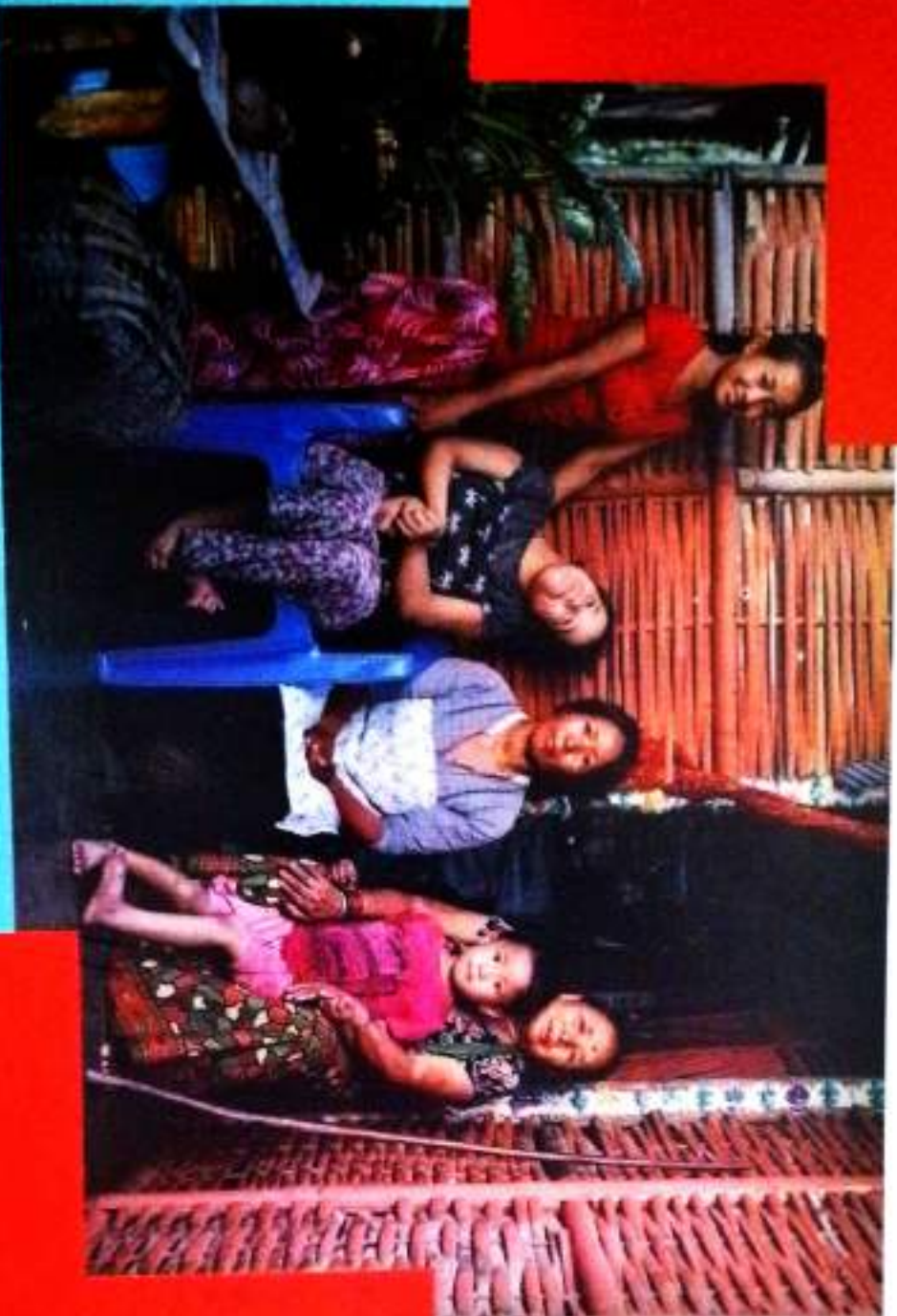


until
No Leprosy Remains



ANNUAL REPORT 2018



Advancing Health & Ability

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Message from Country Director

Dear Partners, Friends, Well-wishers and Co-workers,

It is my great pleasure to work with NLR Nepal since the last 5 years including in leading role of the Nepal office from 1st March 2018. NLR started working in Nepal since 1977 and the organization underwent through various strategic phases of health sector support before stepping towards the portfolio of disability inclusive development from a purely leprosy focused organization. The year has been a year of action, experiments, achievements and learning.

Main activity targets were directed towards innovative approaches both in leprosy control and disabilities inclusive development. To support Leprosy Control Program, LPEP remained the major focus also in 2018. Till the end of 2018 (2015-2018) a total of 62,611 persons are provided with Single Dose Rifampicin (SDR) out of the 68,976 contacts screened tracing 2,918 index cases. LPEP piloting has been wrapped up in December 2018 and has now become an integral part of routine leprosy program in national level.

The integration of leprosy control and prevention program into an inclusive development programme including disability and WASH has been fully owned by the local Government and Communities within the package program of Inclusive development and is well appreciated. This has encouraged us for the replication in other municipalities of NLR Nepal working area.

I am pleased to say that we have been able to achieve in maximum of the plan made for 2018 despite of internal and external factors including in searching the resources for the projects. For this achievement, I would like to thank the Government authorities, all the partners, well-wishers, co-workers and staff members for their consistent technical, financial and moral support.

Sincerely,



Himalaya Sigdel

Country Director

NLR Nepal

Acronyms



LPEP	Leprosy Post-Exposure Prophylaxis
OM	Outcome Mapping
SDR	Single Dose Rifampicin
BPs	Boundary Partners
KPPs	Key Priority Programmes
CBRFs	Community Based Rehabilitation Facilitators
SWC	Social Welfare Council
ILEP	International Federation of Anti-Leprosy Association
DPOs	Disabled Peoples Organizations
NFDN	National Federation of Disabled Nepal
LCDMS	Leprosy Control and Disability Management Section
EDCD	Epidemiology and Disease Control Division
NNSWA	Nepal National Social Welfare Association
TLMN	The Leprosy Mission Nepal
NLF	Nepal Leprosy Fellowship
KZHH	Koshi Zonal Hospital

Who We Are

NLR Nepal is a non-profit, non-religious & non-political development organization working in Nepal for over 40 years. It promotes health, specifically in making the country free of leprosy and inclusion of persons affected by Leprosy by enhancing their ability. NLR Nepal supports Governments & local NGOs in carrying out different project activities including leprosy control & disabilities inclusive development. The emphasis is primarily on changing of the behavior, relationships & actions of local Government and non-government partners through capacity building. NLR strives to work and coordinate activities consistently with other likeminded national and international organizations.

Our Vision

A world free of leprosy and exclusion due to disabilities

Our Mission

Promote and support health, ability and full inclusion in society for persons affected by leprosy and persons with disability.



Strategy

Currently, NLR Nepal is undertaking the program activities guided by the five years' project document approved by Social Welfare Council (SWC) for the project period 2016-2020 based on Outcome Mapping as Program Monitoring and Evaluation strategy. It implements its projects through the Boundary Partners (BPs) fulfilling the requirements set by the Government of Nepal.

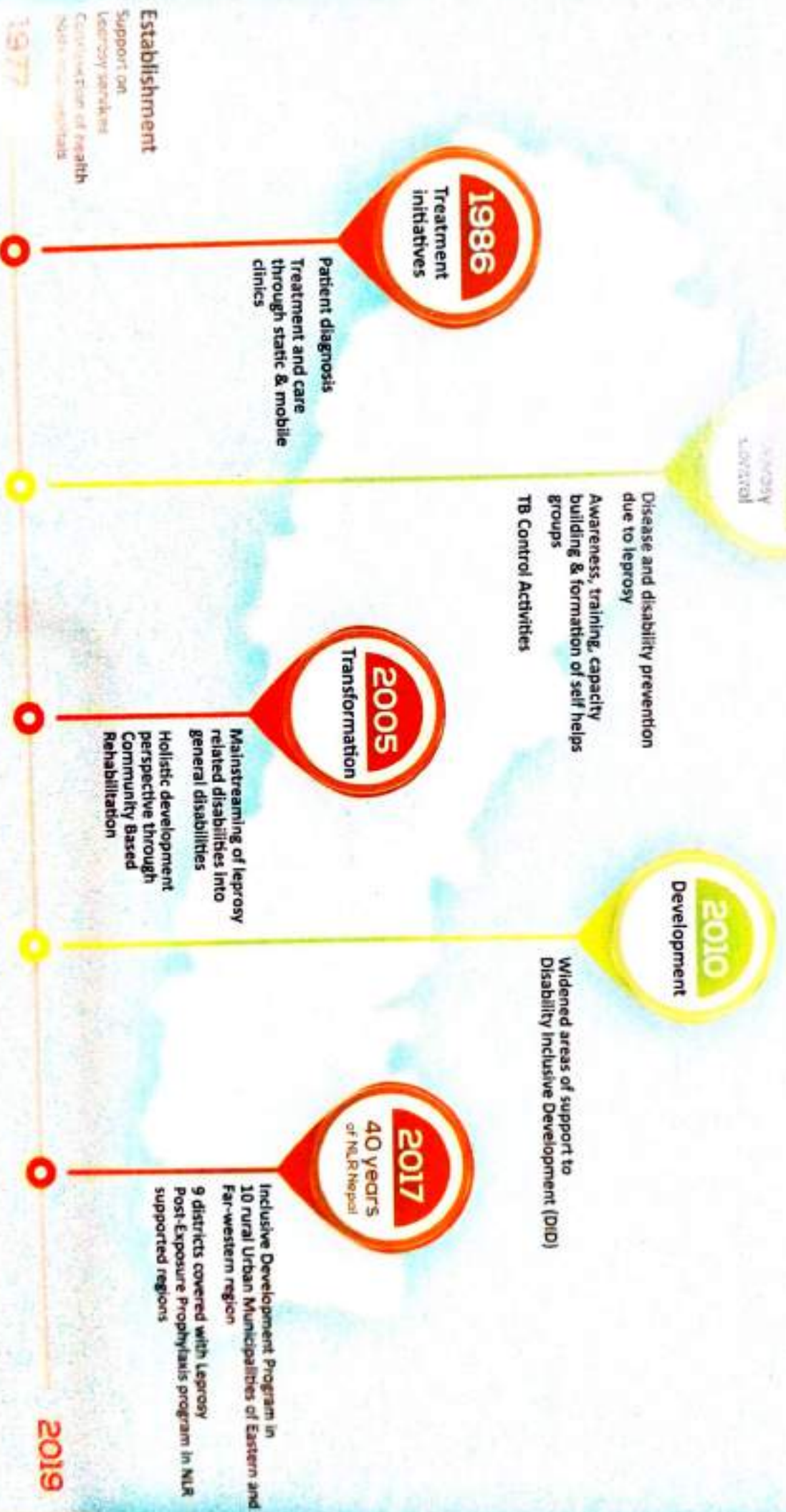
NLR Nepal supports Governments & local NGOs in carrying out different project activities including leprosy control and disabilities inclusive development. The emphasis is primarily on changing of the behavior, relationships and actions of Boundary Partners (BPs) through capacity building. NLR strives to work and coordinate activities consistently with other strategic partners or international organizations.

Outcome Mapping (OM) Approach

The monitoring and evaluation system (M&E) based on the Outcome Mapping/Outcome Harvesting has been in place since past three years which has been strengthened with an electronic data base Outcome journals and Strategic journals are the main tools for monitoring project outcomes.

NLR Nepal has adopted OM as PME tool for this project period where as main focus of OM is outcomes, which relates to the changing knowledge, attitude, action/policy and relationship of BPs. In this regards, main focus of the program is strengthening the capacities of BPs.

Later in this report, we have kept the program outcomes for the year 2018 that were generated from Outcome Harvesting. In Outcome Harvesting, an outcome is what each social actor did, or is doing, that reflects a significant change in their behavior, relationships, activities, actions, policies or practice.



Program Achievements 2018



- GON has taken ownership and included Post Exposure Prophylaxis for Leprosy (PEP), which was successfully pioneered by NLR Nepal in the country strategy document with resource allocation for its proper execution and expansion.
- All the municipalities notified with significant number of cases of (159 municipalities) are covered with complete inventory.
- Twenty Eight Leprosy affected persons are representing in Executive body of 15 DPOs in various positions.
- Four Boundary Partners including local government body (10 Municipalities) have clear mandate to work on Inclusive Development program with matching fund.
- Joint venture has been started in 10 Municipalities covering 32,020 (including family members) direct rights holders/beneficiaries.



Achievements in 2018



852

New Leprosy Cases detected



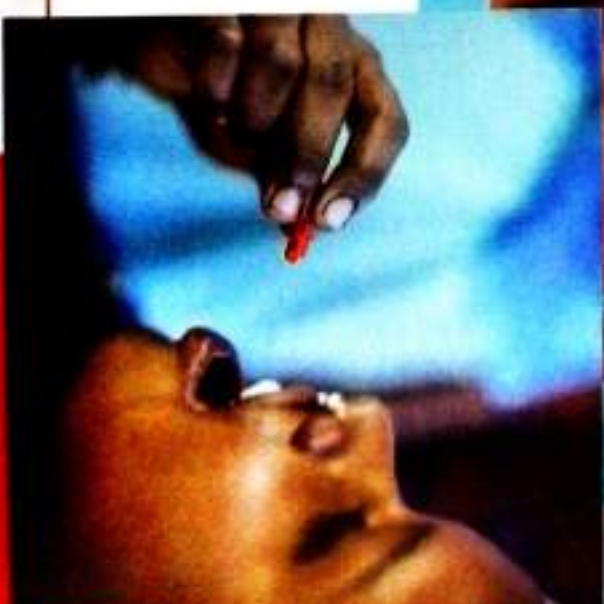
24

Cases of Tuberculosis detected



2918

Index Cases Covered





New Cases Detected with PEP intervention



274

Direct Contacts of New Patients with
SDR administration



14407

People trained on leprosy



1154

Districts covered with PEP intervention
within NLR Nepal working area



9



10

Disabled Peoples Organizations (DPO) received assistance from NLR



899

People supported for Medical Rehabilitation



46

People provided with Reconstructive Surgery



260

People provided with micro credit





Persons with disabilities oriented on their rights



276

People provided with leadership training



110

Rural Urban Municipalities created matching fund for Inclusive Development program



10

Persons with disability provided with Identity Cards



2046





गणतन्त्र नेपाल
समाजिक विकास मन्त्रालय
प्रदेश १, नेपाल

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APPRECIATION LETTER

Netherlands Leprosy Relief (NLR)

Ministry of Social Development, Province 1, Provincial Health Directorate
Charakda appreciates the contributions of your organization in the area of Leprosy and disability.
We look forward to receiving your organizational contributions to fight against Leprosy and reducing disability in future as well.

Thanking You,

David Lal Urrutia
TB/Leprosy Officer



Bhagendra Raj Dorai
Health Director
Health Directorate
Charakda, Province 1

World Leprosy Day
27th January, 2018



Key priority Programmes (KPPs)



1

Stop Transmission

Promote through PEP intervention in all the leprosy endemic districts with ownership of GON and partnership with GON and I/N-GOs/NGOs).

2

Combined approach for prevention of disabilities

Empower communities to be inclusive for persons with leprosy-related disabilities and persons with other disabilities

3

Disability Inclusive Development

Establish and expand DID model work in different Urban/Rural Municipalities

4

Reduce stigma and discrimination

Focus on reducing stigma and discrimination against leprosy, NTDs and disabilities by promoting systematic inclusion



Out of four Key Priority Program (KPPs) considered only two KPPs (KPP1 & KPP3) for 2018, whereas activities related with "Integrated Self-help Group - I-SHG" and "Stigma & Discrimination - KPP4" are mainly included within KPP3 (Disabilities Inclusive Development).

KPP1- Stop Transmission

NLR focused its strategy on supporting innovative or need based activities rather than regular leprosy control activities. LPEP and establishing leprosy inventory in province 1 & 7 were the major planned events for 2018 and both of them were successfully executed.

LPEP Pilot Project

The Leprosy Post-Exposure Prophylaxis (LPEP) pilot project which was jointly started by NLR Nepal and Ministry of Health in 2015 has been completed this year and the PEP program has now become an integral part of routine leprosy program in national level. This program has also been replicated in 9 other districts. The pilot project was implemented in three districts Jhapa, Morang and Parsa with financial support from Novartis Foundation.

For LPEP piloting till December 2018, out of 54,541 listed contacts of 2439 index cases 54,207 (99%) were screened and 51,122 (94%) were provided with Single Dose Rifampicin (SDR). Out of the total contacts screened, a total of 248 new leprosy cases and 24 new TB cases are detected. During the period, 4533 service providers were trained whereas 1873 people were oriented from those piloting districts. LPEP piloting has been wrapped up in December 2018 and has now become an integral part of routine leprosy program in national level. According to the results, contacts coverage per index cases is 23. Early case detection is promoted & new cases of Leprosy/TB detected from risk populations. Moreover, community participation for leprosy control program has increased (~ 200,000 Popn).



Stories from the field

51 years old Nannu Ram Choudhary, a resident of Badkemuda, Kailari Rural Municipality-3 was diagnosed with leprosy and had received treatment two decades ago. After a decade, he received further treatment for his legs and could easily walk again. Later he received seed grant from NLR Nepal for livelihood support and now he is able to look after his family well.

Ten years after my treatment for leprosy, I noticed some difficulties with walking but didn't care about it. After being diagnosed with Right foot drop, I was provided with spring shoes along with some medications.

A year later, reconstructive surgery was done at Tikapur Hospital during the reconstructive surgery camp and I could walk easily again. During the same year, NLR Nepal also provided seed money of Rs. 5000 as livelihood support. Adding some other funds I started small shop and bicycle repairing shop in the village and running successfully till now.

It was very difficult for me to run my family before with limited resources. But now, with the shop, my bicycle workshop and some livestock; I am able to run my family of eight members happily. Though my two sons are working as labor outside the district, I became able to provide them with education up to higher secondary level.

KPP3-Inclusive Development

Municipality level orientation programs were conducted on Inclusive development (ID package program) and its seven components. Municipalities were selected for Inclusive Development program on the basis of the need, their capacity and interest for program implementation. Suitable environment for coordination with municipalities was created with initial resource mapping. Memorandum of Understanding (MoU) had been signed with 10 municipalities and CBRFs were recruited accordingly. Furthermore, ID package program had also been incorporated in Municipalities' annual planning & resources allocation. Proper execution of leprosy work within ID package with the proper ownership of local Government has been started and some of the Municipalities has planned to declare leprosy free Municipalities by 2020.

Situation analysis with census survey has been conducted in 7 Municipalities and then municipality level profile with complete baseline situation has been established which is expected to serve an important basis for periodic integrated planning. The innovative conceptual framework of inclusive development (ID) together with its seven components as an updated version of 'Model communities on DID', which is already justified as effective innovation of NLR Nepal from its evaluation done in 2017, has settled with proper shaping in those Municipalities this year.





Stories from the field

'There has been increase in number of women visiting health-post for their prenatal check-up'.

Women in Bayarban Municipality hardly visited Health Centre for institutional delivery. Bayarban Birthing Centre had all necessary medical equipment and abundant electricity supply but due to absence of adequate human resource, these equipment were barely utilized. Once, a woman who visited the centre for delivery died after giving birth to her child. Since then, the people in Bayarban Municipality had lost faith in institutional delivery and number of women visiting the birthing centre was very low or none.

Health division of Kanepokhari Municipality conducted various levels of discussion and additional nurses were temporarily appointed for 24 hours services at the birthing centre. 'Best Wishes' program under Inspire2Care was carried out for newly married couples and expecting mothers. Orientation on safe motherhood and distribution of 'best wishes card' was conducted in the community. Kanepokhari Municipality decided to provide incentive of Rs.5000 to women who visited the birthing centre for delivery and the women who got referred from the birthing centre were also provided with incentive of Rs.1000.

24 hours service has become available for all expecting mothers from all seven wards in Bayarban Municipality. This year the birthing centre witnessed 14 successful institutional delivery and people have regained faith towards it.

Major Activities



As an integral part of the project agreement, NLR Nepal organized a Central Project Advisory Committee (CPAC) meeting under the chairmanship of Member Secretary of SWC, Mr. Rajendra Kumar Poudel to review and analyze the progress and achievement of programs being conducted by NLR through its boundary partners in Province 1 and Province 7. Along with central level, these meetings were also organized in districts and municipality level recommendations had been incorporated to the possible extent.



With joint collaboration of NLR Nepal & rural/urban municipalities, two sharing and review meetings on Inclusive development program were organized with the Chairperson and Vice-chairperson of all 10 municipalities. Two slots of trainings, basic and refresher, conducted for recruited CBRF from all the Municipalities.



With financial support from NLR Nepal, Kankain Municipality organized a five days Inclusive Development training for Community Based Rehabilitation Facilitators (CBRFs) at Kawalgudi from 22nd to 26th April, 2018. The training intended to share the background of Inclusive Development program with its seven components, create clear understanding on disability inclusive development activities, enhance Capacity of CBRFs and influence them towards the program. Later in December a refresher training was conducted for the same CBRFs at Suklaphanta, Kanchanpur with technical support from NLR Nepal, National Nepal Social Welfare Association (NNSWA) and the Health Coordinators from different municipalities.



The first KPP2 workshop on Combined Approaches for Prevention of Disabilities (POD), was held from 27-30 May in Biratnagar, Nepal. It was a first inception workshop, to discuss possible collaborative efforts in sharing and learning on combined approaches for POD. In the workshop, a total of 17 persons participated: 11 from NLR country offices in Nepal, India, Indonesia, Brazil and Mozambique, 3 from partner organizations of NLR Nepal (IDEA, REED and NLF), and 3 from our ILEP partner organizations Lepira Society India, TLM Nepal, and TLM Bangladesh. The aim of the KPP2 workshop in Nepal, was to start up a learning and exchange platform on combined approaches and brainstorm ideas for possible joint projects in this field.



NLR Nepal organized central and provincial level LPEP strategy workshop with participation from local and national government authorities as well as LPEP supervisors & Partner organizations. The major objective of the workshops were to share the performance status, achievements & challenges faced among the stakeholders from LPEP piloting of Nepal. The workshop further aimed to influence the policy makers & related key stakeholders on the importance of LPEP program as a key aiming to achieve "Stop Transmission" on leprosy. The participants also contributed in developing strategies on sustainability and expansion of LPEP program to other relevant areas.

A national level LPEP Task force meeting was organized by Epidemiology and Disease Control Division (EDCD) with technical support of NLR Nepal on 14th of November, 2018 in Kathmandu. The program was conducted under the Chairmanship of Dr. Bibek Kumar Lal, Director of EDCD with the objective to disseminate performances and achievements from the LPEP pilot districts, Morang, Jhapa and Parsa as well as to discuss and decide on strategies for continuing LPEP interventions as regular activities in those districts and roles and responsibilities of the government and supporting partners for such continuation.



An exciting journey along the road has been started towards a new NLR in which all parties contribute and work alongside in order to maximize our quality and impact for our common dream, a world with zero leprosy, disabilities and exclusion. In line with the notion of NLR alliance, the N.L.R. Nepal as a local organization has been registered in 2018 with a competent chair and board of six with high profile including two female members.

until
No Leprosy Remains

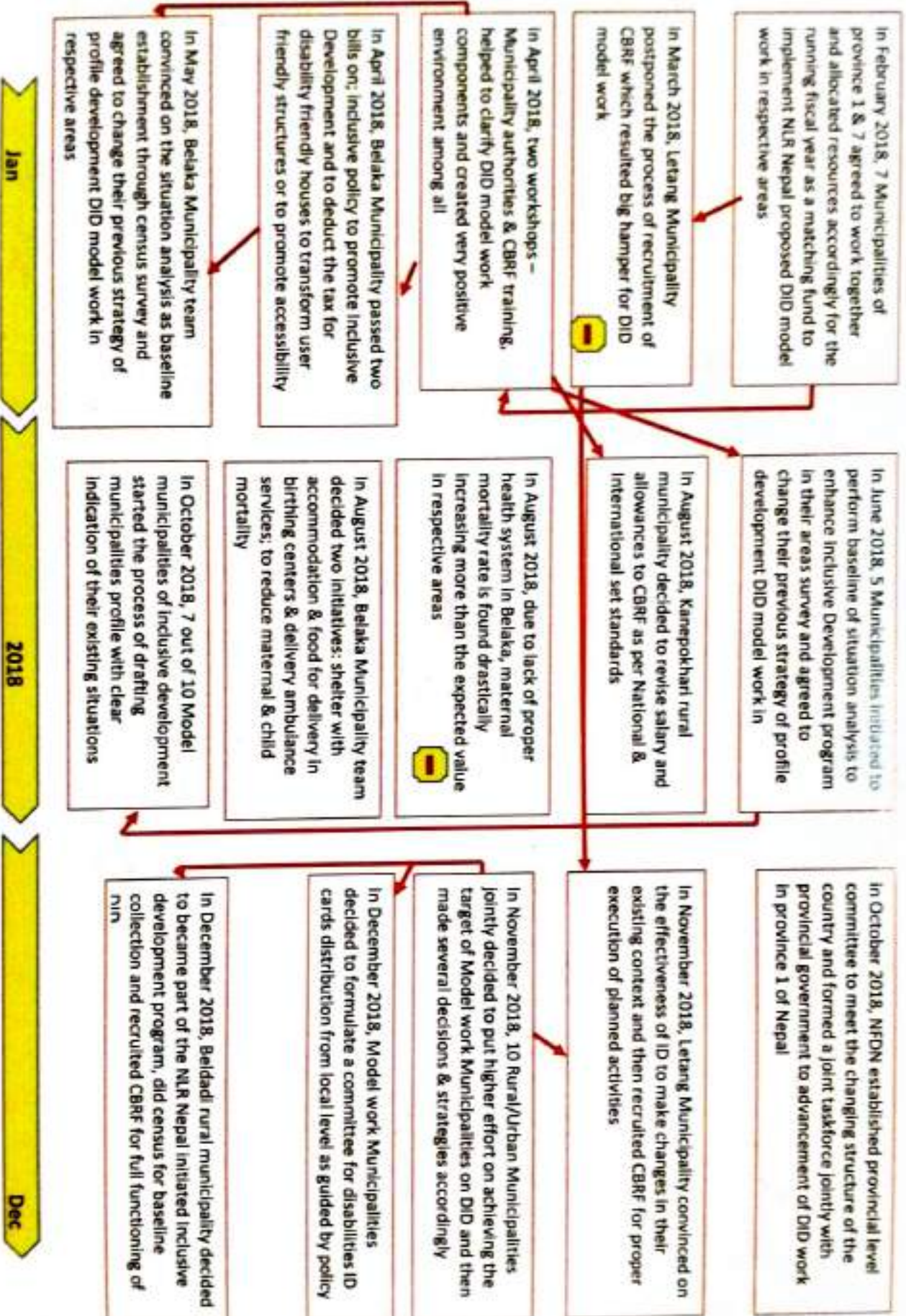


NLR Nepal developed an MIS system to manage the existing census database and to conduct online/offline survey in different Municipalities. The data collected will help local government to analyze, plan and make decision on strengthening municipal services. By creating and managing the database, NLR would promote and support the health, ability and full inclusion in society of people affected by leprosy and persons with disabilities. The MIS system will be later handed over to the municipalities for management.

NLR Nepal hosted a three days International Workshop on KPP1-Stop transmission of Leprosy program on 23rd May to 25th May, 2018. All five countries of LPEP intervention participated in the workshop including national and local stakeholders. The focus of the programme was on 2018, but it aimed to work on the long term planning towards targets set 4 years from now (2022). The workshop was set up to develop the programme in collaboration with partners, based on existing needs. Mainly, the workshop intended to have a clear understanding of common indicators and expected results of the program among the participants, and to explore ways to work towards those results.



Outcome Harvesting January-December 2018



Partners and Stakeholders



The major stakeholders involved in the NLR Nepal program are persons affected by leprosy & their families, persons with disabilities & their families, self-care & self-help groups, community based organizations (CBO), Disabled People Organizations (DPOs), Community Based Rehabilitation (CBR) organizations, Community consumer groups, Government & non-Governmental organizations. There has also been a strong linkage with leprosy & disability related organizations and need based coordination is maintained with organizations working in other developmental sectors.

NLR Nepal is the member of different Networks such as AIN at National & Regional level, Nepal Leprosy Network (NLN) at National level, AIN Health Working Group and Disability Working Group at National level, Regional health taskforce at regional level. Further, NLR is frequently invited as a member in events within networks of education, health & disabilities.

NLR worked with the following boundary partners during the reporting year 2018;

The boundary partners of NLR are Leprosy Control and Disability Management Section under Epidemiology and Disease Control Division of Ministry of Health, National Federation of the Disabled Nepal (NFDN), Nepal Leprosy Fellowship (NLF), Nepal National social welfare Association (NNSWA), The Leprosy Mission Nepal (TLMN), Koshi Zonal Hospital (KZH) and Seti Zonal Hospital (SZH). NLR Nepal also promotes involvement of other local NGOs, CBOs and DPOs in its works in leprosy as well as Inclusive Development.



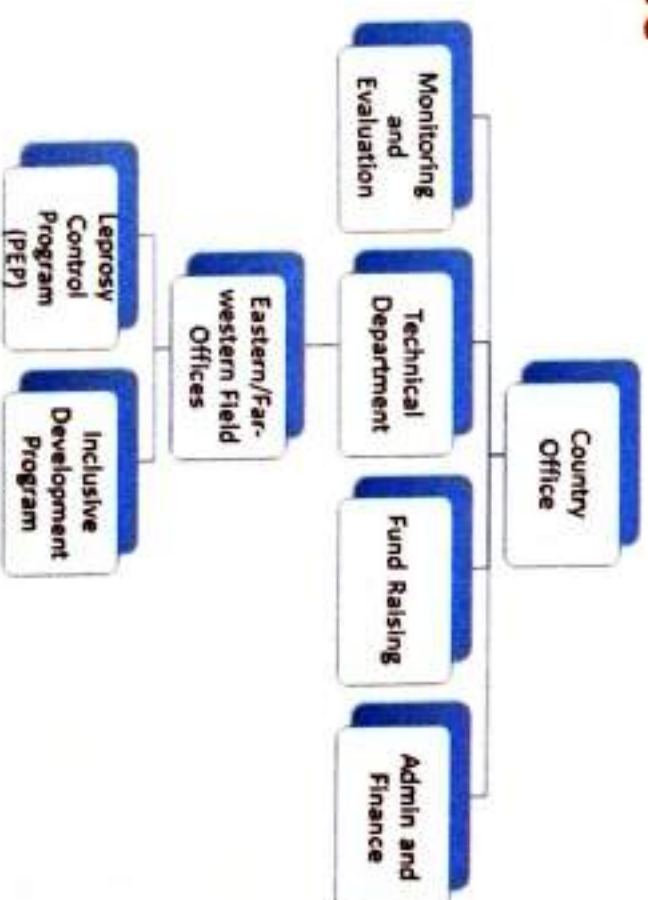
Management & Administration

The country office is led by country Director. NLR Nepal have two field offices one in Biratnagar of Province 1 and in Dhangadhi of Province 7.

The coordination and communication among the Government authorities and boundary partners has been continued and NLR Nepal has been able to influence the Municipality authorities to put Outcome mapping approach in practice.

NLR Nepal has run smoothly making the country office stronger and field offices equipped with technical team. Furthermore, this year NLR Nepal has amended gender balanced workplace with recruitment of female staffs in major positions. The newly recruited staffs are motivated and taking the momentum based on their Job description including implementation the OM approach.

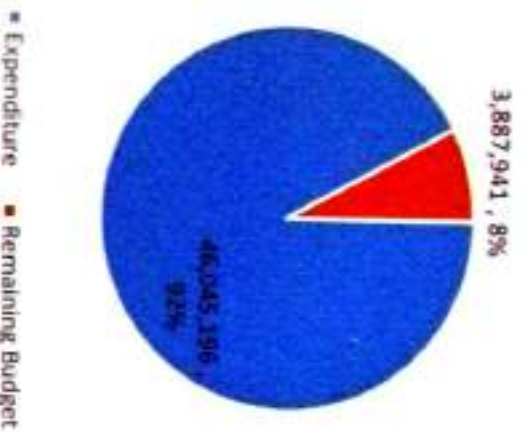
Organisational Structure



Financial Report

NLR in Amsterdam is the major donor for NLR in Nepal in the last fiscal year. Besides this Novartis Foundation provided funds LPEP program. The total budget of NLR Nepal in 2018 was NPR 49,933,137

Budget Vs Expenditure, n=49,933,137



Admin & Program Cost







Acknowledgements

- Social Welfare Council
- Leprosy Control and Disability Management Section, Epidemiology and Disease Control Division, Ministry of Health
- Netherlands Leprosy Relief (NLR), International Office
- Association of International NGOs, (AIN)
- NOVARTIS Foundation
- Erasmus Medical Center
- National Federation of Disabled Nepal (NFDN)
- Nepal Leprosy Fellowship (NLF)
- The leprosy Mission Nepal (TLMN)
- Nepal National social welfare Association (NNSWA)
- Rural/Urban Municipalities of Province 1 & 7

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