

# HDACS ANNUAL REPORT

2075-76/2018-19







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## MESSAGE FROM THE CHAIRPERSON

Greetings and Namaste!!!

First of all, I am ever so grateful and give thanks to all HDCS General Members for selecting me as a Chairman of the organization for the next three years. Please let me assure you that I will try my best to serve HDCS during my chairmanship. I would like to take this opportunity to welcome all the new Board Members and give thanks to all outgoing Board Members who gave their time and talents to HDCS being on the Board.

As the Lord said, he came to serve but not to be served, we at HDCS are inspired and encouraged by his teaching and passion so we follow his path of Love, Justice and Mercy. We have the same Mission, Vision and Values to serve the needy ones in our societies. Here once again I would like to repeat that: Our Vision: To be a living witness of God's love. Mission: Spiritual, Social and Economic transformation. Values: Righteousness, Honesty & Service. My prayer for us: May God help us to carry and show this Mission, Vision, and Values through our service.

What a joy to publish this annual report of HDCS and whatever is presented and written here is just a taste of our achievements. I am sure there is so much to report but please be informed by this briefing.

Celebrating the 25th anniversary of ABBS itself speaks of the works of ABBS. We were glad to have the Metropolitan Mayor of Lalitpur as chief guest who spoke highly of the works of ABBS and has shown a deep interest in working together.

All the services at our Hospitals, International School (KISC) and EQUIP, Public Health Program, Community Development (CoRIN), ABBS are still going on to bless the communities.

Finally, I thank God for enabling us to carry forward these missions so far. Thanks to all General and Board Members for your valuable inputs and wisdom. Thanks to the Executive Director and all the HDCS family, staff and volunteers for your hard labour in being a blessings to others. Thanks also go to the Nepal Government for trusting us in giving continuous support and cooperation. Our partners are our assets too so we highly value and appreciate your commitment and generosity towards our country and people.

***May God be with us all always.***

A handwritten signature in black ink, appearing to read 'Milan Kumar Adhikari', written over a horizontal line.

**Mr. Milan Kumar Adhikari**  
Chairman



## MESSAGE FROM EXECUTIVE DIRECTOR

Dear Partners, Supporters and Friends of HDCS,

We are excited to share the blessings we received in the year 2018-19 and though our journey has been challenging and troubling, we felt God's guidance and protection from every corner.

We are very pleased to inform you that our programs are continuously growing. The emergency building of Lamjung Hospital was inaugurated by the Chief Minister of Gandaki Province and now we have better emergency service. Chaurjahari Hospital received necessary medical equipments from DHM Germany. The new MCH building has been inaugurated by the Minister of Economic Affairs and Planning of Karnali Province and the in-service is expanded. Many mothers and children are served in Lamjung and Rukum by Public Health Project and also, WALI (WASH/Livelihood) is started in Rukum as a pilot project.

KISC family has adapted to the new site and feels comfortable now. Teacher training program, EQUIP has further extended its services to more schools across the country. Our Community Radios are continually providing excellent services and changing the life of the people. The commitment of FEBA UK was over and yet again they have committed to support further for the coming years and we are thankful for their contribution over the years. We celebrated 25th anniversary of ABBS and thank God for his grace for the last 25 years in ABBS. We give thanks to our Lord for his grace, guidance and His faithfulness to HDCS in the year 2018-19.

We would like to thank the Government of Nepal for their support and allowing us to serve the people who are need. Also, we would like to thank our Partners, Supporters and Friends. Thank you for your support and prayers in our journey to serve the people who are need in order to bring glory to our Lord. Thanks to our dedicated Executive Board Members and Staff. We would not have made it without your dedication and serving hearts. This is huge encouragement for us to continue our journey in spite of the many challenges along our path. We have always experienced God's faithfulness, guidance and protection over us.

***"The harvest is plentiful but the workers are few."***

God bless!

**Kapil Sharma**  
Executive Director



# HUMAN DEVELOPMENT AND COMMUNITY SERVICES (HDACS)

HDACS is a non-government, non-profit making organization established in 1991 registered with the Government of Nepal. It is currently working in three main sectors of health, education and community development.

From its establishment, HDACS continues its activities according to its motto “**Quality Services is our Commitment.**” Its goal is not simply the operation of different programs, but also the improvement of the living standards and the transformation of the life styles of those to whom HDACS ministers.



## Vision

*To be living witnesses of God's love.*



## Mission

*Spiritual, social and economic transformation of the disadvantaged, marginalised and underprivileged communities through health, education and community development.*



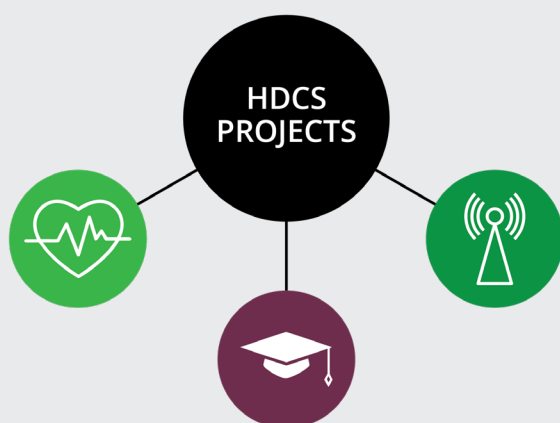
## Core Values

- *Righteousness is the path of our life*
- *Honesty is the strength of our life*
- *Serving others is the duty of our life*

## Background & History

HDCS was founded by Dr. Tirtha Thapa in 1991 but it was envisioned by a young boy of 15 when he faced a tragic death of his father in an early age. He was just 16 when he felt his village in west Nepal and moved to Kathmandu. After years of struggle, hard work and dedication; HDCS was established as a result of his vision. It started as a social and community development program providing services as minute as supplying drinking water, informal education, uplifting the poorer Nepal as well as constructing suspension bridges in rural Nepal. At present, it is focused on three areas of health, education and community development. Through the HDCS projects activities, thousands of Nepalese have been accessible to a better and affordable quality health care, transformational education and improving their lifestyle by learning basic survival skills.

Currently, it manages various projects across Nepal especially in rural regions and provides services through hospitals, health camps, public health programs, school development programs, teacher training, educational daycare centers for special needs children and community radio stations. HDCS aims to improve the quality of health services and education facilities for the impoverished communities and to increase access to, and use of quality health care, education and livelihood opportunities for the poor and underprivileged without discrimination.



### Health

- Lamjung District Community Hospital (LDCH)
- Chaurjahari Hospital Rukum (CHR)
- Gunjaman Hospital Chitwan (GHC)
- Public Health Program (PHP)
  - Promoting Maternal and Child Health Improvement, Lamjung
  - Strengthening Partnership for Maternal and Child Health, Rukum

### Education

- Asha Bal Bikash Sewa (ABBS)
- Kathmandu International Study Centre (KISC)
- Education Quality Improvement Programme (EQUIP)

### Community Development

- Community Radio Initiative Nepal (CoRIN)
- Livelihood









# LAMJUNG DISTRICT COMMUNITY HOSPITAL (LDCH)

HDCS-Lamjung District Community Hospital (LDCH) is a 60-bed unique venture between Government of Nepal and a Nepali NGO Human Development and Community Service (HDCS) under Public Private Partnership model. The hospital was reported by World Bank as "Role Model District Hospital for Nepal in 2003" It is located in Besishahar, Lamjung District and provides Medical, Surgical, Gynecological, Orthopedics and Emergency services to a large population sources with bed occupancy rate of 60% throughout the year. The level of care is Primary Health Care provided by team of 10 doctors lead by General Surgeon.

In 2015, LDCH was awarded by the International Project Management Association (IPMA) for excellent management of the hospital. LDCH hopes to carry the example of being the Model hospital with quality affordable health care for all hospitals in Nepal.

LDCH is currently working on increasing its hospital's capacity to 100 bedded and aims to add in more specialized and advanced health care services.



## Achievements

*Hospital has been providing regular health services as before and following are some more achievements of this year.*

- Organized and supported 7 Free Medical Camp (Jagat, Dordi, Rainash, Chiti and Marshyangdi, Lamjung Jail and Khudi)
- Special New Born Care Unit (SNCU) started
- New equipment's (Cautery machine, Cardiac monitor, SNCU setup, phototherapy)
- Started hospital emergency service from new building and expand emergency bed 3 to 6
- Ambulance service started
- Repair, maintenance and coloring of training building
- Repair and maintenance of training site furniture
- Completed 31th batch Skilled Birth Attendant and 28th batch Mid-Level Practicum (MLP) training
- Public health awareness program for (Aama/Buwa Samuha) in local community
- Organized school health program (Diamond Hill Academy, Chandra Surya Eng, Boarding School, Kid Zone Montessori). 400 students were benefited.
- Extended Lab services (TFT, Tissue Biopsy, Cytology test, Pap smear, cervical cancer screening)
- Hospital visited by **Chief Minister** of Gandaki Pradesh - **Prithivi Subba Gurung**, **Social Development Minister** of Gandaki Pradesh - **Nar Devi Pun** and **Chief Whip** of NCP - **Dev Gurung**
- Done pitch of hospital roads in support of Besisahar Municipality and construction of new toilet for patient visitors.
- Construction of truss in front of Emergency Department in support of Siddhartha Bank.
- Successful completion of 3 days free ear camp in support of INF, Green Pasture Hospital. 348 patients were benefited.

## Mathieu's Story

I am Mathieu, 20 years old, from France. I arrived in Kathmandu on the 2nd of August 2019. On the 3rd of August I took a bus from Kathmandu to Besisahar, and started feeling pain in my lower abdomen. As I arrived at the hospital, I wrote my name on the booklet. I was sent to room 10 for checkup and then room 6 for payment, room 19 for blood and urine samples, and finally room 5 for Ultrasound, where I met Dr. Prakash Shahu (General Surgeon) the doctor who analyzed my lower abdomen and told me I have appendicitis. "You need surgery today" he said and gave me all the option/method for appendicitis. He then asked me if I wanted to do the surgery here or at Kathmandu. I chose to do it here; Kathmandu was just too far away. Doctor explained that the surgery would be cutting through the abdomen leaving a 5 or 6 centimeter scar, whereas in the capital the procedure will be more advanced as they have better technology and the scar won't be visible as much but I chose to do it here because capital was too far to give me rest from my abdomen pain. As I waited for the coming surgery, I met Ram Chandra Dhakal who was going to be my spinal anesthetist. The surgery came and we went to the operation room, big bright room with air conditioning and



*Preparing for Surgery*

all the necessary medical equipment's. I felt safe and secured when entering as I knew I was in good hands. They put two surgeons Dr. Prakash Shahu & Dr. Sabin Yadav with big team for the operation. It lasted between 45 to 50 minutes and after that everything was done. Surgery gave me rest from my abdomen pain and passion to live healthily. They showed me the removed appendix as well as the small rock that had caused the infection.

The hospital is very clean and everything is very well organized like any other hospital in any other more developed country. I am very happy and grateful of the outcome of my stay here at the hospital. The doctors were very professional, and the nurses were also amazing in taking care of patients. It was difficult for me due to my language but I got all the guidance for food, communication and other stuff from Shova Thakuri who is

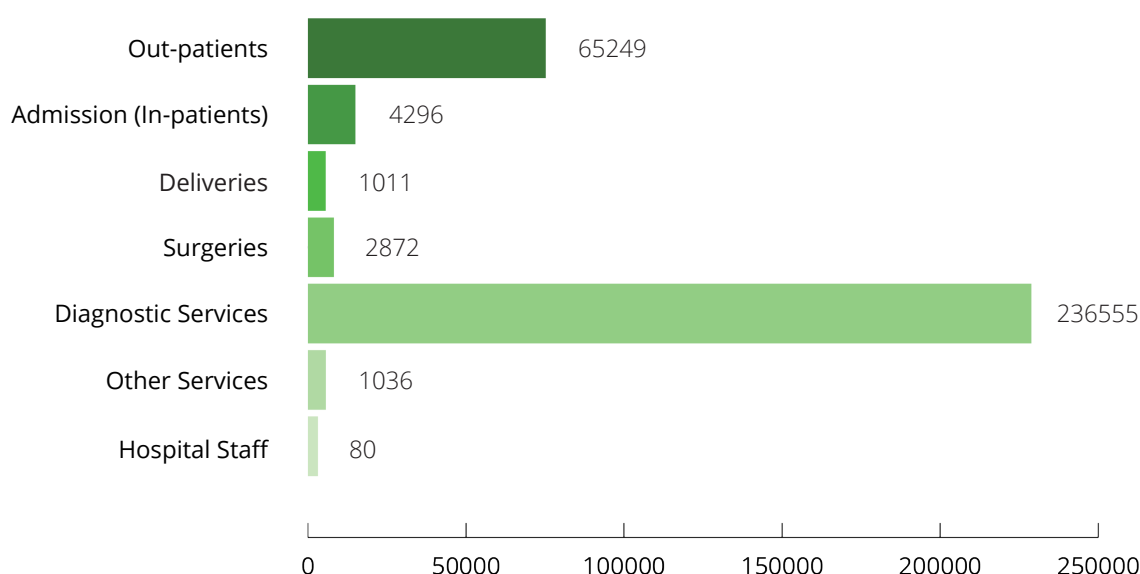
working in the Social Service & Counseling Department. She was my eyes to read all the Nepalese I could not understand, my mouth to translate and speak with the nurses when I could not communicate. She is full of generosity and kind. Thank you all for taking care of me. The small scar I have now on my lower abdomen will be one of a kind "Souvenirs" that I will bring home and which remind me of my time in Nepal but most of all my time here in the HDCS-Lamjung District community Hospital of Besisahar. The saying that goes "the less you have the more you give" is honestly true and I got to it with my very own eyes during my day stay at the hospital.

*Thank you all!*



*During discharge of Mathieu*

### — Hospital Data of the year (2075-76/2018-19) —





# CHAURJAHARI HOSPITAL RUKUM (CHR)

HDCS Chaujahari Hospital is located at Chaurjahari Municipality in West Rukum District, KARNALI Province in western Nepal. It's currently has the capacity of 50+ beds (future extension plans will increase this number of beds). The hospital, has been contributing greatly to regional medical care in caring on average 215 out-patients a day. The hospital is effectively implementing the GoN social security health insurance program.

## Health Service Coverage and Progress

In almost all areas, patient figures are up and look to continue to rise in the coming year.



Alongside health services provision, the hospital extension project was also on-going. This included the construction of an out-patient building with the aid of GoN, and the maternal and child's building supported by DHM. The construction of the emergency building has recently been awarded by the grassroots funding cooperation of the Ministry of Foreign Affairs of Japan. A water purification system was also installed in the hospital by the support of TEAM and TEAM and Yonsei University Korea.

The hospital regularly supported communities in their schools, mothers' groups, and Female Community Health Volunteers (FCHVs) through locally held meetings. It also supports the GoN health facilities like health posts and primary healthcare centers through, health education, school health programs, seminars and regularly conducts medical camps in remote villages.

Chaujahari Hospital remains a place of hope and healing for the sick and poor of the hills in these districts of West Rukum, Jajarkot, Salyan and Dolpa. Despite the challenges and constraints placed on us, we remain committed and determined to overcome disease and poverty.

*Our thanks go to our leaders, and the GoN staff at local district, municipality, provincial, and ministry levels for their constructive support and help that enable us to better serve.*

*We also thank our prayer partners and donors, friends who continue to support and provide us with invaluable feedback that furthers the service of our hospital.*

## Stories worth telling



**A** 62-year-old man from Kholagaun, Rukum was brought to us with severe abdominal pain and vomiting for the last 3 days though he was only 4 hours far from our hospital. Since he was deaf and dumb and from very poor family, it took his daughter some time to find some people to carry him to hospital.

He was found to have appendicitis. When we explained this to his daughter that he needs emergency surgery, his daughter said they will not go for surgery, because of financial problem. We said we will carry out his surgery and treatment free of cost. She happily agreed and the surgery went well. He also recovered well, staying in the hospital for 7 days then discharged.

He received free treatment from the hospital. He joined his hands in a thankful gesture and smiled to all of the staffs before happily leaving the hospital.



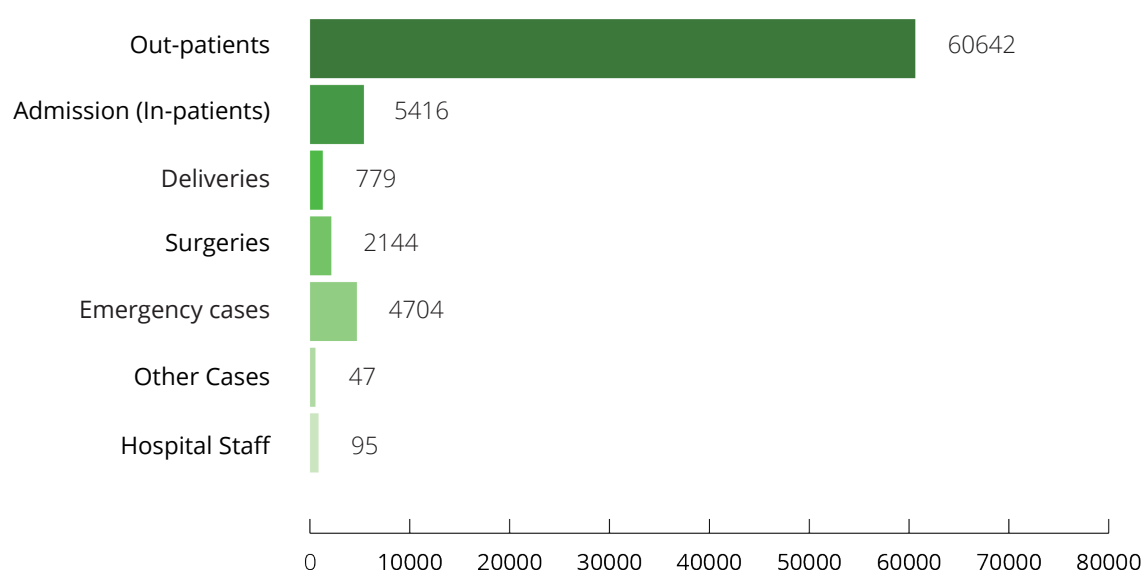
**1** 8-year-old Habil Budha Magar, from Takasera, East Rukum was brought to us having been unconsciousness for 3 days. He had gone to the high mountains to find expensive Herbs (yarchagumba), which grew in that season. He developed a headache, dizziness and became unconscious. Once he became unconscious his relatives brought him to Chaujahari taking them 3 days to reach our hospital.

When he was examined, it was found that he had cerebral oedema (brain swelling) due to lack of oxygen at high altitude. We advised the Habil's relatives to take him to Nepalgunj (a higher-level care centre), where CT scan, ventilator, and Intensive care is available. However, they said they can't go there as they could not afford it. So, we treated him at our hospital with oxygen and some limited medicines.

He was unconscious for 2 more days then the next day he opened his eyes, responding to some sound. On 4th day he moved his right hand and right leg. At this time, we realized that he had developed a stroke. We continued the medications, physiotherapy and prayers. After 3 weeks of hospital stay Habil went home walking! "We thank God and to you for this miracle" said his elder brother.



### — Hospital Data of the year (2075-76/2018-19) —





## GUNJAMAN HOSPITAL CHITWAN (GHC)

Gunjaman Hospital Chitwan was handed over to Human Development Community Services (HDCS) in 2018 by the Gunjaman Memorial Trust. The hospital has been imparting medical services to the local people of remote villages of Chitwan and Makawanpur districts with stark lacuna of hospital services. Against this backdrop of long felt general lacuna of medical services for needy people in the region, the hospital has been able to fill a little in the gap of such services. The aim is to provide a comprehensive health program, aimed at reaching target groups, in particular focusing on deprived groups, marginalized people including Chepang, Dalit, Janajati, Tharu, madhesis, women, and children with the financial constraints.

The Gunjaman hospital is an outreach to, not just the people of Chitwan but also, the neighboring Makwanpur district. People travel miles to reach the hospital because of the inaccessibility of affordable and quality health care in eastern Chitwan and Makwanpur district. GHC is a hope for many to receive general care and treatment within a very low budget, sometimes free of cost. Besides helping people suffering from illness and deprivation, the hospital also provides counseling to patients when in need. However, many are still not aware of the various health services offered at GHC. Therefore, GHC additionally works with partners, social workers, supporters and government offices to advance programs and awareness campaigns as an outreach to people not just living around GHC but in the surrounding districts as well. This year the hospital has added a new X-ray machine, an USG machine and a cautery machine to include more services for patients.



### Key Achievements

- Started 24hr emergency service
- 24hr Lab and Pharmacy service
- Conducted seven free health camps in different areas of Chitwan districts.
- Conducted several meetings with local leaders and social workers regarding available hospital facilities.
- Provided First Aid Training and Kits in several community schools.
- Health awareness programs conducted in communities with hospital information.
- Started portable USG service in hospital. Many poor and underprivileged people are expected to benefit from this service. This will also save them time and money often used to travel to Bharatpur and often Kathmandu for this service.
- Provided home nursing care to disabled and elderly patients.

## Success Story



**B**al kumara Shrestha, an elderly woman of 84 years, came from Ratnanagar municipality, ward no 14, with low socio-economic status. She had already a check up with Chitwan medical Hospital and her son came in HDCS Gunjman Hospital for some advice, as well as taking an appointment with the doctor. However, her situation was so critical she couldn't even come to the hospital and they wanted home service to take care of her.

She was diagnosed with cancer of the left lung in its second stages. In Nepal, lung cancer is the most common type of cancer which is difficult to treat over a long time period and not totally curable.

When she was able to come to our hospital, she was feeling very weak and did not have a good appetite. Her vital signs were BP=90/60, PULSE=88/min, RESPIRATION=26/min, TEMPERATURE = 98F, so we inserted an IV line and provide DNS with vitamin B over 2hrs then NS over 4hrs. We also gave hydrocortisone 100 stat which continued for 3 days and vitamin B for a month. We also provide home service for 4-5days with encouragement to take food and improve personal hygiene. All family members were encouraged in the decision to take care of her and further her treatment process. Finally, she was able to carry out personal things like brushing, washing, walking a short distance, taking food, and talking with people. Similarly, she came to our hospital to take advice and for a normal checkup.



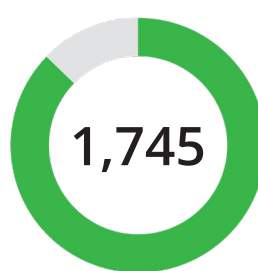
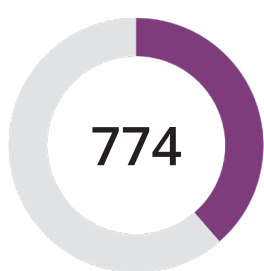
### — Hospital Data of the year (01 Srawan 2075 to 31st Asar 2076) —

Hospital Services	OPD	Laboratory	Emergency	USG	Xray	IPD	Home services	Minor OT	Free Health Camp	Others
Patients	2530	423	120	48	36	4	5	15	2519	23

### — The total number of peoples who visited free health camps in different areas of Chitwan districts —



Male



Female



# PUBLIC HEALTH PROGRAM (PHP)

Public Health Program (PHP) works within the health sector to encompass community health programs carried out in HDCS hospitals and surrounding communities. The approach is to develop and implement programs aimed at improving the health and well being of individuals, families and communities where hospitals of HDCS are based. It carries out awareness programs on health promoting healthy behaviors and how to prevent health hazards. PHP also partners with the government for providing emergency obstetric equipment to the birthing centers and provides technical support to local health staff as well as community members.



## Achievements

PHP has implemented a maternal health project in strengthening its partnership with local government in maternal and child health in rukum district across 16 communities since five years. It has just completed maternal health project on 8 communities of lamjung district on i.e 2018/2019.

This project is delivering awareness sessions to 5500 women in the Rukum and 2400 in lamjung district. Project supported for establishment of birthing centers in rural communities through providing emergency obstetric equipment across 16 health facility in rukum district and 8 health facilities in lamjung district.

It has also delivered training on nutrition and newborn care practice to 144 Female community health Volunteers (FCHV) across Rukum district and 72 FCHV across lamjung district. Currently there are 35 school health clubs across 16 communities of rukum district and 20 school health clubs across 8 communities of lamjung district which provided technical knowledge on HIV/AIDS, WASH< and maternal health. We also deliver mobile health camps across remote communities and 1500 mothers have been benefitted. PHP also broadcasts maternal health program weekly through local radio.

## Impact and Value

PHP had increasingly supported health care child delivery through government health institutions in PHP project communities. PHP had supported to establish birthing centers on both project district rukum and lamjung through providing emergency Obstetric equipments. We can evidence there in increase of institutional deliveries on rural communities of project communities. Initially there was approximately 300 institutional deliveries during the start of the project now there are more than 900 deliveries at Chaurjahari hospital. This is the result of PHP raising awareness. FCHV have the technical capacity to provide awareness training.



## Story worth telling

This is the story of Ms. Khali Budhathoki a 35 years old lady residing in Chaurjahari-9, Nauli bazar. She had her husband, 2 daughter and 1 son in her family. One day she came to our Aama Surakshya classes on 2076/3/6 as our social mobilizer was giving health education regarding immunization in our Ama Surakshya classes.

During the session as our social mobilizer asked Ms. Khali the question had you immunized your child? She answered that she had not given any vaccination to any of her children because she had the wrong perception that her child would get fever and cry the whole night and it would be difficult for her house hold work. Our social mobilizer explained her in details regarding immunization, its scheduled, advantages and its side effects. Her last child is now 9 months and this time after the class she had started BCG and DPT vaccination to her child and agreed to give other vaccination as well. Her child is also well after the immunization.

So, in this month also we are able to save the life of the children from diseases which can be prevented through the vaccination. Ms. Khali is very much thankful to the HDCS MCHPP for conducting the Ama Surakshya classes.







# EDUCATION





## ASHA BAL BIKASH SEWA (ABBS)

Asha Bal Bikas Sewa (ABBS) is a centre established in 1991 with the support of Norwegian Missionary, working with people having intellectual disability, physical disability (Cerebral Palsy and Muscular Dystrophy), Autism and Multiple Disabilities. Started by giving service to three children, now ABBS provides service to a total of 118 children and adults with various disabilities in Lalitpur and in Chitwan. ABBS also runs the Community Based Rehabilitation (CBR) center in the remote district of Rukum. CBR facilitates the communal integration of disabled children and young adults by hosting workshops that train parents and the community to appropriately interact with people with disabilities. Till date, the CBR program has served over 600 people who have different forms of disability and altogether ABBS has served around 2000 children and people with disability.

In Nepal, many families believe that bearing children with disability is a curse and force people with disability to live in the shadows. ABBS strives to remove this stigma and bring transformation in their life through psychological means targeting to help and rehabilitate them by identifying their ability and support them as per their needs to simplify their daily life by conducting various activities and therapies. ABBS uses different therapies such as physiotherapy, music, hydro therapy, art therapy, and vocational training to help develop the physical and mental capabilities of children with disabilities and grooming them to be independent adults.

The children of ABBS are an example to the society that all children have talents and capabilities that make them special and unique in the world. ABBS hopes that the mentality of the society towards children with disabilities changes from a negative to a positive light where all children do not have to hide in the shadows but lead an inclusive life in all societies.

### Our Activities

#### *Key:*

- Primary rehabilitation based on needs
- Physiotherapy
- Community based rehabilitation program
- Training and development of technical human resource for continuation of rehabilitation service

#### *Current:*

- Rehabilitation service provided to children with intellectual disability, physical disability, Autism and Multiple Disabilities
- Various therapies and activities like, indoor and outdoor games, meditation, music dance, sports, drawing and craft to bring psychosocial transformation and development
- Organization and management of training to produce community-based rehabilitation human resources.
- Conducting Trainings for technical human resources to begin necessary rehabilitation service in those communities where there are disable children who are barred from necessary service.





*Showing God's love to children with disabilities in Nepal.*

## Case Story – Samarpan Thapa



It has been almost four years since he joined the school. At that time, he could not sit by himself. His head was different or larger than normal children's. This is called the Hydrocephalus. Because of this, it was difficult for Samarpan to sit. He would only want to sit in a position that was easy for him. In particular, he used to sit on the sidewalk and turn his head and rotate like a clock. Likewise, it was very difficult to feed him. Putting a spoon of food in his mouth required a lot of effort. It was also very difficult to make him sleep. The room had to be completely dark for him to be able to sleep. There should have been no noise inside or outside the room to make him sleep otherwise he would cry so much. He was not even toilet trained. For this too, his family and school had to work

very hard. Getting him into daily activities was very difficult in the early days. The parents and the school have contributed a lot to bring him in the current situation. It is said that the fruits of hard work are very sweet. That is something that everyone knows. Today, we know that the hard work and dedication we put in for Samarpan together has somewhat been achieved.

Today, Samarpan is able to understand and do many things. He is able to get up and walk from where he is sitting and able to identify his place and sit there. Feeding has become easier. He now understands what we are saying. He has been toilet trained and can express his needs through speech. He can return simple toys such as blocks, rings, and Lego brick back into their right places. He is able to identify his own shoes and socks. He can play football and interact with friends.

While singing in the group, he claps his hands and greets others by shaking hands and does "Namaste". He also tries to play madal, a nepali folk musical instrument. He likes to sit amongst adults and imitate

what others are doing. He also knows when he makes mistakes. If he has made a mistake, and we say something to him he pretends like he did not hear us and looks around. If he is not at fault, then he feels hurt.

When he first came to ABBS he could not even sit and now in the past four years, there has been a much improvement in Samarpan. It also also been easier to make him sleep. However, he only listens to his class teacher.

His family and school have played a huge role in bringing Samarpan to his present level. His parents are very positive towards ABBS. His parents have the attitude that we should teach him and make him do things which has also made us as teachers very comfortable.

They were concerned about the child in that he is being taught in the right way. Equal participation of school and parents has greatly improved Samarpan. In this way, we expect all parents to have equal participation.



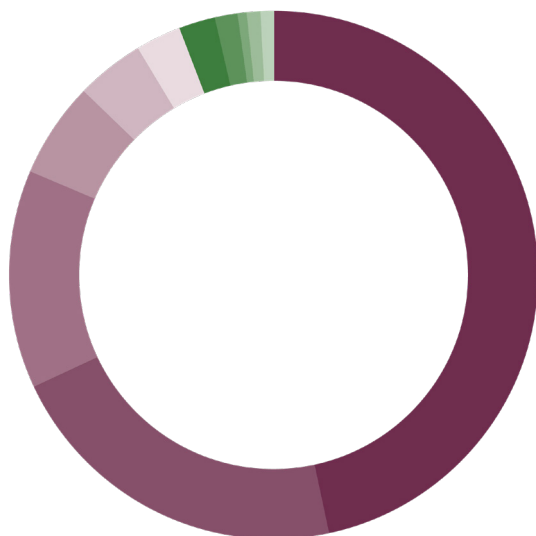
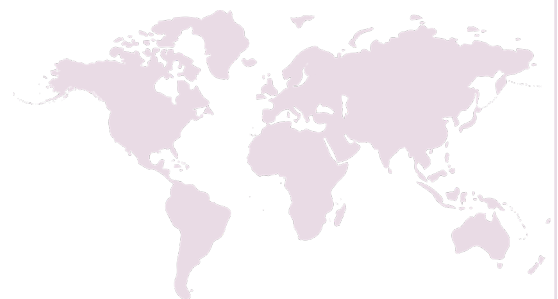
# KATHMANDU INTERNATIONAL STUDY CENTRE (KISC)

KISC is an International School under the ownership of Human Development and Community Services, (HDCS) by signing an agreement with the Ministry of Education, Science and Technology. The goal of KISC is to provide excellent international education to the children of expatriate mission families who are working in the field of aid and development, business and diplomatic missions. KISC has been providing international education in Nepal over last 33 years. The school runs from Kindergarten to Grade 12. KISC is accredited by Cambridge Assessment International Education, (CAIE) UK and Middle States Association Commissions on Elementary and Secondary Schools, (MSA) USA.

KISC currently represents students and staff from nearly 20 different countries. Our Expatriate teachers are volunteers and they are supported by their families and sending organizations.

*KISC is making significant contribution to promote rich Nepali cultures to the different parts of the world.*

## Nationalities of Students represented at **KISC**



	Korea Republic of (South)	66
	Nepal	30
	Australia	19
	India	8
	Netherlands	6
	Austria	4
	Norway	3
	Canada	2
	China	1
	Germany	1
	Ireland	1

*Number of students at KISC in 2019*



Mr. Gajendra Maharjan, Mayor of Godavari municipality addressing at KISC end of the year celebration.

## Graduation Day

KISC continues to strive for excellent education by focusing on students' academic progress along with their holistic education. KISC students are expected to serve in the community. Our students had excellent test results in the Cambridge International General Certificate of Secondary Education (IGCSE) exams. 91% of our students received a score in the A to C range and 50% of our students received an A/A\* in their exams. In the AS/A level exams, 53% of students received a score in the A to C range and nine results were A\*. In 2018-19, nine students graduated from KISC.





# EDUCATION QUALITY IMPROVEMENT PROGRAMME (EQUIP)

EQUIP is a teacher training programme of KISC. The overall goal of EQUIP is “To provide training for Nepali school communities to improve the quality of education and to enable them to positively transform their own lives and their communities.” EQUIP provides subject specific training in Maths, Science, English, ICT and Physical Education along with several general training such as thinking skills, classroom management, checking for understanding, peer observation, lesson planning and TALULAR (Teaching and Learning Using Local Available Resources). EQUIP also offers training and workshops for parent and school leaders.

In addition to training activities, EQUIP also runs school support programme which includes providing scholarships to Dalits, girls and disadvantaged student. We sponsored 132 students (88 girls and 44 boys) in this academic year 2018-19. The total amount we invested to these students is 16,76,400. We also set up of class room libraries, Mini-science labs and ICT labs in order to create love for reading culture as well as making learning more fun and meaningful through hands on activities.

Currently, we are working in Lamjung and Nuwakot district. This year we have partnered with 22 schools (Lamjung-15 schools, Nuwakot-6 schools and Lalitpur-1 school).

It is our desire to expand ICT education in our partner schools. We have set up an ICT lab in Janabikash Secondary School, in Lamjung this year in partnership with an organization called EduTech Nepal. We are aiming to gradually set up more labs in our other partner schools in future.

## E in EQUIP is for....?

### Education

— All children deserve to go to school and be educated

### Equality

— Girls and boys are equal and should be treated equally



ICT lab set up in Janabikash Secondary School, Chandidanda, Lamjung



Science teachers from Nuwakot partner schools having fun on hands on activity at Science Training



Scholarship students of Ganga Milan Secondary School, Lamjung with their parents and teachers

## The key beneficiaries of KISC EQUIP in 2018-19 are as follows:

Activity	Lamjung	Nuwakot	Kathmandu	Total
School leaders benefitted by leadership Training	15	6	60	81
Teachers benefitted by Subject Specific Training	42	35	43	120
Teachers benefitted by General Training	238	12	274	524
Parents benefitted from parents workshop	0	187	59	237
Students Benefitted by distribution of scholarships	122	0	10	132
Number of classroom library distributed	33	3	48	84
Students Benefitted by distribution of classroom library	836	1051	58	1945
Schools Benefitted by distribution of classroom library	15	6	1	22
Students Benefitted by distribution of Science Lab	5063	0	0	5063
Schools Benefitted by distribution of ScienceLab	15	0	0	15
<b>Total</b>	<b>6379</b>	<b>1300</b>	<b>544</b>	<b>8223</b>

## A star runner – Radhika Subedi

**R**adhika is a beautiful very hard working and talented girl from the rural mountains of Lamjung. She studied in Himchuli Secondary school, one of EQUIP partner schools in Khudi, Lamjung. EQUIP sponsored her for the last 7 years.

She has overcome not being able to walk as a child and her family's financial challenges, to go on to become a talented runner and excel in school. But, the race of her life isn't over yet, and she still needs support. Her parents were going to take her out of school when they could not afford it anymore.

A bright student, Radhika was worried she would not be able to continue going to school when her parents couldn't afford it anymore. But this challenge was overcome when EQUIP offered her a scholarship to continue her education.

Radhika is not just another runner at her school, she happens to be one of the best. She has a particular passion for long distance running – participating in races ranging from 1500 to 5,000 meters. “Radhika has done very well in both school and running,” says Ramchandra Bhandari, principal at Himchuli Secondary School. “She’s continuously a champion.” For the last four years she has been a district champion.

Running has also taught Radhika some great life lessons, like how to persevere through difficulties. “Sometimes when I get tired during a race, I want to quit,” says Radhika. With the support from KISC EQUIP, she completed her Secondary Education Examination (SEE) from with ... GPA. She was offered a free tuition fees by a college in Kathmandu and KISC EQUIP continue to provide her support to cover her accommodation and other costs for the last two years. She completed her grade 11 and 12 with flying colors this year. Her race isn't over yet. She wants to continue her education. The College has made a commitment to offer her scholarship for her tuition fees for the bachelor's degree in computer application for four years. She would still need financial support to cover the costs for her food and accommodation in Kathmandu for four years. KISC EQUIP is trying its best to raise support for Radhika to fulfill her dream to continue to her education.

*“I want to thank people for all their support,” says Radhika. “I would love an opportunity to continue my education and running in college. I'd like to become a bank manager and a great athlete someday.”*







# COMMUNITY DEVELOPMENT





# COMMUNITY RADIO INITIATIVE NEPAL

## (CoRIN)

Human Development and Community Services has three community radios situated in Dadeldhura, Okhaldhunga and Rukum. The first radio began broadcasting from 2008 June, followed by the next in January 2009 and then in January 2017. We carry the vision, *"To be living witness of God's love through the medium of Radio, connecting with and having a positive impact on community life."* It has been serving in the communities in three different districts in line with this vision.

*The objective of this radio initiative is to transform the community. To fulfill and achieve this we broadcast a variety of programs covering five different areas.*

Educational	Informational	Advocacy
Entertainment		Awareness



## Achievements

Afno FM is **"the best friend"** for the people living alone at home or inside the jail. They have opportunities to listen to music, share their stories, and learn different skills through these programs. That's why often people say that the Afno FM is their friend in need, their medicine when sick, stick to walk, music to listen, teacher in their study, eye for blind, voice for the voiceless, source of news and much, much more. The Member of Parliament, Mr. Yagraj Sunuwar said that *"Afno FM is a flower on the top of mountain which gives the smell and see it by all as it is the light to many"*.

People can listen to Afno FM broadcasted directly in 15 different districts and can listen in from all around the world by going to [www.afnofm.org](http://www.afnofm.org) or <https://www.radioafnofmrukum.com/>. There are over 1.5 million direct listeners. Many listeners have shared their stories when they have had the opportunity to visit the nearby hospital on time because of the information they have received from the radio. Some shared their stories who have received help during disaster time. Some disable families have received their support from the government as it played the role of mediator.

## Radio Fellowship

— Binu Rai (Station Manager)

The Provincial Government one had organized a day program to encourage the prisoners in Okhaldhunga jail on 15th of Ashar Sunday (30th June). The national level artists were invited to perform. I was also invited and had the opportunity to meet the prisoners inside the prison. National artists performed their songs and there was also dancing. Even the prisoners were singing and they were sharing their sorrows by poems.

However, I saw a middle-aged man who did not seem to enjoy the music but was busy making a bamboo chair. I went over to him and wanted to know about his story so I just asked some questions. His name is Tek Bahadur Magar, a resident from Syangja district.

Then I asked him why didn't he go and enjoy the music, instead you are making bamboo chairs? He said that he did not like the music and dancing because it only gives temporary entertainment. He further said, *"I wanted to talk to you and share something but never had the chance. Today I have this opportunity. I became a Christian. I pray in the morning, during the day and in the evening. I read the Bible daily. There are three of us here, we always do Bible study. We need a Bible which has Old and New Testament. We never*



*miss (listening) the morning (devotional) program from 5-6 AM".* Then I asked, can you name the program we broadcast in the morning? He simply replied, "Yes, we listen to some radio programs such as **Muktiko Marga, Susandesh, Muktiko bato, Jiwanko bato, Nepali cheli** and many more. Our fellowship is only the Radio fellowship. It is our friend, it is our teacher, it is our source of information. It is our Church here inside the prison. We can send our request to the radio and we are able to tune to the music we like. We came to know about Bible's stories and learn many things". After a short conversation, I promised him that I will provide a Bible next time I visited.

I never thought that the morning devotional program would change so many people's heart inside the prison. I thanked our Lord for this opportunity to broadcast radio program for the people who are unreached. I am also thankful to the sponsors who provided this program for us. I pray for their hard work, for their investment and pray for those who are still not reached. I also became very happy and felt blessed by them. According to him almost all prisoners listen to the radio from the beginning till the end, as the radio is their friend which talks their voices.

It is our prayer that all the people may receive the love of God through our program. Today I am so happy that people inside the prison are changing their lives because of the program. I also believe that someday all people will have the chance to receive the love of God. Because of the radio and our devotional program many people like Tek Bahadur have the opportunity to listen to the Word of God and change their lives. I would like to thank those who have provided the Word of God. We have already managed some Bibles to them. Praised the Lord.

## From Okhaldhunga-The news that brought water in the village

Mrs. Radha Kumari Pokharel, 67, from Siddhicharan, Nisankhe, looks very happy now. She is aware of the general population growth and in particular, the village growth and its affects. She runs a small shop in the village but due to the lack of water she had wanted to leave Nisankhe. However, because of her properties that she did not want to lose, she started to carry water in a gagro from almost 2 km walk away. Later, other people who had come to live there also started to do the same. Local government was established but the water problem remained the same.

They could see the tap (without water) in middle of Nisankhe market and yet had to carry the water from 2 km away. One time, I had to go there to report news about the SEE Exam. I mentioned on the radio that the students who were there for the exam had to borrow water from other people. After my radio report, the local government realized the difficulties of local people and gave them first priority to bring the water in the village. Now they have water coming in the tap.

On Srawan 2nd, when I went there for another radio report, I met the elderly, Mrs Pokharel. She had tears in her eyes and thanked me for the report which brought water to the community. Mr. Kiran Shrestha, a leader in the village, shared how they now receive water in the village. He said that the report that was broadcasted in the radio concerning the lack of water and people needing to borrow water to drink. They felt very ashamed. He said, "We decided to work together with the ward municipality to bring water without delay. If you were not here and no report was on the radio, we would still have no water, even now". Mr. Krishna Bahadur Karkee, ward president, thanked us for the report and said how a small good report could change people's mind and work together for the better.

# Human Development and Community Services (HDACS)

## Compiled Income Statement FY 2075-76/2018-19

S.N.	Description	HDACS-HQ	ABBS	KISC	CoRIN	PHP	LDCH	CHR	GHC	Total	%
Income											
A.	Internal Income	16,164,233	1,983,870	142,080,221	1,897,095	19,500	73,369,479	85,079,245	2,636,864	323,230,506	72%
B.	External Income	302,164	10,526,085	11,931,242	1,990,543	17,643,719	9,847,292	51,197,898	485,080	103,924,023	23%
C.	Government Income						19,527,247	4,618,000		24,145,247	5%
D.	Total Income (A+B+C)	16,466,397	12,509,955	154,011,463	3,887,638	17,663,219	102,744,017	140,895,143	3,121,944	451,299,776	100%
Expenditure											
E.	Revenue Expenditure	16,562,841	10,840,074	140,236,671	4,830,729	15,795,537	89,561,925	98,230,279	5,884,677	381,942,733	86%
F.	Capital Expenditure	42,375	3,655,000		100,000	250,000	15,816,053	41,958,330	129,950	61,951,708	14%
G.	Total Expenditure (E+F)	16,605,216	14,495,074	140,236,671	4,930,729	16,045,537	105,377,978	140,188,609	6,014,627	443,894,441	100%
H.	Surplus/(deficit) for the year (D-G)	(138,819)	(1,985,119)	13,774,792	(1,043,091)	1,617,682	(2,633,960)	706,533	(2,892,683)	7,405,335	
I.	Surplus/(deficit) up to previous year	1,428	(7,039,114)	2,042,257	(716,740)	36,222	(1,893,983)	3,772,359		(3,797,571)	
J.	Total Surplus/Deficit	(137,391)	(9,024,233)	15,817,049	(1,759,831)	1,653,904	(4,527,943)	4,478,892	(2,892,683)	3,607,764	

### Note:

HQ	—	Headquarters
ABBS	—	Asha Bal Bikash Sewa
KISC	—	Kathmandu International Study Centre
CoRIN	—	Community Radio Initiative Nepal
PHP	—	Public Health Program
LDCH	—	Lamjung District Community Hospital
CHR	—	Chaurjahari Hospital Rukum
GHC	—	Gunjaman Hospital Chitwan



L O V E

G R A C E

C O M M U N I T Y

J U S T I C E

E X C E L L E N C E



## TO HDCS MEMBERS, PARTNERS, SUPPORTERS AND FRIENDS

Your trust and all kinds of support in HDCS has been one of the main reason why we have come this far in these years. We would like to thank you all for having faith in our organisation and participating in our values. Together we become stronger and better equipped to help and transform the lives of the impoverished and marginalized people living in Nepal.

## HOW TO SUPPORT HDCS

- Support our hospitals by volunteering, giving grants and medical equipment
- Support to KISC through volunteer and grants for EQUIP ([www.kisc.edu.np](http://www.kisc.edu.np))
- Volunteer at ABBS and support through gifts and grants
- Support Afno FM (CoRIN) through grants and equipment
- Support HDCS through our other projects ([www.hdcsnepal.org](http://www.hdcsnepal.org))



## Human Development and Community Services

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