FROM THE EXECUTIVE CHAIR’S DESK

Annual Report of Nepal Public Health Foundation (fiscal year 2017/18) 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 institution. Its ability to deliver has increased visibility and substantially and its influence as research organization has crossed the boundaries of our country.

This year Nepal is in spotlight as an exemplar country for Stunting reduction and USMR reduction. NPHF has collaborated with Sick Kids (Canada), Partners in Health (USA) and University of Global Health Equity (Rwanda) to conduct research in understanding the factors that led to such achievements despite enormous geographical, political and institutional problems. Other projects have focused on restoration and strengthening of health system in past few years in earthquake affected districts, among marginalized and hard to reach communities: SPARSH-M in Chepang communities of Malewanpur, SAHAS Project in Lalitpur, Kavre, Dolakha, Dhading, Nuwakot, Gorkha, Ramechhap, Okhaldhunga and Solukhumbu are examples of such interventions.

Maternal and Child health had been another area where our efforts were mostly concentrated. Assessment of Auxiliary Nurse Midwives Program in Dadeldhra aimed to provide quality services on mothers’ and newborns’ doorstep to bridge gaps between health facilities and communities and contribute to reducing maternal and newborn mortality. Life Saving Comprehensive Nutrition Response Including Integrated Management of Acute Malnutrition in Flood Affected areas of Morang and Sunsari districts began with the objective to manage the cases of Severe acute malnutrition and prevent the under 5 children from malnutrition.

NPHF with GARP-Nepal has taken the lead in raising awareness and conducting research about Antimicrobial Resistance in human and animal population. Alternative health Financing that was looking into the alternative models of health financing experience of different communities in Nepal has just come to an end. Pesticide use and farmers health (FHEN) project is on its second phase and Highly Hazardous Pesticide Poisoning Identification has just begun with the aim to document the highly hazardous pesticides use in Nepal and its impact on human health.

With these projects we have developed a strong working relationship with our partners such as UNICEF, Project HOPE, WHO and CDP. We are developing partnership with Bangladesh (icddr,b) and India (Thapar University). With Boston University and NHRC we collaborated to accomplish our first International Conference on Epidemiologic Research with a three-day training workshop conducted by World’s leading epidemiologist Prof. Ken Rothman.

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). Most importantly, NPHF has just inked an MOU with Nepal Health Research Council for collaboration in research activities. 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, five distinguished resource persons has already delivered their lectures in their field of expertise.

NPHF works closely with the Government in every project, in areas ranging from policy dialogues to flood related disaster management and prevention of epidemics. The executive chair with three prominent members were in the high-level policy making body commissioned to draft New Health Policy for Federal Nepal. I also want to take note that since last year, NPHF has embarked Institutional Social Responsibilities, emphasizing on volunteerism in ward and river cleaning campaign and nutrition program in rural villages.

The fine tradition of NPHF Lecture on 30th June every year has continued, this time graced by Dr. Dharma Sharna Manandhar, founding member of NPHF in an inspiring lecture title “My Adventure in Public Health Research”. NPHF has also started honoring distinguished professionals who have contributed in Public Health with Life Time Achievement Award at the time of its Annual General Body Meeting, this year recipient being Prof. Madan Upadhyay and Dr. Tirth Rana.

With these words, once again I would like to thank Anustha Mainali, Kriti Adhikari, Dip Narayan Thakur, Pritisha Shrestha and Nikita Pradhan for their effort in preparing this report and all those who have contributed in various ways in the activities of the NPHF. 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
Nepal Public Health Foundation
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## Abbreviations

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<th>Description</th>
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<td>AGM</td>
<td>Annual General Meeting</td>
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<td>AHF</td>
<td>Alternative Health Financing</td>
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<td>AI</td>
<td>Appreciative Inquiry</td>
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<td>AMR</td>
<td>Anti-Microbial Resistance</td>
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<td>ANC</td>
<td>Antenatal Care</td>
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<td>ANM</td>
<td>Auxiliary Nurse Midwife</td>
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<td>ASRH</td>
<td>Adolescence Sexual and Reproductive Health</td>
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<tr>
<td>BPKIHS</td>
<td>B.P. Koirala Institute of Health Sciences</td>
</tr>
<tr>
<td>BUSPS</td>
<td>Boston University School of Public Health</td>
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<tr>
<td>CBHI</td>
<td>Community Based Health Insurance</td>
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<tr>
<td>CDDEP</td>
<td>Centre for Disease Dynamics, Economics and Policy</td>
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<td>CDP</td>
<td>Centre for Disaster Philanthropy</td>
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<tr>
<td>COI</td>
<td>Conflict of Interest</td>
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<td>CPHE</td>
<td>Continuing Public Health Education</td>
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<td>CSR</td>
<td>Corporate Social Responsibility</td>
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<tr>
<td>D(P)HO</td>
<td>District (Public) Health Office</td>
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<tr>
<td>DCC</td>
<td>District Coordination Committee</td>
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<tr>
<td>DDA</td>
<td>Department of Drug Administration</td>
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<td>DEPROSC</td>
<td>Development Project Service Centre</td>
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<td>DHO</td>
<td>District Health Office</td>
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<td>DRI</td>
<td>Drug Resistance Index</td>
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<tr>
<td>ECG</td>
<td>Electro Cardiogram</td>
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<td>EPI</td>
<td>Expanded program of Immunization</td>
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<td>FCHVs</td>
<td>Female Community Health Volunteer</td>
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<td>FGD</td>
<td>Focus Group Discussion</td>
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<td>FHD</td>
<td>Family Health Division</td>
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<td>FHEN</td>
<td>Family Health and Environment – Nepal</td>
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<td>FSP</td>
<td>Fulbright Specialist Program</td>
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<tr>
<td>GARP-Nepal</td>
<td>Global Antibiotic Resistance Partnership - Nepal</td>
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<tr>
<td>GDP</td>
<td>Gross Domestic Product</td>
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<tr>
<td>GPS</td>
<td>Geographic Positioning System</td>
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<td>HFOMC</td>
<td>Health Facility Operation Management Committee</td>
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<td>HHPs</td>
<td>Highly Hazardous Pesticides</td>
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<td>H-MG</td>
<td>Health Mother’s Group</td>
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<td>HMIS</td>
<td>Health Management Information System</td>
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<tr>
<td>icddr,b</td>
<td>International Centre for Diarrhoeal Disease Research, Bangladesh</td>
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<tr>
<td>ICER</td>
<td>International Conference on Epidemiologic Research</td>
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<tr>
<td>IEC</td>
<td>Information Education Communication</td>
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<td>IMAM</td>
<td>Integrated Management of Acute Malnutrition</td>
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<td>INGOs</td>
<td>International Non-Governmental Organization</td>
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<tr>
<td>IOM</td>
<td>Institute of Medicine</td>
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<tr>
<td>KU</td>
<td>Kathmandu University</td>
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<tr>
<td>MG</td>
<td>Mother’s Group</td>
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<td>MG-H</td>
<td>Mother’s Group for Health</td>
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<td>MIRA</td>
<td>Mother and Infant Research Activities</td>
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<td>MNCHN</td>
<td>Maternal, Neonatal, Child health and Nutrition</td>
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<td>MOLD</td>
<td>Ministry of Livestock Development</td>
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<td>NCE</td>
<td>No Cost Extension</td>
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<tr>
<td>NDHS</td>
<td>Nepal Demographic and Health Survey</td>
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<tr>
<td>NGOs</td>
<td>Non-Governmental Organization</td>
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<tr>
<td>NHEICC</td>
<td>National Health Education, Information and Communication Centre</td>
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<td>NHRC</td>
<td>Nepal Health Research Council</td>
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<td>NPHF</td>
<td>Nepal Public Health Foundation</td>
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<td>NPHL</td>
<td>National Public Health Laboratory</td>
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<td>NVC</td>
<td>Nepal Veterinary Council</td>
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<td>Abbreviation</td>
<td>Full Form</td>
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<tr>
<td>OP</td>
<td>Organo-phosphorus Poisoning</td>
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<tr>
<td>OPD</td>
<td>Out Patient Department</td>
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<tr>
<td>OTC</td>
<td>Outpatient Therapeutic Center</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>UGHE</td>
<td>University of Global Health Equity</td>
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<td>USM</td>
<td>Under Five Mortality</td>
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<tr>
<td>PIH</td>
<td>Partners in Health</td>
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<tr>
<td>SAM</td>
<td>Severe Acute Malnutrition</td>
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<tr>
<td>SC</td>
<td>Stabilization Center</td>
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<tr>
<td>SWC</td>
<td>Social Welfare Council</td>
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<tr>
<td>TB</td>
<td>Tuberculosis</td>
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<tr>
<td>UNICEF</td>
<td>United Nations International Childrens Emergency Fund</td>
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<td>WHO</td>
<td>World Health Organisation</td>
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About Nepal Public Health Foundation

Introduction

Nepal Public Health Foundation (NPHF) is an independent, autonomous, non-political and non-profitable organization established in April 2010 AD by a group of public health experts and activists with a mission to have concerted public health action, research, and policy dialogue for health development, particularly of the socio-economically marginalized population and with a goal to ensure civil society’s pro-active intervention in public health. NPHF aims to prioritize public health action and research areas; facilitate interventions in collaboration with national and international partnerships with special emphasis to build community capacity for healthcare. NPHF is committed to strengthening health system generating quality evidences for policy formulation process through high quality research. Health policy and system research, social determinants of health, nutrition, maternal and child health, sexual and reproductive health are its major focus areas. Since its inception, NPHF has taken initiatives to advocate the relevant public health issues at national and regional level. Besides it has established good linkages with academic institutions, civil society and different non-government organizations.

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 areas 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

Objectives of 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.
Figure 1. NPHF Staffs at central office
Districts Covered by NPHF Projects

*GARP Nepal, BHS, Appraisal of Stunting decline, Exemplar in Global Health: Reducing under 5 mortality. Highly hazardous pesticide poisoning are nation-wide projects
**PROJECT LIST**

- **GARP**: Global Antibiotic Resistance Partnership (2017-2018)
- **SAHaS**: Strengthening and Activating District Health System (2016-2018)
- **AHF**: Exploration of Alternative Health Financing Initiatives for Sustainable Health Financing (2017-2018)
- **Conducting and Evaluating Stigma Reduction Interventions in Sunsari and Dadeldhura, Nepal (Baseline-2017; Endline-2018)**
- **FHEN**: Farming Health and Environment Nepal (2017-2020)
- **Life Saving Comprehensive Nutrition response including integrated management of cute malnutrition in flood affected districts (2017-2018)**
- **Assessment of Community Auxiliary Midwives programme Dadeldhura (2017-2018)**
- **Appraisal of Stunting decline in Nepal (2017-2018)**
- **HOPE GRID**: Highly Hazardous Pesticide Poisoning - Gathering Requisite Information for Decision-making (2018-2020)
Global Antibiotic Resistance Partnership (GARP)-Nepal

Global Antibiotic Resistance Partnership (GARP)-Nepal is part of a 15-country partnership organized by the Center for Disease Dynamics, Economics & Policy, a USA and India-based “think tank” and funded by the Bill & Melinda Gates Foundation. It was initiated in May 2013 in Nepal by Nepal Public Health Foundation, as part of a global effort to preserve the effectiveness of antibiotics.

Activities carried out in FY 2017/18:

1. **Celebration of World Antibiotic Awareness Week 2017**
   GARP-Nepal carried out a series of activities to mark “World Antibiotic Awareness Week 2017” in collaboration with several academic institutions. The theme of this third Antibiotic Awareness Week was “Seek Advice from a Qualified Healthcare Professional before Taking Antibiotics” as given by World Health Organization. On last day of Awareness Week, GARP Nepal, Ministry of Health, Ministry of Livestock Development, FAO, WHO, OIE and the Fleming Fund jointly organized a Workshop on ‘One Health and Antimicrobial Resistance: Challenge and Way Forward’.

2. **Production and worldwide launch of animated video ‘Superbug Story’**
   The animated video ‘Superbug Story: Diary of a Staph’ was developed targeting school students and medical/ paramedic students. The video was released worldwide during World Antibiotic Awareness Week 2017. The video is available in the following link: https://www.youtube.com/watch?v=3o5wT3K mhFo&t=139s

3. **Production of TV Program and Documentary on Antimicrobial Resistance**
   The six episodes TV program ‘Bahas Ma Antibiotic’, were produced in collaboration with NHEICC and telecasted on Nepal television (NTV), wherein experts from all related fields of health can be seen interacting on the rational use of antibiotics in human and animal health. In addition, an audio/visual documentary built around the issue of Antimicrobial Resistance in Nepal has been developed. All the episodes of the TV program and documentary are available in the following link: https://www.youtube.com/channel/UCC4QV1Fgj3WFWaXcCai4ow/videos

4. **Development of Antimicrobial Stewardship Program (ASP) policy document:**
   Introduction of comprehensive ASP in health facilities have demonstrated a 22-36% decrease in antimicrobial use through optimal selection, dosage, and duration of antimicrobial treatment. GARP Nepal together with DDA has taken this initiative to start ASP Program across various institutions in the country and has prepared the ASP Policy documents based on which further work can be done.
5. **Training for Community Pharmacists**

GARP-Nepal in collaboration with Department of Drug Administration developed a training manual for community pharmacists to equip them with required knowledge on prudent use and sale of antimicrobials to limit the spread of resistance. The manual is owned by DDA and trainings will subsequently be provided to the target groups.

6. **Training for Veterinarians and Para-veterinarians**

With the purpose to increase awareness in veterinarians and para-veterinarians and rationalize use of antibiotics in veterinary, a training manual has been developed by GARP-Nepal. The manual was drafted by a team of experts from Ministry of Agriculture, Land Management and Cooperative (then Ministry of Livestock Development). The manual will be handed over to the Ministry.

7. **AMR curriculum development for undergraduate medical students**

To develop a focused curriculum on AMR, a committee had been formed with experts from 4 universities of Nepal- Kathmandu University, Institute of Medicine, Patan Academy of Health Sciences and BP Koirala Institute of Health Sciences. The committee developed a curriculum which has been submitted to Nepal Medical Council for endorsement and implementation.

8. **AMR curriculum development for undergraduate veterinary students**

GARP-Nepal in collaboration with Nepal Veterinary Council (NVC) has developed undergraduate curriculum for veterinary students. A team of experts identified by the council drafted the curriculum. As the curriculum is drafted by NVC, a government body, NVC will make an effort to implement the curriculum in universities.

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**Better access and Service provision to improve Maternal, Neonatal, Child Health Nutrition and Hygiene service in Makwanpur (SPARSH)**

Marginalized ethnic communities like Chepangs and Tamangs are mostly concentrated in the western-northern part of Makawanpur (Raksirang, Khairang, Kankada, Sarikhet, Bharta) and their health status is much lower compared to the national and district data. The key indicators of safe motherhood such as ANC, PNC also stand very low.

In response to two major earthquakes that hit Nepal in 2015, Project HOPE in support of Centre for Disaster Philanthropy (CDP) and in collaboration with Nepal Public Health Foundation (NPHF) conducted Post Disaster Need Assessment (PDNA) in 14 districts. The basic objective of the need assessment was to assess the impacts of earthquake at family level in the earthquake affected districts with specific focus on health, physical and psychosocial aspects.

**Activities carried out in FY 2017/18:**

- Health Facility Mapping
- Community consultation with appreciate inquiry
- Community skill development training
- Communication and skill management training
- Positive deviance training
- Implant training
- SBA training
- Orientation to traditional healer about MNCHN
- Interaction and orientation with school health teachers about MNCHN

**Project Objective:**

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

**Project Area:**

Kankada, Khairang, Bharta, Raksirang, Sarikhet

**Supporting partner:**

Project HOPE in support of Centre for Disaster
Community health score board
Revitalization of health mother groups
Mobilization of peer groups
Counseling services through Door to door visit
Construction of maternity waiting home
Health event celebration
Need assessment

Strengthening and Updating District Health Workers (SAHaS)

NPHF in collaboration with UNICEF Nepal for supporting Ministry of Health and Population to build fully equipped prefabricated structures in 74 VDCs of 9 earthquake affected districts. Quality service delivery was expected from health facilities of these districts as they were well equipped. Since the fundamental issue was handling and maintenance of those structures, training of health workers and HFOMC members was necessary.

Various infections were also prevalent in the community which directly affected health of the community (especially that of mothers and children) thus, it was essential for health workers to treat those infections in the health facilities. Training the health workers in infection prevention was likewise vital to forestall health worker and health facility induced infection.

For these purposes, SAHaS is being implemented in 74 the then VDCs of 9 earthquake affected districts which includes province 1,3 and 4.

Activities carried out in FY 2017/18:

- More than 90% Health Mothers Group Meeting were conducted during the project period
- Meeting of Health Facility Operation Management Committee were conducted once in three months during the project period.
- Altogether 32 Prefab health facilities were handed over to the local level during the period.
- All the then VDCs had advocacy group formed for the regular conduction of Health Mothers Group Meeting and Health Facility Operation Management Committee Meeting.
- A total of 62 out of 74 prefab health facilities have been successfully handover to local level.
- Among the handover prefab IP orientation has been conducted successfully in 61 health facilities.
- A total of 389 health workers, 253 HFOMC and 140 others were oriented during the onsite IP orientation program.

Project Objective:
- Capacity building of FCHVs in order to strengthen the existing functional and to re-activate the non-functional MG and HFOMC in 74 VDCs of 9 districts
- Establish advocacy group for advocacy and sustainability of MG and HFOMC.
- To handover prefabricated health facilities in earthquake affected districts.
- Orient health workers and HFOMC members about handling and maintaining the prefabricated health structures.
- To train the health workers about infection prevention and control.

Project Area:
Gorkha, Dhading, Nuwakot, Lalitpur, Kavre, Dolakha, Ramechhap, Okhaldhunga and Solukhumbu

Supporting partner:
UNICEF Nepal

Figure 3. Improved Child Health Nutrition and Hygiene in Raksirang, Makwanpur

Figure 4. Group Photo of SAHaS Team at NPHF Office
Assessment of Alternative Health Financing Practices in Nepal (AHF)

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 necessary to achieve UHC which is target 3.8 under SDG-3. Despite of the fact that out of pocket expenditure decreased in Nepal after free health care program, it still accounts for nearly 50% of total health expenditure. (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 appear to be promising. Social Health Security Program, also known as Social Health Insurance had 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 setting. Thus, this project was started in Feb, 2017 under support of a German organization, Medico International.

Activities Carried out in FY 2017/18:

- 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
- Dissemination program was held on 21st may, 2018 to share findings from the study.

Conducting and Evaluating Stigma Reduction Interventions in Sunsari and Dadeldhura, Nepal

Abortion stigma is an important public health issue as it contributes to the rate of unsafe abortion since it has appeared as a formal topic of study in peer-reviewed journals as well as in the social discourse of the public and culture at large. Recent estimates show the abortion rate of Nepal is 42 per 1,000 women of reproductive age. But only 42% of abortions are estimated to be performed in an approved health facility by a registered provider, under the legal conditions allowed by the law. Despite the rapid expansion of abortion facilities over the past 15 years, statistics show that a lot needs to be done to reach underserved populations. The demand side barriers for abortion are enormous and yet to be measured applying rigorous scientific methods. One of the reasons is that much of our attention to date was on increasing service availability, rather than improving service acceptability and creating conditions where women feel confident in exercising their reproductive rights.

Project Objective:

- To explore and analyze various existing financing initiatives and practices in various level in Nepal.
- To review the free health care program and social health security program of Government of Nepal

Project Area:

Nation-wide

Supporting partner:

Medico International, Germany
Activities carried out in FY 2017/18:

- Interview with stakeholders, community people, adolescents and FCHVs,
- Key informant interview (KII) with health facilities in-charge.

Farming Health and Environmental Nepal (FHEN)

After the successful completion of first phase of Farming, Health and Environment Nepal Project (FHEN), Phase-II was launched in September 2017 in Chitwan district. FHEN is one of the projects of Nepal Public Health Foundation aimed to improve the health of farmers and consumers by promoting a healthy and sustainable food production in Nepal with a focus on Integrated Pest Management (IPM). This project has been developed to address the growing problems of irrational use of pesticides in farming. Core target groups are local farmers, pesticide retailers, pesticide sprayers, school teachers, health workers and community people (consumers). One of the major activities of the project is to train local farmers on IPM with practical exercises based on Farmers’ Field School concept, onsite coaching and equipment support. Health workers and Female Community Health volunteers are also trained for their capacity enhancement to prevent and manage pesticide poisoning in the community. Awareness of pesticides to the community is spread through schools as well. Besides, we also advocate this issue at the district and national levels through workshops and by writing scientific articles and disseminating information through local and national media.

Project Objective:

- To prevent occupational pesticide poisonings among farmers, professional sprayer-men and pesticide retailers by strengthening their knowledge, attitude and practice on IPM and organic alternatives to pesticides.
- To prevent pesticide poisonings including those due to self-harm and accidents by increasing awareness in the villages among the health care workers about treatment and prevention.
- To facilitate advocacy to reduce pesticide poisonings and pollution by dissemination of knowledge, strategies and materials developed in the project at district and national levels.

Project Area:

Four wards of 4 different municipalities- Bharatpur metropolitan, Khairahani municipality, Kalika municipality and Rapti municipality

Supporting partner:

Danish Society for Occupational and Environmental Health (DASAM) and Dialogos
Activities carried out in FY 2017/18:

- Round of informal interaction, preparatory meetings and orientation programs regarding the concept, objectives and expected outcomes of the project in all working municipalities of Chitwan District.
- A situation assessment study on pesticide use and its health effects in Chitwan District followed by dissemination of the findings to the local government.
- Participatory planning workshop among different groups of stakeholders in Shivanagar, ward 14 of Bharatpur metropolitan so as to prepare detailed implementation plan for the year (a collaborative effort of ward and FHEN project).
- Farmers Field School (FFS) concept at Shivanagar and exposure tours to farmers to different places of Chitwan to internalize different successful examples of adopting Integrated Pest Management.
- Refresher training to local farmers from phase 1 of FHEN.
- Sensitization training among pesticide sprayers about safety measure while handling pesticides and personal protective equipment distributed to them to provoke behavior change.
- A Three-day training targeting pesticide retailer for their awareness on safe handling of pesticides and motivation to influence farmers in the same line.
- A Three-day training to primary health care workers about the prevention and management of pesticide poisoning cases.
- Various awareness and advocacy campaigns to promote safe and healthy food production with ensured health of farmers and consumers.
- Reflection of the existing activities and outcomes of the project in local and national media and also in newspapers.

Life Saving Comprehensive Nutrition Response Including Integrated Management of Acute Malnutrition in Flood Affected Areas of Morang and Sunsari Districts

Among several programs to enhance nutritional progress, IMAM (Integrated Management of Acute Malnutrition) has been exceptionally effective in forestalling and treating the standing cases of malnutrition in Nepal. This approach maximizes impact and coverage by bringing nutrition services closer to households and reducing opportunity costs to the beneficiaries which combines four components, community mobilization, inpatient therapeutic care, outpatient therapeutic care (OTC) and management of MAM.

Project Objective:

- Breast feeding promotion, protection and support (0-23 months children)
- Promotion of complementary feeding (6-23 months)
- Management of moderate acute malnutrition through community and facility-based counseling services (6-59 months children)
- Management of severe acute malnutrition program through therapeutic feeding program (6-59 months children)
- Access and utilize essential micro-nutrients for children and women such as; Vit A for the children age 6-59 months, IFA for pregnant and postnatal women

Project Area:
Morang and Sunsari district

Supporting partner:
UNICEF Nepal
Life Saving Comprehensive Nutrition Response including Integrated Management of Acute Malnutrition in Flood affected areas has been implemented by NPHF in partnership with UNICEF and in coordination with District Public Health Office, Morang and District Health Office, Sunsari in order to manage the cases of Severe acute malnutrition and prevent under 5 children from malnutrition.

**Activities carried out in FY 2017/18:**

- Coordination with D(P)HO and Nutrition focal person of Morang and Sunsari district
- Orientation of IMAM project to D(P)HO team and health coordinators of Municipalities and Rural Municipalities.
- District Training of Trainees to 25 health workers each in Morang and Sunsari district.
- Training of health workers on comprehensive nutrition service delivery mechanism and protocol (total 172 health workers in Sunsari and 352 health workers in Morang district were trained)
- Training of FCHVs on IMAM program targeted for flood affected area in the districts. (total 674 FCHVs in Sunsari district and 503 FCHVs in Morang district were trained)
- Training of total 20 hospital staffs each in Morang and Sunsari districts on management of medical complication of malnourished children by establishing stabilization center (SC) in the district.
- Establishment of total 10 OTCs in Morang and 13 OTCs in Sunsari in coordination with D(P)HO.
- Screening of almost ten hundred thousand children of age 6-59 months using MUAC in each district.
- Identification of SAM cases (591 children in Sunsari and 768 children in Morang district) during the screening followed by admission to the OTC for appropriate treatment using RUTF
- Handing over of all OTCs to the respective Municipalities and Rural Municipalities.

**Assessment of Auxiliary Nurse Midwives Programme in Dadeldhura**

Ministry of Health has initiated several programs to encourage women from the lowest quintile to utilize available services such as Aama program (free delivery with transport incentive), incentive for update of 4 ANCs, and Nyano Jhola (mother and newborn package) but the service coverage among the targeted group had remained low. Therefore, to address these bottlenecks, Family Health Division (FHD) had launched a pilot program “the community Auxiliary Nurse Midwife (ANM) program” in Dadeldhura district in 2013/14, which aimed to provide quality services on mothers’ and newborns’ doorstep to bridge gaps between health facilities and communities and contribute to reducing maternal and newborn mortality. The program deployed one community ANM entrusted with the responsibility of three wards, thus 3 ANMs in one village development committee (VDC). A total of 60 ANMs were deployed in Dadeldhura district through the strict and transparent selection process.
Activities carried out in FY 2017/18:
- FGD with Mothers’ Groups
- Key informant interview with Health facilities in-charge, local leaders and FCHVs.

Project Objective:
- Examine whether the ANM programme has the intended target group;
- Examine factors that affect client demand and utilization of health services provided by ANMs;
- Document the process in which ANM worked to improve utilization of services in health facilities and to strengthen community-based services such as ORC and EPI clinics
- Analyse trends in service utilization for comparison before and after ANM programme
- Analyse the current and long-term cost of the ANM programme;
- Extract lesson learned and draw concrete recommendations that will guide the planning of successful expansion of the ANM programme.

Project Area:
Dadeldhura district

Supporting partner:
UNICEF Nepal

Appraisal of Stunting Reduction in Nepal

Despite of low Gross Domestic Product (GDP) with political instability and armed conflict, Nepal has made impressive gains in nutrition status of population. According to Nepal Demographic Health Surveys (NDHS), stunting in Nepal has declined from 57% in 2001 to 41% in 2011 to 36% in 2016, an annual decline of 1.6 percentage points and is commended as exemplar for success story in global nutrition forum.

The Ministry of Health along with other related ministries has put tremendous efforts in reducing stunting prevalence. Evidences have also helped to reveal critical factors behind Nepal’s story of change in nutrition. In light of the belief that Exemplar countries may provide essential case study for discovering the diverse determinants responsible for successful reduction, Nepal was chosen for this study.

Activities carried out in FY 2017/18:
- In-country stakeholders’ meeting and internal planning
- Development of methods and materials for qualitative component of the study
- Key Informant Interview with Nutrition Sensitive/specific Experts /Stakeholders

Project Objective:
- To gain first-hand insights from nutrition-specific experts and stakeholders on facilitators and barriers to reduction of stunting in Nepal;
- To explore initiatives (policies/strategies/programs/guidelines) in Nepal that have contributed to stunting reduction; and
- To gain community-level insight from health workers and mothers of children born in the study period.

Project Area:
Kathmandu

Supporting partner:
Sick Kids Hospital, Canada
Exemplars in Global Health: Reducing Under-05 Morality in Nepal

The rates of U5M in Nepal dropped between 2000 and 2015 to become one of the lowest in the South Asia region. The University of Global Health Equity (UGHE) worked with the teams at bgC3 and the Bill and Melinda Gates Foundation to better understand countries’ successes in reducing under-5 mortality (U5M). This work was initially designed with two aims: 1) developing and testing an implementation framework and mixed methods approach to understand the successes of these countries and 2) extracting actionable knowledge focused on implementation strategies and key contextual factors to inform other countries working towards the same goal.

Project Objective:
- To explore the policies, strategies and interventions related to reducing amenable causes of U5M implemented by Nepal at the national, sub-national and community levels
- To understand how Nepal prioritized, adapted, implemented, and sustained these interventions
- To explore the contextual factors at the global, national, ministry, and local levels that acted as facilitators or barriers to reduction in U5M
- To explore transferable knowledge derived from the first three objectives to be able to share with policy makers and implementers in other countries working to reduce U5M

Project Area:
Kathmandu

Supporting partner:
University of Global Health Equity, Rwanda/Partners in Health (PIH), USA; funded by BgC3

Activities carried out in FY 2017/18:
- Development of materials and methods
- Approval of the research from Nepal Health Research Council
- Key Informant Interview with Experts/Stakeholders
- Transcription and translation of KII findings
- Literature review on Policies/programs on under five mortality in Nepal
- Qualitative data analysis
- Development and submission of preliminary draft of qualitative analysis to UGHE team for feedback

Figure 12. Group Discussion between NPHF team and UGHE Team
Highly Hazardous Pesticide Poisoning Gathering Requisite Information for Decision-Making (HOPE-GRID)

Intentional pesticides poisoning is a significant clinical and public health problem in Nepal. In 2014, WHO estimates that Nepal had the 7th highest suicide rate in the world (24.9 per 100,000). Evidence shows that restricting the sale of the highly hazardous pesticides (HHPs) most commonly linked to suicides is a highly effective way of reducing deaths and injuries from pesticide poisoning. Since countries may register different pesticide formulations that are imported or produced locally under different names, each country needs to conduct its own assessment of what HHPs lead to most harm. Thus, we aim to identify the highly hazardous pesticides currently responsible for majority of pesticide suicides in Nepal. Clinical and pesticide data for pesticide poisoned patients presenting to at least 13 hospitals, information on the pesticides for sale in local shops and data from the police and toxicology labs post-mortem records for patients who die before hospital presentation will be collected. These data will be analyzed and presented to the national pesticide regulator in Nepal so that decisions about priority pesticide regulation can be informed.

Activities carried out in FY 2017/18:

- Pilot study in Madhyapur Hospital, Bhaktapur.
- Research co-ordination meetings with 9 hospitals.
- Retrospective data collection in 4 hospitals (i.e Teaching Hospital, Bir Hospital, Patan Hospital and Bharatpur Hospital).
- Meeting on “Sharing experience from Nepal and India and working together to ensure good data quality” with research team of Nepal and India.

Project Objective:

- Identify burden of pesticide-related admissions and mortality in Nepalese hospitals.
- Study the spectrum of pesticides responsible for poisoning-related admissions and deaths.
- Study the spectrum of pesticides available in the pesticide shops

Project Area:

Dharan, Chitwan, Kathmandu, Lalitpur, Dhulikhel, Pokhara, Butwal, Dang, Nepaljung, Janakpur, Surkhet, Dhangadi

Supporting partner:

University of Edinburgh, Center for pesticide suicide prevention

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Figure 13. HOPE-GRID workshop

Figure 14. Discussion with Research Consultant about data collection
Nepal Public Health Foundation (NPHF) organized 8th Annual General Meeting on September 08, 2017 at Summit Hotel, Kupandole under the chairmanship of Dr. Mahesh K. Maskey, Executive chair of NPHF.

The meeting began with welcome remarks by Dr. Mahesh K. Maskey, Executive Chair of NPHF. Dr. Sameer M Dixit, General Secretary of NPHF outlined the updates of each projects activities and financial statement of fiscal year 2017/2018. He concluded his remarks by thanking the staffs for their contribution and dedication towards their work, hoping for similar commitment and enthusiasm in the years to come. This was followed by presentation on annual plan of fiscal year 2017/18 of NPHF by Prof. Dr. Lochana Shrestha.

The AGM endorsed bylaws (Administrative and Financial) and amendment in constitution. Also, two eminent personalities and members of our NPHF family Dr. Mrigendra Raj Pande and Prof. Dr. Ramesh Kant Adhikari were awarded with a prestigious life time achievement award. After, the discussion about further approaches of NPHF, the meeting was adjourned.

Nepal Public Health Foundation has been organizing public health lecture as its core activity every year inviting eminent personalities on June 30 to foster collective action of people around common agendas of public health. The inaugural lecture was delivered on 2010 and has been continuing since last eight years. Proceeding with this tradition, this year Dr. Dharma Sharna Manandhar an eminent personality in Public Health delivered his lecture on “My Adventure in Public Health Research” on 30 June, 2018 in MOHEGO Building, IOM, Maharajgunj. The program began with welcome message by Dr. Mahesh K. Maskey, Executive Chair of this organization with the introduction of keynote speaker of the program. Representatives from different NGOs, INGOS, educational institutions, doctors, students of IOM and other public health colleges attended the program.

Dr. Manandhar talked about his journey as a public health researcher which was more by chance than by his choice. He mentioned about his research organization called 'Mother and Infant Research Activities (MIRA) whose activities has spanned over two and a half decades. He also talked about his initial studies and publications, highlighting the evidence for effectiveness of health education interventions. Further, he discussed about the affordable and low maintenance locally made equipment for newborn care; which was named after him and was supplied to district hospital and PHCs. Likewise, he emphasized on enhancing newborn care at home and an effect of a participatory intervention with women’s group on birth outcomes in Nepal and also shared the findings of similar interventions in different areas like Makwanpur, Dhanusha, India, Bangladesh and Malawi with little modification. Lastly, he shared his experience of running a research organization not only in the field of research but also in management of human and financial resources. The lecture series came to an end with Dr. Maskey honouring Dr. Manandhar with token of love.
Continuing Public Health Education

NPHF has taken an initiative of Continuing Public Health Education (CPHE) which aims to refine skills to improve overall public health practices and address real world challenges that professionals face day to day. It consists of educational activities which serve to maintain, develop and increase knowledge, skills and professional performance of public health professionals.

In this fiscal year 2017/18, three lectures were conducted successfully. Prof. Dr. Archana Amatya delivered her lecture on ‘Contraceptive Needs and Challenges of Adolescents and Young Adults’. Similarly, Dr. Rita Thapa gave her lecture on ‘Empower School Adolescents: Prevent the Five Primary Risk Factors of the current number one killer From Research to Action’. Likewise, Prof. Dr. Lochana Shrestha delivered her lecture on ‘Geriatric Health and Concerns: Past, Present and Future’.

At the end, certificate of appreciation was provided to the resource person.
**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 in Kavre has introduced “Mid-day meal Nutrition” project for student, pregnant women and children in Patlekhet with the aim to improve nutritional status of its Community by providing mid-day meals (one glass milk and one egg). This project hopes to make the community self-dependent in livestock and organic agriculture and likewise create employment opportunities for local women and youths. As of now, buffalo shed is being constructed for the buffalo rearing.

**International Conference on Epidemiologic Research-2018**

Continuing the effort to help generate quality evidence in the field of health research in Nepal for policy and action, NPHF envisioned to enhance the capacity of public health professionals in Nepal in the field of epidemiology. In response to this, from March 11-15, 2018, five days ‘International Conference on Epidemiologic Research’ (ICER) was organized by NPHF in collaboration with Nepal Health Research Council (NHRC) at Hotel Shanker, Kathmandu, Nepal.

The two days conference was followed by three days training workshop. The conference had four major themes: disaster epidemiology, nutritional epidemiology, MCH epidemiology and NCD epidemiology. There were panel discussions, orations, keynote speeches and paper presentations.

Main speakers in the conference were Dr. Kenneth J Rothman, a distinguished fellow at RTI Health Solutions, Dr. John David Clemens, Executive Director of icddr,b, Dr. Sandro Galea, Dean of Boston University, School of Public Health, Dr. Elizabeth Hatch, Professor at Boston University and Dr. Sharmeen Yasmeen from Public Health Foundation of Bangladesh.

Similarly, Dr. Rajendra BC and Dr. Meghnath Dhimal from NHRC, Dr. Bhesraj Pokharel from Department of Health Services, Ms. Chahana Singh from Unicef Nepal, Dr. Kedar Baral from Patan Academy of Health Science, Dr. Kenda Kunningham from Helen Keller International, Dr. Ramesh Kant Adhikari from Kist Medical College, Dr. Robin Shrestha from Nutrition Innovation Lab, Dr. Mahesh K Maskey from NPHF, Dr. Sunil Raja Manandhar from Kathmandu Medical College, Dr. Meera Thapa Upadhyay from WHO Nepal, Dr. Rajendra Koju from Kathmandu University, Dr. Sharmeen Yasmeen from Public Health Foundation of Bangladesh, Dr. Jyoti Bhattarai from Nepal Diabetes Thyroid and Endocrine Centre and Dr. Abhinav Vaidya from Kathmandu Medical College and presented their papers and discussed pertinent issues in their respective sessions.

The three days training workshop was facilitated by Dr Kenneth Rothman, Dr Elizabeth Hatch and Dr Mahesh Maskey. It included interactive sessions on different areas of epidemiologic concepts such as study design, measures of occurrence and effect, causation and causal inference, epidemiological data analysis, critical review of papers etc.

Both conference and training was accredited by NHRC with active participation of over 150 professionals from academia, government bodies, research organizations, non-government organizations as well as health institutions.
Institutional Social Responsibility

Ward Cleaning Campaign

Nepal Public Health Foundation being located in ward-4 (Baluwatar) has been participating/organizing cleaning campaign every week.

Figure 19. Participants and organizers on the last day of ICER 2018
Activities

Internship/Volunteering Program

Nepal Public Health Foundation accepts interns from every national and international platform. Interns from Tribhuvan University-Institute of Medicine, BP Koirala Institute of Health Sciences, Wageningen University, Netherlands, Lund University, Sweden; SRM University, India; Boston University School of Public Health, USA and other students studying Bachelor / Masters in health-related fields have 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, four students from Boston University School of Public Health, studying Master in Public Health completed their 6 weeks internship along with respective field work as a part of their academic requirement.

<table>
<thead>
<tr>
<th>Name of Interns</th>
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<tbody>
<tr>
<td>Ms. Vicotria Pae</td>
</tr>
<tr>
<td>Ms. Dipika Das</td>
</tr>
<tr>
<td>Ms. Ningyi Wang</td>
</tr>
<tr>
<td>Ms. Hailun Wang</td>
</tr>
<tr>
<td>Ms. Pooja Pokhrel</td>
</tr>
</tbody>
</table>

Meeting with Delegates

A team of icdr,b visited Nepal on July (10-11), 2017. The team led by Prof. John D. Clemens, Executive Director of icdr,b shared new research advancements particularly for saving lives of children and mothers and also for effective management of infectious diseases such as TB. NPHF facilitated a round of meetings between external developments partners, team of experts from Nepal and guest team to explore the potential areas of research collaboration in the future. The visit was quite productive in establishing bilateral relationship between two organizations.

A team from Boston University School of Public Health (BUSPH) alongside Dean Sandro Galea and Professor Kenneth J Rothman visited Nepal from March 15th to 18th, 2018 to attend International Conference on Epidemiologic Research (ICER) and likewise explored possible collaboration between BUSPH and NPHF. The visit was quite fruitful in establishing reciprocal liaison between two organizations.
The research team along with Dr. Mahesh K. Maskey, Executive Chair, NPHF had a meeting with Dr. Manisha Nair- Senior Epidemiologist and MRC Career Development Fellow, National Perinatal Epidemiology Unit, University of Oxford on June 11th, 2018 to discuss about potential collaboration on Maternal and child health research. Both parties agreed to have research collaboration in the future.

A team of HOPE-GRID, Dr. Gael Robertson and Dr. Pratibha Milton visited NPHF on August 8th, 2018 and shared the experiences and requisite information on highly hazardous pesticides poisoning and also explored the potential collaboration with NPHF to work together on suicidal prevention arena.

### 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 called 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 (Five days Research Proposal Development Training)

Targeting university students, Nepal Public Health Foundation organized a five days Research Proposal Development Training Course from September 11-15, 2017 in NPHF building, Maharajgunj. The main purpose of the course was to enable the participants to build a scientifically sound research proposal based on Nepal Health Research Council (NHRC) format and University thesis guidelines. The event was designed so as to provide an overall concept about writing a research proposal by renowned public health experts throughout the five-day period.
along with exercise session at the end for a practice-based learning. At the end of the course, each of the students presented their research proposals based on learnings of the training, followed by the valedictory function. Bachelor's and Master's level students from faculty of Public Health, Human Biology, Nursing, Food and Technology were benefitted by the training course.

**Training and Career Development**

Ms. Simrin Kafle, Project Manager of FHEN Project attended the training Course on Integrated Pest Management and Food Safety at Wageningen University and Research, Netherlands from 04-22 June, 2018. Ms. Kafle also shared her experiences and learning later on with other staffs about the contents of the course, management of different aspects of training like theory, practice, methods and its management, diverse types of exposure and networking, policy systems, technology development, human skills and attitudes.

To invigorate the discourse on the current state of mental health in Nepal, an International Mental Health Conference Nepal under the theme ‘Coming Together for Mental Health’ was organized by MoHP on February 16 and 17, 2018 at Park Village Resort, Budhanilkantha. Ms. Anushtha Mainali and Ms. Nikita Pradhan, on behalf of Nepal Public Health Foundation, as an institutional representative participated at the conference. It provided a common platform for the government, multilateral and bilateral organizations, health professionals, social workers, different institutions, civil society to exchange information, ideas and research findings in the field of mental health.
Annual Plan and Strategy

NPHF core activities plan

Nepal Public Health Foundation Lecture Series

Nepal Public Health Foundation has been organizing public health lecture as its core activity every year inviting eminent persons on 30th June to foster collective action of people around common agendas of public health. The inaugural lecture of year 2010 was delivered by Mr. Kul Chandra Gautam, a former Deputy executive Director of UNICEF and Assistant Secretary-General of the United Nations who highlighted on 10+2 agenda for public health. In 2011, Prof. Dr. Mathura Prasad Shrestha, Advisor of NPHF delivered lecture on “Understanding Public Health: Conceptual and Philosophical Foundation”. In 2012, Dr. Mrigendra Raj Pandey presented his lecture on “Control of Non-Communicable Disease: Scientific, Social and Spiritual perception”. In 2013, Dr. Hemang Dixit presented his lecture on “Public Health in the past, present and future”. In 2014, Dr. Rita Thapa, Advisor of NPHF presented on “Changing Public Health Paradigm- (Changing Maternal Child and Family Planning)”. In 2015, Dr. BD Chaut, Founding Member of NPHF delivered lecture on “Unveiling the debate on Euthanasia”. In 2016, Dr. Buddha Basnyat, Vice-President of NPHF delivered lecture on “From a Reluctant Researcher to Public Health Advocacy: My Life and Times”. In 2017, Dr. Badri Raj Pande, Founding Member of NPHF delivered lecture on “Switching to Public Health from Clinical Pediatrics - a reminiscence”. In 2018, Dr. Dharma Sharna Manandhar delivered the lecture on the topic “My adventure in Public Health Research”.

Total Budget: Rs. 100,000

It covers the cost of hall, book, token of love, etc.
Source of fund: NPHF Main account.

Health Policy Dialogue

Nepal Public Health Foundation was established with a mission to have concerted public health action, research, and policy dialogue for health development, particularly targeted to marginalized population. There is a need for NPHF to focus on pertinent public health issues and act as a pressure group, engage in continuous evidence informed policy advocacy based on research conducted by NPHF and others for policy implications.

NPHF members are nominated in key policy making committees such as High-Level Health Advisory Committee, thematic groups of the New Health Policy 2014, thematic group of health for all. This involvement gives members the opportunity to engage in policy dialogues. Members have also taken lead roles in advocating public health policy matters.

From this fiscal year it has been planned to organize a health policy dialogue once in every three months inviting the policy makers and government officials. World Health Organization will be the supporting partner for this activity.

Public Health Foundation Website and Social networking

Official website

Nepal Public Health Foundation has its own official website: www.nphfoundation.org which provides updates of all the activities of NPHF. In 2017, the old website was redesigned and published. The materials are also being updated regularly. Further, coordination will be done with Nepal Health Research Council (NHRC) for exploration of possibility to establish digital library.

As we are already planning to involve all of our current projects into this digitalization system, we are also planning to initiate mapping structure of all our working areas (districts) in the website.
**Project exploration and bidding**

For exploration of grants and funds, a team will be formed which will spare their certain time in exploring grants and funds. The team will be responsible for providing assistance to develop the proposal. In this fiscal year, a dozen of proposals are anticipated to be developed.

**Collaboration with Government**

Series of meetings will be held with different divisions/departments/centers of Ministry of Health and Population Areas of collaboration will be discussed and eventually this will create a platform to work together with government.

**Modular Lecture**

A modular lecture programme will be conducted once in every month which will last for one week mainly targeting the bachelor and masters level students as well as fresh graduates in medical and allied health disciplines. On an average, NPR 5000 will be charged per participant for a week-long course. Assuming an average of 15 participants per course, the expenses and income is as follows:

Expenses per programme: Rs. 40,000 (Making a total of Rs. 4,80,000 in a year)

Income per programme: Rs. 75,000 (Making a total of Rs. 9,00,000 in a year)

**Interaction with Health Journalists**

An interaction programme will be conducted four times in a year where current issues of health will be discussed.

Budget: Rs. 10,000 per programme making a total of Rs. 40,000 for a year.

This cost covers the refreshment, hall cost and transportation and communication cost.

**Institutional social responsibility**

**NPHF field office**

Nepal Public Health Foundation has initiated a field programme in Namobuddha VDC of Kavre District with the aim of improving socio economic status of community along with the nutritional status of children. Basically, whole programme is encountered to the concept of community empowerment. The vision is to establish an exemplary farm which will uplift the status of the community people.

**Approaches**

Animal husbandry has been conceptualized to achieve this aim. Agriculture and allied activities have been the core livelihood for majority of the rural people in Nepal. A farm will be established in a ward of the VDC engaging the community people for taming cows. Milk produced will be distributed to the community school located over there and the surplus products will be sold in the market. The profit gained will be used to buy egg to feed the school children daily and also for the sustainability of the project. At the end, the farm will be handed over to the community.

**Working partner**

Sanima Bank Limited will provide financial support for this programme as a part of their Corporate Social Responsibility (CSR) along with loan of nominal interest rate.

**Total budget:** Rs. 10,000 per visit (Total in a year: Rs. 500,000)

This budget covers the transportation cost and refreshment for the staffs visiting the field site. The field visit will be done twice a month. There is separate budget for the implementation of the project.
Budget structure

Total expenditure and income of NPHF core activities

<table>
<thead>
<tr>
<th>S N</th>
<th>Activities</th>
<th>No. of activities in a year</th>
<th>Expenses Amount (Rs.)</th>
<th>Income Amount (Rs.)</th>
<th>Remarks</th>
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<tr>
<td>1</td>
<td>NPHF Lecture Series</td>
<td>1</td>
<td>100,000</td>
<td>9,00,000 (from Modular lecture) + 1,000,000 NPR per year from voluntary donation</td>
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<tr>
<td>1.</td>
<td>Health Policy dialogue</td>
<td>4</td>
<td>40,000</td>
<td></td>
<td></td>
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<tr>
<td>2.</td>
<td>Proposal Exploration and bidding</td>
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<td>300,000*</td>
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<td>This will be compensated by the awarded project</td>
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<tr>
<td>3</td>
<td>Modular lecture</td>
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<td>4</td>
<td>Interaction with health journalist</td>
<td>4</td>
<td>40,000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>NPHF field programme</td>
<td>26</td>
<td>500,000</td>
<td></td>
<td></td>
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<tr>
<td>6</td>
<td>Urban community health awareness programme/ward cleaning</td>
<td>12</td>
<td>120,000</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Grand Total</strong></td>
<td></td>
<td><strong>1,580,000</strong></td>
<td><strong>1,900,000</strong></td>
<td><strong>320,000 NPRS</strong></td>
</tr>
</tbody>
</table>

*since this will be recovered from the awarded project, it is not added in the total amount

Anticipating projects and collaboration

<table>
<thead>
<tr>
<th>S.N.</th>
<th>Projects</th>
<th>Start date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Oxford - establishing the MNCH surveillance-</td>
<td>December, 2018</td>
</tr>
<tr>
<td>2</td>
<td>UNICEF- Health facilities need assessment-MUGU</td>
<td>October, 2018</td>
</tr>
<tr>
<td>3</td>
<td>Understanding determinants of maternal mortality in Nepal</td>
<td>October, 2018</td>
</tr>
<tr>
<td>4</td>
<td>Heightening institutional capacity for use of research capacity in health research</td>
<td>February, 2019</td>
</tr>
<tr>
<td>5</td>
<td>Analysis of and support to health service delivery to sub national level</td>
<td>November, 2018</td>
</tr>
<tr>
<td>6</td>
<td>Fleming fund- regional grant</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Collaboration with NHRC for different surveys and events (e.g. STEPS survey, Health and population scientists’ summit etc.)</td>
<td>2018/19</td>
</tr>
</tbody>
</table>

Working Partners

The working partners for all the activities of this fiscal year:

International/Multinational

- UNICEF Nepal
- Nepal Health Research Council
- Liverpool School of Tropical Medicine
- Boston University School of Public Health
- University of Edinburgh
- Oxford University
- Ipas
- WHO Nepal
- DIALOGOS, Denmark
Local Partners:
- Nepal Health Research Council
- Prayas Nepal
- Tusal Youth Club

National Academic Partners:
- Patan Academy of Health Science
- Tribhuvan University, Institute of Medicine

Major reforms anticipated for FY 2018/19

- Formation of fund raising committee (with representation of board members)
- Roster preparation for mapping potential collaborators/consortium
- Departmentalization within NPHF
- Formation of Health Alliance
- Exploration of collaboration with universities and councils for launching accredited courses with long term aim of starting university degree course.
Case Study- I

Changing the Nutritional Status

Ridham Khatri, a 15-month old male child was brought to Itahari Primary Health Center (PHC) for vaccination by his mother Puja Khatri resident of Sundarharaicha municipality. The child was screened using MUAC tape and was identified as Severely Acute Malnourished (SAM) child. His mid upper arm circumference (MUAC) measured 11.3cm and he weighed 8kg and was 75cm tall.

When asked about the history, his mother informed that Ridham was only 2.5kg at birth. Breastfeeding was initiated only after half an hour of his birth and according to her, he was exclusively breastfed up to first six months. He was introduced with “SARBOTTAM PITHO” after completion of six months. The mother recalls she was worried about him getting lean and thin day by day but could not do anything. “He used to eat properly and breast feeding was also continued but later when he was about nine months he suddenly started refusing food”. After taking anthropometric measurement, she was informed about her child being malnourished. She was worried about this but after counseling she decided to seek treatment for her child thinking “If my child becomes healthy, I am ready to do anything for him.” After taking her consent, the child was fed Ready to Use Therapeutic Food (RUTF) in order to test his appetite. The child passed appetite test and was admitted in Outpatient Therapeutic Centre (OTC) in Itahari PHC on 12/09/2074.

The child was diagnosed SAM through IMAM program. If the program had not been launched, the child probably would never have been treated. He could possibly be lean and thin and underweight for his life time. But due to introduction of RUTF through IMAM program, his physical status changed dramatically. Now, the child looks much better and healthy. On the other hand, the mother was counseled on importance of complementary food along with continuation of breast milk after which she assured that she will feed four types of food each day (“harek baar, khana chaar”) in order to make sure he grows healthy. Most importantly, she guarantees to share the information and knowledge that she has to her neighbors and friends.

-IMAM Project Team
Reactivating Mothers Group Meeting

A 35 years old woman permanently residing in Harkapur (Malung Gaupalika) ward no -3 got married 20 years ago. Her name is Bagwati Khatri and she has been living with two sons, one daughter and a husband, with her main source of income being agriculture. She is also a member of Shivaduti Health Mothers Group. Despite of having high incidence of diarrhea in her family, she conceded that prior to mothers group meeting she had a very little knowledge about water purification and proper hand washing techniques. Before the program was implemented in the ward, they often came together to discuss about micro savings, but after the implementation, they had begun to discuss about health related issues such as hand washing techniques, drinking boiled water, Antenatal check-ups, post-natal check-ups, nutrition, immunization, family planning services, and so on. Social mobilizer and Female health community volunteers had additionally helped them by providing information on different health related issues. She recalled that their participation in the mothers’ group meeting had a positive impact in their health behavior such as drinking safe water, appropriate utilization of latrines, attending safe motherhood clinic and so forth, which had helped to improve their living condition. In spite of several challenges after earthquake to conduct mother’s group meeting and discuss health topics in the ward, SAHAS program had motivated them to reactivate and continue meetings in the ward. Now, all participants participate enthusiastically in the meeting where health issues are discussed.

- SAHas Project Team
Voice of a Survivor, Quake Story

On 11th Nov 2017, me along with NPHF team had been to Barpak, Gorkha (epicenter of April 25th and May 12th 2015 earthquake) to handover the prefab (health post) established with UNICEF’s support. There I encountered a brave, bold lady who worked as an assistant in the same health post. I had a long conversation with her about her quake experience.

“…………. two years back on Baisakh 12th, 2072, it was a nightmare to us, all of sudden massive earthquake intensely hit our small village, Barpak. The periods of pain and sentiments we people had at that crucial time can never be erased from our mind. As the clock struck around 12 pm, the walls, floors of my humble terraced home shook violently, the contents of my stomach jolted slightly too quickly up to my ears and then down to my ankles. I have never been so scared in my entire life. I was all alone in home. My husband is in abroad and my one and only son was in his maternal home. I yelled, I uttered but no one was there to hear my voice. I somehow managed to come outside and saw all the liquefaction and cracks all through the ground. It was weird thinking that a few big shakes could do all this in few seconds. People had already been out shoveling off the concrete grey stuff that looked and smelled really bad (…..tears on her eyes, shivering).

Just the day before the earthquake, I had been to Jobhari to collect vaccines as I work as Karyalaya Sahayogi here in Health post. That day was full tiresome (…..sad face). On Saturday I woke up late and was doing my household chores. All of sudden all these happened in the blink of eyes. It’s still creepy because there are aftershocks still going on from that earthquake and the one after that but now we people of Barpak have become much more stronger and bold to face any sort of powerful pain (...smile on her face). Since 2 years we have had only one room in delivering all type of health services to people here. It was very much difficult to pregnant mothers and newborns specially to get the quality services. We have suffered a lot and struggled also. But now it seems our day has come back......(smile on her face).

With the continuous support and generosity of local people, government of Nepal and other big organizations- we have soon returned to normal situations and we survivors also have regained our confidence to live a customary life again (...long breath). I feel so blessed and happy that from today we all have well established prefab health post here which will deliver a quality health services to all the people residing here in Barpak”.

-NPHF staff sharing her experience during her field visit
Advisors
Mathura Prasad Shrestha
Rita Thapa
Kul Chandra Gautam
Suniti Acharya

Legal Advisor
Badri Pathak

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

Life Members
Archana Amatya
Bishnu Chaoulagai

Ordinary Members
Chhatra Amatya

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

Janak Thapa, Program Director
Ami Maharjan, Admin and Finance Director
Santoshi Giri, Project Coordinator
Raj Kumar Subedi, Monitoring & Evaluation Manager
Raj Kumar Sangroula, Program Manager
Niraj Giri, Senior Monitoring & Evaluation Officer
Anustha Mainali, Senior Program Officer
Kriti Adhikari, Senior Project Officer
Sasmrita Bastola, Senior Project Officer
Manisha Pokhrel, Senior Research Officer
Pritisha Shrestha, Program Officer
Nikita Pradhan, Program Officer
Sunita Bhandari, Project Officer
Meena Maden Limbu, Project Officer
Dip Narayan Thakur, Project Officer
Sushmita Phuyal, Project Officer
Rajan Kawan, Project Officer
Basudev Bhattrai, Project Officer
Ayousha Pokharel, Research Officer
Jibika Siwakoti, Admin and Finance Officer
Neera Shrestha, Account Officer
Sunita Chand, Admin Officer
Pooja Khanal, Communication Officer
Yubraj Tamang, Account Assistant
Rabin Nepal, Account Assistant
Devraj Moktan, Driver
Sabina Khatri, Office Assistant
Susrimaya Lama, Office Assistant
Dilip Thakur, Night Guard
Sushma Shrestha, Cleaner (Part time)

FHEN (Chitwan field Office)

Simrin Kafle, Project Manager
Amrit Pokharel, Field Officer
Shirjan Kumar Yadav, Admin and Finance Officer
Kamala Gurung, Office Assistant
Dr. Mrigendra Raj Pandey felicitated with Life Time Achievement Award

Dr. Ramesh Kant Adhikari felicitated with Life Time Achievement Award

MOU between NPHF, icddr,b and MoHP

Inauguration program at FHEN Project

With the participants of Research Proposal Development Training

Prefab Handover, Chankhu HP, Dolakha
Group photo, IP orientation - Kattike deurali HP, Kavre

Group picture after completion of IP Orientation Manthali PHC, Ramechhap

Poster presented during World Antibiotic Awareness Week 2017

Central Steering Committee Meeting of FHEN Project

IMAM Training for Health Workers

IMAM Training to Health Worker, MTot
IMAM Training for Health Workers

MToT on onsite orientation on IP and prefab maintenance

Guest lecture by Dr. Surajit Nandi

Guest lecture by Dr. Nirmal Kadel

Group photo after SPARSH-M dissemination

Dissemination Program: Alternative Health Financing Project

Inagurgration program for birthing centre at Rakshirang

SPARSH-M Meeting at Rakshirang
Mother’s group meeting with community discussion

Mother’s group meeting at Gorkha

Health Workers Training at Chitwan

Interns from BUSPH interacting with pesticide retailers about how they can be the part of pesticide minimization movement

Inaguration program of FHEN Project
NPHF Team with Prof. Kenneth J Rothman and Prof. Elizabeth E Hatch at ICER 2018