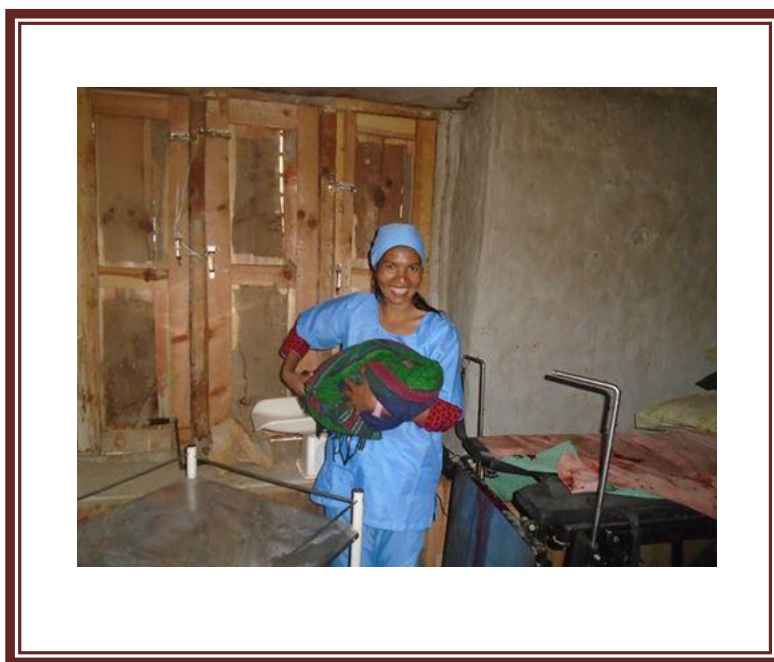




Report on Miteri Birthing Center, Jumla



Supported by:
NRN,UK Chapter and Sidhartha Nepali Samaj

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1. Introduction

Action Works Nepal (AWON) is a non-governmental organization centered to the social and development issues in the remote mid-western mountains of Nepal. AWON initiated its contribution since 2001 in an informal basis and basically focused its activities in Karnali, an isolated region of Nepal. It has formalized and strengthened its activities from 2010 AD. AWON is one of the pioneer organizations to work for rural Nepal, and well recognized and accepted by local, national and international communities.

AWON has been working in an integrated approach to address the extreme poverty and human rights issues through "Miteri Gaun-Let's Live Together Campaign", leading strategies of AWON. As guided by the strategic plan (2012-2016), AWON has four thematic areas; women empowerment, education support, livelihood improvement and humanitarian assistance. AWON has focused right to reproductive and maternal health programs in the Karnali region, where women are not aware of their reproductive health rights and have little access to basic health services, The Karnali region has highest Women of Reproductive Age (WRA) deaths rate (310/100'000) and the second highest MMR (275/100'000; MMS, 2008). Infant, under-five and neonatal mortality rates are both above the region (DHS, 2011). To address these problems, AWON launched a pilot project in November 2012 entitled "Miteri Birthing Center" (MBC) in Sunnigaun Village Development Committee (VDC) of Jumla. The VDC was recommended by District Public Health Office (DPHO) Jumla as a suitable location to construct a birthing centre because of highest maternal mortality rate. This project is financially supported by NRN (Non-Residence Nepalese), UK Chapter and Siddhartha Nepali Samaj, UK. This report covers activities carried out after the establishment of the MBC to December 2016.

2. Objectives

The overall objective of MBC is to improve maternal and child health condition in the Karnali region of Nepal. The specific objectives are:

- To address the high maternal mortality rate and poor child health condition in the program area and it's nearest outreach.
- To provide quality basic emergency services to the poor, vulnerable and socially excluded groups.
- To create an enabling environment and make compatible of demand and supply.

3. Key approaches and strategies

3.1 The following approaches and strategies are followed during the establishment of MBC:

- **Partnership with District Public Health Office (DPHO):**

AWON carried out a series of meetings with DPHO at AWON's office in Kathmandu (n=2), and DPHO in Jumla (n=2). Likewise, AWON has been doing coordination by formal and informal meetings with DPHO and its team. As a result, AHW had assigned, mobilized in the community and precede in the birthing centre. Thus, AHW is become secretary of User's Committee.

- **Miteri Gau-Let's Live Together Campaign:**

As guided by organizational strategy “Miteri Gau-Let’s Live Together Campaign”, AWON launched many activities such as: women empowerment, education support, livelihood improvement and humanitarian assistance as a complement to fulfill the objectives of MBC. The social awareness program lunched as a part of “Miteri Gaun Let’s Live Together Campaign” has been created awareness and sensitization among local communities on maternal and child health. AWON also formed and mobilized women and men (mixed with local stakeholders and traditional healers) groups to promote social campaigns in the field. The field volunteers and social mobilizers conduct weekly meetings with these groups and discuss on the various community problems and issues such as women empowerment, health, gender based violence (GBV), women rights and women’s participation in decision making process.

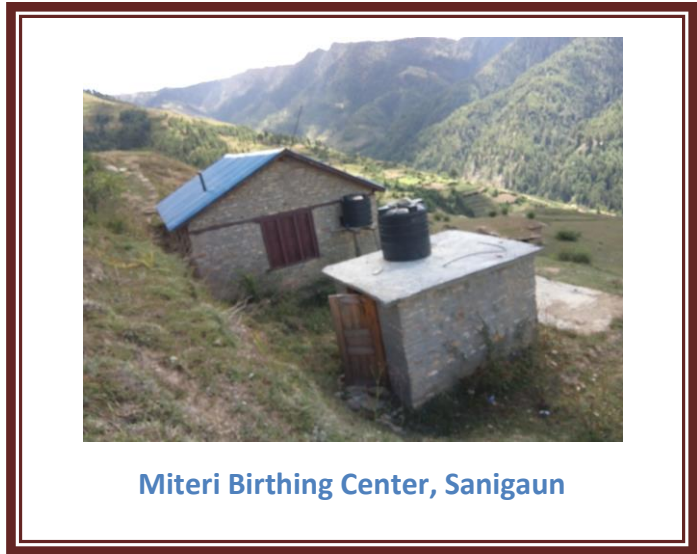
3.1.1 Program Budget: NRs. 3,578,200 For Five years (from 2013 - 2017)

The total expenditure of the project is NRs. which is% of total budget. (Please see detail attached sheet for finance progress).

The following sections provide major project activities and progresses according to project objectives.

3.2. Construction of the Birthing Center:

A building construction committee was formed with the help of local community and Health Post Management Committee in Sunnigaun of Jumla. The committee took a lead role for the construction of Miteri Birthing Center. The construction of MBC has completed in November, 2013. The building consists of two rooms and a toilet. One room is used for delivery purpose and the other for the visitors and caretakers. During the construction period of the building, the local community organized the public audit program in order to make transparent of the construction process among the concerned stakeholders.



Miteri Birthing Center, Sanigaun

3.3. Purchasing of the medical apparatus for the birthing center:

After construction of the Birthing Center, AWON purchased and delivered all essential materials, following the guidelines of the Birthing Center and as prescribed by the Family Health Division / Government of Nepal. In addition to this, AWON already installed a solar operated alternative energy facility considering lack of electricity facility in the MBC.

3.4. Recruitment of Human Resources

For the smooth running of the Miteri Birthing Center, AWON has recruited a local ANM named Ms. Sarada Rokaya in 2013 and she is serving till now. She has been selected among many other applicants based on a competitive selection process. Ms Rokaya is trained as ANM with some years of work experience in the local hospital. She gives full time for service delivery and she is available as and when necessary in addition to normal office hour as she lives nearby Birthing Center. About 446 (Four hundred forty six) houses of Sunnigaun VDC are expected to directly benefited from the MBC. She is providing services and taking care of women with pregnancy cycle and at the delivery period.

Majority of the women suffering from the uterus prolapsed problems also visited the MBC and the ANM provide necessary treatment service with suggestions and refers in case of serious cases to the district hospital for further treatment. She has also been initiated community level awareness and community mobilization on maternity, women's health and social issues. She is giving pre-natal and post- natal care to mothers and new born in the VDC.

Below is the list of the services that ANM is providing till date:

SN.	Activities	Number of beneficiaries
1.	Antenatal checkup	434
2.	Postnatal checkup	78
3.	Use of Depot Provera	105
4.	Use of Oral Contraceptive pills	41
5.	Implant insertion	31
6.	IUCD insertion	15
7.	Number of referred postnatal cases	3
8.	Recipient of counseling on safe abortion care	43

Education Support to One Local Nurse:

AWON selected a local girl to provide full scholarship to study Auxiliary Nurse Mid-Wife. Ms. Dil Maya Rawat from Sannigaun village was provided full scholarship with the commitment that after the completion of her study, she will continue to work at Miteri Birthing Center Sannigaun. She studied in the Karnali Technical School (KTS), Jumla and now she completed her final exam and these days she was appointed to work at MBC, Sanniagun. Ms. Rawat is mostly involved in the awareness raising activities in the local community, like, importance of anti-natal checkup (ANC), post natal checkup (PNC), caring of infants, Importance of



Ms. Dil Maya Rawat Working in MBC

immunization, use of family planning methods and many other health related issues. In spite, she is doing house hold visit once in a month to aware the local community people. As the number of the beneficiaries is increasing day by day and awareness raising activities becoming more effective in the area.

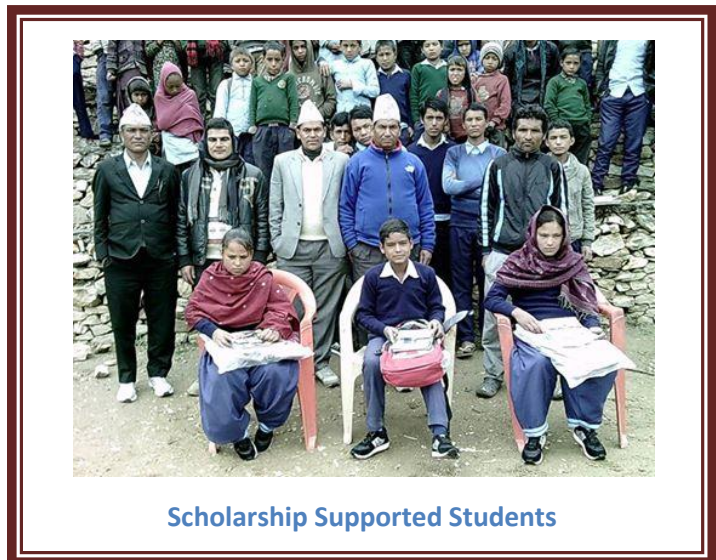
3.5. Mobilization of Miteri groups/REFLECT groups on Maternal Child Health (MCH):

3.5.1. Group Mobilization:

AWON has formed Miteri reflect groups in Sannigun VDC where MBC is located. AWON is also working with the Miteri Reflect groups on MCH. In order to create awareness, one ANM and one volunteer is regularly conducting weekly meetings with these groups and discuss in different health related issues, mostly focused in the maternal and child health care. The meetings are held especially with the different women and men groups of the community.

3.5.2 Education Support Program:

AWON, since its inception, is working with the schools at local community where MBC located, AWON volunteer conducts triplet meeting with the parents, teacher and school management committee and discuss about the importance of quality education and also highlighted the importance of Birthing Center in the village. AWON has also been provided scholarships to five needy students of the same village. The students were selected from the two schools, Shree Kailash Secondary School and Jyoti lower secondary School, Sannigaun. The stationary materials and two pair of cloth dresses were distributed to students.



3.5.3 Economic empowerment activities

Economic empowerment of the community is also an integral part of our work and we are continuously making our effort for it. AWON has created some saving credit groups in the community. These groups collect and mobilize money on monthly basis. Most of the groups in the communities collect small amount of money that ranges from NRs. 10, 15 to 20 every month as a part of their saving. They mobilize this money among the needy people within the group as a soft loan at a minimum interest rate i.e 1% per month. The loan is being used for income generating activities such as retail business and animal husbandry at individual and household levels. This practice of group has reduced the burden and the chances of exploitation from the high interest rate from landlords, moneylenders and elite people of the community.

3.5.4. Humanitarian Support:

As a part of humanitarian support program, AWON initiated the Miteri Recycle Center (MRC) where it collects second hand clothes from various places, recycle them and distributes to needy people in the rural remote villages. Once the clothes reached to the MRC, the cloths are well washed, repaired, stitched, ironed, labeled and packed well and look like retail items rather than donations and sold at a price that is affordable to the poorest consumers/people. This preserves the dignity of the people buying the clothes and provides a sustainable income for the marginalized women, especially the clothes are sent to the remote villages of Jumla and Kalikot. We are getting a very good response from the people of these areas and the customers too as the clothes are sold at a very cheaper rate with quality.

3.6: Engagement with the stakeholders:

AWON created different male, female and traditional healers groups directly working with the groups in the different villages of Jumla. AWON local volunteers conduct weekly meeting with these groups and explore about the importance of MBC in the villages. They have also been meeting with school management committee to engage local teachers along with political leaders, traditional healers and CBOs and made discussions on the human right, inclusion and gender related issues.

3.7: Support Communities in organizing various events, local festivals and community actions:

AWON organizes different programs with the male, female and traditional healer groups on the occasions of day celebrations and different campaigns. Especially, the community activities such as song competition, street drama, rallies, debate competition with school children are conducted in order to aware the local communities in different issues such as gender based violence, gender equality, equity and campaign to end social taboos such as Chhaupadi and importance of Birthing center and safe delivery. Such programs have also been helped to exchange knowledge and experience among the schools and community people. Such type of activities encourage people to fight against gender based violence and also ease them to go to Birthing Center for the safe delivery and safe motherhood.

3.8: Engage media to advocate about the value and use of Birthing Center:

AWON is also working with different media partners in Jumla as well as in Kathmandu. Especially, AWON is working with local radio 'Nari Awaj' of Jumla and OUTLINE Media in Kathmandu. Regarding the birthing center, radio 'Nari Awaj' covers message about the process of MBC and various maternity related issues and broadcasts through its local radio. As a result of this campaign, people are more encouraged to get facilities from the MBC. In addition to this, Outline media also helps to bring the local issues through FM Radios, newspapers, and social media like facebook, blog highlighting the activities of MBC.

Outline Media is currently preparing a small documentary of MBC that will capture some of the activities and scenario of the MBC at local context. *(Will be shared this documentary soon after the completion).*

3.9. Inclusiveness in the health facility:

Being much marginalized community in the far west district, there is very diversity in the community and various ethnic groups exists in the community such as Brahmin, Chhetri, Dalit (so called untouchable) and Janajati. The caste and gender based discrimination are still exists in the community. Level of understanding of people on human right issues is very low and the local volunteers are making discussions on the different issues. There is seen gradual increment of dalit, janajati women to visit Miteri Birthing Center for seeking health facilities.

3.10. Support in fund raising:

To sustain the program initiatives in the long term and to make user groups and communities independent, AWON is seeking to initiate new strategies such as apple farming in the community land and cooperative businesses to promote local products and to enhance skills in processing and marketing of the products. This will help to raise funds and engage poor, marginalized people for their employment and to sustain the program and activities and initiations.

3.11. On the site monitoring visit:

AWON local district staffs are making regular monitoring visit of MBC in order to see the progress and also to participate in the different meetings organized by the user groups and local community people. Team from Kathmandu is also continuously making visit of MBC and also participate in the group discussions of the local community.

Major Challenges:

- AWON is a growing organization; it has very limited funds so it is facing difficulties to mobilize competent and sufficient staff in the field.
- Due to the poor communication facilities in the remote VDCs of Jumla, it is very difficult to communicate with the staff and local volunteers.
- Due to remoteness and poor road access and time to reach the district



Group Discussion with the community people

headquarters and project sites, AWON is compelled to use highly expensive and unreliable air travels.

Conclusion

The Miteri Birthing Center is already in operation in the village and local community people especially women are visiting MBC for seeking SRH, Maternal and child health facilities. It seems that there is gradual increment in the number of beneficiaries seeking facilities in MBC. The local nurses and volunteers are playing a very important role to aware the community people in the SRH and importance of MBC so that the local women are encouraged to visit birthing center especially pre and post natal checkup. The women who are suffering from uterus prolepses also visit Birthing Center and ANM suggests the normal cases but refers serious cases to the district hospital for further treatment. Due to the increasing level of awareness on local community from the program on maternity, women's and child health, women were mostly visiting the MBC for seeking health facility.

Recommendation

- Since the MBC is a newly established center in the VDC, support should be continued to institutionalize and to make it sustainable.
- Community level activities (awareness raising campaign and women groups' mobilization) should be organized regularly in the adjoining VDC's too to encourage people to come to center for seeking the services.



Annex 1:

Dudhjira got new life.

Dudhjira Rawat is a residence of Sannigaun VDC ward no. 03, Jumla and she is living with four members in her family; husband and three children. After her second child, she was again pregnant with the expectation of having baby boy but her economic condition was very poor and her health condition was also getting worsen day by day. I was suffering from anemia and I went for ANC checkup in birthing center, she said. After her health checkup, she was told to take nutritious diet and reduce the work load and take rest. Her family members worried about her health. When she went for checkup in 9 months they told that the condition of her child was very bad and they suggested her to come for delivery in the birthing center. Later labor pain started and continued for two days but she did not inform about her health condition to her family members. After that other women of her village tried to deliver the baby at home forcefully. At last her condition was getting very worst so other people in the village took her to the birthing center. She was unconscious at that moment. The baby was presenting face as leading part complicating the normal delivery. The condition of the child was serious. It was impossible to reach to the district hospital due to the difficult geographical condition. After two hours, the baby was finally born in the birthing center. They got a baby girl. Rawat told that "Thanks god I got new life". She was very much happy and glad that her life and her child's life was safe and were out of danger. She was glad that AWON built birthing center in their village. If it was not in her village, she would have died in the lack of health service. She was very much thankful to the AWON and was very much grateful that other women in her village would also get benefitted from the service of the birthing center. Both Dudhjira Rawat and her husband Dhan Bir Rawat are happy now.