of Health and Population, and under the financial and technical assistance from Project HOPE, Nepal Public Health Foundation (NPHF) carried out Post Disaster Needs Assessment in 14 severely affected districts in May- July 2015. The key factors of the need assessment pointed out Makwanpur as one of the mostly hit and least support provided district among them. Therefore, with this rationale, NPHF with technical and financial support of Project HOPE conducted SPARSH-M project in five Village Development Committees (VDCs) of Makwanpur district i.e. Kakada, Bharta, Sarikhet, Rakshirang and Khairang \(^1\) from February 2016.

The project especially focused on Chepang and Tamang population of those VDCs as they were characterized as the mostly underdeveloped population compared to national data. Under these circumstances, SPARSH-M project intends to achieve following objectives:

\(^1\) Kakada, Bharta, Sarikhet, Rakshirang and Khairang VDCs merged to Rakshirang rural municipality and Bharta VDC merged into Kailash Municipality respectively.
Overall Objective
To improve maternal and child health nutrition and hygiene practices by increasing access to related information and services.

Specific Objectives
- To improve access and utilization of maternal, neonatal, child health, nutrition services and hygiene practices in the project area.
- To create awareness and improve practices on quality maternal, neonatal, child health, nutrition and hygiene services in community.

Main activities of the project till date
- Strengthening Mothers Group for Health (MG-H).
- Peer Group Formation and conduction of health promotion activities through different groups.
- Home visit (door to door visit) for health education and follow-up of pregnant and lactating women.
- Referral fund for complication during pregnancy and sick children.
- Introduction of Community Health Score board at VDC level.
- Health facility mapping.
- Induction and refresher training of SM.
- Appreciative inquiry (AI) training.
- Communication skills development to Health workers and FCHVs.
- Skill Birth Attendant (SBA) and Implant training to health workers.
- Orientation to faith based leaders, traditional healers on Maternal, Neonatal, Child health and Nutrition (MNCHN) and hygiene practices.
- Distribution of Garvawati Bhet Package to the pregnant women.
- Documentary filming on project activities.
- Multiparty stakeholder meeting- to discuss on construction of maternity waiting home and child development center.
- Preparation and distribution of Nutritional calendar.
- Launching mobile application for data collection from field level.

![Fig. 5: FCHVs Facilitating Mother’s Group Meeting](image-url)
Outcome

Improved health and nutrition status of mothers, neonates and children of Makawanpur district

Table 1. Beneficiaries reached from second to six quarter

<table>
<thead>
<tr>
<th>Beneficiaries</th>
<th>2nd quarter</th>
<th>3rd quarter</th>
<th>4th quarter</th>
<th>5th quarter</th>
<th>6th quarter</th>
<th>Total</th>
</tr>
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<tbody>
<tr>
<td>Pregnant women (Target 109/per quarter)</td>
<td>258</td>
<td>306</td>
<td>344</td>
<td>320</td>
<td>338</td>
<td>1566</td>
</tr>
<tr>
<td>Mother with under 1 children (Target 109/quarter)</td>
<td>232</td>
<td>158</td>
<td>192</td>
<td>411</td>
<td>451</td>
<td>1444</td>
</tr>
<tr>
<td>Mother with under 5 (Target 472/quarter)</td>
<td>478</td>
<td>359</td>
<td>449</td>
<td>757</td>
<td>972</td>
<td>3015</td>
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<tr>
<td>Women of reproductive age (Target 962/quarter)</td>
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<td>823</td>
<td>1670</td>
<td>1980</td>
<td>2128</td>
<td>7569</td>
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<tr>
<td>GRAND TOTAL</td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td>13594</td>
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</table>

Note: No field work during 1st quarter of first year as it was the preparatory phase.

Table 2. Cumulative Target Vs Cumulative Achievement till 6th Quarter

<table>
<thead>
<tr>
<th>Beneficiaries</th>
<th>Quarter</th>
<th>1st Quarter</th>
<th>2nd Quarter</th>
<th>3rd Quarter</th>
<th>4th Quarter</th>
<th>5th Quarter</th>
<th>6th Quarter</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pregnant Women</td>
<td>Target</td>
<td>109</td>
<td>218</td>
<td>327</td>
<td>436</td>
<td>545</td>
<td>654</td>
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<tr>
<td></td>
<td>Beneficiaries</td>
<td>0</td>
<td>258</td>
<td>306</td>
<td>394</td>
<td>495</td>
<td>615</td>
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<tr>
<td></td>
<td>Achievement%</td>
<td>0</td>
<td>118.34</td>
<td>93.57</td>
<td>90.36</td>
<td>90.82</td>
<td>94.03</td>
</tr>
<tr>
<td>Mother with Under 1 year children</td>
<td>Target</td>
<td>472</td>
<td>944</td>
<td>1416</td>
<td>1888</td>
<td>2360</td>
<td>2832</td>
</tr>
<tr>
<td></td>
<td>Beneficiaries</td>
<td>0</td>
<td>478</td>
<td>597</td>
<td>725</td>
<td>1030</td>
<td>1324</td>
</tr>
<tr>
<td></td>
<td>Achievement%</td>
<td>0</td>
<td>50.63</td>
<td>42.16</td>
<td>38.4</td>
<td>43.64</td>
<td>46.75</td>
</tr>
<tr>
<td>Women of reproductive age group</td>
<td>Target</td>
<td>962</td>
<td>1924</td>
<td>2886</td>
<td>3848</td>
<td>4810</td>
<td>5772</td>
</tr>
<tr>
<td></td>
<td>Beneficiaries</td>
<td>0</td>
<td>968</td>
<td>1380</td>
<td>1727</td>
<td>2457</td>
<td>3166</td>
</tr>
<tr>
<td></td>
<td>Achievement%</td>
<td>0</td>
<td>50.31</td>
<td>47.81</td>
<td>44.88</td>
<td>51.08</td>
<td>54.85</td>
</tr>
</tbody>
</table>

Note: No field work during 1st quarter of first year as it was the preparatory phase.
**Way forward**

- Construction of more maternity waiting homes (one per VDC).
- School Health Program (focused on Nutrition, Menstrual hygiene, environmental sanitation, mid-day meal).
- Formation of "Male Volunteers" and "Male Support Group" to support females and create supportive environment.
- Focus on Family planning services and Adolescence Sexual and Reproductive Health (ASRH) services in order to prevent early marriage, teenage pregnancy and vicious cycle of malnutrition.
- Tracking the pregnant women for Antenatal Care (ANC) visit, institutional delivery, Postnatal Care (PNC) visit and children for growth monitoring.
- Concept note and preparation for national learning workshop.

**Digitalization of SPARSH-M**

Nepal Public Health Foundation has also launched digitalized mobile application on SPARSH-M project for the instant recording and reporting, which is one of the process of converting message and information into digital format. Digitalized mobile application has reduced paper works and time required to entry information on database. At central and district level, the focal persons have easy access to information or data within minute of entry of information/data from social mobilizers at field level. Digitalized mobile application also gives the information about where exactly information/data was taken through GPS location.

*Fig. 6: Social Mobilizers distributing nutritional calendar*
One day orientation has been given to social mobilizers to make them familiar with mobile application.

Global Antibiotic Resistance Partnership-Nepal (GARP-Nepal)

GARP Nepal has been honored as an official member of the National AMR Action Plan Drafting Committee of Nepal. The committee is responsible for drafting and developing a National AMR Action Plan that is in line with the Global Action Plan on AMR. The then Honorable Health Minister Mr. Ram Janam Chaudhary accompanied by Dr. Paras Pokharel, Vice Chair, GARP Nepal attended CDDEP symposium at the 17th International Congress for Infectious Diseases, “Antibiotic resistance: national actions contribute to a global solution”. There were representation from India, Kenya, Mozambique and South Africa.

In addition to this, GARP Nepal hosted the inaugural meeting of GARP Bangladesh and Pakistan on 14-15 July, 2016 at Hotel Yak and Yeti, Kathmandu. The meeting was inaugurated by Nepal’s then Minister of Health, Mr. Ram Janam Chaudhary.

Dr. Nira Ramdam, researcher from Agriculture and Forestry University, Rampur Chitwan completed GARP Nepal funded research entitled “Study of Antimicrobial Use Pattern, Residue and Resistance- in Poultry of Nepal”. Similarly, Mr. Shaurav Bhattarai completed GARP Nepal funded research “Pattern of Drug Use in Aquaculture in Chitwan and Its Vicinity”. Both the researches on veterinary were carried out under the supervision of Prof. Dr. Sharada Thapaliya, Dean, Agriculture and Forestry University (AFU) and Working Group Member of GARP Nepal. Similarly, the research entitled “Prevalence of Typhoid: Before and After Vaccination” was carried out from Oxford University Clinical Research Unit- Nepal, Patan Hospital by accessing data from fever clinic at Patan Hospital. GARP Nepal also carried out a research in collaboration with Himalayan Trust UK to assess the knowledge on Antibiotics among the people of Taplejung district. GARP Nepal is also supporting the implementation of Drug Resistance Index (DRI) program at Patan Hospital, Lalitpur.

An AMR Curriculum Drafting Committee with representatives from four universities of Nepal (Kathmandu University, B P Koirala Institute of Health Sciences, Institute of Medicine and Patan Academy of Health Sciences) drafted AMR curriculum for undergraduate medical students. The committee reviewed the existing curriculum of medical colleges and developed a focused curriculum on AMR; the draft is currently under the process of endorsement.

There has been a slight modification in the national-level Working Group of GARP Nepal. Representatives from Department of Drug Administration (DDA), Ministry of Livestock Development (MOLD), National Health Education, Information and Communication Centre (NHEICC), National Public Health Laboratory (NPHL) and Institute of Medicine (IOM) have been added to the existing Working Group.

Giving continuity to the previous year, GARP Nepal carried out a series of activities to mark “World Antibiotic Awareness Week 2016” from 14-20 November, 2016. The theme of the second World Antibiotic Awareness Week was “Handle Antibiotics with Care” as given by World Health Organization. GARP-Nepal’s catchphrase for this year was “AMR: Access Vs Excess” which was also used in Essay as well as in Poster Competition. The detailed events of the week long campaign are enlisted below:

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![Fig. 9: Nepal hosting the inaugural meeting of GARP Bangladesh and Pakistan](image)
• GARP-N conducted rallies in different parts of the country. The rally took place on 16th November in Dhulikhel and 19th November in Patan and Dharan with professors, physicians, resident doctors and health science students taking part in it.

• GARP Nepal in collaboration with Cycle City Network Nepal organized a Cycle rally on December 9, 2016 with about 100 participants. The then Honorable Minister of Health Mr. Gagan Kumar Thapa inaugurated the event.

• Information corners were set up in different places – Nepalgunj, Pokhara (Manipal and Bhatbhateni Supermarket outlet); Dharan (BPKIHS); Kathmandu (TUTH, OM Hospital and Research Centre, and four outlets of Bhatbhateni Supermarket) with volunteers providing antibiotic related information and IEC materials to the general public.

• Essay and poster competitions were organized among the medical students on the theme Antibiotic: Access Vs. Excess in BPKIHS, PAHS and KU; and the respective winners were awarded.

• A talk program was organized at Patan hospital where Dr. Mark Zimmerman, the key speaker, medical doctor and former Medical Director of Patan Hospital presented a brief talk on “Improving antibiotic use in Patan hospital”.

• The materials produced for the World Antibiotic Awareness Week, 2016 were distributed to general public during the above listed events. The materials were also provided to different health facilities.

The winning essay from World Antibiotic Awareness Week 2015 “A Staph’s diary” by Pranjal Rokaya, a fourth year medical student from Patan Academy of Health Sciences was featured in the React Blog.

Link to the Essay:
http://www.cddep.org/blog/posts/day_life_staphylococcus_aureus_and_other_stories_winning_essays_nepal#sthash.rjsX8aof.6Mdbt0JZ.dpbo

Ongoing Activities:
• GARP Nepal has collaborated with National Health Education, Information and Communication Centre (NHEICC) for production of a TV program named “BAHAS Maa Antibiotics” and documentary on AMR that will be aired on national television.
• With an aim to provide health practitioners with adequate antimicrobial information, GARP Nepal has developed committees (with members from the Government and...
relevant stakeholders) for the development of training manuals for practicing veterinarians and community pharmacists.

- GARP Nepal is aiming to introduce an antimicrobial stewardship program at Chitwan Medical College for which it has nominated a technical advisor for developing a planning package for implementation of the stated program.
- In addition to this, the Veterinary antimicrobial curriculum is being developed by Nepal Veterinary Council with technical and financial support from GARP Nepal.

Exploring health financing options to achieve Universal Health Coverage in Nepal (Alternative Health Financing Project)

Appropriate health financing policy focusing on how and from where to raise sufficient funds for health; how to overcome financial barriers that exclude many poor from accessing health services; and how to provide an equitable and efficient mix of health services, is necessary to achieve UHC, which is target 3.8 under SDG-3. Out-of-pocket expenditure has been decreased in Nepal after free health care program, but still it accounts for nearly 50% (ranged between 40-50 in last 10 years) of total health expenditure. Many Community Based Health Insurances has been practiced in various pockets of the country but most of them didn’t look promising. Social Health Security Program, also known as Social Health Insurance has been started in three districts namely, Baglung, Ilam and Kailali in 2016, and was expanded up to fifteen districts by July 2017. In this context, it was important to explore sustainable health financing options in Nepalese context. Hence, with the main objectives to understand and explore existing health financing practices in Nepal, this project was started in Feb, 2017 under support of Medico International, a German organization. Since then, following activities has been carried out.

Desk Reviews
Literature related to health financing and universal health coverage were reviewed continuously since the start of the project. In first month (Feb), extensive literature review was carried out with purpose of tools development and review of free health care program.

Exploration of home grown alternative health financing initiatives
Based on reviewed literature and consultation with relevant people, various home grown alternative health financing initiatives were identified for further exploration. Following insurance schemes were explored
- Jivan Bardan Surgical Support Program is operated by Sahara Nepal Saving and Credit Cooperative in six districts, primarily based in Jhapa, of Eastern Nepal since last 3 years. Family Health Nepal is technical supporter of the program.
- Saubhagya Micro-Health Insurance is running in 15 VDCs of Dhading by community people with minimal support from DEPROSC (Development Project Service Center) Nepal and Save the Children Nepal.
- Syafru Health Post based Insurance Program was running in Syafru VDC with support from Karuna Foundation Nepal but currently it is terminated after running only for three years.
- Bajrabarahi Community Hospital (previously Primary Health Care Center, Chapagaun) based Community Health Insurance of Lalitpur.

**Review of Social Health Security Program launched by government of Nepal**

Till July 2017, field visit to Ilam, Jhapa and Baglung has been carried out to review the progress and challenges of the Social Health Security Program. Scheme and enrollment, managerial process and issues like implementation challenges and coordination, people’s perception were the key areas of review. District Manager of Social Health Security Program, District Public Health Officer and focal person from DPHO for the program, focal person from hospitals as well as general people were interviewed for this purpose.

**Documentation of reviews, field records, interviews and meeting notes**

The collected information through interview and meeting were transcribed to prepare transcript and meeting memos.

**Coordination**

Participation in various forums related to health insurance like Plenary Session on Social Health Insurance in National Summit of Population and Health Scientists conducted by Nepal Health Research Council, Interaction Program on possible structure of Social Health Insurance in federal structure of Nepal. Meeting with Mr. Khem Raj Subedi, secretory of National Health Cooperative Ltd., Ms. Shristi Pant, program coordinator of Family Health...
Nepal (technical partner of Jivan Bardan Surgical Support Program), Mr. Purna Poudel, program manager of DEPROSC Nepal (supporting partner of Saubhaya Micro-Health Insurance) and Mr. Ram Krishna Thapa and Mr. Mandar Shikhar Banarjee of Karuna Foundation Nepal (supporting partner of Syafru Provider based health insurance in Rasuwa). Beside this, visit to Ministry of Cooperative and Poverty Alleviation, and Cooperative Division Office of Kathmandu were done to explore possible cooperatives running health insurance type schemes.

**Way Forward**

Future actions include completion of field visits of four places viz. Social Health Security Program of Kailali, CBHI of Nawalparasi (public scheme) and Banke (NGO supported), interaction with health economists and policy makers, documentation and analysis of all the data to draw conclusions.

**Conducting and evaluation Stigma reduction interventions in Sunsari and Dadeldhura, Nepal**

NPHF has signed a contract with Ipas for conducting a baseline survey of the project entitled “Conducting and evaluating Stigma reduction interventions in Sunsari and Dadeldhura, Nepal”. This baseline survey is the part of a proposed intervention study entitled “Conducting and evaluating Stigma reduction interventions in Sunsari and Dadeldhura, Nepal”. It has objectives to assess attitudes and beliefs about abortion among community members and health workers and explore facilitating or restricting factors associated with accessing safe care.

This is an analytical cross-sectional mixed method study that aims to explore the pre-intervention community and individual level abortion stigma, both among community members and healthcare workers.

**Achievements till date**

NPHF has already completed the instrument development, recruitment and training for two field supervisors and four data enumerators. Currently trained field research team is in the community for data collection. Data collection will be continued until the end of September.

**Expected outcome of baseline study**

The baseline survey findings will help us to understand knowledge, attitudes and beliefs about abortion among community and individual level and also help us to explore the facilitating or restricting factors associated with accessing safe care. Study finding will be useful for measuring the effect size or changes brought by the proposed intervention by comparing with end-line findings in the same cohort.
B. Programs

Seventh Annual General Meeting (AGM)

Nepal Public Health Foundation (NPHF) organized 7th Annual General Meeting on 30 September, 2016 at Shangrila Hotel, Lazimpat under the chairmanship of Dr. Mahesh K. Maskey, Executive chair of NPHF. The meeting started with the welcome remarks of Dr. Badri Raj Pande, Founding Member of NPHF. Dr. Sharad Onta, the then General Secretary of NPHF briefed on updates of each projects activities and financial statement of fiscal year 2015/2016. He concluded his remarks thanking the staff’s contribution and dedication towards their work and hopeful for their commitment and enthusiasm in future. This was followed by presentation on annual plan of fiscal year 2016/17 of NPHF by Dr. Mahesh K. Maskey.

The AGM endorsed by laws (Administrative and Financial) and amendment in constitution. The old Executive board was dissolved and new Executive board was formed by the election. The name of new Executive board members are in the annexes. Also, two members of our NPHF family Dr. Rita Thapa and Dr. Badri Raj Pande were awarded with a prestigious life time achievement award. After, the discussion about further approaches of NPHF, the meeting was adjourned.

Eighth NPHF Lecture

Nepal Public Health Foundation organizes annual lecture on 30th June every year, where a prominent public health professional delivers his/her lecture. Continuing the tradition, this year Dr. Badri Raj Pande, founding member of NPHF delivered lecture on “Switching to Public Health from Clinical Pediatrics - a reminiscence” on 30 June, 2017 in MOHEGO Building, IOM, Maharajgunj. The program started with the welcome address by Dr. Mahesh K. Maskey, Executive Chair of this organization. He also introduced the keynote speaker of the program. Representative from different NGOs, INGOS, educational institutions,
doctors, students of IOM and other public health colleges attended the program. Dr. Pande talked about his journey in health sector since 1950 era where he said that during 90’s where cholera and diarrhea were very common due to unhygienic practices, dietary pattern and poor health seeking behavior. During those times the health service was not so easily available, so he decided to work as a service provider. He also shared that the level of knowledge in family was very low, they used to sell the food instead of feeding their children due to which malnutrition was very high.

In the lecture, he talked about background, rational and importance of integrated family planning survey. He also highlighted the role of USAID and WHO in Family Planning and Population Project, which was first of its kind in family planning area. Later based on the findings of various researches, family planning clinics, postnatal clinics and four regional family planning office were established and family planning survey was done in three places which proved to decline Infant Mortality Rate in Nepal.

He shared his experience as a pediatrician, which taught him to think holistically beyond medicine. He also highlighted various events in his journey from clinical pediatrician to public health practitioner.

Dr. Maskey honored our keynote speaker, Dr. Pande with token of love. Dr. Sameer Mani Dixit, General Secretary of NPHF extended the vote of thanks to all the attendees of the program.

**Continuing Public Health Education**

Continuing Public Health Education is a new initiative of NPHF that consists of educational activities which serves to maintain, develop and increase knowledge, skills and professional performance of public health professionals. The content of CPHE includes information generally recognized and accepted by the professionals within public health discipline.

Its objective is to share the evidence based knowledge and practices particularly in public health policy and program that will help to:

- Refine skills to improve overall public health practices
- Stay current with the latest developments within their specialty
- Address real-world challenges that public health professionals face day to day
- Gain professional growth and means to advance career status.

Fig. 15: First CPHE lecture delivered by Ms. Daya Laxmi Joshi
In this fiscal year 2016/17, two lectures has been successfully conducted. Mrs. Daya Laxmi Joshi inaugurated the lecture session with her presentation on “Importance of cancer awareness to School Children to reduce Cancer Incidence”. Similarly, Prof. Dr. Ramesh Kant Adhikari delivered his lecture on “Neonatal Health in Nepal” Certificate of appreciation was provided to the resource person. The program receives positive feedback from the participants.

**Health Policy Dialogue**

NPHF has been organizing several discourses on Universal Health Coverage and Health Financing in Nepal. The purpose is to develop a critical document so as to use it as a scientific instrument to advocate to Government of Nepal to ensure better access to health care services, as provisioned by New Constitution, 2072 B.S. Series of policy discussion has been carried out this year. Various relevant professionals were invited for discussion on various health issues. Major policy issues covered this year was Universal Health Coverage and National Health Policy.

**Mid-day Meal Nutrition Project for Students, Pregnant Women and Children**

Nepal Public Health Foundation in collaboration with Patlekhet Community Livestock and Organic Agriculture Farm is introducing “Mid-day meal Nutrition” project for student, pregnant women and children in Patlekhet which aims to improve nutritional status of its Community by providing mid-day meals (one glass milk and one egg). This project will also make the community self-dependent in livestock and organic agriculture. It will also create employment opportunities for local women and youths. Currently, buffalo shed is being constructed so that buffalo can be reared.
C. Institutional Social Responsibility

Bagmati Cleaning Campaign

Nepal Public Health Foundation has been actively participating in the Bagmati Cleaning Campaign every Saturday. This year on March 11 2017, NPHF organized and participated on the 200th week of Bagmati Cleaning Campaign. The walkathon started from Pashupati area and ended in Sankhamul Bridge. Despite heavy rainfall, there was an active participation of around 300 volunteers along with the entire NPHF staff.

Ward Cleaning Campaign

Ward office of Balwatar area has been organizing cleaning campaighn every saturday. Since, NPHF is located in ward-4, as its institutional social responsibility it has participated in the cleaning campaighn on July 8. Also, different organizations like Nepse Mac, Fulbari Maila Bewasthapan, Prayas Nepal, NPHF, Insight Vision College, Political parties (Congress, CPN-UML), Tusal Yuva Parivar participated. The Rally was initiated from Bishalnagar to Shankha Park.

Fig. 19: 200th week of Bagmati Cleaning Campaign

Fig. 20: Ward Cleaning Campaign
D. Activities

Internship/Volunteering Program

Nepal Public Health Foundation intakes interns/volunteers every year as per need. It accepts interns from national and international platforms. Interns from Tribhuvan University-Institute of Medicine, BP Koirala Institute of Health Sciences, Wageningen University of The Netherlands, Lund University of Sweden and other students studying Bachelor /Masters in health related fields has successfully completed their internship till date. The internship period can be from minimum of 4 weeks to maximum of three months but are extended under special circumstances. In any condition the period can’t exceed 6 months.

This year, Mr. Nigam Koirala, a Master in Public Health student from Sri Ramaswami Memorial University, Chennai completed his four months internship as part of his academic requirement. Similarly, Ms. Riju Tiwari, also a Master in Public Health student from Rajiv Gandhi University of Health Science, Karnataka is currently doing her academic internship at NPHF. Ms. Neharika Karki and Ms. Simrin Kafle are currently working as volunteers. They have a specific terms of references/ tasks to follow and are involved in different activities of NPHF.

Similarly, four students studying Bachelor in Public Health at Maharajgunj Medical Campus, Institute of Medicine joined NPHF for Comprehensive Public Health Practicum. They were Ms. Amrita Giri, Ms. Rashmita Nayaju, Ms. Rasmita Shrestha and Ms. Swastika Badhu.

Meeting with different Delegates

International Centre for Diarrhoeal Disease Research, Bangladesh team visited NPHF

A team of ICDDR-B visited Nepal on July (10-11), 2017. The team led by Prof. John D. Clemens, Executive Director of ICDDR-B shared new research innovations particularly in saving lives of children and mother, and effectively managing infectious disease including TB. NPHF facilitated a round of meetings between external developments partners, team of experts from Nepal and guest team and explored the possible way of research collaboration in future. The visit was quite fruitful in establishing bilateral relationship between two organizations.
Nepal Public Health Educational Institute Network (NePHEIN)

Nepal Public Health Education Institute Network (NePHEIN) is network of public health institutions in Nepal. It was formed on July 06, 2011 with an aim to produce competent manpower and conduct researches to effectively address the challenges of the country. Also, to mobilize the knowledge, expertise and talent of the academic institutions and other research organizations contributing directly or indirectly in conducting quality public health researches; and to foster the mutual help and collaboration among aforementioned institutions to address existing and future challenges in public health. Nepal Public Health Foundation, secretariat of it call for meeting on March 16, 2017. Participants from Institute of Medicine, BPKIHS, Nepal Academy of Medical Sciences, KU Medical College and Patan Academy of Health Sciences attended the meeting. Major outcomes of the meeting were reformation of executive body, creation of its website, preparation of profile of all public health institutions in Nepal, plan for drafting proposal on national seminar on Universal Health Coverage and Non-communicable diseases. They also agreed upon consulting WHO Nepal and Government of Nepal for above activities. They also made consensus of continuing NPHF as its secretariat.

Development of short course training modules

Research team is actively working to develop various short-term training courses in research methodology, statistical methods, computing software and epidemiology. For now, the team has developed a training manual on research proposal development targeting students, early career professional and graduates from allied health sciences. This course will help the participants to prioritize problems in health care within the local context and to prepare a research proposal.

In-house capacity development training

NPHF Research section has been organizing the orientation trainings on Epi-Data, Advanced computing in MS-Excel, Statistical analysis through SPSS and Manuscript writing to capacitate its staff in research and analytical skills. Similarly, public health interns were trained and guided in evidence synthesis, statistical analysis and publications.
E. Planning

International Epidemiology Conference

NPHF is organizing International Epidemiology Conference and Epidemiology Training in March 13-15 2018 which is supported by Fulbright Specialist Program (FSP). Dr. Kenneth J. Rothman, a distinguished Epidemiologist currently working at Research Triangle Institute as a distinguished fellow and a Professor of Epidemiology and Medicine at Boston University will be a special resource person for the workshop and a keynote speaker for the conference. He has over 45 years of experience in the field of Health and Epidemiology. The program expects to enlighten the Public Health stakeholders from across South East Asia about the research and epidemiological issues. The application is under review.

Interaction with Health Journalists

NPHF has planned to invite the health journalists from different media such as Kantipur, Nayapatrika, Rajdhani Dainik and online news (Swasthya khabar, Hamro doctor and others) once a month to discuss the situations related to public health in order to determine further actions. Those media personnel will then publish those discussed issues.
Advisors
Prof. Dr. Mathura Prasad Shrestha
Dr. Rita Thapa
Mr. Kul Chandra Gautam
Dr. Suniti Acharya

Legal Advisor
Mr. Badri Pathak

Executive Board Members
Dr. Mahesh Kumar Maskey (President/Executive Chair)
Dr. Buddha Basnyat (Vice President)
Dr. Sameer Mani Dixit (General Secretary)
Dr. Lochana Shrestha (Treasurer)
Dr. Abhinav Vaidhya (Member)
Dr. Aruna Upreti (Member)
Dr. Karuna Onta (Member)
Dr. Rajendra BC (Member)
Mr. Narayan Subedi (Member)

Life Members
Prof. Dr. Archana Amatya
Mr. Bishnu Chaoulagai

Ordinary Members
Dr. Chhatra Amatya

Founding Members*
Dr. Aarati Shah
Dr. Achala Baidhya
Ms. Alina Maharjan
Dr. Arjun Karki
Mr. Ashok Bhurtyal
Dr. B.D. Chautau
Dr. Badri Raj Pande
Dr. Bhagwan Koirala
Dr. B.D. Pradhan
Dr. Binjwala Shrestha
Ms. Daya Laxmi Joshi
Prof. D.S. Manandhar
Dr. Gajananda Prasad Bhandari
Mr. I.M Shrestha
Prof. Dr. Kedar P Baral
Dr. Lonim Prasai Dixit
Mr. Nabin Shrestha
Dr. Narendra Kumar Shrestha
Prof. Dr. Nilamber Jha
Dr. Rajani Shah
Dr. Ramesh Kant Adhikari
Dr. Renu Rajbhandari
Prof. Dr. Sharad Onta
Mr. Shanta Lal Mulmi
Prof. Dr. Shiba K Rai
Dr. Shrikrishna Giri
Dr. Shyam Thapa
Dr. Suresh Mehata
Dr. Tirtha Rana

*Listed alphabetically by first name
Staff Members

Mr. Janak Thapa, Program Director
Ms. Ami Maharjan, Administration and Finance Director
Dr. Raja Ram Dhungana, Research and Policy Manager
Mr. Raj Kumar Subedi, Monitoring and Evaluation Manager
Ms. Nikita Pradhan, Program Officer
Mr. Baburam Tandan, Account and Finance Officer
Ms. Mamata Pant, Account and Admin Officer

Ms. Sunita Chand, Admin Officer
Ms. Ranju Moktan, Store Keeper
Mr. Yubraj Tamang, Receptionist
Mr. Rajan Sunam, Driver
Mr. Devraj Moktan, Driver
Mr. Rabin Nepal, Office Assistant
Ms. Sabina Khatri, Office Assistant
Mr. Roshan Diyali, Office Assistant
Ms. Sushma Shrestha, Office Assistant

GARP NEPAL
Ms. Santoshi Giri, Coordinator
Ms. Pritisha Shrestha, Program Officer

Alternative Health Financing
Mr. Dip Narayan Thakur, Project Officer

SPARSH-M
Mr. Suprich Sapkota, District Project Coordinator
Ms. Jibika Siwakoti, Admin and Finance Officer
Mr. Prakash Bhatt, Program Associate
Mr. Bishow Tamang, Admin Assistant
Ms. Yasodha Homagain, Office Assistant

Social Mobilizers (SPARSH-M)
Ms. Rita Moktan
Ms. Pramuna Tamang
Ms. Melina Syangtan
Mr. Shankhar Bahadur Shah
Mr. Hari prasad Gajurel

SAHaS Project
Mr. Raj Kumar Sangroula, Senior Program Officer
Mr. Niraj Giri, Monitoring and Evaluation Officer
Ms. Ganga Thapa, Project Officer
Ms. Mina Maden Limbu, Project Officer
Mr. Prushuttom Niroula, Project Officer
Mr. Rajan Kawan, Project Officer
Ms. Sunita Bhandari, Project Officer
Ms. Sushmita Phuyal, Project Officer
Social Mobilizers (SAHaS)

Ms. Pratima Thapa
Ms. Roshana Adhikari
Mr. Bir Bahadur Ghising
Ms. Ramila Kumari Thapa
Ms. Shobha Rana
Ms. Jhuma Bhattarai
Ms. Rajani Bhujel
Ms. Goma Devi Neupane
Ms. Ranjana Burlakoti
Ms. Karuna KC
Ms. Sabitri Dani
Mr. Urbin Sapkota
Ms. Shreejana Rokka
Ms. Sita Poudel
Ms. Manisha Shrestha
Ms. Sabina Jirel
Ms. Asmita Rayamajhi
Ms. Peli Maya Jirel
Ms. Chandrawoti Khadka
Ms. Sunita Gautam
Ms. Devi Maya Jirel
Ms. Kalpana Karki
Mr. Dambar Bahadur BK
Ms. Tara Waiwa
Mr. Hansa Bahadur Karki
Mr. Tika Ram BK
Mr. Bhupendra Rana Magar
Ms. Draupadi Basnet
Mr. Pranil Rana Magar
NPHF on Social Networks

Facebook: https://www.facebook.com/nphfonfoundation/
Twitter: https://twitter.com/nepalphf
YouTube: https://www.youtube.com/channel/UCC4QV1fGj3WiFWxcCa4ow

New Outlook of Upgraded Website

Nepal Public Health Foundation, Annual Report 2016/17
Dr. Badri Raj Pande felicitated with Life time Achievement Award

Dr. Rita Thapa felicitated with Life time Achievement Award

Meeting with Secretary of Ministry of Health along with ICDDR-B Team

Dr. Maskey with the Dean of School of Public Health, Xian Jiaotong University and group

Certificate of Appreciation for our project activities by HFOMC Salyantar PHCC, Dhading- SAHaS

Communication and Management Skill Training for Health Workers- SPARSH-M
Bagmati Cleaning Campaign with Activists

Interaction with WHO and ICDDR B team

Participants in Cycle Rally for Antibiotic Awareness

Sahid Smarak Park with SPARSH-M Team

NPHF team geared up for World Antibiotic Awareness Week 2016

Farewell to MPH interns of IOM

Working Group of GARP Nepal

Distric Investment Case Workshop
Joint Monitoring Team- SPARSH-M

Health Mothers Group Meeting- Thadichauri, Rakshirang- SPARSH-M

Group photo of Prefab handover (HP, DHO, UNICEF, NPHF, MoH, HFOMC, FCHV), Dolakha

Prefab handover and inauguration program in Dolakha health post

New Year 2074 Picnic of office staffs
Statement of Income and Expenditure

For the Period 1 Shrawan 2073 to 31 Ashad, 2074
(Corresponding to 16 July 2016 to 15 July 2017)

<table>
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Significant accounting policies and explanatory notes form an integral part of the financial statements.

Dr. Mahesh Kumar Maskey
Executive Chair

Dr. Sameer Mani Dixit
General Secretary

Dr. Lochana Shrestha
Treasurer

Ms. Ami Maharjan
Finance Head

Date: September 03, 2017
Place: Kathmandu

As per our report of even date

Gyanendra B. Bhandari
Partner
BRS Neupane & Co.,
Chartered Accountants

Nepal Public Health Foundation, Annual Report 2016/17