

# HDACS

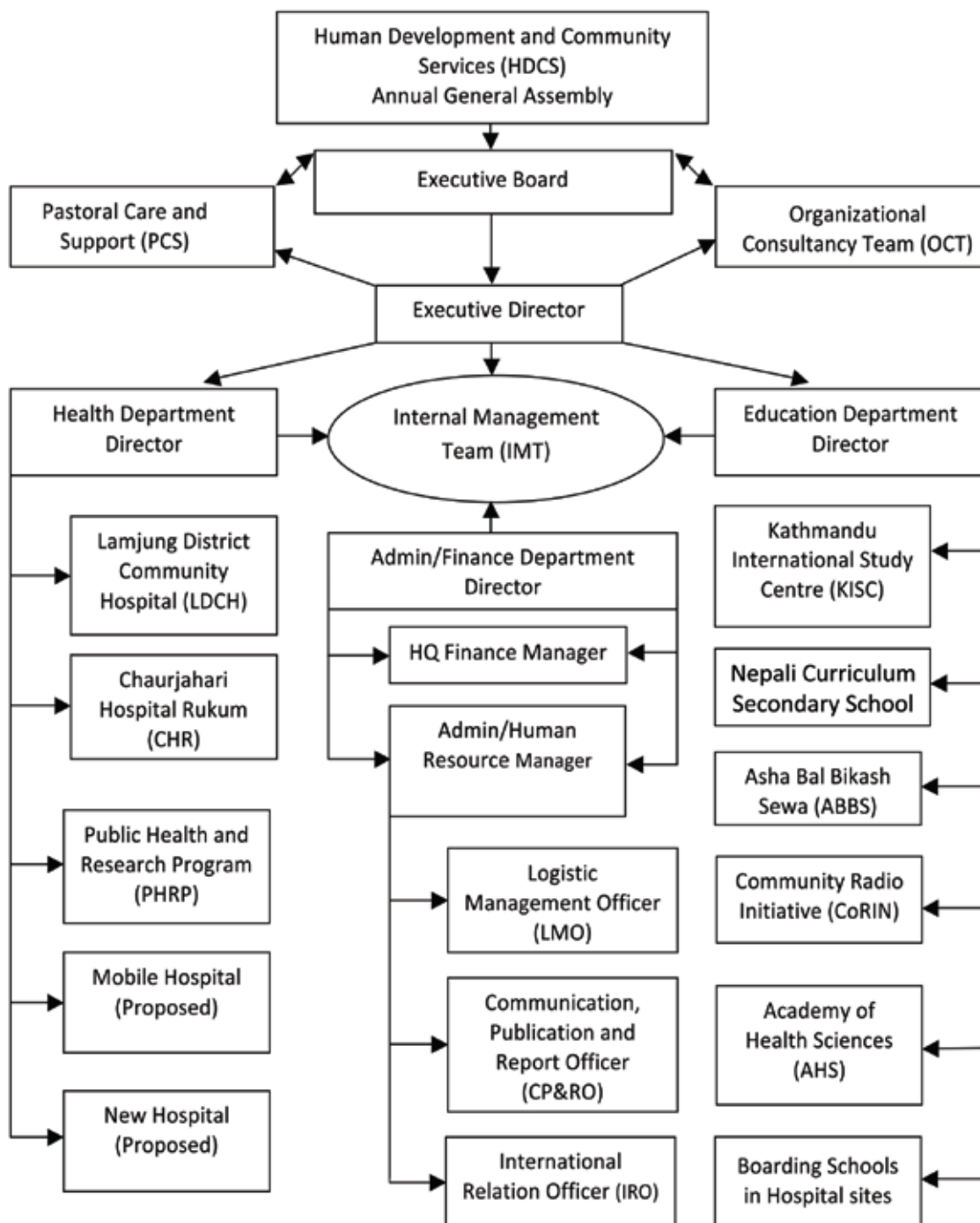
Human Development & Community Services

**Annual Report 2071-72  
(2014-15)**



# मानव विकास तथा सामुदायिक सेवा Human Development & Community Services (HDCS)

## HDCS Revised Organogram





## Message from the Chairperson

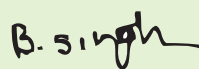
Dear all,

As I recall this year, it feels like it was a year that was both rewarding and challenging. The massive Earthquake that struck Nepal this year took the lives of many and left several homes shattered. We were fortunate to have been able to act immediately and provide service to the vulnerable people who were in need of food, healthcare, and temporary shelters. HDCS with the support of dedicated people like you, was able to coordinate and act responsibly to ensure the care of the victims. Additionally, the projects of HDCS have made new achievements which makes me happy beyond words and that they are being recognized not only locally but globally throughout the world.

During our Annual General Assembly 2015, we introduced new members of the Executive Board. We are delighted to welcome new members of the Executive Board Dr. Dipak Maharjan, Kesang Yudron, Mangal Lal Maharjan, Milan Adhikari, Muni Sakya, Dr. Natsu Sharma, Raju Nepali, Rythmani Sandyang, and Ratna Rai. I further take this chance to welcome our new Chairperson Dr. Natsu Sharma, I feel happy to hand over my responsibilities to him and acknowledge his willingness to support our organization. It has been a privilege for me to have been a part of HDCS and I wish the organization the best for its future progress as I still continue to support HDCS.

It brings me great joy to thank the management team, staff members, supporting donor partners and well wishers of HDCS for helping shape our organization. My deep acknowledgment to the team who helped implement organizational plan, the external support of advice and analysis from leaders and all well wishers on maintaining the prestige of HDCS.

Thank you,



Bishnu Singh

Executive Board Chairperson



## Message from the Executive Director

Dear all,

The past year has been filled with both challenges and success. We faced the major Nepal Earthquake, the promulgation of the Constitution and then the unrest in Tarai but during the hardships we received immense support and encouragement from our partners, friends and supporters.

We believe in being living witnesses of God's love and to demonstrate love and care through our services. All our projects value this statement and bring love into daily lives for the sick, suffering, poor and our children. This year, we were able to provide services to over 100,000 patients and furthermore act immediately during the Earthquake and provide efficient Humanitarian Support to the earthquake victims.

There were many success stories reported to us this year, along with it our projects achieved multiple awards and gained increasing community support. Such news fills us with encouragement for our future progress.

Here are few things we are planning on proposing and initiating this coming year the PHP in LDCH, merging of KISC & HDCS Administration Department and the possibility of another District Level Hospital. The vision we carry are for the purpose of a

better community, through encouragement and collaboration we look forward to transform more lives and help the people to overcome times of difficulty.

Not to mention, many of our actions have turned possible with the collaboration and support of our board members, staff, expatriate volunteers, donor partners, Government agencies, supporters and friends. Working together makes it possible to shape a brighter future for our Nation and our organization, it also gives us unity and courage to let God's love work in our heart and services.

My warm welcome to the new elected members of the Executive Board under the chairmanship of Dr. Nastu Sharma, we appreciate your trust in our organization and wish you all the best on your journey with us.

We look forward to sharing our experiences, and suggestions for our future progress in these few but important pages of our Annual Report. We hope it brings you happiness in knowing more about HDCS and its various projects.

Tirtha Thapa  
Executive Director

# ABOUT US

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HDCS is a Christian non-governmental organization in Nepal, encompassing projects on three different sectors of health, education and community development. Nepal continues to struggle with development and is marked as having a low human development index. The lives of many here are affected as Nepal struggles to find a development direction. Most of our projects are located outside of Kathmandu in rural areas thus making our objective to be able to provide services to people with low income and to those who have limited access to care. Our focus is on community based development for self reliance and sustainability for the people in Nepal.

*Our mission is to transform lives through our services.*

*Our Vision is to be living witnesses of God's love and to transform communities.*

## OUR PROJECTS

### HEALTH

Lamjung District Community Hospital (LDCH)  
Chaurjahari Hospital Rukum (CHR)  
Public Health Program (PHP)

### EDUCATION

Kathmandu International Study Centre (KISC)  
KISC/ EQUIP  
Asha Bal Bikash Sewa (ABBS)

### COMMUNITY DEVELOPMENT

Community Radio Initiative (CoRIN), Afno FM  
HDCS Relief Response

The community hospitals are located in the western and mid-western region of Nepal. We believe in serving and uplifting the poor and unprivileged through our hospitals services and furthermore with a Public Health Program (PHP) that mobilizes awareness programs and health related care activities.

The Kathmandu International Study Centre (KISC) is also a project of HDCS, providing International quality education to over 30 different Nationalities of students.

We also provide support and training to school management committees and teachers, as well as scholarship for students across Nepal through KISC/EQUIP.

We have day care center caring for special needs children, the Asha Bal Bikash Sewa (ABBS) that provides services of care and educational development to the children. We also create a social, economical, and spiritual environment through radio awareness programs by Afno FM, CoRIN.







# HDCS EARTHQUAKE RESPONSE

On 25th April, 2015, Nepal was hit by a massive earthquake followed by another major earthquake on 12th May, 2015. Lamjung District and Sindhupalchowk were the epicenter of the quake respectively. Reports share over 9,000 people lost their lives, 25,000 injured and thousands remain displaced. The earthquake heavily impacted the lives of the people in Nepal, leaving people vulnerable to disease and traumatic injuries.

It was evident that the destruction was wide spread. Our immediate response on the aftermath of the earthquake was to focus on delivering relief materials to remote areas which was severely damaged where the people were in need of support. Over 100 days into providing relief, we were able to meet the necessity on giving support to the targeted villages.

## HDCS APPROACH

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The response of HDCS was to focus on the immediate needs of the people living in the remote and heavily affected areas. We provided basic food, rations, relief money and building materials, even cooking equipments to families who lost their homes and belongings during the earthquake.

We formed teams for relief distribution. Two medical teams were also formed to provide medical aid. We faced many challenges when carrying out our tasks, road blockade caused landslides made travelling with huge relief materials difficult, most of the remote villages were inaccessible by road we had to walk to the villages. There were tensions of possibilities of conflict by different villages, as people rushed to get supplies. We were able to send medical teams to the affected areas that requested or needed medical assistance. The team comprised of nurses, health assistant and community coordinator. The teams provided medical aid to anyone who was seen injured on the way while travelling to the villages.

The various districts that HDCS targeted were the Lamjung, Bhaktapur, Kavre, Dhading, and Makawanpur District. **The total number of households HDCS served 4,000.**

With basic ration included nutritional and staple food like lentils, rice, grains and even cooking oil and salt while tarpaulins and galvanizing sheets were distributed for the people to create temporary shelter. HDCS provided galvanizing sheets in more quantity as it was more robust and would give the families flexibility on creating desired shelter until permanent shelters would be created.

## HDACS SUPPORT

Area	Details of Support
Lamjung District - Dudh Pokhari Ilam Pokhari and Bichaur VDCs	Among 12,000 displaced, with USD 45,000 we provided 1000 families with basic ration of food. USD 45 per family (USD 25 for basic ration, USD 20 for transport).
Bhaktapur District - Sudol VDC and Bhaktapur Municipalities	We provided 880 families with basic ration of food as well as cooking supplies and galvanize tin sheets for 120 families. USD 60 per family (USD 60 for food and supplies).
Cavre District - Milche VDC	We provided galvanize tin sheets for 26 families. USD 65.35 per family
Dhading District - Thakre, Jiwanpur, Chheredurali, Phulkharka, Salantar and Ghumdi VDCs	We provided 1200 families with basic ration of food as well as cooking supplies and galvanize tin sheets. USD 26 per family. We also provide 174 families with galvanize tin sheet for shelter. USD 150 per family (USD 15 per tin sheet, 10 tin sheets per family). We realized that they were in greater need of this kind of help to build their shelter.
Makawanpur District - Dandakharka VDC	We provide 600 families with basic ration of food as well as cooking supplies. USD 26 per family (USD 25 for food and supplies, USD 1 for transport).
Prime Minister's Relief Fund	Beside above mentioned direct relief work where we provided supplies of about US\$ 200,000/- HDACS has an amount of USD 50,000/- which is designated to be deposited in the Prime Minister's Relief Fund.

HDACS feels immensely appreciative as all the Projects of HDACS were involved and responsive in their project sites on helping the community people. You will read more on how each project helped the earthquake victims, on the following pages.

Education plays a vital role in the livelihood and well-being of a child's growth. We still continue to extend our support to the earthquake victims by helping the Government with repair and reconstruction of 2 schools that have been damaged by the earthquake in Lamjung.



The people living in the affected areas faced numerous difficulties, yet they embraced us with warmth and hospitality.



# Hdcs Relief Response



HDCS Earthquake Response Team Distributing Galvanizing Sheets.



The people of Dhading - Thakre gather around the truck to receive relief materials from HDCS.



A woman stands outside her home that was shattered by the Earthquake.



The response teams had to travel to villages that were inaccessible by road and met with an accident. (The team escaped with minor injuries)

To be living witnesses of God's love





A team member of the Earthquake Response helps carry food items.



Army officials help load off relief materials in Makwanpur.



A local resident of Dhading -Jiwanpur takes his share of the relief provided by HDCS.



Roads blocked by the landslide on the way to Kavre Milche.

and transform communities !



## Lamjung District Community Hospital

In 2001, HDCS established its first state-nonstate partnership with the Ministry of Health and Population (MoHP) to form the Lamjung District Community Hospital (LDCH). Since then, HDCS-LDCH has been providing quality health services to the people of Lamjung and its surrounding districts for the past 14 years. This year, the partnership was once again renewed by the MoHP with HDCS for another 10 years. Your kind prayers have made it possible for us to continue delivering our services to the people specially the marginalized, the excluded and the poor.

In 2003, we were recognized as a role model hospital by The World Bank, and further became successful in establishing a model Government training centre for Skilled Birth Attendant (SBA) and Mid-level Practicum (MLP). This past year we made another achievement by becoming the Bronze Winner of the International Project Management Award (IPMA) held in Panama.

This year, New services and programs have been introduced including specialized services on Orthopedic and Pediatric care, public hearing programs that encourages community participant and an additional Nutrition Program Frequent health camps were also carried out. The



programs held are mostly for community development purpose that gives the people access to better future health care opportunities.

HDCS-LDCH has managed to increase the hospital capacity suitably. The results show outpatients to be 44,712 and inpatients being 4,144 this fiscal year, steadily showing increase in patients flow.

We continue with internal trainings and professional gathering to enhance skills and to create a growing environment for the staff members.

We are delighted to provide free essential prescribed medicines for everyone (72 items referred by the Government) and selective health care services that remain free to the disadvantaged group of the community the poor, ultra poor, senior citizens, people with disabilities and Female Health Volunteer (FCHVs) of Lamjung.

New equipments have also been added to the hospital, all with the support from across the world enables us to deliver better services.

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## Earthquake Response

On the aftermath of the earthquake, LDCH immediately responded by distributing relief materials. Lamjung District, being the epicenter of the Nepal earthquake carried more risk of further calamities. LDCH carried out Relief distribution programs and Medical Camps to help the earthquake victims of Bichaur, Ilampokhari and Dudh Pokhari of Lamjung district with the support of DHM-Germany and technical support of HDCS. The focus of the team was to further serve the victims with both basic relief materials, medical assistance besides give counseling to those who were distressed.





## Chaurjahari Hospital Rukum

As HDCS Chaurjahari Hospital enters its 20 years of service to the community, we continue to remain focused on our founders' vision, to deliver quality health care to the poor and underprivileged at an affordable cost. The hospital has been under Nepali leadership of HDCS for the past 13th years, and has progressed considerably towards establishing itself as a self-sustaining mission hospital. The total number of patients served in the past year was 25,363. Many of our patients are from the Rukum, Salyan, Jajarkot and Jumla districts, but a considerable number also come from the remote districts of Dolpa.

This year patients from Rolpa and Surkhet were also reported to have come. Our x-ray and ultrasound service remained busy throughout the year. The lab continues to provide excellent chemistry, hematology, and microbiology services. Our maternity ward is almost always packed with expecting mothers and babies, staffs say it is immensely wonderful to watch families welcome their new born babies. 1068 surgeries were done, along with 46 uterine prolapsed surgeries in coordination with Rotary International Kupundol Lalitpur and CEAD Nepal Surkhet. 510 patients received eye care and 82 cataract surgeries performed with the help of Rapti eye hospital Dang.

5253 patients received free care during this year, along with thousands of additional patients whose fees were discounted. In our outpatient department, we see a full spectrum of patients, from babies to the elderly. We also provide pastoral care and social services. During the period of orthopedic surgeon (Dr. Mori) everyday our OT was busy. 368 orthopedic surgeries performed. 1770 patients received spiritual care and counseling service this year. Six free medical camps conducted and 4078 patients were benefited from the medical camp service. Some essential medical equipment received and installed in the hospital from our donor partners. Our community health programs are effectively being administered in close co-ordination with the district health office of Rukum. This year 114 of tuberculosis and 4 case of leprosy were diagnosed at our hospital. We're the main part of the district's immunization program. In our outpatient department, we see a full spectrum of patients. For pediatrics,





the most common illnesses include respiratory tract infections, worm infestation, and malnutrition.

Nepal has had a tumultuous decade from a political standpoint. Although things are easier than they were during the recent conflicts and disagreements between political factions continue to spill over and have an impact on public life. This makes patients unable to reach our facility, and can create supply issues as well. Several time meeting, interaction done with local community and leaders to build up the good relation and feedback for the hospital service.

As a whole, our hospital remains a place of hope and healing for the sick and poor people in the hills of Mid Western Nepal. In spite of our challenges and constraints, we remain committed and determined to make every effort to address the health problems of our friends and neighbors in Rukum, Salyan, Jajarkot and the surrounding districts.

### Community Health Program

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Health Education Program was formed with the purpose to spread health awareness to the people living in the rural areas. The program provides Health awareness and Counseling services to the mother's groups, women health workers, schools, medical camps and traditional healers. Following with a positive response, there is an increase in the ANC check up of pregnant women in Kholagaun, also patients with lower abdomen problems are going for treatment and there has been a continuity of Health education in Women's group remains.

School Awareness Programs, Health Check-Up, Sanitation and Hygiene, Nutrition Growth & Monitoring Program has enabled the hospital to create better health standards for the people in Rukum. In addition CHR provided drinking water supply to school children, Maternal Infant care help, immunization, Family planning services, ANC and pregnancy check up are such other services which has saved many lives and created a better community for the people living in Rukum.

## Public Health Program

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PHP works within the health sector to encompass the community health programs carried out in the HDCS hospitals. The approach is to develop and implement programs aimed at improving the health and well-being of individuals and, families of the community where the hospitals of HDCS are based. We carry out various awareness programs on health, by developing mobile camps to carry out programs for surrounding community areas and also to promote awareness on healthy behaviors and how to prevent health hazards.



People living in remote areas of Nepal are in more risk of health issues due to not having access to proper health care. Additionally, low educational rate makes them unaware of the benefits of living a healthy life.

Our targets include the locals, community leaders, mothers and even school children to positively influence the importance of a healthier lifestyle. We work in collaboration with local and International organization to make our programs more effective.

To improve health standards, various community health intervention and projects have been formed to address health on different levels including the Maternal and Child Health Promotion Project funded by International Needs Australia (INA), the nutrition promotion project, the WASH project, and other basic community based health programs that facilitated by the team members of PHP.

### More About Maternal and Child Health Promotion Project

The project aims to improve maternal and child health by increasing awareness on maternal and child health care promotion, strengthening and capacity building of current health systems and advocacy for the quality of care, including access to service, creating demand for knowledge and supporting an enabling environment for MCH services and logistics in the community and health system.

The MCHP Project is based in Rukum district of Nepal's Mid Western Development Region. The District is poor, rural, conflict



affected, it has poor access to health services. The primary beneficiary population includes children under 5, pregnant women and women of reproductive age however, adolescents, female Community Health Volunteers (FCHVs), and facility-based health workers will also receive direct benefit from the project. Till date, we have formulated more than 30 mother groups, that encourages mothers to equip themselves with health information and led trainings regarding mother and child health issues. We plan to introduce PHP in Lamjung as well this coming year.





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Growing Up with ABBS





## Kathmandu International Study Centre

Since 2007, KISC is under the operation of HDCS. The school first started as a study centre for the children of the missionary families and today students and staff from 30 different nationalities have joined in to grow in the transformational education of KISC.

This year, new staff members were greeted and oriented at KISC and the HDCS head office. KISC has a total of 96 staff which includes mission volunteer staff, operational, international and nationally hired Nepali and expatriate teaching staff for KISC and EQUIP.

We continue to be actively involved in training programs for Nepali school and communities in rural places. The children of KISC learn to grow in a culturally diverse environment, there are plenty of interactive session with the children from KISC and different community schools in rural places encouraging the students to value cross-cultural and community building skills. This year we are thankful as students continue to do well in tests and examinations.

## Earthquake Response

The KISC community was actively involved in carrying out relief work in earthquake affected areas. KISC in partnership with Kutumba, organized a concert in KISC to raise fund for the schools in Sindhupalchowk. A total of approximately Rs. 120,000 was raised to support these schools. Funds were raised from sending missions, ex-KISC staff, their friends and Churches to help our staff to rebuild and repair their houses. KISC basketball court was able to provide shelter for over 300 people from the KISC community as well as our neighbors.



## KISC EQUIP

Education Quality Improvement Programme,(EQUIP) and Transformational Education College,(TEC).

Established in 2007, it shares the vision with KISC community to bring about transformational and lasting change in Nepal by improving education in rural and regional areas. All the projects in Lamjung, Palpa, Lalitpur and Nuwakot have successfully completed their training for the academic year of 2014-15.

For over eight years, KISC EQUIP has been providing holistic education training to the school communities (teachers, school leaders, parents and students) in a range of subject areas. KISC EQUIP currently partners with 22 schools in 4 project areas in both rural and urban Nepal.

Regarding Tec EQUIP, the Kathmandu University shared the information that they are not going to have new affiliations/partnership for the time being. The Tec subcommittee is working on developing strategy for Tec to evolve.

## EQUIP Scholarships

With the help of our donor partners and supporters, we were able support 88 Nepali students through our scholarship program. These scholarships help the students continue with their education and their livelihood.





## Asha Bal Bikas Sewa

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ABBS started in 1993 with simply three children, the centre today has over hundred special needs children receiving care and guidance provided by the centre. Currently, we have 3 centres that are in Jorpati, Kathmandu and Baraipur Chitwan. Our focus is to help children with physical and learning disabilities to develop learning skills that will make them independent and self-sufficient to integrate with the community.

It is true that many people in Nepal still think that bearing a child with disability is a taboo. Although, it is a difficult challenge for children to face the differences in the society, **we believe that there is chance for them to grow through our programs designed to meet the needs of the children.**

There are plenty of therapies and activities to help children address their individual differences in learning and development. This year we successfully completed the construction of the new classrooms, then introduce the Adult Training Program that gives vocational training to young adults (16 years & above).

With our partner's support, the Community Rehabilitation Training Program (CBR) was also introduced this year, it provides training to interested participants from Nepal on how to strengthen programs that includes people with disabilities.

The ABBS teachers still engage and participate in capacity building trainings, Early Childhood Educational Centre (ECEC) is one of such training course that the teachers of ABBS have actively participated in. Volunteers, continue their support in caring for the children of ABBS. ABBS hopes to become sufficient in arranging more training that encourages the community to be inclusive of people with disabilities.

**ABBS works with the belief to influence change in the community and through CBR trainings the centre hopes for the change to progress through the trainee and reach out to the people in rural and even urban areas.**





## Community Radio Initiative Nepal

Afno FM, is a community radio that broadcasts a variety of programs to help with community development, including sharing of information related to agriculture, sanitation & hygiene and education. It was first proposed in 2006-07, in collaboration with Feba Radio UK. since then it has been functioning as a project of HDCS with two radio station based in Okhaldhunga and Dadeldhura. It is also involved in social work and other various activities, directly interacting with the community people on creating positive social changes. This year we received multi awards from different organization including, best report award from Association of Community Radio Broadcasters (ACORAB).

Many listeners have been moved by our programs, frequently showing their support. Our radio continues to be active even in most difficult circumstances. This year, the radio continued broadcasting immediately on the aftermath of the earthquake. the team knew the radios were the only means of communication that worked undisturbed in Okhaldhunga. It shared important information that would keep people safe and together on the aftermath of the earthquake.

With Feba Radio UK's, support the radio was able to give better relief services to the community.



Despite, the radio building being severely damaged the team was quick to respond to the situation. They evacuated the building and with the dedicated help of the army, police officials and the community people the team build temporary shed to function the radio at the crucial hour. Many other community radios were shut down because of damages on buildings and loss of equipments but we continued broadcasting knowing the importance of it. When our radio building received the red card upon assessment by engineers we went to the CDO office and the Red Cross for help. We were then provided two small tents and the army and police helped us to build the tent house on the street. Army officials helped us to move our equipments (batteries, transmitter, computers etc) from building to the tent house. Many of the services given would have been difficult to perform without the prayers and support from friends and well wishers. We are thankful to have supports whose concern and care gave us the courage to execute God's love through our services.



Building of community commode, many remote areas in Nepal do not have access to proper toilet.



The CoRIN team with Helena and Paul (Bottom Right) from Feba during their visit to Nepal.

## Earthquake Response

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Afno FM was able to visit Rasuwa with First Response Radio (FRR) team to support during Earthquake disaster. We were able to communicate to the local and relief team during disaster. Our radio was only means of communication as all other radios were off air due to the collapse of building and equipment. We distributed some 200 radios to the very needy people which was big relief to the community as it could inform them where to get relief materials. Many people reported feeling well informed, as the radio coordinated information about relief distribution it managed to play a very good role for communication.

We stayed almost over one month on the street where we had built the temporary shed and even now we are broadcasting our radio from there but the shed is more refined for temporary use. We have plans to build our own radio building and for this we are praying for timely support.



# Success Stories



## LIFE'S WARM EMBRACE, PHP

Sita KC, had the opportunity to join the safe motherhood classes offered by the HDCS/ INA - Mother and Child Health Promotion project, where she learnt about the importance of proper care during the pregnancy. Her husband works abroad to support her and make a decent living. She said, "I took all the Suraksha classes every month and learnt about the care needed during the pregnancy period, it turned life saving for me." She recalls not feeling alone even though her husband was away but felt supported by the presence of the other group members in her classes.



During pregnancy, she came to know her baby is in transverse position. She was terrified when the doctor advised for an operation. She didn't go to hospital for operation at given date. The same day, there was a regular mother's group meeting, she joined the meeting and during the discussion she raised her concerns. The community health coordinator explained about the complication of transverse pregnancy and the need of institutional delivery through caesarean section and he advised her to go to hospital soon. She decided to go to hospital for her delivery, the following day she went to the CHR hospital with her sister. Her operation was successful a healthy baby girl weighing 2.6kg was born. When she saw her baby, she was moved with happiness. Thereafter, she was hospitalized for 7 days and then she happily returned to her home. Now she says "If I wouldn't have attended Suraksha classes, I don't know what would have happened to me and my baby. I am thankful for being here it is a blessing to my baby's life".

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## PERKS THROUGH THE RADIO, AFNO FM CoRIN

As the radio continued with awareness programs during the earthquake we were additionally able to support three lactating mothers. The mothers were in the corn field without proper shelter with their new born babies, having lost all their belongings, clothes and other necessary belongings during the earthquakes they felt stranded. We able to provided 3 mattresses, warm clothes and other food items to the mothers, immediately.

Furthermore, after hearing our program on the radio, some of our listeners gave support to the people who needed help. A disable lady from Kathmandu Ms Aruna Chhantyal, gave a wheelchair to a disable young man Mahesh Thapa who lives in Balakhu Okhaldhunga. Many listeners and well wishers joined in our cause to help each other, showing acts of great generosity.



## BRINGING BACK SMILES, CHR -Doctor's Account



I have been able to go to 3 different medical and dental camps to various villages, most notably in Shyala Khadi (one of the most remote and unreachable villages in Rukum). Our brave team reached there after hours of walk for almost 2 days. We had to carry the equipments and supply for the camp ourselves. I had the opportunity to remove hundreds of teeth that had been troubling people for years due to lack of dental treatment. All the hard work was worth it when I realized that a simple thing as tooth extraction can make people so happy and relieved of pain.

**Dental education is the most cost effective, sustainable form of prevention.** I was able to go to various school oral health education programs and teach the school children about proper brushing habits and taking care of their oral cavity. It was a pleasant experience for me to be able reach the community people and instill good habits for prevention of future oral and dental diseases.

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## THE STORY OF A NEW HOPE, CHR

Kaushil Sunar, aged 65, was brought to HDCS- Chaurjahari Hospital Rukum after walking for whole two days. She lives with her family in a remote place of rural Nepal. She had fallen from a ladder and injured herself with a small wound on her hand due to poverty and transportation difficulty, her family did not take her to a health center. They started treating her wound at home and further followed advised from traditional healers (Dhami and Jhakari). The traditional healer advised her sacrifice animals like goats and chickens. Though they continued visiting the traditional healer and followed his request, her wound worsened with infection day after day.



It was a miracle when one of our staffs went to her village to conduct mother groups meeting where he came to know about Kaushil's condition. Then he informed her family and told them to bring her to Chaurjahari hospital. The hospital team guided her and her husband that she has to go through amputation of her arm. The hospital team performed a successful surgery which made the continuous infection of the wound stop. The infection could have resulted to a worst situation or even cost her life. **But due to the advice and kind act of the hospital team, she was saved.** The hospital provided her with no charges for the total cost of NRs. 35,000 for her surgery and accommodation. Kaushil and her family were so happy and moved by the services the hospital provided them.



## To Be Remembered, LDCH



An old lady stooped on the hospital wheelchair looking tired and waiting to be rescued. The nurses rushed to help her as she unconsciously murmured and muttered in agony in pain. She was dropped off by a local bus and was left outside the hospital.

She failed to remember even her name or where she came from but looking at her situation one could tell that she had suffered immensely. The nurses spoke to her while gently removing her torn and tattered clothes, there were burses all over her body, her skin hugged the bones of her ribs she was severely weak. She was in a critical state yet she managed to giggle and smile when the nurses spoke to her and gave her fresh clothes and food. One of her leg was swollen so bad that she was not in the condition of walking. It was hard to imagine how difficult the journey must have been for her. After resting and gaining a bit of strength she recalled being a resident of Polang, Kaski district.

Furthermore, during her treatment and while cleaning up the wounds, the nurses checked to see if she had any other wounds, the hospital team found that she also had problem with her uterus. She was in a severe stage of uterus prolapsed.

To help get in touch with her family, the hospital administration team and police department succeeded in finding out the old woman's family members. The family was asked to come to the hospital, the old woman's sons and their wives and her daughters visited the hospital. After talking with them, the reality was the old woman never returned to her home for over a month. Her journey within that month was a brutal one. She walked helplessly and fell down unconsciously. She stayed many nights in the jungle, and reached the hospital at last. Her name was Sukmaya Kumal. Her children had tried hard to search for their mother. When she saw her children, she was in tears and told them that the hospital not only gave her new clothes and food to eat but also gave her a new life and asked to take her back to home.

The hospital team did their best to help her. She was given treatment for her uterus prolapsed problem. The family members were thankful to take her home, after the doctors suggested to discharge her from the hospital. "We were hopeless in finding her alive, so we were just looking for her dead body. But Lamjung District Community Hospital gave our mother a new life to live", told Natikaji Kumal, her son, to the hospital.

# Human Development & Community Services (HDCS)

## Compiled Income Statement For FY 2071-72 (2014-15)

S.N.	A/C Head	HDCS-HO with Relief	CoRIN	ABBS CBR Training	ABBS	KISC	LDCH	CHR	PHP with Pilot Project	Total	Remarks
	<b>Income</b>										
1	<b>Internal revenue</b>	23,389,728	1,842,717	-	812,221	125,243,515	48,157,148	29,482,352	-	228,927,681	81%
2	<b>Government Contribution</b>	-	-		-	-	5,243,933	-	-	5,243,933	2%
3	<b>External revenue</b>	-	2,562,879	1,669,736	4,531,914	8,817,195	11,321,624	16,810,754	2,437,592	48,151,694	17%
<b>A</b>	<b>Gross Income</b>	<b>23,389,728</b>	<b>4,405,596</b>	<b>1,669,736</b>	<b>5,344,135</b>	<b>134,060,710</b>	<b>64,722,705</b>	<b>46,293,106</b>	<b>2,437,592</b>	<b>282,323,308</b>	<b>100%</b>
1	<b>HR Cost</b>	6,427,833	2,682,373	240,036	4,500,059	39,857,836	24,659,956	14,648,754	1,174,919	94,191,766	35%
2	<b>Capital Items</b>	120,476	202,770	196,723	-	485,818	8,672,361	8,319,886	263,997	18,262,031	7%
3	<b>Human Resource Development</b>	-	-		3,487	1,483,380	1,294,005	1,006,704	4,000	3,791,576	1%
4	<b>Charity</b>	-	-		-	-	5,974,702	5,096,289		11,070,991	4%
5	<b>Program Cost</b>	13,557,354	1,009,116	199,215	2,373,475	83,858,505	23,112,466	17,400,408	1,588,466	143,099,005	53%
<b>B</b>	<b>Gross Expenditure</b>	<b>20,105,663</b>	<b>3,894,259</b>	<b>635,974</b>	<b>6,877,021</b>	<b>125,685,538</b>	<b>63,713,490</b>	<b>46,472,041</b>	<b>3,031,382</b>	<b>270,415,368</b>	<b>100%</b>
<b>C=A-B</b>	<b>Surplus/(deficit) for the year</b>	3,284,065	511,337	1,033,762	(1,532,886)	8,375,172	1,009,215	(178,935)	(593,790)	11,907,940	
	Accumulated surplus/(deficit) upto previous year	1,172,110	788,868	-	(1,375,884)	26,600,341	(822,263)	1,225,313	630,012	28,218,498	
	Amount apportioned to reserved fund	(3,900,000)	-	-	-	-	-	-	-	(3,900,000)	
	<b>Accumulated surplus/(deficit) taken to balance sheet</b>	<b>556,175</b>	<b>1,300,205</b>	<b>1,033,762</b>	<b>(2,908,770)</b>	<b>34,975,513</b>	<b>186,952</b>	<b>1,046,379</b>	<b>36,222</b>	<b>36,226,438</b>	

Source: Audit Report 2014-15 (2071-72)

## Tax and etc. to Government of Nepal from HDCS for FY 2071-72 (2014-15)

S.N.	Description	HO	CoRIN	CBR Training	KISC	ABBS	LDCH	CHR	PHP	Total	Re-marks
1	Remuneration Tax	479,949	33,215		3,729,706	6,647	312,154	51,338	20,799	4,633,808	
2	Social Security Tax 1%	28,894	17,312	2,041	188,915	32,435	288,730	156,720	4,582	719,629	
3	TDS-Consultancy fee	180,000			32,528		585,146			797,674	
4	Education Service Tax	-	-		999,025	-		-		999,025	
5	Radio Royalty	-	103,419			-		-		103,419	
6	Vehicle Tax	111,680	-		126,365	27,230	-	-		265,275	
7	Tax on House Rent	-	10,333		1,370,384	11,332	-	-		1,392,049	
8	VAT	184,848	28,398	22,527	2,235,065	13,503	340,680	227,083	27,422	3,079,526	
9	Withholding tax (1.5%) on Goods and Services	18,764	585	1,073	241,683	1,214	22,274		4,620	290,213	
10	Tax to Municipality	107,413			302,912					410,325	
11	Visa Fees				3,250,947					3,250,947	
12	Contribution to Prime Minister's Relief Fund	2,662,171			2,000,000					4,662,171	
13	Contribution from staff to Prime Minister's Relief Fund	54,855	26,437	5,443		47,424		191,906	11,764	337,829	
	<b>Total</b>	<b>3,828,574</b>	<b>219,699</b>	<b>31,084</b>	<b>14,477,530</b>	<b>139,785</b>	<b>1,548,984</b>	<b>627,047</b>	<b>69,187</b>	<b>20,941,890</b>	

Note:

HO Head Office

ABBS Asha Bal Bikash Sewa

CoRIN Community Radio Initiative Nepal

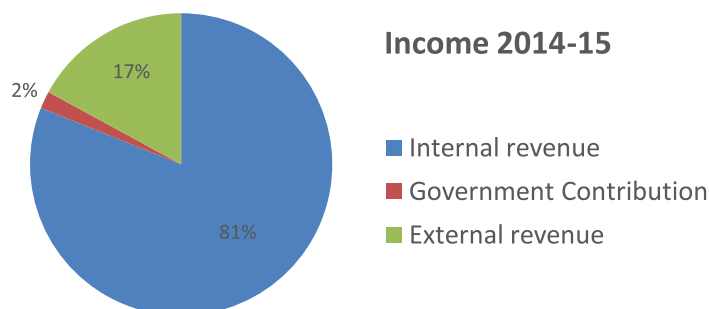
KISC Kathmandu International Study Centre

LDCH Lamjung District Community Hospital

CHR Chaurjahari Hospital Rukum

PHP Public Health Program

CBR Community Based Rehabilitation



## Growing Up with ABBS !

In Nepal, people with disabilities have fewer privileges; the care provided for them is far from satisfactory. It is still prevalent that the lives for the children and people with disabilities are filled with false belief, superstitions, ignorance. Poverty plays a dominant role in the lives of the people with disabilities, especially in remote areas.



The growing children of ABBS has become a great concern for us, to maintain the years of schooling they have received as they turn into adults has turned into a challenge for us. As many growing children of ABBS turns into young adults our focus is to be able to help them become independent and self sufficient. It remains a challenge for them to be completely accepted in the society, yet in few cases we have seen that their independence has helped them to feel respected. We teach young growing adults to create work of art, that gives them new room for passion and self-reliance.

Sometimes batches of cookies made by our very own children make its way to homes of families, other times colorful candles and pretty cards reach the hands of supporters and dedicated people who support our cause.

Kriti Rayamajhi age 17 says,

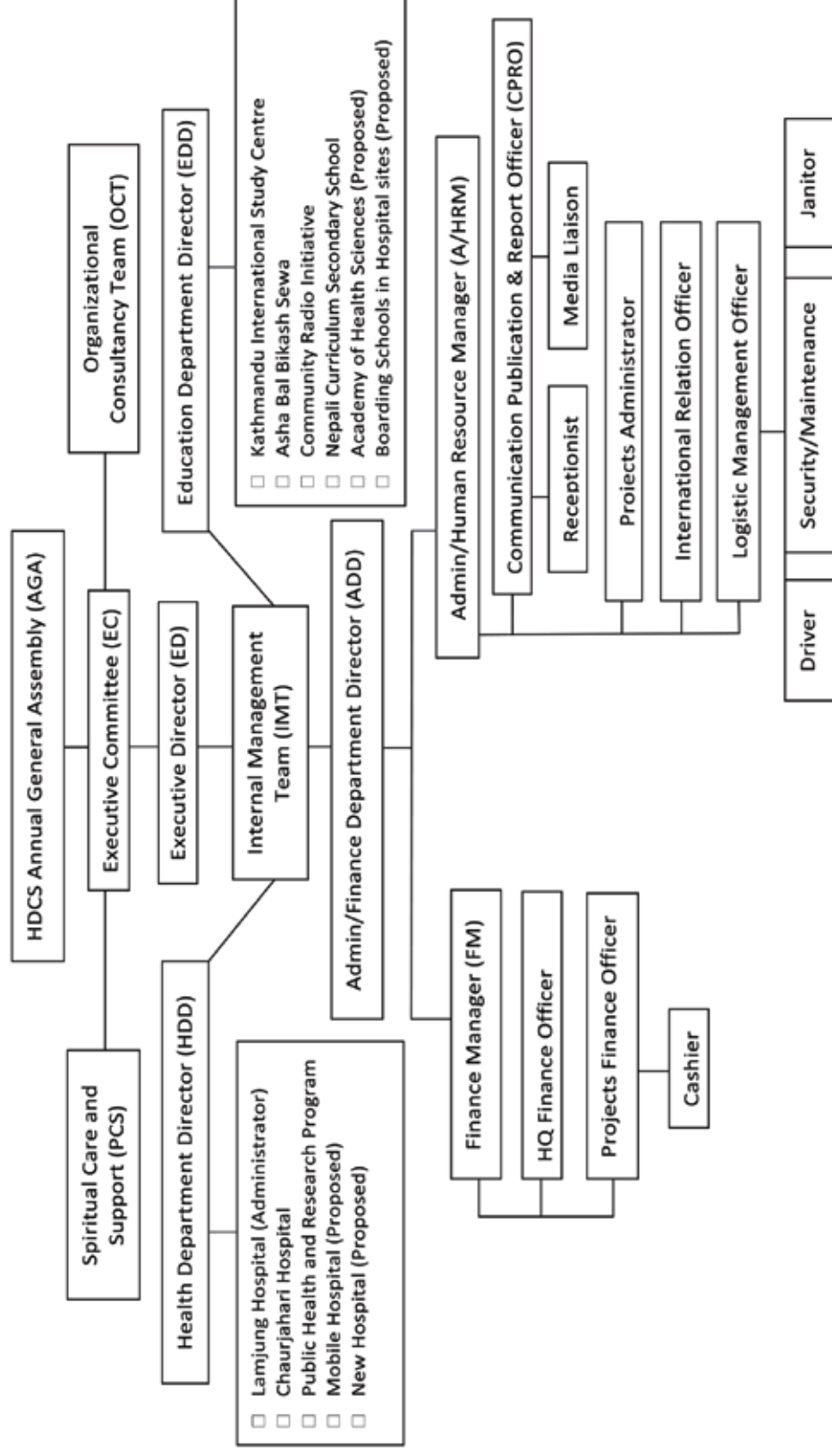
**"ABBS mero ghar ho"** (ABBS is my home), all children feel at home at our day care center and it is our aim to make them feel at home, both loved and independent growing children.

We are positive that the vocational training will help the young children to form skills that can enable them to create an independent lifestyle.



# मानव विकास तथा सामुदायिक सेवा Human Development & Community Services (HDCS)

## Head Quarter Organogram







To support our cause contact:

## **Human Development & Community Services**

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