



Americares Nepal

**ANNUAL
REPORT**

2017

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ACRONYMS

ANM	Auxiliary Nurse Midwife
BNMT	Birat Nepal Medical Trust
CBPCB	Community Based Psychosocial Capacity Building
CVICT	Center for Victims of Torture
DHO	District Health Office
DRR	Disaster Risk Reduction
FCHV	Female Community Health Volunteer
HFOMC	Health Facility Operation and Management Committee
HHC	Himalayan Health Care
HSS	Health System Strengthening
mhGAP	Mental Health Gap Action Programme
MHPSS	Mental Health and Psychosocial Support Services
MoH	Ministry of Health
NPR	Nepalese Rupees
TPO	Transcultural Psychosocial Organization
USD	United States Dollar
VDC	Village Development Committee
WASH	Water, Sanitation and Hygiene

MESSAGE FROM THE CEO



For nearly 40 years, AmeriCare has responded to disasters and crises around the world. Since the earthquake struck Nepal in April 2015, we have collaborated with government and local partners to rebuild and strengthen the health system, working side-by-side to restore health services and help communities heal.

Now, nearly three years later, we remain committed to the nation's recovery. I visited Nepal in 2017 and saw for myself how our partnerships are improving lives. I met community leaders who are investing in a better future for their neighbors. AmeriCare is proud to be a partner in those efforts.

Nepal is among the 86 countries AmeriCare reached in 2017 with life-changing health programs, medicine and medical supplies.

We know that for people affected by disaster, health is essential. We thank our Nepalese partners for their support in saving lives and improving health after the devastating 2015 earthquake.

Michael J. Nyenhuis
President and CEO

MESSAGE FROM THE COUNTRY DIRECTOR

I am immensely proud to present our Annual Report 2017 and share AmeriCares Nepal's achievements and results from our pivotal post-recovery phase of operation in Nepal as we continue to pursue our aspiration of a strengthened health sector in Nepal.

This year marks the successful completion of the first phase of the Community Based Psychosocial Capacity Building (CBPCB) project as it got significantly applauded by the government and communities resulting in the project's extension to address communities' needs. Under our reconstruction and health systems strengthening efforts, we have reconstructed/repared fifteen additional health post buildings and handed them over to the government. This year is also important to us as AmeriCares commenced the mental health activities in the primary health care setting in Ramechhap district.

As we strengthen our focus on fragile settings post-earthquake, we have also tied our programs and projects to the Sustainable Development Goals. AmeriCares has emerged from this process more motivated than ever as we make a difference to thousands of vulnerable and marginalized people in Nepal. In the upcoming years we hope to expand our work to community empowerment; gender-based violence; ASRH, MNCH, WASH, and DRR.

The accomplishments over the year 2017 and the work ahead depends on the support and contributions of our partners, donors and dedicated staff. I celebrate the AmeriCares team who is unmatched in its dedication and talent. I also want to express my special thanks to the representatives of the Ministry of Health and respective District Health Offices teams of project districts for valuing AmeriCares philosophy and its approach to the progress of the health sector in Nepal. I also want to thank our implementing partners: IsraAID, BNMT, CVICT, HHC, and TPO for their relentless efforts and continuous cooperation.

We are looking forward to another amazing year at AmeriCares Nepal!

Rohit Odari
Country Director





Who We Are?

Founded in 1979 and headquartered in Stamford, Connecticut, U.S.A., AmeriCares is a health-focused relief and development organization that responds to people affected by poverty or disaster with life-changing health programs, medicine and medical supplies. Each year, AmeriCares reaches more than 90 countries and all 50 U.S. states with over \$800 million in innovative health programs and quality medical aid. AmeriCares is the world's leading nonprofit provider of donated medicine and medical supplies.



Americares Nepal

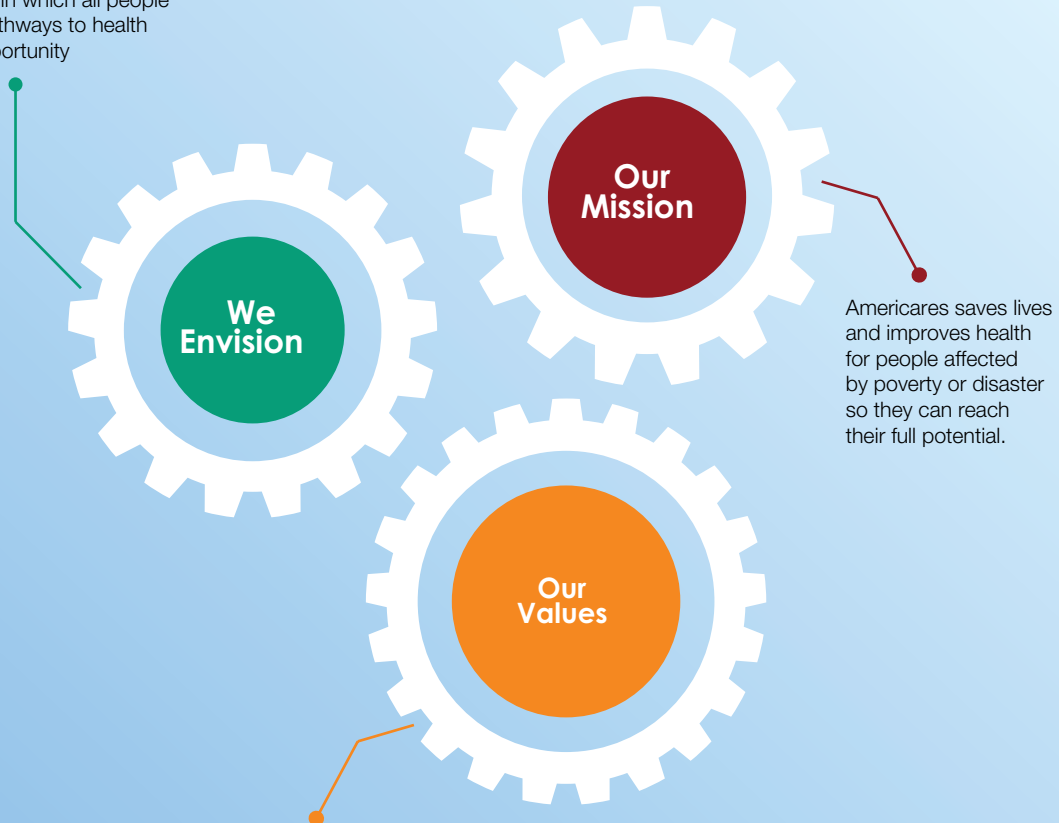
Americares is a registered international non-governmental organization in Nepal providing humanitarian aid and implementing health programs. Americares established its office in Nepal immediately after the devastating earthquakes in April and May 2015 and launched a large-scale relief support, bringing aid workers, medical teams, and emergency medicines and supplies to the disaster zone. In the initial days of the response, Americares supported the Government of Nepal and the Ministry of Health in the delivery of life-saving medical services and supplies and provided direct care to earthquake survivors.

As we moved into the third year of the recovery period, our programs and activities focused on restoring and strengthening health systems, addressing long-term health concerns including Mental Health and Psychosocial Support (MHPSS); Water, Sanitation and Hygiene (WASH); and Disaster Risk Reduction (DRR) in eight districts of Nepal.

Vision, Mission And Values

Our work is anchored in helping those struggling with disaster and poverty overcome the crises they face. Our hope is that they will have a pathway out. It is this pathway out of crisis that Americares aspires to create by working alongside the individuals, families and communities affected.

A world in which all people have pathways to health and opportunity

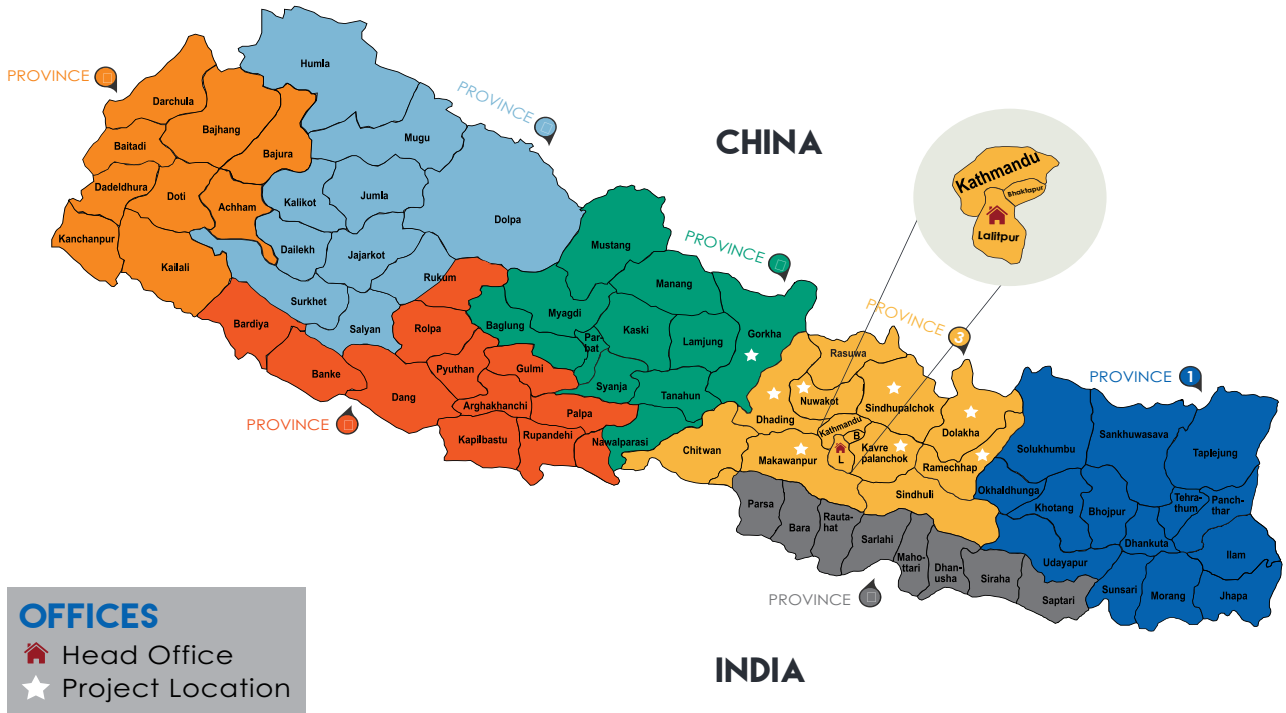


Americares saves lives and improves health for people affected by poverty or disaster so they can reach their full potential.

- Collaborative:** We achieve significant and lasting impact by combining the expertise and resources of our staff, partners and the people we serve, leveraging expertise and passion to help others and improve lives.
- Accountable:** We measure and demonstrate results to serve our diverse communities, partners and donors with transparency and integrity.
- Responsive:** We listen to the communities we serve and respond compassionately and nimbly to their needs. We provide assistance without prejudice, on the basis of expressed need.
- Effective:** We make a difference by working productively, using resources wisely and efficiently and producing meaningful, sustainable outcomes.

Our Presence

americares PROJECT COVERAGE DISTRICTS



2017 at a Glance

Americares has continued working in seven earthquake affected districts by providing MHPSS services and Health System Strengthening (HSS) support.

Americares has now expanded its presence to the eighth earthquake affected district of Ramechhap, where we are working towards integrating mental health services into the primary healthcare system.

Americares completed reconstruction of **15** health posts (including pre-fabricated Type 1 and Type 2 and semi-permanent buildings) in Dhading and Makwanpur districts and handed them over to the respective District Health Offices.

More than **5,500** community people and health workers, including Female Community Health Volunteers (FCHVs), were provided with training in the areas of MHPSS, WASH, DRR, and Menstrual Hygiene.

Americares reached **367,502** community members through its theater programs on MHPSS and the catchment population of **195,000** through HSS support.

All staff of Americares Nepal were provided training on Community Action for Disaster Response (CADRE) with the aim of empowering them with technical skills and knowledge to respond to complex, traumatic and volatile incidents such as hazards, disasters and emergencies.





Americares staffs receiving CADRE Training at Dhulikhel

Program/Project Highlights

COMMUNITY BASED PSYCHOSOCIAL CAPACITY BUILDING (CBPCB) PROJECT I & II



Theatre Program shown at Patalekhet, Kavre

This project was designed to provide psychosocial support to remote and isolated earthquake-affected communities. Across six districts, Americares and our partners are promoting community resilience by helping survivors develop long-term coping strategies, regain a sense of normalcy and fully recover. In the first phase of the project, by training Female Community Health Volunteers and Auxiliary Nursing Midwives (ANMs) and raising community awareness through theater forums, the project helped to create an effective community-led mechanism for psychosocial support at the grassroots level.

As the number of Mental Health and Psychosocial cases referred through the FCHVs, theater and community increased, the project was extended to its second phase with an objective of improving delivery of and access to quality MHPSS services through enhanced case management. The project also works with newly elected local government officials sensitizing them on mental health issues and advocating to mainstream these issues at the local level for its long-term sustainability.

A robust evaluation study of the project was also conducted by research partner, Social Science Baha, to understand the effectiveness of the MHPSS program in the target communities. The study aimed to evaluate the knowledge local people have about MHPSS issues and the extent to which participation in the CBPCB project increased their resilience and decreased the prevalence of mental health issues in the communities served.

The project is implemented in partnership with IsraAID, Center for Victims of Torture (CVICT) and Transcultural Psychosocial Organization (TPO) Nepal.



6 districts covered (Dhading, Dolakha, Gorkha, Kavre, Nuwakot, & Sindhupalchowk)



2,389 FCHVs and 196
Auxiliary Nurse Midwives trained



937 Theater Events performed targeting
271,961 audience members and
353 follow-up Theater Events performed
targeting
94,007 audiences



1,856 cases reported and 501
cases responded

“After this training I am capable to save the life of a girl who planned to attempt suicide. I felt this was my greatest achievement in my lifetime and I was proud to be an FCHV and happy to be involved in this training.

Female Community
Health Volunteer,
Maneshwora,
Sindhupalchowk

► IMPACT STORY

Nishan Tamang (name changed), 18, is a resident of Nuwakot. He developed epilepsy symptoms like fainting, seizure and difficulty to control urine and stool when he was 12. His mother and family initially approached traditional healers for the treatment. However, they could not find any improvement in his conditions and the problem worsened with other psychosocial issues such as aggressiveness, low confidence, low self-esteem, and sleeping disturbances. This case was then referred to AmeriCare's supported CBPCB project implemented by TPO Nepal by one of the trained FCHVs. The FCHV had received four days of training on psychosocial and mental health care.

During the counseling session, the counselor initially assessed Nishan's problems, and then provided counseling to both his family and himself. The counselor also provided psycho-education about epilepsy and referred Nishan to a psychiatrist for further medical assessment, who then prescribed him medicines. The counselor has been continuously following up and is providing psychosocial support to help Nishan deal with his sleeping disturbances and boosting his self-confidence. Nishan was also encouraged to take medicines according to doctor's advice and attend counseling sessions regularly. During the sessions, the counselor also taught him some alternative techniques like reverse counting and anger management skills. After the sessions, his coping skills became more constructive and positive changes were visible.

With all of these interventions, Nishan's earlier symptoms of epilepsy are also reducing. His mother became emotional and said that "Had my son's problem been diagnosed five years ago, he would not have dropped out from school due to his problem". She is immensely thankful to the counselor and the project.



Staff quarters of Dhading District Hospital, Dhading

DHADING HEALTH FACILITIES POST-QUAKE REPAIR AND RECONSTRUCTION

Working alongside a national health partner, Himalayan Health Care (HHC), AmeriCare reconstructed eight health facilities damaged or destroyed in eight former VDCs of Dhading district during the 2015 earthquake and handed them over to the District Health Office. These include retrofitting/renovation of two old buildings and construction of six semi-permanent Type 2 buildings. In addition, AmeriCare is also supporting the construction of a permanent structure for staff quarters and an outpatient department at Dhading District Hospital in Dhadingbesi Municipality. The restored facilities serve a population of more than 140,000 people in the following remote Wards of Tipling, Lapa, Ree, Jharlang, Salang, Pida, Bhumisthan, and Chatre Deurali and Nilkantha Municipality.

With the construction of these new and fully functional health posts, the catchment population has easier and better access to safer and more spacious physical structures for health services.

► IMPACT STORY

"Fortunately, we got this new building and we are so happy to be working in the newly built infrastructure that has all essential rooms and facilities including toilets, drinking water and electricity. Prior to this construction, we were delivering health services under temporary makeshift tents and tin sheds and our staff quarter was in old cracked buildings. Those temporary sheds and cracked buildings were very unsafe to work at which hindered our ability to provide quality health services to the patients and clients. At that moment, we had a very difficult time to store medicines, medical supplies and instruments to save them from insects, dust, rain, and weather. As a result, we could not attend to delivery cases and emergencies. These disruptions had reflected on descending patient flow, i.e. to 250 patients and 2 deliveries in a month. Finally, this health post had come as a great relief for us and we are deeply thankful to Americares Foundation for the financial support to this Tipling health post".

- Mr. Liliman Tamang, In-Charge, Tipling Health Post

"Three months ago, my father-in-law suffered from diarrhea and we went to the old health post. But over there, the service was delivered under the tent and there was no toilet, water or bed for the patient. Now in this building, everything is available and we feel good and happy to come to the health post. This newly built health post building is a good model for the entire region and it looks nice and safe."

- Kamaya Tamang, Lingjo, Ward-9, Tipling



OPD Building of Dhading District Hospital, Dhading



Newly constructed Health Post, Makwanpurgadhi, Makwanpur

HEALTH FACILITIES RECONSTRUCTION AND HEALTH SERVICE STRENGTHENING IN MAKWANPUR DISTRICT

This project aims to strengthen health service delivery and promote community health throughout Makwanpur. Partnering with Birat Nepal Medical Trust (BNMT), Americares, in the first phase of the project, supported reconstruction of four pre-fabricated Type I Health Post buildings in Tistung, Nibuwatar, Phakel, and Makwanpurgadhi as per the government guidelines. The health posts were built in close coordination with MoH and have been handed over to the Government of Nepal. Similarly, in the second phase of the project that started in August 2016, we completed reconstruction of three pre-fabricated Type -I Health Post buildings in three remaining wards — Basamadi, Dhial and Khairang. The project has also equipped all seven health posts with essential medical equipment. These reconstructed facilities serve a catchment population of 294,667 individuals.

Along with the reconstruction activities, in the second phase of the project, public health interventions including training to health workers, local leaders, teachers, and students and awareness campaigns are being conducted in the areas of WASH, MHPSS and DRR in close coordination with government line agencies, other concerned stakeholders and the communities. In addition, we are conducting baseline and endline evaluations of the project activities in order to measure the impact of the programming on the community.



Construction of 7 health posts completed and handed over to the government



529 prescribers and non-prescribers (FCHVs, Community Leaders and HFOMC members) trained in MHPSS



915 community people and students provided with psychosocial support services



135 HFOMC members oriented on improved and sustained WASH programs in communities



121 HFOMC members oriented on Disaster Risk Management



50 Health Workers trained on the principles of mass casualty management and health sector emergency response



297 students benefitted from knowledge on Menstrual Hygiene Management

► IMPACT STORY

Kanchha Syantang is a 60 year old farmer living in the outskirts of Tistung ward with a family of ten members. Unknown that he was living with mental illness for the last 14 years, he used to run away from home to return only at nights. When asked why, he said, “The police are chasing me.”

In 2015, his home was fully destroyed by the earthquake. Due to this, he was even more anxious than before. He had difficulty in sleeping, feared crowds and was restless. He used to say “Aayo Aayo” (earthquake is coming) most of the time without any reason. Eleven months ago, he ran away from home for three days. Fortunately, he was found near the river, but in critical condition. He had blood spots all over his body and his index, middle and ring fingers of his right hand were found to be chopped and scattered around a stone. Kanchha's family members took him to the health post for the treatment of his finger. When asked about that accident he was disoriented about his condition. There, the Health Assistant, trained in MHPSS, counseled him and referred the case to Patan Hospital. With the support of AmeriCares for travel and treatment, he went under medication in Patan Hospital for two months.

Along with the medication, Kanchha was regularly counseled by the project's District Coordinator, as well as a trained counselor. As a result, his mental and behavioral condition has improved and he has started his regular work of farming. The counselor is continuously following up with him and advising him on the medication.

Kanchha's family are now relieved to see him normal and happy. “We are and will always be grateful to AmeriCares and BNMT Nepal for helping us”.





INTEGRATION OF MENTAL HEALTH AND PSYCHOSOCIAL SERVICES IN THE PRIMARY HEALTH CARE SYSTEM IN RAMECHHAP (MHIRA)

Following the Inter-Agency Standing Committee (IASC) guidelines on MHPSS in emergency settings and WHO's mhGAP intervention, this project implements the adapted version of mhGAP V2.0 in Ramechhap district with an aim of integrating mental health services into the primary health care system by training the health workers (both prescribers and non-prescribers). In addition, the project follows Standard Treatment Protocol of the Ministry of Health to ensure the minimum standard of the trainings and clinical services. The project uptakes a multi-sectoral approach and a layered support system to address the mental health and psychosocial wellbeing of people. MHIRa incorporates primary prevention of psychosocial problems through early identification and referral of those with MHPSS needs by coordinating with other agencies. A second level of support includes Psychological First Aid and basic emotional support, facilitation of theme-centred discussion groups, and screening of those in need of counselling and/or therapeutic group work. At the health facility level, trained non-prescribers will provide individual and group counselling, whereas people in need of medication will be treated by the mhGAP-V2 trained prescribers.

The project started its interventions in December 2017 and is implemented by TPO Nepal in two local administrations - Khandadevi Rural Municipality and Manthali Municipality.

EMERGENCY RESPONSE



Responding to flooding crisis in Saptari

Americares responded to the severe flooding of August 2017 in the Terai belt (southern plains) of Nepal that affected more than six million people. Responding to this emergency, Americares transported medicines and medical supplies to 10 districts of Nepal. Americares also donated medicines worth USD 5,000 to the District Health Office, Saptari and additional medicines worth USD 10,000 in coordination with Fairmed, to the Department of Health Services in Kathmandu. Additionally, in partnership with IsraAID, Americares organized five mobile camps in the flood affected district of Saptari where more than 1,700 patients were treated. These camps were organized in close coordination with the District Health Office, Saptari and the treatment services were provided on MHPSS and general health checkup. Together with treatment services, 600 hygiene kits were distributed to the affected families.



Distributing relief materials on the flood affected area of Saptari

Financial Statements

Americares Foundation

Kathmandu, Nepal

BALANCE SHEET

As on Asadh 31, 2074 (July 15, 2017)

Figures in NPR

Particulars	Schedule	31 Ashad 2074	31 Ashad 2073
<u>ASSETS</u>			
Non-Current Assets		3,757,616	105,315
Property Plant & Equipment-net	1	3,757,616	105,315
Current Assets		18,973,461	325,698
Cash & Cash Equivalents	2	295,847	268,298
Advances & Deposits	3	47,588	57,400
Advance to partners	4	18,630,026	-
Total		22,731,077	431,013
<u>FUNDS & LIABILITIES</u>			
Non-Current Liabilities		-	-
Current Liabilities		18,739,798	352,052
Deferred Revenue	5	18,630,026	269,198
Trade & Other Payables	6	109,772	82,854
Fund Balances		3,991,279	78,961
General Fund			78,961
Capital Asset Fund	7	233,663	
		3,757,616	-
Total		22,731,077	431,013

Americares Foundation

Kathmandu, Nepal

STATEMENT OF INCOME AND EXPENDITURE

For the period from 01.04. 2073 to 31.03.2074 (July 16, 2016 to July 15, 2017)

Figures in NPR

Particulars	Schedule	F.Y.2073/74	F.Y.2072/73
REVENUE			
Grant Income	8	84,264,960	7,742,436
Other Income		828,099	-
Total Revenue		85,093,059	7,742,436
EXPENSES			
Support to partner organizations	9	69,307,457	-
Salary & payroll related cost		10,571,503	2,289,716
Rent & occupancy cost		906,672	983,717
Relief supplies & support cost			904,665
Traveling cost		1,475,794	2,166,599
Professional service cost		626,094	309,640
Other operational cost	10	1,412,975	978,734
Depreciation	1	824,049	4,050
Tax expenses		-	26,354
Total Expenses		85,124,544	7,663,476
Net surplus/(deficit) for the year		(31,485)	78,961



Our Team

Our team is comprised of dedicated professionals who are passionate about global health and emergency response. Each and every employee represents the spirit of Americans: to save lives and build healthier futures for people in crisis.

Our Partners

- Ministry of Health, Government of Nepal
- BNMT Nepal
- CVICT Nepal
- Fairmed
- Himalayan Health Care
- IsraAID
- TPO Nepal
- Social Science Baha

A close-up photograph of a young child wearing a pink and yellow striped knit hat with a small horn-like detail on top. The child has a bindi on their forehead and is smiling broadly, showing their teeth. They are wearing a red and black striped garment.

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