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ANNUAL NARRATIVE PROGRAM REPORT

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Submitted To

Sub-Office -Suaahara

Bidur-4, Nuwakot

Submitted By

The Kakani Centre for Development of Community

(KCDC)

SUAAHARA PROGRAM

(A Good Nutrition Programme)

Nuwakot

Sub-award No: 21854-01-147

Report Type: Annual Report

Summary

<i>S.N</i>	<i>Activities</i>	<i>Target</i>	<i>Achievement</i>	<i>Male</i>	<i>Female</i>
1	Celebration of national Vitamin A supplementation campaign	2	2	-	-
2	MIYCN follow up		11	12	18
3	RDQA		4	3	6
4	OTC follow up		3	5	6
5	CNF conducts 3 key life events (pregnancy, birth, and 6 months) for each 1000-day family		1323	1492	10284
6	FS/CNV makes specific visit to FCHV led HMG for conducting a food demonstration, separate from the calendar-focused or SATH visits		459	575	5645
7	FS/CNV identify children with Moderate Acute Malnutrition (MAM) cases and counsel them on child feeding and care and trigger family members to engage with Suaahara II and GoN platforms, especially HMGs to discuss with other families and FCHV		15	21	145
8	Peer Facilitator		1	0	44
9	MNCH/GESI officers and NSBC officers provide participatory interaction meeting and on-site coaching (post training follow-up) at health facilities including OTCs to enhance knowledge and skills of health workers on CB-IMNCI, MIYCN, NACS, IMAM, PHC-ORC mgmt and to conduct RDQA on CB-IMNCI		3	5	7
10	FS visits each HMG to follow-up on SATH action plans developed in years 1-3		93	-	-
11	HMG visit other than SATH implemented		96	-	-
12	PHC/ORC monitoring and onsite coaching		266	-	-
13	Support to EPI clinic		345	-	-
14	FC and MNCH/GESI and NSBC Officers coordinate with government/ municipalities to distribute health and nutrition equipment and supplies		2 UM and 10 RM	-	-
15	FC and HFP officers in coordination with municipality-level Agriculture/Livestock coordinators, conduct follow-up meetings with previously oriented HFPB group/VMF network on resilience action plan		1	6	10
16	FC, MNCH/GESI officer and NSBCC officers support, Provides CHSB follow up and technical assistance to municipal-level health coordinators, HFOMC members, Health workers and FCHV		2	9	86

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17	Provided support to Homestead Food Production Beneficiaries (HFPB) Group and training follow up -FS/CNV		29	-	-
18	HFP/M Officers/PC conducts review meeting with district and municipality-level government and non-government agricultural and livestock stakeholders		1	23	9
19	"Interactions meeting among municipal agriculture and livestock coordinators, local private stakeholders, HFPB group members, VMFs and LRPs to promote nutrition sensitive agriculture practices, discuss HFP related issues, identify solutions and build linkages with local government and other stakeholders"		1	18	14
20	Formation of VMF network in Likhu		1	-	-
21	KTM team, PC-Province Focal Points and technical officers lead with support from resource persons will roll out "Sustaining nutrition and health interventions at local level" workshops at municipal-level to advocate for nutrition and guide local-level action plans for improved/sustained implementation of both nutrition-specific and nutrition-sensitive activities		1	24	17
22	MNCH/GESI officers and NSBC officers hold follow-up meeting with and mobilization of GESI champions on GESI and orient them on resilience		1	10	8
23	Iodine month Celebration		2 UM and 10 RM	-	-
24	PNGO leadership will facilitate district-level Program Advisory Committee (DPAC) meetings		1	22	8
25	FC will facilitate review and planning meetings with FS, CNV, CWV, FCHVs, VMFs, LRPs, GESI Champions, PFs etc		5	16	7
26	Organize agri and nutrition fair in Nuwakot Mahotsab		1	-	-
27	Phone contact and Counseling of Covid -19		28240	-	-
28	Participated in RRT meeting		1	-	-

INTERMEDIATE RESULT 1: IMPROVED HOUSEHOLD NUTRITION AND HEALTH BEHAVIORS

I. Celebration of national Vitamin A supplementation campaign

National Vitamin A campaign is a very significance and successful campaign in Nuwakot district. Government of Nepal as Federal Government, Provincial Government and Local Governments have been conducting National Vitamin A Supplementation Campaign in all 10 Rural Municipalities as in Kakani, Shivapuri, Panchakanya, Dupcheswar, Tadi, Likhu, Suryagadhi, Kispang, Myagang and Tarkeswar Gau Palika and 2 Municipalities as in Bidur and Belkotgadhi Nagar Palika in two times of a year (Kartik 2, 3 and Baishak 5, 6) by mass campaign style through FCHVs. The vitamin immunization day of Second round campaign was changed date. It was organized in Asaadh 22 and 23, 2077 from the date of scheduled and planned, due to the problem of lockdown and affected by Covid-19. In addition, the vitamin A were distributed to children below 6-59 months and it results in the significant reduction of child mortality. The health hygiene materials as PPE (Personal Protective equipment) Mask 4492 pcs and 1123 bottles of sanitizer were provided to 1123 FCHV by SUSAHARA PROGRAM II for their safety and protective during Vitamin A immunization Day and campaign in throughout the Nuwakot District.



During the COVID – 19 emergency and lockdown period, as communities around the world mobilize to protect their most vulnerable citizens during the crisis, we are working to ensure that our students, families, and communities in Nepal are also able to endure. Many in our community work as day laborers and are no longer earning an income, leaving them unable to buy food and other basic necessities for their family.

In emergency response, our team has shifted to focus in prevention of Covid – 19 our respective community. We were committed to providing emergency packages of food and supplies each week to vulnerable families in need, for as long as the crisis continues. And, as we were dedicated to response whatever possible during the emergency relief time. An available support was provided to vulnerable and affected families living in our communities who are a part of our regular programs.

Awareness was raised about on Covid 19 prevention, control and vitamin A campaign by Suaahara District team and PNGO staff team through local FMs Bhanchhin Aama-Radio Program for raising awareness, disseminating information throughout Nuwakot district. Field Supervisor (FSs) and Community Nutrition Volunteers (CNVs) were very active in respective program community through mobile and phone contacts with target group and their role was significant to providing counselling and

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awareness to pregnant women, lactating mothers, children and family members on prevention and control of Covid – 19 in Nuwakot. In other side they were active in assisting the 1123 FCHVs of the all 12 Palikas of Nuwakot district for coordination activities and proving available services, materials, monitoring the activities and implement of Vitamin A campaign in correct manner and right way in the district in our working area.

II. MNCH/GESI officers and NSBC officers provide participatory interaction meeting and on-site coaching (post training follow-up) at health facilities including OTCs to enhance knowledge and skills of health workers on CB-IMNCI, MIYCN, NACS, IMAM, PHC-ORC mgmt and to conduct RDQA on CB-IMNCI and/or nutrition,

The MIYCN follow-up orientation was organized in 11 health facilities, as similar, like OTC orientation was organized in 3 Health facilities, RDQA orientation was organized in 4 health facilities and the MIYCN orientation was organized in 18 health facilities for 50 CMSG of 18 health facilities. The participants from 7 palikas as Likhu, Belkotgadhi, Tarkeswar, Dupcheswar, Suryagadhi, Panchakanya and Shivapuri were participated in the orientation program. As male 20 and female 30 participants were attended the program. The senior. Program manager- Ms. Bhim kumari Pun and Nutrition advisor- Mr. Rajan Mandal from Suaahara Central Office Kathmandu were presence in the program for facilitation, interaction, supervision and monitoring of the program. The program was conducted by NSBCC officer - Ms. Rekha Lama from District Suaahara Office and Field Coordinator Hari Tamang from PNGO KCDC Suaahara Program.

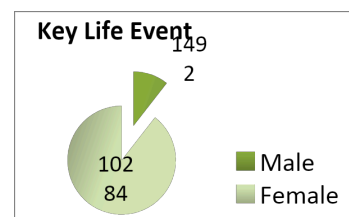


Program was concentrated on raising awareness and sensitizes communities on good nutrition, care and stimulation practices, using clear messages disseminated through CMSG, baby friendly meetings, targeted home visits, and other health promotion activities through community outreach, community dialogues, campaigns, nutrition days, and health fairs, provision of communication content materials such as fliers, use participatory community engagement through photo voice, and digital media with key nutrition messages and the right to good nutrition for communities.

III. CNF conducts 3 key life events (pregnancy, birth, and 6 months) for each 1000-day family

A total of 1323 key life events were celebrated out of 2238 planned in this fiscal year 2019/020. A total of 11776 community members 10284 female and 1492 male have participated in the celebration. They were benefited and counseled during the key life events. The 1000 days mothers were chosen by HMGs and

FCHV's. Key life events were celebrated in the presence of FCHVs and community members and they promoted the key message of women nutrition exclusive breastfeeding, complementary feeding, hygiene behaviors, HMG/HFP during the



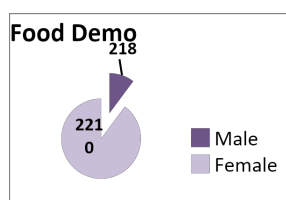
celebration. A small gift pack of nutritious four types of foods like ghee, fruits, eggs, vegetables and hygiene kit like nail cutter, soap etc. were provided. It has been observed that the participants involving in celebrating the event are inspired for changing their behavior related to health and nutrition.

IV. FS/CNV makes specific visit to FCHV led HMG for conducting a food demonstration, separate from the calendar-focused or SATH visits

Total of 459 Food Demonstration events were conducted out of 842 planned in this fiscal year 2019/020 A total of 6220 community members 5645 female and 575 male have participated in the food demonstration. Participants were learned about preparation of nutritious meal from local available food. After food demonstration



health mothers group has been regularized and locally available food has gained its importance and practice of feeding. FS sand CNFs were promoted to listen of Bhanchhin Aama radio program in the food demonstration.



V. FS/CNV identify children with Moderate Acute Malnutrition (MAM) cases and counsel them on child feeding and care and trigger family members to engage with Suaahara II and GoN platforms, especially HMGs to discuss with other families and FCHV



A total of 15 MAM case babies were triggered out of 200 planned in this fiscal year 2019/020. A total of 166 community members 145 female and 21 male have participated in the program. FSs, CNVs and FCHV were find out MAM case baby and called their family and members in healthy mother group meeting. They were triggered and counseled their family during the HMG meeting and FCHV's. They were triggered about the key message of exclusive breastfeeding, complementary feeding, feeding BAL Vita, hygiene

behaviors, diversity food, water purification and hand washing in critical times. A small gift pack of nutritious four types of foods like ghee, fruits, eggs, vegetables and hygiene kit like nail cutter, soap etc. were provided. It has been observed that the participants involving in event are inspired for changing their behavior related to health and nutrition.

Peer Facilitator Training

The peer facilitator one day follow up training was organized by KCDC-Suaahara for 1000 day mother Peer Facilitator and FCHV in three Rural Municipalities as in Tadi (Raluka), Suryagadhi (Lachyang) and Dupcheshwor (Rautbesi). The follow up training was scheduled and concentrated on distinguished topic and the sessions and it was delivered accordingly to the participants. The coverage of the topic was exclusively based o



n experience sharing of 10 key behaviors. More specifically, the deliberation on need of community nutrition facilitator, introduction of 1000 days and its importance, steps of behavior change, steps of effective counseling for behavior change (GALIDRA),

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consumption of diversity food, four times ANC visit, iron folic tablet, appropriate modern family planning contraceptive and breastfeeding. A total 44 female participants were participated in the training.

Iodine month Celebration

An iodine month was celebrated in every year from 1st to 28th February month to activate communities, households, schools, and workplaces as means of focusing to raise awareness about importance and use of Iodine. Iodine month were celebrated by Field staffs of KCDC Suaahara, by conducting food demonstrations, as key life event, HFPB meeting and FCHV meeting, HMG meeting and tested presence or absent of iodine in salt by using iodine test kit.

INTERMEDIATE RESULT 2: INCREASED USE OF QUALITY NUTRITION AND HEALTH SERVICES BY WOMEN AND CHILDREN

MNCH/GESI officers and NSBC officers provide participatory interaction meeting and on-site coaching (post training follow-up) at health facilities including OTCs to enhance knowledge and skills of health workers on CB-IMNCI, MIYCN, NACS, IMAM, PHC-ORC mgmt

The supportive supervision and site coaching of CBIMNCI were conducted in two health facilities and Health Office of Nuwakot to discussing on key points and affected factor to health facilities and services. Program was conducted in Jiling, Fikuri and Khadgabhanjyang health facility and Health Office was supported by selecting the program venue and participants for the program. Program interaction was focused to discuss on poor CBIMNCI related indicators' improvement. The program was supervised by Mr. Janardan Silwal - Health Coordinator of Nutrition Section of District Health Office and MNCH and GESI Officer and Field Coordinator were involved with the team in the training. The facilitation service and class orientation were provided by the team in the health post on concern matters and objectives. The program was very effective and fruitful discussion for participants and community. During the visit HMIS 2.4, 2.3, 4.1 and 9.3 were verified every indicators. It was found various findings as management related aspect, as record files and reporting documents, counselling events and progress, follow up record of follow-up visit and scheduled reports.



Onsite coaching of CBIMNCI at Khadgabhanjyang HP

The interaction program was concentrated with Health Post staffs to discuss on rule and norms of Health Post supervisory-guideline and regulations. The discussion was focused on each PHC/ORC, CBIMNCI register, Nutrition and Family planning register books and record files. They were asked the health facility staffs to keep proper record and reports of each HMIS register regularly and maintain files.

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In order to track for conducting monthly meeting in health facility center before preparing monthly HMIS report and even all agreed on it, all health post In-charge was consulted. The discussion was held in proper location about the health facility where all participants are interested and involved on it. At the end of the supervision. An action plan was prepared, so that it has helped us for findings and improving our gaps lapses. Action plan was become a precise road map for related personnel to maintain record files and reporting of all HMIS register to concern departments and it is continued after the this sessions.

FS visits each HMG to follow-up on SATH

KCDC Suaahara has conducted non budgetary activities in this fiscal year under norms and objectives of USAID funded Suaahara Program in Nuwakot District. 93 SATH follow-up programs were conducted in various wards of 12 palikas of Nuwakot throughout the district. It has been conducted in the lead of FCHV and in presence of the respective HMG where technical supports were provided by field supervisors (FSs) and Community Nutrition Volunteers (CNV) of Suaahara in respective community. During the follow up visit, FSs and CNVs have updated and applied the different indicators with SATH technique and helped 1000 days mothers and inclusion of new 1000 mother's members in SATH technique and discussed about the health services utilization behaviors of community people and barriers in utilizing the health services.



SATH Update

HMG visit other than SATH implemented.

A total 96 HMGs's meetings were organized and attended in program community. They were followed and used of HMG calendar during the meeting. The supports were provided to HMG members by FS and CNV. They have supported in organizing and also in facilitation of the meeting. Similarly, they have helped the members in record keeping of their monthly savings.



HMG Meeting monitoring by ED-Tanka Lama at Likhu

PHC/ORC monitoring and onsite coaching

Health facilities were extended up to village level. However, utilization of services provided by health facilities, especially preventive and promotive services, has been found to be limited because of limited accessibility. Therefore it was felt that services should be expanded closer to the community. Thus Primary Health Care Outreach (PHC/ORC) services was initiated and established in 1994 (2051 BS). Suaahara Nuwakot has planned follow up monitoring of PHC/ORC one times in every month by every Field Supervisor. The main objectives of this PHC/ORC monitoring is to improve access to some basic health services including family planning, child health and safe motherhood closer to rural households. These clinics are the service extension sites of PHCCs, HPs and up to community level. FS and CNV were followed 266 events PHC/ORC monitoring.



Growth Monitoring in Chaughada

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Support to EPI clinic.

A total 345 EPI clinics were attended and supported by FS and CNV. They were counseled 1000 days mother and their families about consumption of diversity food mother and baby, intake iron folic acid, ANC checkup, growth monitoring, exclusive breastfeeding, complementary feeding, sick child feeding, ORS and zinc tablet, hygiene behaviors, water purification and hand washing in critical times during EPI clinic.

FC and MNCH/GESI and NSBC Officers coordinate with government/municipalities to distribute health and nutrition equipment and supplies

Health Office Nuwakot had a yearly plan and they had decided to distribute the NACS materials in health facilities for 2 Municipalities and 10 Rural Municipalities of Nuwakot district. The NACS materials were distributed to 2 Municipalities and 10 Rural Municipalities of the district by Field Supervisors and Community Nutrition Facilitators of Suaahara Program in cooperation and partnership with Health Office Nuwakot. Necessary management support was provided by KCDC Suaahara for NACS materials distribution in 12 M/RM of Nuwakot district. The 12 Palikas and community have been so far benefited from the support of KCDC Suaahara Program.

FC, MNCH/GESI officer and NSBCC officers' support, Provides CHSB follow up and technical assistance to municipal-level health coordinators, HFOMC members, Health workers and FCHV

CHSB follow-up program was conducted in 2 palika as in Sallemaidan HP of Shivapuri Palika and Chaughada HP of Likhu Palika. CHSB follow up program was conducted in presence of all health facility staff and HFOMC member and the FCHV were involvement in the program and with including health facility personnel and 1000 days mothers were participated in the program.



In coordination with M/RM and health coordinator the date and venue were fixed and confirmed for conduction of CHSB follow up program. The all Ward Chairpersons, Health Coordinator, Health worker, Community Stakeholders, Palikas's Working Committee Members and FCHVs from DAG

community were informed and invited by the health facility – Health Coordinator for attending meeting. It is stagnated with the problem of Lockdown and Covid – 19 in Nuwakot.

2 CHSB follow up meetings were conducted in 2 palika as in Sallemaidan HP of Shivapuri Palika and in Chaughada HP of Likhu Palika. The health facility personnel, HFOMC member and the FCHV were participated in CHSB orientation program to discussing on situation of health facility, follow up action, planning for next year and how to improve the status of pregnant women, lactation mothers and under 2 years age children, health and nutrition indicators of the district and community in Nuwakot district.

INTERMEDIATE RESULT 3: IMPROVED ACCESS TO DIVERSE AND NUTRIENT-RICH FOODS BY WOMEN AND CHILDREN

Provided support to Homestead Food Production Beneficiaries (HFPB) Group and training follow up -FS/CNV

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KCDC has been implementing homestead food production program under Suaahara Program II. The main objectives of the HFP are consumption of fruits and vegetables and animal source foods for improving health and nutrition outcomes of women and children in participating households. HFPB group were facilitated by VMF and support was provided to organize meeting by Field Supervisors and Community Nutrition Volunteers in their working field. HFPB group has helped to diversity food production in their kitchen garden, poultry rearing, IYCF and MIYCN counseling, hand washing in critical times, promotion of bhanchhin Aama Radio program, consumption of diversity food and animal source food their child and mothers and to help them for improving the nutrition status of 1000 days children and mothers. The VMFs were monitored and supervised the activities of the program by 29 times by Field Supervisors and Community Nutrition Volunteer over the period and seasons of the years throughout the district in Nuwakot.

FC and HFP officers in coordination with municipality-level Agriculture/Livestock coordinators, conduct follow-up meetings with previously oriented HFPB group/VMF network on resilience action plan

Follow up meeting and VMF network meeting was conducted in Panchakanya Rural Municipality on 19 December 2019 for supervision and monitoring of program.

The Health Facility Personnel, HFP and Marketing Officer- Ms. Pragati Kandel and Field Coordinator Hari Lama were participated in the program and they had discussed about the progress of program activities, present situation and problem, need and implementation of previous year's action plan and analysis of benefits, identify of risk, solution of disaster risk reduction, identify source of VMF network capacity like human, social, physical, economic and natural capacity. In last, irrigation pipe, drum and mulching plastic. The materials were distributed to VMFs



network group by Suaahara Program in free costs for collective farming in community in Panchakanya Palika of Nuwakot district. Community has been so far benefited from the activities of this program.

HFP/M Officers/PC conducts review meeting with district and municipality-level government and non-government agricultural and livestock stakeholders

Review meeting was held in Hotel Square, Battar on 21 January 2020 with District level Government organizations and Municipality Level Governments and non-government agriculture and livestock stakeholders. An organization chiefs and representatives from Agriculture Knowledge Center, Livestock and Veterinary Hospital, Agriculture Offices of the Palikas and Livestock Offices of the Palika and USAID funded Program KISAN Project were participated in the program on discussion of SWOT of the program in the district. The Review meeting was anchored by Feld Coordinator – Mr. Hari Krishna Tamanga. Thanks, welcome greetings and objectives KCDC Suaahara were expressed to the participants of the Review Program by the Executive Director Mr. Tanka Lama and aims of the program was shared with the participants by Program Coordinator Mr. Arjun Aryal. Program budget and financial statements were presented and share with the participants by Finance and Operation Officer Mr. Pralad Adhikari and Admin and Finance Officer Mr. Hari Bahadur Dangol. Review meeting was facilitated by HFPMO- Ms. Pragati Kandel, PC- Mr. Arjun Aryal, and FC Hari Tamang. Bellow the following topics were discussed and thresh out in the review meeting.

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- Sustainable approaches-Support local government and community capacity development, systems strengthening, and cost effective approaches to help ensure nutrition improvements are sustainable over time.
- Accountability and transparency - Commit to ensuring openness and full, accurate, and timely disclosure of information and communication on a regular basis.
- Equity - Commit to reaching urban and rural populations, ensuring coverage for the poor and hard-to-reach regardless of gender, class, caste, ethnicity, or sexual orientation.
- Gender equality and female empowerment - Support the core development objective of promoting gender equality, working with women and girls and men and boys to support change in attitudes, behaviors, roles, and responsibilities at home, in the workplace, and in the community; and female empowerment: promoting the ability of women and girls to act freely, exercise their rights, and fulfill their potential as full and equal members of society. Next year programs will be designed with a gender lens and a focus on improving women's nutritional status in deep and more concentration.
- Vulnerable groups - Target resources and programs to the most vulnerable populations including women of reproductive age, pregnant and lactating women and their children in the first two years of life (the 1,000 day window of opportunity), children under five, children in adversity, adolescent girls, people with disabilities, people with infectious diseases, people with nutrition-related non-communicable diseases, people impacted by humanitarian crises, and people living in extreme poverty.
- Resilience: Support programs and policy actions that ensure the ability of people, households, communities, countries, and systems (social, economic ecological, and other) to mitigate, adapt to, and recover from shocks and stresses in a manner that reduces chronic vulnerability and facilitates inclusive growth. These efforts will focus on people and places at the intersection of chronic poverty and exposure to shocks and stresses who are subject to recurrent crisis.
- Evidence-based - Support evidence-based nutrition programming based on rigorous research and field application; strengthen evaluation and learning; increase the documentation of implementation successes and failures; and disseminate best practices and apply lessons learned throughout the Agency and district-wise nutrition community.
- Coordinated multi-sectoral approaches - Promote and strengthen coordinated planning and programming across sectors (health, agriculture, water, sanitation and hygiene (WASH), environment, early child care and development, education, economic growth, and social protection) as well as geographic convergence of multi-sectoral interventions/services to address the multiple causes of malnutrition.
- Local government and community stakeholders' interest and partnerships - Government agencies and civil society and implementing KCDC Suaahara Program to ensure coordinated efforts and maximize the expertise and resources across organizations throughout the district and Palikas.



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- Engagement with the private sector - Promote the substantial engagement of the private sector district-wise and in Palikas and support increased coordination between the public and private sectors.

"Interactions meeting among municipal agriculture and livestock coordinators, local private stakeholders, HFPB group members, VMFs and LRPs to promote nutrition sensitive agriculture practices, discuss HFP related issues, identify solutions and build linkages with local government and other stakeholders"

The interaction meeting was organized in HFPB group 'Mahakali Devi Krishak Samuha' of Shivapuri RM on 18 February 2020. Group members, VMF, SPII staffs, community people and Agriculture and Livestock Coordinators from RM and ward no. 4 and SPII staffs (total 32 participants -Male 18, Female 14) 32 were participated in Interaction Meeting. Program agenda was focused on Introduction and Objective sharing by Facilitated by Field Supervisor, Brief description of the HFPB group and Facilitated by group chairperson, Experience sharing by VMF and discussions on problems, challenges and way-out and Discussion with Agriculture and Livestock Technicians on the concern matters and situation in the area.

The meeting was focused on improving their existing food production system to help them increase availability of nutrient-rich foods. Additionally, Suaahara II provided training and feedback services on group management and saving credit to 1000-day mothers. HFP group members who were graduated 1000-day mothers from Suaahara I in the district to



enhance their capacity and institutionalize HFP groups. Motivating them to grow diverse range of vegetable throughout the year. Additionally, different initiatives were taken to promote orange-fleshed sweet potatoes (OFSP) for its nutrient value (Vit A-Beta carotene) and market potential. The team distributed OFSP cuttings (planting material) to selected VMFs and FCHVs in the Palikas, as OFSP harvesting.

Suaahara II provided technical support to VMFs to establish OFSP nurseries and generate income by selling OFSP cuttings to 1000-day households. Nuwakot piloted OFSP group farming in coordination with rural municipalities. Suaahara II service is to increase the availability of eggs at the household level, Suaahara II provided technical services to promote and improve poultry FCHVs and households in the 1000-day day period in 12 Palikas in the district.

In the meeting and discussed key issues such as identifying potential agricultural markets, listing existing agri-markets, identifying possible solutions to boost efficacy of haat bazaar/collection center effectively. The discussion was taken place on weighing machines, vegetable crates, trays, record books, plastic super storage bags, and calculators to the group to help them connect with small producers. The support has helped increase marketing skills of small surplus producers to keep vegetables in crates safely minimizing produce damage, measurement accuracy, and increasing produce life. At the district level, Suaahara II organized a half day interaction workshop among value chain actors (producers, buyers and traders) to discuss potential linkages with small producers.

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Formation of VMF network in Likhu

The network of Village Model Farmers (VMFs) is formulated on 13 December 2019 in Likhu Palika for program extension, mainly involved technology transfer, with the village extension worker (VEW) for transferring knowledge from farmers by using individual, group, and mass media methods. More recently, extension has been asked to play a "technology development role" by linking research with community group needs and helping to facilitate appropriate technology development. It is in the historical context that many local government agencies, developed group policies for rural development and designed a policy framework to help rural people become organized so that the delivery of services could be channeled through the various types of farmer organizations or groups.

Suaahara has provided a well-meaning policies also print and technical support for farmer organizations (FO) in the form of cooperatives and commodity organizations in order to provide various input, marketing, and educational services to the farmers. Targets for forming groups and farmer organizations were given to VEW. Training was provided them properly in the theory and principles of community organization. VEWs did not have many skills and not much experience in the process of establishing these organizations.



VEWs in many communities lack knowledge, skill and policies, and high targets, they resorted to shortcut methods to establish farmer organizations and groups. Many VEWs presented government policies in an oversimplified way to rural communities, suggesting that unless they are organized into cooperatives or associations or groups, they will not get government subsidies or access to credit and technical services. As a result, several FOs were established overnight on paper. Many FOs remained active during the period that government subsidies were distributed. Aims of VMF Network is to actively create cooperatives or partnerships and mobilize local resources to help achieve agricultural development. Mostly the elite of rural communities captured all of the services and resources, while the poor and women were left out or received little benefit. Very few attempts were made to develop the management capacities of FO leaders, their members, and VEWs. Community organization and facilitation skills will be part of staff training program.

The prototype approaches to organizing farmers and forming cooperatives need to be revised to meet the following development challenges of the community.

- The decreasing absolute and relative poverty in many households
- The protection of degradation of natural resources such as soil, water, flora, and-fauna
- The high active involvement of women in health, agriculture, and other development program
- The improvement poor health nutrition and education facilities in rural areas
- The increasing solidarity and common sharing among the communities

A VMF network including VMFs of all wards of RM was formed in chairmanship of Tulasa Nepal. The main objectives were to increased livestock and vegetable production as well as sharing the technology of cultivation among the groups and linking with local government to receive benefits and grants.

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INTERMEDIATE RESULT 4: ACCELERATED ROLLOUT OF MNSP THROUGH STRENGTHENED LOCAL GOVERNANCE

KTM team, PC-Province Focal Points and technical officers lead with support from resource persons will roll out "Sustaining nutrition and health interventions at local level" workshops at municipal-level to advocate for nutrition and guide local-level action plans for improved/sustained implementation of both nutrition-specific and nutrition-sensitive activities

The Two days sustainability workshop was organized in Likhu Rural Municipality (RM) by KCDC Suaahara on 4 March 2020 for preparation of handover of local government ownership and program sustainability for long run. The program was chaired by Mr. Druva Shrestha – the Chairperson of Likhu Palika (Local Government – Chief) and other distinguish participants as Vice-Chairperson, Ward Chairpersons, Village Council and Executive Committee members of the Palika, the Chief Administrative Officer, chief officers, thematic officers from Local Government (Palika) Agencies as Health, Agriculture, Livestock, Education, Women and Children, INGOs, NGOs, CBOs, health workers, FCHVs, LRP and VMFs and Board Members of KCDC were participated in the program. The program was taken first-stepped by lighting the candle by Chairman Mr. Druva Shrestha in the inaugurating ceremony of program in Likhu Palika.



CAO of Likhu RM- Suraj Aryal presenting on implementation guideline of local level

The lead role was played in the workshop program conduction by Mr. Bhim Rokka- Health Coordinator and welcome to distinguish participants by Social Development Officer Ms. Parbati Upreti. She had expressed on importance of maternal and child health nutrition and contribution of Suaahara. It is very essential to improve nutrition status of women and children in the Palika, she said. Mr. Arjun Aryal – the Program Coordinator of District Suaahara Office has highlighted and addressed to the importance of nutrition and Golden 1000 Days and integrated approaches of Suaahara II in the district. He has shared positive outcomes and to affecting factors to the health and nutrition. Progress and problem/issues were shared with Palika and participants by Mr. Arjun Aryal in the program through his presentation. In the program Action Plan was prepared and presented to the Palika for handover ownership for program sustainability.

Mr. Tanka Lama – Executive Director of KCDC Suaahara Program extends cordial and sincere thanks to the USAID, people of America, Helen Keller International (HKI) and consortium partners Helen Keller

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International (HKI), CARE, FHI 360, Nepali Technical Assistance Group (NTAG), Equal Access Nepal (EAN), Environment and Public Health Organization (ENPHO), Vijaya Development Resource Centre (VDRC), all team members of Suaahara II, District Suaahara Team, Palika chairman, vice-chairman, ward chairpersons and members, chief administrative officer, Local Government Agencies' chiefs, focal persons, officers, coordinators, thematic officers and personnel, FCHVs, community stakeholders, HMGs, VMFs, CBOs, teachers, community leaders and people in the project area in Likhu Palika in Nuwakot district in deserve special thanks for their committed involvement in the implementation of project activities and it's all staff members and board members on the implementation of its "Suaahara Program II. All the Facilitators and staff members of KCDC and HKI and professional members of the organization to deserving appreciation for their excellent cooperation, contribution and performance in carrying out the Activities of the project. The community members, several organizations/agencies/networks and individuals have supported our initiatives and activities. The supports are of different kinds and magnitude varying from moral, technical, material and financial. We pay tribute to all as every segment of supports have contributed significantly in strengthening the capability of KCDC Suaahara Program to perform and survive as women and children service oriented NGO in vulnerable community for improving health and nutrition status of pregnant women, lactating mothers and the children under 2 years age.



Mr. Pralad Adhikari – Finance and Operations Officer, Mr. Bharat Shah – WASH Promotion Officer from Suaahara District Office and Mr. Hari Bahadur Dangol – Admin and Finance Officer from KCDC Suaahara were attended the program and they had addressed the issues by providing financial aspect and budgetary norms in the program. In day second, presentation was displayed by Mr. Tamang -Field Coordinator of KCDC suaahara on Suaahra Program activities. During time, formation of group

as in the name of health, nutrition, agriculture and livestock, WASH, Education, GESI, and Policy for preparation of Action Plan. It is prepared on the base of identified problem/issues in thematic sectors for improving it. The presentations were displayed by every groups for threshout and discussion. All displayed and presented action plans were summarized by Mr. Arjun Aryal – Program Coordinator and other thematic persons for compiling of Plan of Action for next year and to submit it in NFSSC Committee of Likhu Palika. The Action Plan was decided and sanctioned by the Meeting of NFSSC Committee of Likhu Palika in the day. The chairperson, vice-chairperson, ward chairperson and members, local government agencies personnel, Heath Coordinator and all participants are committed by taking oath by reading the promise and commitment papers and manifesto statements to continue all activities of Suaahara after phase-out Suaahara Program in Likhu Palika in Nuwakot district.

In the final remarks of the program, Mr. Druva Shrestha – Chairman of Likhu Palika extends cordial and sincere thanks to the USAID, Helen Keller International and KCDC Suaahra for improving health and nutrition status of pregnant women, lactating mothers and the children under 2 years age in Likhu Palika. And I would like to request the UDAID, HKI and KCDC to continue the program in Likhu Palika in coming days and we are committed to adopt similar health and nutrition program and allocating the budget the running of the committed program activities in this Palika, he says in the end of program.

GESI Tools used in household visit and community level activities.

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GESI tools like motikhel, samasyabriksha, sahamatasahamat, karyabojh and samaya dairy were used by FS and CNF for facilitation and discussion. The GESI tools were used mostly in key life event celebration, HMG meetings, food demonstration, HFP meeting, WASH Activities, bhanchhin aama listener group meeting, SATH follow up and house hold visit. FSs/CNVs were provided family planning massage and intake zinc and ORS tablets for diarrhea diseases by using FP method game. Participants were sensitized fact and myth of family planning method Participants have appreciated these kinds of tools as its easy way for discussion and understanding the topics.

MNCH/GESI officers and NSBC officers hold follow-up meeting with and mobilization of GESI champions on GESI and orient them on resilience

One day review meeting was organized in Hotel Square, Battar, Nuwakot on 10 December 2019 for male GESI Champion to gain the ideas and knowledge on GESI practices. The participants from different place, locality and community of Nuwakot district were participated in the program. The review meeting was successfully completed and the participants were in the program as 10 male GESI champion and 8 field supervisors. The meeting was facilitated by MNCH GESI Officer-Ms. Indira Khadka, GESI Expert- Ms. Sujata Shinh, Program Coordinator – Mr. Arjun Aryal, NSBCC Officer – Ms. Rekha Lama and Field Coordinator Mr. Hari Tamang and program was focused on changing mind and changing lives.



Executive Director- Tanka Lama addressing his valuable view

During the Review Meeting, the outputs and outcomes of last year's training were reviewed by MNCH GESI Officer- Ms. Indira Khadka and GESI Expert -Sujata Shinh and Review Meetings was conducted by interaction with participants on bringing it in practices as sharing experience, socialization, hegemonic masculinity, power structure, understanding of family structure, and role of male in society, social norm and value, skill of communication, need and role of gender, 10 key behavior of suaahara and change of agent.

FC with district team collaborate with local level stakeholders at municipality level during the 16 days of activism campaign and international women's day, highlighting GESI champions

The 16 days of activism against Gender-based Violence Campaign was celebrated in respected program areas under mission of the international campaign which is organized each year starting from 25 November (International Day for Elimination of Violence against Women) to 10 December (Human Rights Day).

The theme of the 16 Days Campaign is “Generation Equality Stands against Rape”. In coordination with Local level government, Nuwakot like Tadi, Suryagadhi and Shivapuri we have celebrated 16 days activism against Gender- Based



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Violence campaign. On 10th December. And we are participated in District Level Campaign program.

PROJECT MANAGEMENT AND OPERATION

Human Resources

The enabling environment:

KCDC has been conducted the broad social system within which people and organizations function. It includes all the rules, laws, policies, power relations and social norms that govern civic engagement in the organization. It is the enabling environment that sets the overall scope for capacity development.

The organizational level:

KCDC has amended and updated the internal structure, policies and procedures that determine an organization's effectiveness. It is here that the benefits of the enabling environment are put into action and a collection of individuals come together. The better resourced and aligned these elements are, the greater the potential for growing capacity of the organization for service delivery, transparency, effective, accountability and integrity.

At the individual level:

KCDC has been organized and conducted capacity building training, seminars and workshops for board members, advisors, staff and volunteers. The purpose of the training is to gain and sharing ideas, skills, experience and knowledge that allow each person to perform. Some of these are acquired formally, through education and training, while others come informally, through doing and observing. Access to resources and experiences that can develop individual capacity are largely shaped by the organizational and environmental factors described above, which in turn are influenced by the degree of capacity development in each individual to the capacity guideline of the organization.

i.	Executive Director	- 1
ii.	Field Coordinator	- 1
iii.	Admin and Finance Officer	- 1
iv.	Field Supervisors	- 14
v.	Community Nutrition Volunteers	- 24
vi.	Project Office Support Staff	- 1
Total		42

PNGO leadership will facilitate district-level Program Advisory Committee (DPAC) meetings

KCDC Suaahara organized District Project Advisory Committee (DPAC) Meeting for sharing organizational and Program Progress Review with the participation of related stakeholder at District Headquarter in Bidur on 14th December 2019. The program was organized with the chairmanship of Mr. Santaman Tamang (Chief – District Coordination Committee - DCC), and Mr. Tamang was chief guest in the program. The vice-chief of DCC and members of DCC, government agencies' chief and officers, representative and chief from district stakeholders were participated in the program. Welcome speech was presented by Ms. Vice-chief Ms. Apsara Thapa. The program was facilitated by ED Tanka Lama from KCDC Nepal. This report gives the overview on two aspects: 1) First, it gives project



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introduction, clear overview, working modality, monitoring mechanism and role of DPACC member, stake holders on how to integrate or collaborate in project activities at Project Palikas. 2) Secondly; it suggests some key recommendation for project implementation based on the discussion with district level stakeholder, related concern and political leaders field experiences on field basis.

DPAC meeting was organized for DPAC member as well as political leaders and district stakeholders, journalists and local people who have been selected to integrate, collaborate & facilitation to implementation and monitoring and evaluation of the KCDC handled projects support in their respective setting.

In this very setting, particular consideration was given project implementation methodology, roles and responsibilities of DPAC members to make sure that stakeholders and participants could understand projects strategy, methodology & intervention and their roles and responsibilities in district level and Palika level. The important aspect of the workshop was used of the participatory methodology where participant were given more time to speak and provide their recommendations on the contextual setting to operation of the project.

PNGO leadership will facilitate district team meetings with FS, CNVs, CWVs etc for review of findings from QA visits, monitoring data and planning

Quarterly review and planning workshop was organized by the Partner organization of Suaahara i.e KCDC to its staff at Hotel Square on 23-24 October 2019. The duration of the workshop was two days where all the participants took part enthusiastically. All the participants were provided the handout of the presentation and implementation guideline. The workshop was represented by District/PNGO team and FS/CNVs of Suaahara.

Objectives

- *Adapt cross learning opportunities for program replication reviewing the year III program achievement and good practices as initiatives at local level*
- *Develop common understanding on plan and priorities for year IV ensuring its quality implementation follow up*
- *Make consensus on sustainable actions to advocate at local government level using evidence-based advocacy (using MTE and HH checklist findings on 10 key behavior and 60 contact points) as well as prioritized small doable action for long term impact*
- *Develop semi-annual action plan for field implementation with proper and needed follow up support to ensure accountability and progress tracking*

Proceeding of the workshop session

The opening session of the workshop was conducted formally by Field coordinator Mr. Hari Krishna Tamang. It started with the chair and welcome remarks by Mr. Tanka Lama-ED after this; Mr. Arjun Aryal was briefed objectives about the workshop. He gave a brief presentation on status of 10 Key behaviors and 60 contact points and suggested to focus in this year too based on the result of



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CMC; he highlighted key priority and plan of year IV. He reinforced to focus within focus in year IV.

The activity started with group work of FS/CNVs to present target versus achievements, lesson learned, issues/challenges, case story/success story of their respective RMs. The groups were given 2 hours for discussion and preparation for presentation which was followed by presentation of FS and CNF. After the presentation, feedback and way out for the problems _____ were given by KCDC and sub-office team. Discussion was quite interactive and fruitful to both parties. After the group work, Mr. Hari Krishna Tamang was sensitized about of implementation priorities on year IV and briefed about pregnancy update, FS/CNV tagging, e-diary and other e-reporting system. Ms. Rekha Lama-NSBCC officer was discussed on IR 1.1. She was discussed of Plan, Priorities, challenges and key consideration for year IV program implementation at all level (HHs, Community, Service outlets). At last, activities to be implemented in Year 4 (DIP orientation) and how to execute the activity at community level with the help of implementation guideline was presented and discussed in the last session. An overall activity of the day was review by PNGO and Sub-office team.

The second day started from review of first day. After the review, Mr. Bharat Shah-WASH Officer was



discussed of IR1.2 and concept of the total sanitation and healthy home was presented. A checklist of healthy home was discussed clearly and issues were addressed. Similarly, Ms. Rekha Lama was presented about IR 2 related activities and discussed it. And then Ms. Pragati Kadel HFPMO was presented IR 3 related activities review and orient of year IV activities. Similarly, Mrs. Arjun Aryal-Program coordinator was emphasized on local level initiation and budget allocation on

nutrition program. He was focused on visit side selection and discussion with respected RM FS/CNVs. He strictly order to FS/CNVs make visit side minimum 2 side near road assess. NSBCC Officer-Rekha Lama was facilitated about importance of MUAC screening, orient of MUAC tape, SAM and MAM case babies and pregnant women. She was demonstrated and measured of baby by MUAC Tape. In last session, Finance and Operational procedures and field level issues were shared by Finance and Operation Officer, Mr. Prahlad Adhikari. After this orientation, In addition, the queries of participants were also addressed. An orientation on new form/format of monthly progress report was explained for clear and uniform understanding. In addition, quarterly work plan along with targets for second quarter was shared by FC. In closing session, some view and home take massage was shared by Mr. Arjun Aryal-PC. Tanka Lama-ED was given suggestion and motivation to be success and effective implementation of year 4 activities and he put some valuable remarks and closed the event thanking to all for their support and cooperation to make the event a grand success.

FC will facilitate review and planning meetings with FS, CNV, CWV, FCHVs, VMFs, LRP, GESI Champions, PFs etc

Review and planning meeting were conducted in 5 Palidas as in Likhu, Shivapuri, Myagang and Panchakanya Rural Municipality and Bidur Municipality. Total 23 participants 7 female and 16 male have

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participated in the program where Review and Planning Meetings were facilitated by Program Coordinator Mr. Arjun Aryal, Admin and Finance Officer Mr. Hari Bahadur Dangol, Finance and Operations Officer Mr. Pralad Adhikari, Mr. Hari Tamang Field Coordinator and Mr. Tanka Lama During the meeting; progress target vs achievement of plan activities, best practices and changes in community, problems, and issues challenges faced, possible solution and lessons learnt were shared.

Review and planning meeting was focused on find out deeper understanding of the linkage between the community and program implementation, impact, and challenges in Nuwakot. Despite the challenges, all the stakeholders acknowledged that the Suaahara program had positive impacts on 1000 days mothers, stakeholders and communities. Our findings highlighted that stakeholders from all tiers should coordinate, collaborate, and continue their efforts to effectively implement and expand the program district wide. Awareness campaigns and advocacy for the program are indispensable to pull more resources from relevant stakeholders.

Organize agri and nutrition fair in Nuwakot Mahotsab

Suaahara Nuwakot established Agri-Nutrition Corner and Stall in Nuwakot Mahotsab (Fair) from 30th January, 2020 to 9th February, 2020 in coordination with Health Office Nuwakot. The aims of corner and stall is to give information regarding the overview of Suaahara II and its activities in health and nutrition aspect. With different activities as agriculture and nutrition fair was conducted successfully. Following activities were demonstrated in the fair on health and nutrition promotion.

Demonstrate 4 food groups

- MUAC Screening of under 5 year children
- Demonstrate SBCC materials
- Counseling of MIYCN and IYCF for 1000 days mothers and their family



Demonstrate 4 food groups:

Agri-Nutrition Corner and Stall is a best platforms in the Fair for disseminating the message regarding the nutrition. So, Suaahara district demonstrate the 4 food groups to promote “*Harek Bar Khana Chaar*” in Nuwakot mahotsab. All people those who have been visit the stall and they are informed regarding on health and nutritional ideas and knowledge. The audiences of the Mela (Fair) know very well on importance of health and nutrition for pregnant women, lactating mothers and children under the age of 2 years.

Phone Counseling of Covid -19 and Coordination local level and health sectors during lock down Summary:

The Government of Nepal has announced the national wide lockdown in the country. In this context, solution for the critical time, the Suaahara Central Office has made a possible option and alternative way to continue work in vulnerable community in Nuwakot district in respective working area from home and by phone based counselling with the 1000 days mothers, other households, FCHVs, Health workers and community people at local level for raising awareness and up to dated data on prevention and controlling

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of Covid – 19 in the district accordance with policies of the organizations. From the date of 8 April 2020, Suaahara Nuwakot has been implemented COVID – 19 Prevention and Control Program in respective all working Palikas and community of Nuwakot throughout District under the guideline of Suaahra Central Office and Suaahara Sub Office Nuwakot.

During the period, non-budgetary activities were implemented in the respective working community. Although, scheduled and anticipated program activities is not completed in respective working areas in the district, due to the problem of Lockdown in the district. With many businesses and government services closed, there is limited access to support services. Police blockades and a lack of public transport are also making it difficult for those seeking medical attention. Documents were collected through social media platform and some hard copies were collected from some palikas. Beside the challenge of COVID-19, we have successfully conducted following activities during this quarter.

Thus, in Nuwakot, Suaahara has taken the initiative to prevent the spread of the virus among non-essential workers, daily manual workers, children, pregnant and lactating mother in our program area and among in Nuwakot district in poor areas by:

- Provided 1000 days mothers and children with information about how to protect themselves
- Provided hygiene kits and promoting best hand-washing and hygiene practices
- Cleaning and disinfecting knowledge, especially 1000 days mothers, water and sanitation awareness
- Provided food parcels containing basic food items to help mitigate poverty and support vulnerable pregnant women and lactating mothers by KCDC in support of Freedom Fund

1. Phone counseling at field to HHs and community platform:

Suaahara Central Office has been developed and shared the guideline and methodology, Suaahara Sub office and PNGO were discussed about guideline and methodology how to implement the program activities, during the lockdown in the district. We provided guidelines and orientation to the field staffs via phone call and social media like messenger group and viber-meeting. Objective of phone counseling is to give awareness and psychosocial support counselling to 1000 days mothers on prevention and control of Coved – 19 in working community.

The field staffs are alert in position to find out and identify vulnerable and affected households (HHs) from hunger and famine poverty. Suaahara staffs have been helped the vulnerable households and 1000 days mother's family and no food and hunger affected family to link and contact with Local Corona Control and Management Center (LCCMC) of Local Government (Palika) for Covid – 19 Relief and Support. So many households as Covid – 19 lockdown affected and vulnerable 1000 days mothers' families have been so far benefited from the help of Suaahara staff in vulnerable community in Nuwakot district.

In other side, Suaahara staffs have provided ideas and knowledge to 1000 day's mothers and their family members and other household through phone counselling as per the guidelines;

1. General family: Indicate with green color

2 Return foreign country: Indicate with yellow color

3 Suspected and infected person and family: Indicate with red color

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The Field supervisors and Community Nutrition Volunteers of Suaahara Program have delivered services of direct counseling to 1000 days mothers about on key behaviors and 60 contact points to 1000 days mothers and family members eg. Pregnant mothers have counseled to take iron tablets regularly such counseling has proved fruitful to maintain healthy life of child and mother through phone contacts.

The contacted persons' mobile numbers were collected from field level staffs by every Tuesday via social media and compiled on Wednesday for records and analysis of data on Covid – 19 and for submitting it to concern agencies for information. The weekly compiled phone counseling reports are submitted to Suaahara Central Office and Health Office-Nuwakot and Respective Local Government's agencies in Nuwakot district.

During this period from 8 April-30 June, we are successfully reached as following HHs and detail other information with referral data;

Key achievement of Tele Phone follow-up and message activity April to June 2020

S.N	Non-budgetary Activities (FS/CNV)	Target	Achievement
1.	No of household contacted		28240
2.	No of household with pregnant women counseled		1467
3.	No of household of lactating (mother of <2 years child) mother counseled		7357
4.	No of Health facilities contacted		82
5	of HH worried that food produced by household will run out in next week		3939
6	of HH worried that food household bought won't last for next week and won't be able to buy more		4403
7	No of household refer for support		202
8	No of person come back home from Abroad /India/Gulf		201
9	No of person with fever		254
10	No of suspected case referred		254

2. Identify new 1000 days women during the lock down

Suaahara has conducted the Campaign of the Phone Contacts to give an orientation to 1000 days mothers' households on prevention and control of Covid – 19 in Nuwakot. The field staffs of Suaahara are contact in touch with 1000 days mothers and households by phone. It is identified 1000 days mothers and have phone contacts and entry and keep it into comcare.

3. SMS to 1000 days woman, FCHVs, frontline workers etc.

Different COVID-19 related informatory SMS were send to registered phone numbers of our targeted groups. FCHVs phone numbers, front line workers and other targeted beneficiaries phone numbers were updated during this quarter. During this period from 8 April-30 June, following no of SMS were sent to different beneficiaries.

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COVID – 19 Prevention and Control Awareness Messages are sent to target groups, FCHVs, all beneficiaries and front line workers on mobile phones through SMS Text. The mobile phone numbers of them are updated in main record files from date of 8 April-30 June. It is illustrated in the table of bellow;

S.N	Non-budgetary Activities (FS/CNV)	Target	Achievement
1.	SMS messages to all HHs members		68,534
2.	SMS messages to lactating mothers		11,334
3.	No of SMS messages to pregnant mothers		1,717
4.	No of SMS messages to FCHVs		923
5	No of messages to Suaahara front line workers:		252

4. Update on Suaahara Roster:

A detail information of the Health Workers and FCHVs were updated in roster. FCHVs' consent is taken for sharing the phone numbers and personal information with relevant and related stakeholders. Stakeholders those who need to take an available information of FCHVs through Commcare App for personal and official use. They can receive it from above mentioned apps.

5. Health Facility Follow up:

Health facilities follow-up is done regularly regarding availability of key nutrition and health commodities at Health Facility level and service continuity status. MNP, Zinc, Family Planning services, Vitamin-A another items stocks were assessed during the follow-up visit and expiry date of stock items.

The weekly complied report was submitted to Health Office, Nuwakot for the information and bridge the gaps and lapses by phone contact to Health Posts after completion of assessment of Health Posts in the district. The program and management team of KCDC Suaahra has coordinated with the Health Coordinators for sharing information and experiences with each other for improvement of health and nutrition in Nuwakot district, as following sector;

1. Reduce stunting, underweight, and wasting prevalence among children under five in 40 target districts.
2. Improve household health and nutrition behaviors.
3. Increase use of quality maternal, newborn, and child health services; family planning services.
4. Improve water, sanitation and hygiene behavior and practices.
5. Increased consumption of diverse and nutritious foods by women and their families.
6. Improve the food security of households.

6. Participant in RRT Meeting

Meeting of Rapid Response Team (RRT) was organized in Health Office Bidur by Health Office Nuwakot on 17/04/2020 venue for collecting data and sharing information. KCDC Suaahara has taken part and attend the every meeting of RRT with the main agenda for sharing in meetings of the RRT as following;

Vulnerable and affected - Agenda of KCDC Suaahara

- Highly affected households and poor households

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- Households with no means to recover the starvation on their own and/or with no or little access to income
- Households that are extremely poor (e.g. with the main income earners who are a day laborers or small/marginal farmers, and/or households that are manual labor, landless)
- Households with vulnerable people such as pregnant and lactating women, elderly, disabled persons, and chronically ill persons (physically and mentally) or socially excluded people like affected ethnic minority groups. At least 10% of the beneficiaries shall be people with disability
- Women-headed (separated, divorced, or widowed) households, or child-headed households with no or minimum support or sources of income. In most cases the women/most vulnerable of the family will be the receiver of the food grant at first
- Data for collecting the information on COVID-19
- Counseling program on COVID-19
- Organize network with the officials of key government staff
- Staff orientation on COVID-19
- A regular basis of counseling meeting arranged with the participation of the volunteers groups
- Arranged miking on COVID-19
- Arranged institution meeting for developing Knowledge, Attitude and Practice on COVID-19
- Arrange network on COVID-19 with the participation of Journalist, lawyer, Doctors, civil society, GO and NGO representatives
- Health Care Activities for patient on COVID-19
- IEC/BCC materials distribution on COVID-19
- Ensure safety net of service providers
- Personal protective equipment (PPE) distribution
- Community Radio talk show
- Local Channel Broadcast program
- Food distribution for COVID hit people
- Cash distribution for COVID hit people
- Waste management and clean program

Sharing Data

1. Covid-19 status data and situation of the district and activities carried-out by RRT
2. A Plan of Action for next week

Discussion # 1

July 19 At least 287 people RDT tested and 33 people with positive PCR tested cases in Nuwakot of the district.

Action point #1 HO informed to continue the RDT, PCR test in the district

Discussion # 2

KCDC is working with 27,000 daily wage workers families with food and nutrition to prevent hunger being the biggest killer during the Corona virus pandemic. With non-essential workers and daily wage workers of adult entertainment sector (AES) forced to stay home in Nuwakot to Nepal, most of who live in poverty, are being hit the hardest and the situation is worsening day-by-day as they are caught in a vicious cycle of no jobs, no food and no solution in the near future and lactating mothers, pregnant,

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children, disability and people are vulnerable and affected. With many businesses and government services closed, there is limited access to support services. Police blockades and a lack of public transport are also making it difficult for those seeking medical attention.

In Nuwakot District, This KCDC Suaahara aims to bring an emergency relief during this pandemic lockdown period for affected and mostly vulnerable children and adolescent girls, pregnant and lactating mothers. We have been prioritizing families with over two children within the following target groups. Single mothers, Female headed households, Families with differently abled children, Agricultural workers with minimum wage, Construction workers with minimum wage, Fishermen, Transport related daily wage earners, Casual Laborers.

In our community in Nuwakot district, as poor and deprived people is severely lacking the resources to handle the currently ongoing global coronavirus (COVID-19) pandemic. With the numbers of those infected on a swift rise since lockdown, the government imposed an indefinite like curfew that bans people from leaving their homes in an attempt to contain the spread of COVID-19. This has made the very existence of the families of daily wage earners a huge struggle with starvation. According to the Joint Needs Assessment (JNA) report, lactating mothers, pregnant, children and old people with disabilities are disproportionately affected by this Coronavirus and lockdown.

By adopting different coping mechanisms, also specified in the Joint Need Assessment (JNA), lactating mothers, pregnant, children old people are compromising their personal hygiene practices and reducing daily meal intakes and thus, impacting their health and wellbeing which are mostly owned and nurtured by women, are also eroded. This has impact on household level food consumption patterns, and the power balance within the families. Elderly people, pregnant, lactating mothers and children have also been affected due to lack of essential food and medicines and reduced availability of care.

COVID-19 Prevention is a project that includes the following set of activities to be implemented as rapid response in order to support the prevention of the spread of the virus in vulnerable areas:

- Provision of hygiene services to 360 vulnerable family and affected people
- Provision of food parcels to 50 households and vulnerable family and 360 affected people
- Provision of sterilizing services for 6 quarantine camps in Nuwakot
- In March 2020, Nepal became aware of the outbreak of novel coronavirus in Wuhan, Hubei Province, China and has been monitoring the progress very closely. Since WHO declared COVID-19 as Public Health Emergency of International Concern (PHEIC), the Government of Nepal immediately activated the Public Health National Emergency Operation Center (PHEOC) at level 3 and took the following actions:
 - Ensure healthy lives and promote well-being for all at all ages



- Contribute in ensuring food security for all vulnerable families in Nuwakot District
- Distributing 360 hygiene kits to families at risk of infection inside ITSs and poor areas in Nuwakot district
- Providing 50 food parcels to 1000 days mothers, children and for their 360 families members at risk of poverty all over
- Providing sterilization services for 6 quarantine camps and ITSs all over Nuwakot.
- Regular phone follow-up of 1000 days women and children and awareness activities through phone call regarding Covid-19 have been conducted on regular basis
- Bhanchhin Aama Program/episode at local level and national level FM radios have been to broadcasting Covid-19 activities on regular regular basis.
- Push message through SMS to pregnant women, lactating mother regarding IYCF and awareness about Covid-19
- Shared about the regular coordination and reporting of activities to the R/Ms by the Suaahara staffs and the discussion on the provision of regular health services such as; ANC, PNC, FP, Immunization, CB-IMNCI, Institutional delivery, availability of essential drugs, functioning of OTC, NRH etc.
- In the meantime, the future plan of Suaahara regular activities and Covid-19 activities were also shared in the meeting

Action point# 2

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The Health Officer of the Health Officer of Nuwakot District – Mr. Sagar Ghimire extends cordial thanks to the USAID, Helen Keller International (HKI), Suaahara II and KCDC on providing of health hygiene materials as PPE (Personal Protective equipment) Mask 4492 pcs and 1123 bottles of sanitizer were provided to 1123 FCHV by SUA AHARA PROGRAM 2 for their safety and protective during Vitamin A immunization Day and campaign in throughout the Nuwakot District. The program activity is praiseworthy in the district among us between district and community stakeholders.

Discussion #3

Mr. Sagar Ghimiri Health Officer of Nuwakot District request Suaahara and INGOs to create Emergency Fund under the Contingencies Plan to response and strengthening disaster preparedness at district and community levels is thus critical to save lives, protect livelihoods and strengthen recovery from disasters and crises. However, significant gaps exist in the District Health's systems for the coordination of its District Societies' preparedness efforts. Contingency planning ensures that we know what to do when disaster strikes, and have the systems and tools to respond fast. It means anticipating the types of disasters we might face and knowing practically how to manage disasters when they do strike.

Basket Fund and Contingency Planning and Preparedness should be considered a core organizational activity for every District Society. The revised guide will support disaster management practitioners in developing contingency plans which are simple, participatory, and realistic and supported by preparedness actions that are identified as a result of the contingency planning. It is very important for us in development and humanitarian sector, he added in the meeting of RRT in Nuwakot.

Issues or Challenges in Program Implementation

- Due to competing priorities and frequent leadership health coordinator changes among Palikas, these meetings were difficult to schedule
- The final 4 meetings were cancelled to make available and presence of the Chairpersons and Vice-Chairpersons in Palikas for Hand-Over and Sustainability Orientation Meetings, due to India Visit of all Chairpersons and Vice-Chairpersons
- Lack of clarity with the DPAC structure, due to the new government structure from conducting DPAC meeting
- Due to Covid – 19 Lockdown and start of the activities was delayed and stopped
- Security presented another challenge during this reporting period and additionally, floods and landslides across the district during the monsoon season must be considered as presenting challenges and sometimes making achievement of targets impossible.
- Local structure also presented challenges as there was a lack of clarity regarding the newly formed Local Government structures especially regarding roles and responsibilities and how to appropriately coordinate especially from ward to district level. This challenge persists and may present difficulties for program coordination
- Administrative procedure changes in Local Government Agencies has created some confusion for implementing some activities
- Coordination and Service delivery mechanism is not fully established
- Capacity building guidelines for health and nutrition program
- Insufficient nutrition related data as per new Palika structure (Disadvantaged Community not updated) Community platforms such as former forums were dissolved which resulted in poor advocacy for effective utilization of local help and contribution

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LESSON LEARNED AND BEST PRACTICES:

- Develop an equitable health and nutrition human resources plan in Palika that engages women and minorities, to address gaps related to the number and skills mix of nutrition professionals and technicians within key sectors at each relevant level in community level as mini-doctors
- Strengthen health and nutrition capacity of Palika's personnel and elected officials to anticipate community technical gaps and develop appropriate technology in local level
- Strengthen advocacy strategies to provide consistent messages to local government and other nutrition stakeholders about the importance of nutrition
- Develop Palika capacity to cost nutrition programs and track resources
- Support the expansion of legal frameworks to promote nutrition interventions (e.g., fortification, food safety) including monitoring and enforcement
- Support Palika-led nutrition policies and strategies to reach nutrition goals in collaboration with Suaahara and Nutrition Program
- Promote and facilitate increased access to and use of safe water supply and sanitation and the key hygiene practices
- Jointly promote essential WASH, food and environmental hygiene, and nutrition actions in community and facility-based nutrition assessments, counseling, and education
- Promote increased availability and affordability of essential commodities to facilitate hygiene practices (e.g., water treatment products, soap, hand washing stations, sanitation options)
- Develop multiple use water systems that provide water for both domestic (e.g., drinking water) and productive uses (e.g., to support crops and livestock for income generation)
- Support the use of conditional cash and food transfers, and other assistance such as cash/ food assets, food vouchers, and support for inputs such as vegetable seeds, small livestock for ultra-poor and highly vulnerable groups to improve their nutritional status and livelihood, particularly in times of humanitarian disaster
- Promote livelihoods opportunities that promote gender equity in combination with achieving nutrition objectives
- Embed nutritional messages in relevant economic strengthening and livelihoods programs
- Invest in improved agricultural techniques (more productive pest-resistant, and drought-resistant varieties) that safely and sustainably increase production and consumption of nutrient-dense foods
- Diversify agriculture and livestock production to improve household consumption of a variety of safe and nutritious foods
- Invest in value chains and food security activities that preferentially provide income generation for women
- Increase access for women to extension services, credit, and production inputs as well as assistance to address barriers to women's land ownership
- Regular phone follow-up with health facilities increases the quality of health services
- Community people were aware about right information to reduce the spread of fear associated with misinformation of COVID by phone counselling
- Embed nutritional and hygiene messages in agriculture extension services along value chains and behavior change activities to increase demand for nutrient-dense foods
- Promote private sector partnerships that channel inputs, services, and technology to farmers and herders, and enhance food production and marketing systems to increase access to safe and nutritious foods

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