Vision
To be living witnesses of God's love.

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

Values
Righteousness is the path of our life, Honesty is the strength of our life & Serving others is the duty of our life.

PROJECTS
Health
- District Hospital Lamjung (DHL)
- Chaurjahari Hospital Rukum (CHR)
- Gunjaman Hospital Chitwan (GHC)
- Public Health Program (PHP)

Education
- Asha Bal Bikash Sewa (ABBS)
- Kathmandu International Study Center (KISC)
- KISC Educational Quality Improvement Program (EQUIP)

Community Development
- Community Radio Initiative Nepal (CoRIN)
- Wash and Livelihood (WALI)

What is our destination?
Welcome to the first edition of our updated Newsletter from HDCS. Gantabya means destination. What is our destination? Where are we going? Every project should have a goal, every trip a destination. Sometimes and especially in this times of a worldwide pandemic, it’s very hard to know what our destination really is. But what we know is: “We live by faith, not by sight.” 2 Corinthians 5:7. God is with us on our way to his destination for us as HDCS family. Our Vision: “To be living witnesses of God’s love” guides us on our way. Our Mission gives us our day to day work and our Values show us how to do it in the right way. Please join hands with us in prayer and support on our way to our destination.

Enjoy the first edition of gantabya and please give us feedback, let us know how to improve.

COVID on the rise again
The second wave of Covid-19 has arrived in Nepal. Nearly 5000 people every day get the bad news of a positive PCR test. We can’t imagine how many people are really infected. The hospitals in the urban areas of Nepal are overrun and the daily death rate hits its peak from the last wave. The number of patients in ICU and on ventilator support are also increasing rapidly. Since this week Kathmandu and many other districts are following the prohibitory orders of the government. We can call it another lockdown again.

HDCS is in the middle of preparing their hospitals for the second wave. Thankfully until now we still have resources for Covid-19 patients in the HDCS hospitals, but we expect in the coming weeks that the wave also reaches the more remote districts. We are ordering medical equipment, for the treatment of Covid-19 patients, like oxygen concentrators, Oximeters and PPEs.

Thankfully the second shot of Covishield vaccine is in the process of being administrated to the frontline workers in our Hospitals.
**HDCS Spotlights**

We are delighted to inform you that Community Radio Initiative Nepal (CoRIN) – Afno FM has started its **fourth radio station** in Chitwan starting this month.

After much awaited time, KISC EQUIP is starting its **new teacher training project** in Rukum.

We did **farewell** to our Procurement Manager, Mr. James Pradhan after his six years of service in HDCS.

**District Hospital Lamjung** (DHL) has **launched** an insurance program for patients who cannot afford the hospital services. It has also started a free hydrocele surgery.

Furthermore, on the occasion of Easter Sunday, DHL family **distributed** fruits to the admitted patients.

**Gunjaman Hospital Chitwan** (GHC) successfully **conducted** one health camp for school children at Shaktikhor School. A total of 130 students benefited from the health camp.

**Chaurjahari Hospital Rukum**

We got to know that Kabir came from a broken family which was very poor and the father was an alcoholic. Also, Kabir had recently gone through some relationship issues as well which further made him furious most of the time.

During his three months stay at the hospital, Kabir was diagnosed with Schizophrenia. His treatment showed a positive change in his behavior. When he came back for a follow up this month, we witnessed his improvement. In between when he returned to his village, he even started labor work to earn some money. Kabir and his family are very thankful to CHR for providing free treatment and food to them during their three months stay.

Nine months ago, Kabir was brought to CHR as the change in his behavior was harming people around him. Kabir’s violence got his brothers worried. His uncontrollable behavior even led his family members to call the police. Thinking that he had mental problems, the police sent him to the local government hospital. However, their treatment brought no change in Kabir’s behavior. His brothers then heard of CHR through a community church and took him to the hospital immediately. When he arrived at CHR, he had multiple wounds around his wrist, legs and face. When asked why, his brother said that they tied his hands and legs to restrain him.

**Public Health Program Rukum**

A night prior from two weeks of her expected date of delivery, she gave birth to her baby at her home. As soon as our Social Mobilizer heard the news, she visited Putali’s house. Putali had a lower abdominal pain and the child was not breast feeding properly which was life threatening.

Therefore, the social mobilizer advised them to visit the CHR as soon as possible and immediately managed a vehicle for transporting Putali and the newborn to the hospital.

The mother and the newborn both got the necessary treatment from the hospital and they were sent back home after two days of hospital stay.

21-year-old Putali is a resident of PHP’s project community, Sanobheri-Rukum. She was a regular attendant of the Am Surakshya Classes (mother’s group) during her pregnancy. As per the suggestions made by our social mobilizer, she was performing **ANC visits** to the local health facility.