



# QUARTERLY NARRATIVE PROGRAM REPORT

Reporting Month: October to December 2020

# **Submitted To**

Sub Office-Suaahara Bidur, Nuwakot

# **Submitted by**

The Kakani Center for Development of Community (KCDC)

Bidur, Nuwakot

### **Summary:**

The Global COVID-19 pandemic hit almost all part of the country and similarly in Nuwakot district too. However, Suaahara II managed to reach the target population by adopting different approach to reach the goal. One of the most effective strategy was phone follow and disseminate the COVID-19 message to the each of the household prioritizing 1000 days mothers. Besides this, Suaahara prioritize the activities which can be implemented in field and started to doing activities after analyzing the situation at community setting. Priority was given to phone follow up and household visit to 1000 days mothers. In addition to this, FCHV follow up, health facility follow up, attended and supported on PHC/ORC and supported on national vitamin A campaign and celebrated 16 days Gender based violence. A part from this, Suaahara coordinated and collaborated with all 12 RMs and concerned stakeholders during the implementation of the program. This year KCDC, Nuwakot implemented the program starting from 8 April 2020 as per instruction form center and sub office.

During this period, both budgetary and non budgetary activities were conducted. and documents were collected through social media platform and each possible ways. Some hard copies were collected from some palikas. Beside the challenge of COVID-19, we conducted following activities successfully during this quarter.

# Phone counseling at field to HHs and community platform:

Suaahara Nuwakot is continuing counsel to the 1000 days mothers and others household to provide Covid-19 related massage by phone follow up. Objective of phone counseling is to continue to the regular service of counselling to 1000 days, provision of psychosocial support in

times of epidemics, to aware community about right information to reduce the spread of fear associated with misinformation of COVID.

MNF and CNF were delivered counseling about ten 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 during phone contact. Thus, the



contacted number were collected from field level every bi-weekly via social media and data entered on DHIS 2 every bi-weekly.

During this period from September to December 2020, we were successful to reach at following no. of HHs and take detail other information with referral for support.

Key achievement of Tele Phone follow-up and message activity of this Quarter

S.N	Non-budgetary Activities (FS/CNV)	Target	Achievement
1.	No of household contacted		3,000
2.	No of household with pregnant women counseled		844
3.	No of household of lactating (mother of <2 years child) mother counseled		2156
9	No of person with fever		8
10	No of suspected case referred		8

# Identify new 1000 days women and update Commcare

Field level workers were contacted by phone follow up and home visit to 1000 days mother. They were identified 728 thousand days mothers and entered on com-care. They were counseled as per guideline to 1000 days mother during phone follow up and home visit.

## **Health Facility Follow up:**

Health facilities follow-up was 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 and other items stocks were assessed during the follow-up with expiry date. After assessment from phone to health post, weekly complied report was submitted to Health Office, Nuwakot for the information and filling the gaps. Respective Health Coordinators were also informed and coordinated during the assessment and intervention process. It increases the quality of services provided by Health Facilities and also plays bridges between the different levels of health service.

### 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 and 2 Municipalities in two times of a year (Kartik 2, 3 and Baishak 5, 6) by mass campaign style through FCHVs. The vitamin immunization day of first round campaign was changed date. It was organized in

Mansir11-12, 2077 from the date of scheduled and planned, due to the big festival of Dashain. 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 5,615 pcs and 1123 bottles of sanitizer were provided to 1123 FCHV by SUAAHARA PROGRAM II for their safety and protective during Vitamin A immunization Day and campaign in throughout the Nuwakot District.

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. Municipality Nutrition Facilitator (MNF) and Community Nutrition Facilitator (CNF) were very active in respective program community through mobile and phone contacts with target group and their role was significant to providing counselling and 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. CNF conducts 3 key life events (pregnancy, birth, and 6 months) for each 1000-day family

A total of 50 key life events were celebrated out of 2172 planned in this fiscal year 2020/021. A total of 260 community members 178 female and 82 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.



### FS visits each HMG to follow-up on SATH

This is non budgetary activities and in this fiscal year. 1 SATH has been follow up. It has been conducted in lead of FCHV of respective HMG where technical supports were provided by MNF and CNF. During follow up visit, MNFs and CNFs have updated the different indicators applied in SATH technique, help in participation 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.

### HMG visit other than SATH implemented.

A total 23 HMG meetings were attended, used of HMG calender during the meeting and supports by MNF and CNF. They have supported in organizing and also in facilitation of the meeting. Similarly, they have helped the members in record keeping of their monthly saving.

## 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. MNF and CNF were followed 25 events PHC/ORC monitoring.

# **Support to EPI clinic.**

A total 91 EPI clinics were attended and supported by MNF and CNF. 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.



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

Suaahara program has been implementing homestead food production approach. The main objectives of the HFP are consumption of fruits and vegetables and animal source foods and improve health and nutrition outcomes of women and children in participating households. HFPB group were facilitated by VMF and support to meeting by Field Supervisors and Community Nutrition Volunteers on their 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 improved nutrition status of 1000 days child and mother. VMF were monitored and supervised one time by Municipality Nutrition Facilitator and Community Nutrition Facilitator throughout the period.

# 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

T The 16 days of activism against Gender-based Violence is an international campaign which takes place each year starting from 25 November (International Day for Elimination of Violence against Women) to 10 December (Human Rights Day). It was originated by the first Women's Global Leadership Institute in 1991 and is coordinated by the Center for Women's Global Leadership.

The theme of the 16 Days Campaign:

International theme: "Orange the World: Fund, Respond, Prevent, Collect"

First Day: 25 November

In coordination with Bidur Municipality, Nuwakot we celebrated 16 days activism against

Gender- Based Violence campaign. On 25<sup>th</sup> November we participated on lit the Candle at Bidur chowk. There were participation from various organization, DCC, Bidur municipality, DAO, DPO, KCDC, Suaaharaa and others NGO/INGOs, etc. Lit the Candle camp was ended with short speech by honorable parliament member , Narayan Khatiwada, DCC- Santaman Tamang, Mayor



Sanju Pandit and Vice-Mayor Gita Kumari Dahal and CDO, Jhanka Dhakal and at last program was ended by blowing whistle in the sense of sensitizing all against Gender Based Violence and ended the first day celebration of 16 days activism campaign.

### **Last Day: 10 December**

16 days activism against Gender- Based Violence campaign was jointly celebrated with Bidur Municipality, CDC, Chhori and Trishuli Plus on 10<sup>th</sup> December 2020 at Hotel Saptarangi. CDO, Police cell, Mayor, Vice Mayor, teenaged girls and boys from school, various NGO/INGOs were participated in the workshop. During the opening session, There was a representation of Mayor-Sanju

Pandit and vice-Mayor-Gita Kumari Dahal and CDO-Jkanka Dhakal and then chaired the session. The workshop was anchoring by Susmita Pokhrel, and welcome speech delivered by ward member. After the welcom and objective, CDO Jhanka Dhakal was presented related gender violence presentation. He highlighted the gender base violence, types of violence and reason, status of violence in present, statement of violence



and policy, law and punishment of violence. Similarly, WCDO- Susmita Phokhrel was showed videos related with gender base and women violence.

After the presentation, Final remark was given by the Mayor sanju Pandit with thanks vote to all for their presence. He was focused on eliminate of gender base violence.

# **District Level Orientation of Case Investigation and Contact Tracing**

Suaahara program was organized orientation to CICT team and conducted two batch on 11th and 12th November 2020 at Sukha Paunaghar, Bidur, Nuwakot. First batch was participated from six palikas like Dupcheshwor RM, Kakani RM, Belkotgadhi M, Tadi RM, Panchakanya RM and Shivapuri RM and second batch was participated remaining six palikas like Bidur M,



Tarkeshwor RM, Likhu RM, Suryagadhi RM, Myagang RM and Kispang RM.

To conduct the orientation program to CICT team firstly coordinated with Sagar Ghimire-Chief of HO and Uttam Khanal- Covid focal person and shared about the purpose of the orientation program. Date was fixed for the orientation program with two batch on 11th and 12th November, 2020. Participants were invited as per plan and follow up was done before orientation. Tasks were divided among the district team and PNGO team.

The orientation started by Mr. Uttam Khanal, Communication Office (Covid-19 focal person), Health Office. The opening session was chaired by Mr. Jhanka Dhakal-CDO and Mr. Rajaram Karki-HO, Nuwakot. The participants were all district level CICT team and of all R/Ms CICT team of the district, the representatives of District hospital and health office. During opening session, Mr. Uttam Khanal Covid focal person, HO welcomed to the participants and presented objectives of the orientation Then, Mr. Jhanka Dhakal- CDO, was given thanks to suaahara program for the support to orientation and thanks to CICT group for well done for the contract tracing. He said " you are follow the as per protocol and guideline for the PCR test and activate CPG. Suaahara program has support to breast feeding corner at District Administrative Office(DAO). We are coordinate all stakeholders for control of Covid-19".

Similarly closing formal session was done by Mr. Rajaram Karki-Immunization officer. He said CICT team are capable for the break of chain of Covid.

In order of continuation of the orientation Dr. Himansu-PHEOC, presented the introduction of Covid 19. He was presented about risk communication, contact tracing and follow up and IMU Nepal aplication for the covid 19 e-reporting. He has more focused on IMU, guideline of IMU, using technology, concept of IMU, features, IMU system, how work of IMU and data analysis.

Similarly Anu Neupane-CICT Coordinator, Nuwakot was presented about the case investigation and contact tracing. She has focused on form and format(A and B1) related contact tracing.

Yagya Pudasaini -LAB technician, DAO has presented with laboratory protocol, safety technique, RT-PCR testing protocol and swab collection technique.

At last floor was opened for discussion. Various queries regarding the program was raised and addressed by Rajaram Karki and Uttam Khanal -HO

### **Orientation of IYCF Assessment to FLWs**

Rapid assessment IYCF was oriented held on 30-31 December 2020 at KCDC office meeting hall. Field Coordinator Hari Lama was facilitated the meeting with the support from District team. It started with the welcome remarks by Mr. Arjun Aryal-PC and He briefed about the rapid assessment of IYCF and its objectives.

NHO- Rekha Lama was also shared sampling method of assessment, data collection tools, procedures and timing, data management, analysis and reporting. Similarly, FC- Hari Lama was

presented and discussed with MNFs about rapid assessment checklist like health worker, FCHV and mothers. He was oriented Com-Care update and ODK mobile apps and he added apps install process, input user id and password, get blank form, data entry process and sent server process.

#### PROJECT MANAGEMENT AND OPERATION

### **Human Resources**

- KCDC Suaahara has been provided responsibility for implementing of program with the mobilization of following human resources: Executive Director, Field Coordinator, Finance and Administration Officer, Municipality Nutrition Facilitator – 12, Community Nutrition Facilitator-14 and a Support Staff.
- ii. Suaahara program covers all R/Ms of the district (10 RMs, 2 Municipalities with 88 wards)

### Review and planning meetings with FLWs

Quarterly review and planning meeting was held on 16-17 December 2020 (One and Half Day) at Hotel Square. Field Coordinator Hari Lama was facilitated the meeting with the support from District team. It started with the welcome remarks by Mr. Arjun Aryal-PC and He briefed about the review and meeting and its objectives.

FC- Hari Lama was shared two days schedule and AFO- Hari Dangol shared logistic for the event. MNFs and CNFs were divided four groups and provide topic and presented about Progress update, Issues/challenges, lesson learnt so far (since onset of Covid 19), Best practices/innovations(including support from local



government to the beneficiaries), Possible community level activities for next 3 months in the respective R/Ms. after the group presentation, FOO/AFO shared Safety guidelines/measures to be followed during field work. NHO- Rekha Lama was shared about IR1.1 and IR 2 base on DIP activities and promotional activities like Bhanchhin Aama, IEC/BCC materials and Case/success stories. She was also oriented to staffs about US family planning compliance. WASH officer Bharat Rijal was facilitated with IR 1.2 related activities.

Similarly, PC Arjun Aryal was shared about IR 3 and IR 4 related activities. FC Hari Lama was shared achievement during lock down period and status of Covid 19 at palikawise and also shared 1000 days update in Com-Care system. He was shared and Reviewed of recording and reporting tools, biweekly phone counseling report, monthly reporting sheet, essential supporting documents for reporting, MNF/CNF Job aid/monthly target. AFO Hari Dangol was presented Organization's HR policy, contract letter, travel, time sheet, leave, Supporting docs of expenses, advance settlement, cost sharing and compliance like CoC, CoI, Fraud, Violence etc. The district

technical officers were provided necessary coaching/guidance to field supervisors about activity implementation strategy on requirement basis.

Finally, Field supervisors were made quarterly plan, work plan and submitted their work plan and fill up time sheet. In last, KCDC Board member- Kunjan Nepali was given given strictly order to field staffs for bi-weekly report, 1000 days update on Com-Care, staff movement, quality data and overall management.

# Annual Health Review Meeting Kartik 23-24, 2077

The annual health review meeting was organized by the health office, Nuwakot to review the program activities of F/Y 2076/077, to discuss issues/challenges faced during the period. In addition, the possible activities of the F/Y 2077/78 were to be discussed during the review meeting.

The review meeting started by Mr. Uttam Khanal, Communication Office (Covid-19 focal person), Health Office. The opening session was chaired by Mr. Sagar Ghimire, PHA, HO,

Nuwakot. The participants were all Health Coordinators of all R/Ms of the district, the representatives of I/NGOs working in the district. During opening session, Mr. Rajaram Karki, Immunization Officer, HO welcomed to the participants and Mr. Arjun Aryal, Program Coordinator, Suaahara Program gave his opening remarks and wished for the successful review meeting and expressed his expectation of the meeting. Then, Mr. Sagar Ghimire, PHA elaborated the objectives of the meeting and closed the opening session.



Six R/Ms presented the status of the health activities through 3 years trend and remaining six R/Ms, I/NGOs and District Health Office presented the status of F/Y 2076/077. The followings were the topics of discussion in brief;

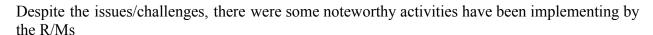
# The followings;

- 1. The status of immunization was found low in almost all R/Ms
- 2. The service outlets like; EPI clinic, PHC/ORC have been partially operated. HMG meeting and FCHV meeting have been halted due to Covid -19.
- 3. 4th ANC/PNC services by the pregnant women have been stopped/rarely received from the health post.
- 4. An institutional delivery at health facility have been reduced drastically after Covid-18

- 5. CPR in almost all health facilities was found very low. During discussion, it was concluded that the clients of permanent family planning were missed in the reporting. Similarly, service unavailability of LTMS at most of the health facilities were found major reason for low CPR.
- 6. GMP rate of under two children was found very low. It was said that irregular PHC/ORC, EPI Clinics, health facility services were the main reason of low CPR.
- 7. Rate of IFA consumption by pregnant women and post-partem women were found very low.

At the end of the review meeting, the following issues were put and discussed during panel discussion;

- Low access of health services after onset of Covid-19
- Lack of SBA, ANM at birthing centers
- The target population given by DoHS does not match with local population.
- There was no enough budget under health program
- Low priority has given to the health by R/Ms



- Hatma Anda Gharma Janda Program
- Bacha Jokhau, Noon Bokau
- -Posan Jhola Karyakram
- -Sutkeri sanga sanga Upmayer/Upadhaychhya Karyakram
- Ek bekti due Falful Karyakram

At the end of 2nd day, the participants expressed their satisfaction about the management of the review meeting and suggested to change the method of presentation. They suggested that more time to be given to discuss success story, issue/challenges rather presenting the data. Mr. Sagar Ghimire, HO said during his remarks that the data verification is also important to verify the achievements and discussions for an improvement. He added that DoHS has been practicing digital reporting system-DHIS2, LMIS which has to be reported within timeline. He requested to I/NGOs to response emergency than regular program. He expressed his appreciation for active participation and interest of the health Coordinators. He closed the session wishing the Tihar and Chhat Parba, 2077.

### **CHALLENGES:**

- Reflecting our RMs to our activities are found difficult as reading emails are not thing in both district here most of the communication has to be carried out through phone which is quite difficult as most of RM leader are quite busy.
  - Due to geographic difficulty problem of contact phone and internet connection since



# **LESSON LEARNED AND BEST PRACTICES:**