

Dining for Women – Interim Report
December 2016

Interim Progress Report – describe the use of the grant funds, compliance with the terms of the grant, and the progress made towards achieving the goals of the grant.

Organization Name: One Heart World-Wide

Program Title: Training Community Outreach Providers to Increase Access to Safe Births in Remote Rural Areas of Nepal. (Dhading, Sindhupalchok, Bhojpur, Taplejung, & Khotang)

Grant Amount: \$60,000 over three years

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1. Recap briefly what outcomes the program was designed to achieve.

The program was designed to improve the health status of the mothers and babies in remote, rural areas of Nepal by increasing access to health care through the training of community outreach providers. Community Outreach providers are composed of Female Community Health Volunteers (FCHVs) and Health Workers. The presence of well-trained outreach volunteers who have the tools and supplies they need to deliver healthcare access messages to their communities allows local mothers to better understand their pregnancies and the need for a safe and clean birth. This also increases the percent of pregnant woman who attend prenatal care and deliver their babies with the help of a trained Skilled Birth Attendants.

The FCHV program is a key piece of the Nepali government's efforts to reach out to Nepali women, especially in the rural areas where access to hospitals or clinics is sparse. The government trains these FCHVs on basic healthcare and first aid, but lacks the resources to extend trainings to include maternal and newborn health. OHW works in close partnership with the Nepali government to pick up where their services drop off and provide essential training and supplies to equip the FCHVs to save mother and infant lives. After our training programs, the FCHVs are better equipped to recognize maternal and neonatal emergencies and are able to provide appropriate outreach to the community they serve, ultimately working to reduce the rates of maternal and neonatal mortalities in these remote districts.

2. Has funding changed for this program? E.g. have you received unexpected funding from another source?

We have received additional funding for expanding the Network of Safety model to the districts in Nepal. Some of this additional funding will also be allocated to training of community outreach providers. New funders include:

1. Direct Relief - \$300,000 over three years
2. Planet Wheeler - \$300,000 (Increase in funding)

3. Mulago – \$300,000 (Increased in funding)
4. Vitol – \$100,000
5. Anonymous - \$75,000
6. Metabolic Studios - \$40,000
7. Aestus - \$25,000

3. Is your organization or program situation different than presented in the approved proposal? E.g. new executive director, significant program staffing changes or NGO affiliation, loss of large funding, or other significant changes?

We have signed a new project agreement with the Nepali Social Welfare Council to scale up the Network of Safety to women and newborns living in some of the more remote districts of Nepal. The agreement outlines a five year project in 16 new districts in Northeastern and Central mountain and hill regions on Nepal. Expanding to these districts will allow us to cover a total population of 3,255,426 people in these districts, in which we will be targeting 87,384 pregnant women and their newborns, and providing birthing center services at 871 health facilities. To meet the programmatic and administrative demands of the scale-up, several new members have been hired and trained to ensure program quality in the field sites. To date, we have 40 staff members working as part of the Nepal team. We have also established and opened a Regional office in Dharan, in the Sunsari district of Eastern Nepal. This office is intended to provide supervision and support for the district teams in this region.

We have hired a new Director of Development and Administration, Mr. Luke Ifland. Luke joins the OHW team with over nine years of experience in nonprofit management and global health. Prior to his time at One Heart World-Wide, Luke served as the lead staff member in development at Heart to Heart International Children's Medical Alliance and the president at Global Healing. During his time at Global Healing, Luke managed a \$1+ million budget, expanding operations from four small-scale programs to six national-scale interventions.

4. What challenges are you facing as you move forward with this project? How are you approaching these challenges?

The geographical terrain, remoteness, and poor road access are some of the biggest barriers to delivering health care in our program districts. These barriers result in a high turnover rate of government health workers in these areas. During the rainy season, logistics distribution including essential medicines and supplies run out. There is also a possibility of disease outbreaks in many places, especially areas that were hardest hit during the 2015 earthquakes. Many people are still living in temporary shelters, which are oftentimes unhygienic and unsafe. In many of the remote, mountainous communities, the government has a very limited presence, resulting in poor development and infrastructure. For this reason, female community health workers are OHW's foot soldiers of change. They are critical as they are the ones that travel throughout these remote communities and ultimately

overcome the lack of access and reduce the risk of complications that are likely to arise.

5. Have you revised your original objectives since the program began? If so, why? What are your new objectives?

As we requested in our letter to Dining for Women in December 2015, we are including three of our new districts (Bhojpur, Khotang, and Terhathum) in addition to Dhading and Sindhupalchok as a part of this project. Outside of the additional three districts, we have not revised our original objectives.

6. What progress have you made toward achieving your objectives? Please address each stated objective.

We have trained a total of 2,886 Community Outreach Providers from 2015 until the end of September 2016 in our target districts. We are continuing training and our target is to train an additional 1,175 Community Outreach Providers by the end of 2016.

Once trained, the outreach providers are expected to use their newly acquired skills and reach out to their respective communities. They will identify and counsel pregnant women in their areas, distribute clean birth kits and prenatal supplements, and refer potential problems to the nearest facilities. They will raise maternal and neonatal health awareness at the community lever and ensure that each pregnant woman under their care attends correct prenatal care, delivers with an SBA, and for home deliveries, uses a clean birth kit.

7. Do you anticipate any difficulties in completing your project in the timeframe outlined in your proposal?

Currently, we are on a track to meet our program deliverables. However, the political situation in Nepal causes governmental delays and closings are always a possibility. There is political turmoil in Nepal due to amendment of the recently promulgated constitution and this can cause delays.

8. Please attach five high-resolution JPG photographs of the program depicting the women/girls who have benefited from the grant funds. Include confirmation of grantee's right and consent to use photos/videos as per law.

9. Please attach a detailed list of all expenses
Expense sheet is attached.

10. Additional Comments: As we go to scale in Nepal, we are looking for additional funding. Would you be willing to consider an additional grant proposal from us to increase our funding level?