

The Asia Foundation
CA No. 367-G-00-97-00098-00
Program Accomplishments: (January16- July15, 2000)

As of July 2000, the program achievements are as follows:

- Total CYP is 39953 against a LOP target of 17,810
- CPR is 41 against a LOP target of 45%
- 1997/98 CYP was 11,511 and 1998/99 CYP was 19,978, 1999/2000 CYP 39953

NGO Program

Ten local NGOs provided integrated community -based family health programs to the population of 1.4 million of people in 126 VDCs of 10 districts of Nepal. The services were provided through 27 NGO static and 1,072 mobile clinics.

Family Planning:

The total CYP achieved from all temporary methods is 39953. The total Norplant CYP is 2604 and IUD CYP is 714. The pills, condom and Depo CYP is 4105, Pills CYP is 1967 and Condom CYP is 1278 respectively. Depo CYP has been increased from 2836 to 4105 CYP.

A total of 450 clients referred for ligation and 320 for vasectomy services. The contraceptive prevalence rate was 41%.

Child Health:

The NGO clinics referred 4027 children to government health centers for immunization, provided treatment on diarrheal diseases to 834, distributed 2076 Jeevan Jal, 592 children for ARI, and provided general check-ups to 75292 children.

Maternal Health:

More than 28568 women received a general check-up, 5591 pregnant women were referred to government health centers for immunization, 11375 women received health education, 11000 received antenatal care and post natal care, and 77 safe delivery kits were procured by TBAs.

762 clients have received STD treatment services from the static and mobile clinic. 95 clients were referred to government health centers for further treatment . 2878 clients were provided counseling on STD and HIV/ AIDS prevention and treatment

District Coordination:

126 village health committees (VHCs) are functional and met monthly to discuss on family planning and maternal child health service delivery in respective village development committees (VDCs). A close coordination has been maintained with the District Health Office and NGOs received all necessary commodities from DHO and the report has been sent to the DHO. NGO also participated in national events and activities, for example, World Population Day, Condom day, Immunization and Vitamin a distribution. The program was organized jointly by NGO, VDC, DHO and other line agencies.

National Immunization Day (Polio), Vitamin a distribution, and the World AIDS Day also celebrated by the partner NGOs with the close coordination of District Health Office, FCHVs, TBAs, Women Group, VDC leaders and other line agencies.

Community Mobilization:

Female Community Health Volunteer (FCHV) and Traditional Birth Attendants (TBAs) are part of the community mobilization program. All FCHVs and TBAs have received orientation and training on family planning and maternal child health. Refresher training was organized for 1116 FCHVs and TBAs. The training was facilitated by DHO staff and the paramedic from NGO. These community volunteers participate in static and mobile clinics, and they refer the clients to the clinics and provide follow-up services. The NGO has strengthened their partnership with the FCHVs and TBAs. The NGO paramedics provide them refresher and on-the-job training as needed.

Monthly Meeting:

Monthly staff meeting is organized and conducted in each NGO in every month. In the meeting discussion done in various topics such as family planning commodities, referral of the clients, physical facility, status of World Education classes, problems, lessons learned etc.

Private Sector Collaboration:

A total of 38 mobile clinics were organized in partnership with tea estates in Jhapa and Ilam districts.

Sustainability and Phase-out Plans:

After revision of the health and family planning program strategy, an observation tour has been done by the NGO staff and the VDC representative in different site of Nepal. A total of 30 participants was participate in the observation tour. The participants have been taken to Bhattedanda Health Post (previously supported by United Mission of Nepal), to observe the health financing scheme and the VDC contribution and the participants also visited to

Dhading district to observe the drugs scheme activities run by the communities under the guidance of GTZ project. In the same way they also visited in ADRA/ Nepal's Health Post strengthening program by VDCs and drugs scheme program run by Sub-Health Post in Katunje Bhaktapur under the guidance of JICA and District Health Office Bhaktapur.

After the observation tour, a strategy planning workshop has been organized and conducted in two groups (15 participants in each group). Objectives of this workshop are to develop conceptual clarity on the need and significance of strategic planning for sustainability and to develop the action plan on financial and organizational sustainability in delivering family planning and reproductive health care services.

VDC Chairman of Puraina VDC declared to donate a land for the construction of the static clinic. VDC representative are enthusiastic to sustained the VDC level health care system by providing the amount allocated for health.

Some NGO like CWS, Bara; NCDC, Jhapa; BMASS, Banke; WDA, Ilam; have their own land which is donated by VDC for the construction of the clinic building. CWS, Bara with the collaboration of VDC is planning to built one clinic by collecting funds from different sources.

NGO Co-ordination Council (NGOCC):

The non- governmental organization coordination council established with the objective of facilitating discussion on various reproductive health and family planning issues The Asia Foundation continued to work with Family Planning Association of Nepal (FPAN) and Ministry of Health (MOH) to plan and conduct activities.

- NGOCC meetings were organized in FPAN and MOH in every two month interval. An NGOCC Directory is already is already printed and has been distributed to all concerned national international and bilateral organizations.
- District level GO/NGO coordination has been launched in 28 districts of Nepal as a pilot phase with the coordination of Family Health Division. A regional orientation meeting has been conducted in four different region. The participants in the meeting were Regional Director, District Health Officer facilitating NGOs and supporting NGOs and the representative from USAID, Family planning Association of Nepal and family health division also participated in the meeting. The main objectives of this orientation is how to coordinate to all implementer agencies in one umbrella with the chairmanship of District Health Officer. (Detail report is attached for your information)

FCHVs/TBAs Endowment Fund:

A small grant called Jewett Fund is received to The Asia Foundation for the family planning program activities with the concept of volunteers an endowment fund. This fund has been provided to eight NGOs, which is deposited in the bank as a fixed amount with the matching fund received from the VDC. The interest earned from the bank and will be use for FCHV/TBAs activities on family planning. Most of the VDC has provided the matching fund according to their budget and the bank account has been opened with the bilateral signature of the VDC chairman and the NGO staff. By creating this type of fund, FCHVs are very encouraged towards their work. A brief report has been sent to the donor about the implementation of this fund. Most of the VDC also shown their interest to add the sum annually as their capacity which increased the amount every year.

Health Education and Adult Literacy (HEAL) Program:

A total of 792 basic and post-literacy (HEAL) classes were conducted by Foundation supported NGOs. While going in the field visit has been made in the literacy class and the findings have been presented and shared with the partners meeting conducted by World Education. Facilitators, like Maternal Child Health Worker (MCHW) conducted HEAL class seems effective in comparison of other facilitators. Participants were very active and enthusiastic to learn more about health. Participants showed their interest for more class in the future and also indicated the shortage of stationary for whole three month period. A program review meeting has been conducted by World Education in different district. TAF representative has also participated in the meeting in Ilam and Udayapur.

Training/ Workshop Activities

- Total ten paramedics from different NGO; NCDC, Jhapa, WDA, Ilam, CWS, Bara, Chitwan, HSA Kailali, and BASE, Dang received training in Norplant from NFCC, Chhetrapati, Kathmandu.
- STD Case Management training has received by five paramedics of NCDC, Jhapa, WDA, Ilam, CWS, Bara and BASE, Dang in ADRA/ Nepal.
- Total nine paramedics received COFP training from different NGOs in NFCC, Chhetrapati clinic.
- Nine paramedics have received IUD training from NFCC, Chhetrapati clinic.
- A strategic planning workshop has been organized for NGOs and VDC Chairman of ten different districts. The total participants were fifteen in each group. The objective of the workshop was to develop conceptual clarity on the need and significance of

strategic planning for sustainability and to develop the action plan on financial and organizational sustainability in delivering family planning and reproductive health care services.

- An observation tour has been organized for NGOs staff and VDCs Chairman in different organization for the learning purpose of the sustainability approach. The total participants were 30.
- Refresher training is provided to the FCHVs and TBAs on family planning, ARI, CDD, and AIDS/STDs. Total of 1116 FCHVs/TBAs received training from different NGOs.

Supervision and Monitoring:

During six month period, supervision and monitoring has been frequently done from the central level with properly a developed check list. Also, a field visit has been done to find out the possible approach for the future sustainability of the program.

After lunching district level GO/NGO coordination meeting in different 28 districts, a follow-up has been done in seven districts. A brief report has been received conducting the meeting and prepared NGO profile list. These all reports are forwarded to NGOCC secretariate.

Other Information:

- Ms. Catharine Thompson, Acting Director, Health and Population, USAID, Dr. Panduka M. Wijeyaratne, Program Director, Environmental Health Project, visited NCDC, Jhapa clinic and refugee camp in February 15-18, 2000. Dr. panduka's visit was related with the concern of implementation of the Malaria program in an Integrate way with the Asia Foundation.
- Dr. Laxmi Raj Pathak, Director, Family Health Division and Ms. Panch Kumari Manandhar, Technical Advisor, USAID, also provided their technical support in district level coordination orientation in Pokhara.
- Mr. Terry Murphy, Technical Advisor, USAID and Ms. Panch Kumari Manandhar, Technical Advisor, USAID also visited the health program area in Bara district implemented by Child Welfare Society (CWS).
- A team from Indonesian has also visited and briefed about the family planning and reproductive health program as a whole.

Problems/Constraints

- WWESC, Nawalparasi the executive committee was dissolved by District Officer (CDO) and the program has been handed over to the CWS. CWS is working in three different VDCs.. Health program activities have been going well as usual.

Lesson Learned:

- Involving VDC members in the program and working together, promote the service in the village as well as they feel the responsibilities of the work.
- Clients are not very much interested to get the incentive after the volunteer surgical contraception, but they want the best quality service rather than incentive.
- Establishment of an endowment fund encouraged the volunteer's spirit for the work. And also motivated to the community, NGOs wants to established this type of fund in all VDC.

Plans for the next six months (January 16- July 15, 2000)

- Introduce standard user fees in all clinics to support a cost recovery scheme after market assessment on ability to pay.
- Orientation to the communities to understand fee for service concept.
- Manage COFP training for ten paramedics.
- Mobilize NGO to seek new sources of local income from sales, donations, DDC, VDC, Individuals.
- Refresher training will be provided to the FCHVs and TBAs with the coordination of DHO.
- Family Planning and MCH services will be provided by static and mobile clinics.
- NGOCC meeting will be organized in every two-months basis.
- Supervision and monitoring of the program in field level.
- Follow up visit will be made for district level coordination.
- Annual performance meeting will be organize

Case study

Jalbarshi's Delivery Pain

Mrs. Jalbarshi, 26 years, lives in Ward No 8, Mohanpur Village of Banke district. She was a regular client for an antenatal check-up in static and mobile clinic run by Bankey Mahila Arthik Swabalamban Santha. Her labor pain was started one day before of her due date. But labor pain was continued for three days, It was a long labor pain which affect both mother and child's health, so her husband Mr. Ram Dulare Kori run to the government Sub Health Post for the help but health post was supposed to be closed, fortunately Mr. Kori met Mr. Keshav Gautam, Sub-Health Post In-charge and Ms. Amrita Shahi, Maternal and Child Health Worker (MCHW) and both of them went to Mr. Kori's house to assist the delivery. With the help of Sub-health Post in charge and Maternal and Child Health Worker, Mrs. Kori delivered a baby boy but the baby was cynosis due to lack of oxygen and fluid retention in the throat and nose. But health workers' best effort and dedication both mother and child are survived. Now both mother and child is happy and a child had all sort of immunization. Mr. and Mrs. Kori have two daughters and one son and they show their interest to have temporary family planning method Norplant. BMASS and Sub-Health post are working very closely and the visit is also made together in the village.

The Asia Foundation
Performance Report (1997-2000)
Integrated Community-based Family Health Program
CA No.: 367-G-97-00098-00

Chart # 1

S NO	NGO Name	District	BASELINE			YEARS								TOTAL CYP	LOP		
			Date	CPR%	CYP	CPR%	CYP	CPR%	CYP	CPR%	CYP	CPR%	CYP		July '97 - July '2002	CPR%	CYP
						July '97 - July '98	July '98 - July '99	July '99 - Jan '00	Jan '00 - July '00								
1	NCDC	Jhapa	June '97	43	880	45	4444	47	5222	48	2034	37	3466	11700	50	6000	
2	WDA	Ilam	June '97	49	505	52	1676	53	2004	53	798	58	1249	4478	55	2300	
3	BASE	Dang	June '97	40	490	43	1176	41	2890	41	1868	41	1118	5934	48	1725	
4	WWESC/CWS	Nawalparasi	June '97	48	270	49	1195	52	2862	43	942	45	805	4999	52	1685	
5	CWS	Bara	June '97	30	325	34	1467	36	2483	39	1036	39	1639	4986	48	2250	
6	CWS	Chitwan	June '97	31	245	33	955	37	2307	47	400	49	1433	3662	45	1550	
7	BMASS	Banke	May '98	7	50	10	60	20	453	28	662	32	262	1175	30	350	
8	TMUK	Bardiya	May '98	35	110	35	140	39	799	40	673	43	371	1612	45	450	
9	WOREC	Udaypur	May '98	31	135	31	140	32	359	32	61	45	122	560	42	450	
10	HAS	Tikapur	May '98	32	150	32	165	34	372	34	310	22	203	847	45	650	
11	SIDS	Sindhuli	Mau '98	29	85	29	93	30	227								
TOTAL				34	3245	36	11511	38	19978	41	8784	41	10668	39953	42	17410	

The Asia Foundation
 Integrated Community-based Family Health Program
 Maternal Child Health Indicators
 CA No.: 367-G-97-00098-00
 (Jan 15, 2000 - July 15, 2000)

A	Maternal Health Program	No of Clients
1	Immunization (Tetanus Texoid - Referred)	5591
2	Antenatal Care / PNC	11000
3	Distribution of Safe Delivery Kit	77
4	Training to TBAs / FCHVs	525
5	Health Education	11375
		28568

B	Child Health Program	
1	Immunization to The Children (Referred)	4027
2	Treatment of Diarrhoeal Diseases	834
3	Distribution of Jeevan Jal	2076
4	Treatment of ARI	592
		7529

C	AIDS/ STD	
1	Screening and Treatment of STD	762
2	STD Cases Referred	95
3	Types of STD	
	Gonorrhoea	143
	Syphilis	90
	Chancroid	22
	Scabies	89
	Warts	2
	Trichomonas Vaginalis	266
	Other	150
		857

D	Counseling / Health Education	
1	Family Planning	7487
2	Maternal Child Health	5400
3	ARI	1648
4	DD	2155
5	Nutrition	3468
6	STD	1731
7	HIV/AIDS	1147
8	Other	324
		23360

The Asia Foundation
 Indicators Jan 16, 2000 - July 15, 2000
 Integrated Community-based Family Health Program
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Description	NCDC	WDA	WOREC	CWS(B)	CWS(C)	CWS(N)	HSA	BASE	BMASS	TMUK	TOTAL
Number of VDCs served	29	17	7	23	7	10	3	18	5	5	124
Couple Year Protection	3466	1249	122	1639	1433	805	203	1118	262	371	10668
Static Clinics	7	3	1	5	2	2	1	3	1	1	26
Mobile Clinics	286	156	12	401	102	120	44	129	70	59	1379
Industry Based Clinics	20	2				16					38
Clinics Charging User Fee	7	3	1	5	2	2	1	3	1	1	26
Clinics Offering IUD	7	3	1	5	2	2	1	3	1	1	26
Clinics Offering Norplant	7	3	1	5	2	2	1	3	1	1	26
Clinics Providing CDD/ARI Services	7	3	1	5	2	2	1	3	1	1	26
Clinics Offering STD/HIV/AIDS Counselling	7	3	1	5	2	2	1	3	1	1	26
Clinics Using QOC Checklist	7	3	1	5	2	2	1	3	1	1	26
STD Clients	64	26	0	11	32	29	374	41	0	6	583
IUD Clients	21	18	5	8	15	34	19	62	0	84	266
Norplant Clients	222	91	0	20	365	96	40	24	146	65	1069
Women Attending ANC/PNC Services	1274	488	247	603	5449	284	930	806	293	626	11000
Village Health Committees	29	17	7	23	7	10	3	18	5	5	124
Basic and HEAL Classes	66	55	13	137	64	0	85	80	34	49	583

The Asia Foundation
 Semi-Annual Report Jan16, 2000 -July 15, 2000
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Method Mix CYP of NGOs

S NO	NGO Name	District	PILLS		CONDOMS		DEPO		NORPLANT		IUD		TOTAL
			July'99-Jan'00	Jan'00-July'00	July'99-Jan'01	Jan'00-July'01	July'99-Jan'02	Jan'00-July'02	July'99-Jan'03	Jan'00-July'03	July'99-Jan'04	Jan'00-July'04	
1	NCDC	Jhapa	454	399	125	107	1188	1851	214	1019	53	91	3466
2	WDA	Ilam	108	300	25	43	605	522	60	347	0	39	1249
3	BASE	Dang	204	201	1095	339	327	403	60	53	182	123	1118
4	WWESC/CWS	Nwalparasi	106	338	81	75	313	177	312	130	130	84	803
5	CWS	Bara	128	219	690	429	105	722	39	158	74	112	1639
6	CWS	Chitwan	60	386	68	74	128	291	116	553	28	130	1433
7	BMASS	Banke	78	35	107	33	11	5	445	189	21	0	262
8	TMUK	Bardiya	70	48	391	161	19	12	42	63	151	88	371
9	WOREC	Udaypur	5	37	10	10	39	40	0	0	7	35	122
10	HAS	Tikapur	14	5	12	8	101	83	102	95	81	14	203
TOTAL			1227	1967	2604	1278	2836	4105	1390	2604	727	714	10668

The Asia Foundation
 Training Status Chart
 Jan 16, 2000 - July 15, 2000
 Integrated Community-based Family Health Program
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TRAINING PROGRAMS	NCDC	WDA	WOREC	CWS(B)	CWS(C)	CWS(N)	HSA	BASE	BMASS	TMUK	TOTAL
Clinical Training for Paramedics											
IUD Training	2	1		2	1		1	1	1		9
Norplant	2	1		2	1		1	1	1	1	10
STD Case Management	1	1		2	1						5
Comprehensive Family Planning	2	2		2	1		1	1			9
Refresher Training To The Counsellor									5	5	10
Recor Keeping Training To The Counsellor									5	5	10
Reproductive Health Training To The Counsellor									5	5	10
RA Training To CHV/TBA	261	153	63	207	63	90	27	162	45	45	1116
Quality Assurance Training											
Observation Tour	3	3	3	3	3	3	3	3	3	3	30
Strategic Planning Workshop (Sustainability)	3	3	3	3	3	3	3	3	3	3	30

12

District Level GO/NGO RH Coordination

A. Background

The Family Health Division/Department of Health Services, Ministry of Health felt the need of a functional district level coordination between governmental and non governmental partners working in the field of reproductive health. Considering this view, discussions were initiated among the partners INGOs/NGOs and government from the last one and half years to materialize this issue raised by the government. At last on May 8, 2000 consensus developed among the supporting and facilitating INGOs/NGOs and DoH/Family Health Division to support the program. On the 29th NGOCC Meeting (on May 9, 2000) this new partnership between the government and non governmental organizations on health service delivery was announced by Dr. Laxmi Raj Pathak, Director, Family Health Division.

The District Level GO/NGO RH Coordination Committee has been established in 28 districts of the country with a aim to support the District Health Office in coordinating effective implementation of health programs among governmental and non governmental organizations. This coordination program also ensures a smooth cooperation, fruitful linkages, functioning and transparency in health related programs at the district level.

B. Objectives of District Level Coordination

- ▶ provide a forum for GO and NGO collaboration and partnership
- ▶ provide opportunity to share experiences and lessons learned
- ▶ avoid the duplication and overlapping of the services/or programs
- ▶ ensure compliance of GO policy, strategy, guidelines, and plans

C. Key Highlights of the Program

The following GO and INGO/NGO are the players on the GO/NGO RH Coordination Program at the district.

- a. District Health Office
- b. Facilitating NGO (district level)
- c. Supporting INGO/agency

Focal person in the district:

- ▶ DHO or the DPHO (who ever is in-charge) will be the focal person for the district level coordination
- ▶ one of the local NGOs (leading NGO) working in the district will work with the DHO or the DPHO to facilitate coordination activities by establishing District RH Coordination Committee under the chairmanship of DHO/DPHO.

- ▶ DHO or DPHO is responsible for reporting to DDC including planning and review meeting and others as necessary.
- ▶ organizations meeting(s) as and when necessary, sub committee can be made according to the nature of the program, such as: Vitamin "A", NID..., at any point as and when needed

Role and functions of facilitating NGO:

- ▶ facilitate DHO in organizing regular coordination meeting
- ▶ facilitate DHO in creating a database on NGO's providing RH services in the district

Essential part of the meeting

- ▶ preparation of agenda in consultation with DHO/DPHO - specifying: date, time, venue, and chief guest
- ▶ CDO, LDO, DDC or key persons of the district should be invited in the first meeting
- ▶ fixed the next meeting date and try to stick on it
- ▶ send the reminder letter and agenda 1 wk. before the meeting
- ▶ assist DHO in drafting meeting minutes and distributing

D. Operational Guidelines:

- ▶ conduct monthly meeting
- ▶ conduct meeting at DHO Office or as decided by DHO/DPHO
- ▶ distribute DHO signed invitation letters to all concerned by NGO
- ▶ develop meeting agenda in consultation with DHO/DPHO
- ▶ prepare meeting minutes and distribution by NGO after finalized by DHO,
- ▶ reporting minutes to NGOCC by NGO
- ▶ follow up actionable activities in consultation with DHO/DPHO
- ▶ documentation of coordination activities by NGO
- ▶ evaluate in every six months

E. Indicators and Monitoring Checklist

<u>Indicators</u>	<u>Monitoring Checklist</u>
1. number of meetings	1. report received
2. number of participating NGOs (organization)	2. follow up maintained
3. maintenance of database	3. no. of action taken
4. Maintenance of minutes	
5. Reporting	

Evaluation

Program review and evaluation in six month

F. Coordination District

Following districts and organizations are voluntarily took part for the district RH coordination (first phase) based on capability of facilitating NGO and their presence in the district. The chart indicates facilitating NGO, supporting agency, and name of the districts.

<u>Facilitating NGO</u>	<u>Supporting agency</u>	<u>District</u>
1. DHDB	GTZ/PHCP	Dhading
2. SCF/US	SCF/US	Siraha
3. NRCS	GTZ/RHP	Bardiya, Achham
4. NRCS	GTZ/RHP	Doti
5. AMK	AMK	Syanjya, Rupandehi, Baglung
6. UMN	UMN	Lalitpur, Palpa
7. NFCC	AVSC	Kaski
8. CARE	CARE/Nepal	Kanchanpur
9. NSMP	NSMP	Kailali
10. NSMP	DHSP	Surkhet
11. FPAN	FPAN	Morang, Sunsari, Kapilbastu, Dhanusha, Saptari
12. MSI/SPN	MSI/SPN	Parsa, Banke
13. PLAN Intl.	PLAN Intl.	Rautahat
14. ADRA	ADRA	Kavre, Rasuwa
15. NCDC, WDA	TAF	Jhapa, Ilam
16. CWS(B), CWS (C)	TAF	Bara, Chitwan

G. Update on District Coordination

- Completed 4 Regional Orientation/Training Meetings for 5 regional personnel in coordination with Family Health Division/DoHS, FPAN and TAF
- ▶ Participants:
 - DHO/DPHO and facilitating NGOs from 28 districts
 - Regional Health Directors
 - Representatives from 14 Supporting INGOs/agencies

- ▶ Resource Person:
 - Director/FHD, USAID Representatives
- ▶ Total 89 participants have received the orientation on the process of district coordination

H. Key Highlights

- ▶ District Profile - Completed
- ▶ 1st Coordination Meeting - All 27 Districts completed
- ▶ Follow-up Visit - 6 visits done by TAF
- ▶ Chief District Officer, District Development Committee's Chairperson, District Superintendent of Police, Mayor, Local Development officer, and other key Govt. officials took part in the District Meeting

I. Main Agenda of 1st Meeting

- ▶ Program introduction
- ▶ Specific program activities and service areas
- ▶ Duplication and coordination
- ▶ Update district profile
- ▶ Next meeting agenda and date

J. Participants Views

- ▶ Good GO/NGO partnership
- ▶ Appropriate platform for coordination and discussion, and sharing experiences
- ▶ Good initiation
- ▶ Shown interest to attend the next meeting

K. Problems and Constraints

- ▶ Few supporting agencies shown budget constraints to support DHO's cost for attending regional meeting and review meeting
- ▶ Some of the local participating NGOs have budget problem especially transportation and foods to attend the district meeting, because they have to come from far distance

L. Next Steps

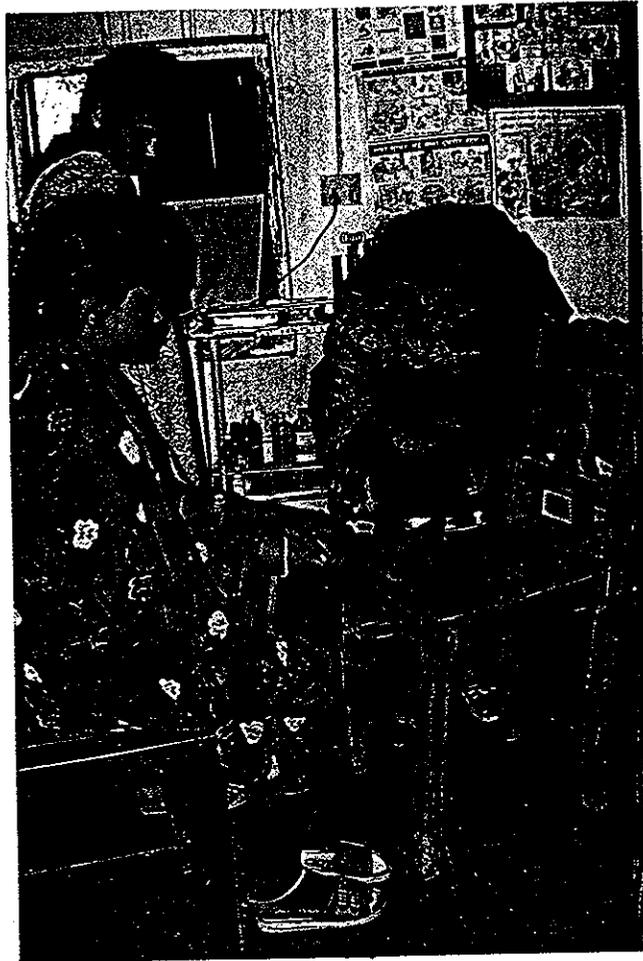
- ▶ Follow up visits for monitoring and supervision of the program
- ▶ Follow up actionable activities in consultation with FHD and concerned agency
- ▶ Organize review meeting on December, 2000
- ▶ Present up date in NGOCC meeting



FCHV Refresher Training



Mother's Group Meeting



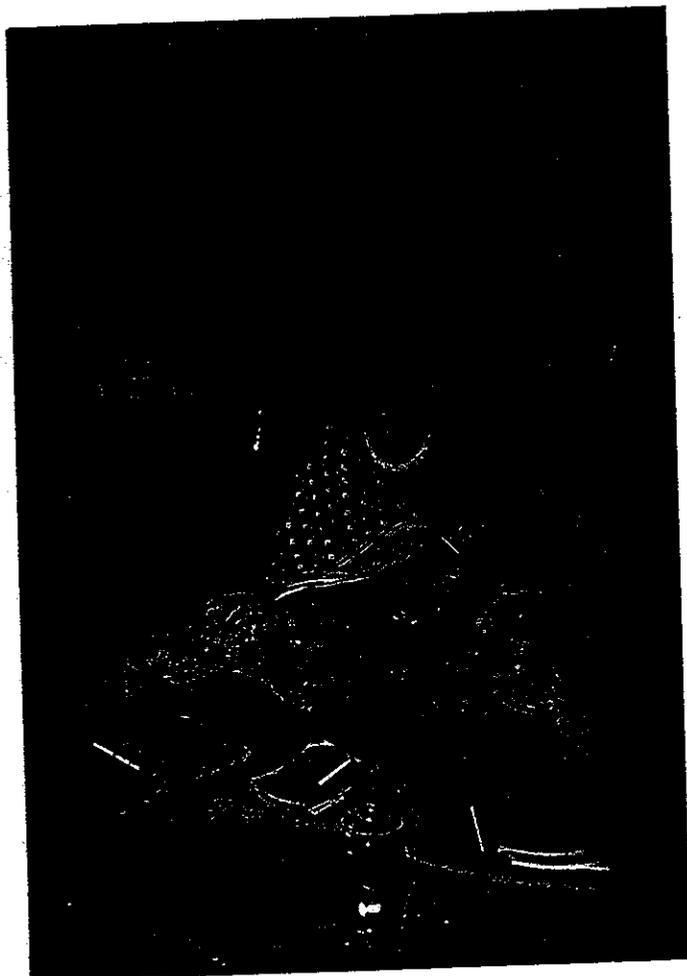
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Women and children gather for treatment in static clinic

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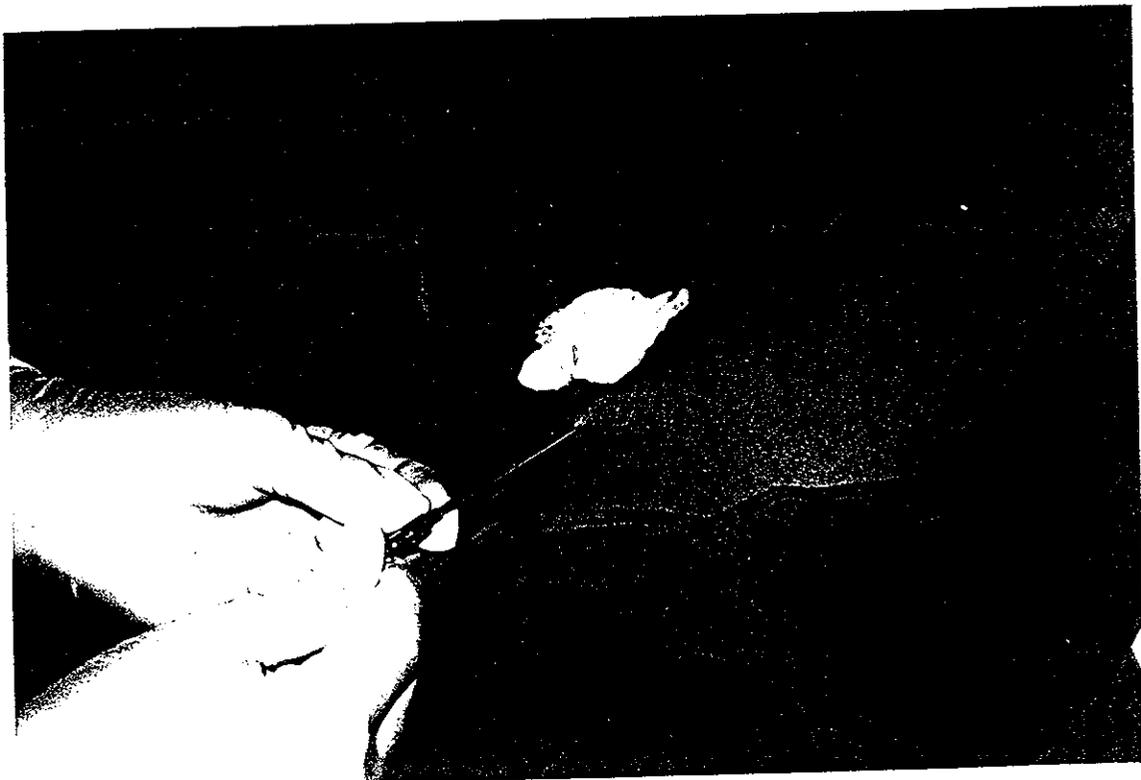


Women participated in HEAL class

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Polio drop to the children in immunization day



Norplant implantation in NGO clinic

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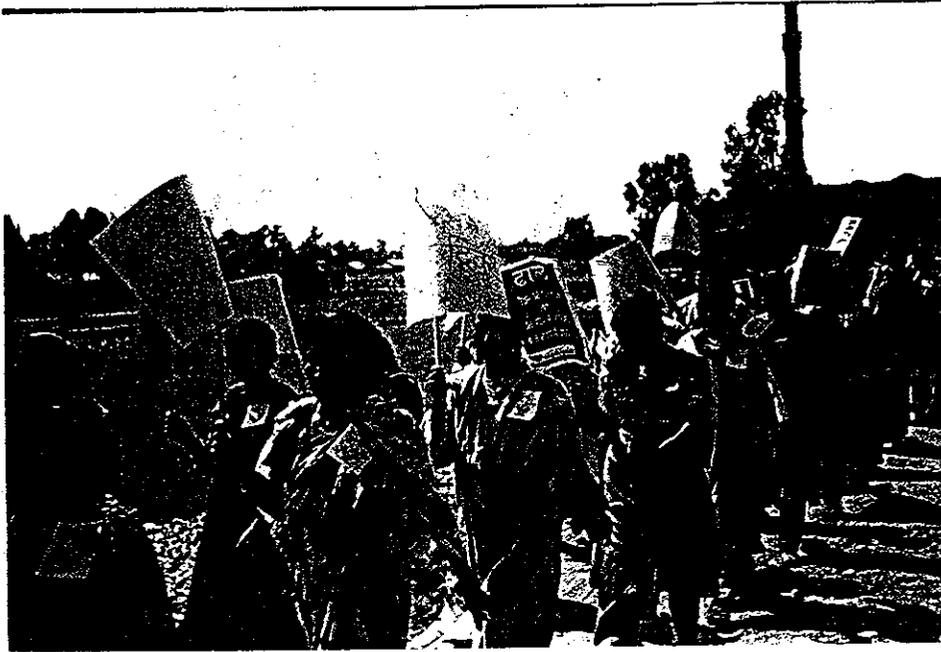
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Women's International Day Celebration in PMASS



Polio Day Rally

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Condom Day Rally



NGO observation tour in Bhattedanda Health Post, Lalitpur



VDC Strengthen observation tour in Kavrepataanchok



NGO observation tour for drug scheme program in Dhading and Bhattedanda