**Annex 4 – BMZ NARRATIVE INTERIM REPORT**

**Christoffel-Blindenmission Deutschland e.V.**

Project Details

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| CBM Project Number: | 4111\_BMZ-MYP |
| BMZ Project Number: | 5226 |
| Project Title: | HEALTH RIGHT: Inclusive Eye and Ear and Hearing Health in Karnali of Nepal |
| City/ Country /Region: | Nepal |

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| Name of Contractual Partner: | Nepal Netra Jyoti Sangh NNJS |

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| Duration of Project: | 37 months |
| Project Start Date: | 01.12.2020 |
| Project End Date: | 31.12.2023 |

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| Report Submitted by: |  |
| Name: | Man Bahadur Kunwar |
| Designation: | Project Manager |
| Email Address: | manbahadurk@nnjs.org.np |

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| Reporting Period: | 2022.01.01 – 2023.12.31 |
| Date of Submission: | 2023.01.17 |

1. General Information
   1. **Project Short Description / Project Goal**

Karnali is one of the most underdeveloped provinces in Nepal. Basic health service for majority of population is still unavailable and not accessible because of various factors. People have little access to affordable eye and ear care which is fundamental factor influencing the prevalence of blindness and deafness. Surkhet eye hospital, located at province capital in Surkhet is only referral and treatment centre for whole province. This project aims to improve the quality of life of poor population of Karnali province affected by visual and hearing impairment by ensuring affordable IEEH service through existing health system, raising awareness on prevention and treatment of eye and ear disease and enhancing professional capacities of service provider.

**Sources of Information (10 lines)**

*Where was the information for the report taken from?*

1. Monthly Progress report
2. Screening data by the community coordinators
3. Workshops/seminar reports/attendances
4. Screening eye and ear camps records
5. Meeting minutes
6. Training reports
7. Surkhet Eye Hospital data
8. Province Hospital data
9. Eye surgical camps data
10. Data from newly established Primary Eye Centres
11. Data from supported health facilities
12. Early detection in Mass Screening Data
13. Financial documents
14. Field visits /monitoring reports
15. Status of Implementation of the project

*The impact matrix reflects a current-status in every bi-/annual report*

*All data should be disaggregated (women, men, girls and boys, person with disabilities, no duplications please), if possible.*

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| **Overall objective (impact):** The quality of life of the poor population of the province of Karnali affected by visual and hearing impairments is improved. |

**To reach the Overall Objective, the Project aims to reach 4 Results, each equipped with indicators:**

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| **Specific Objective** (Outcome) | **Indicators** | | | | |
| Target | Achievement only in current reporting period in numbers  (quantitative & qualitative)  (2022.01.01 – 2022.12.31) | Achievement in previous reporting period in numbers  (2021) | Total accumulated achievement December 2022 (cumulative) | Description of achievement so far. Explanation for over-achievement or underachievement of the indicators. |
| Affordable quality IEEH services are part of the health system of the province of Karnali and treatment for poor people is secured. | The population practices measure to prevent eye and ear health (measured by survey). |  |  |  |  |
| 11,920 poor people have received treatment for their eye or ear disease. | Eye services received=65006  Ear Services received = 3367  Total no. of people received eye or ear services = 68373 | Total eye and ear services received = 18891 | Cumulative achievement = 87264 | The number of service users is increasing in Surkhet Eye Hospital after its service upgradation and partial salary support from the BMZ Project. From December 2022, Karnali Province started to report its ear care service performance after we supported to upgrade its ear services. In Q1 of 2022, we were able to establish 4 new primary eye and centres that started to report their performance, 12 health facilities supported with basic eye and ear care services are also functional. In 2022, the project also reached to larger number of community people through outreach cataract screening and mass screening camps where we also provide treatment services. So, the project has achieved greater number of people received eye and ear services. |
|  | An agreement for the integration of the established IEEH services into the health system of the province of Karnali has been agreed with the government and ratified in writing. Defined requirements for inclusive barrier-free services are an integral part of the agreement. | Two progressive eye health strategies have been proposed and discussed widely at the national and provincial levels separately | NNJS, CBM and other eye stakeholders will continue to play active role for making the strategies more inclusive and integrated |  | The project will continuously lobby, coordinate and advocate for making the strategies more inclusive and endorsement. Once the government endorses them, only then the agreement of established IEEH services into health system will be materialized. |

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| **Results** (Output) | **Indicators** | | | | |
| Target | Achievement only in current reporting period in numbers  (quantitative & qualitative)  (2022.01.01 – 2022.12.31) | Achievement in previous reporting period in numbers  (2021 Annual) | Total accumulated achievement up-to-date December 2022 (cumulative) | Description of achievement so far. Explanation for over-achievement or underachievement of the indicators. |
| Result 1.  The population of the 4 target districts of Jumla, Surkhet, Dailekh and Mugu is aware of measures for the prevention and treatment of eye and ear diseases as well of the IEEH services being offered. | By the end of 2023, the population has been made aware of prevention as well as eye and ear treatments and informed about integrated services through 8 street theatres, 60 murals and 8 information panels in public places, 4 school competitions, radio spots and 32 events on special holidays | # Street theatre drama shown = 8  # 60 murals and 8 information panels planned for Feb 2023  #Additional Jingles being broadcasted till December last through 12 FM stations,  # School competitions = 7  #Special day celebrations = 20 | #Street theatres =0  #Murals = 0  #Information panels =0  # Radio spots = 6 FMs  #School competitions = 2  # Public day celebration = 6 | Street theatres =8  #Murals = 0  #Information panels =0  # Radio spots = 18 FMs  #School competitions = 9  # Public day celebration = 26 | The project has made good progress achieving target of result one, remaining targets will be completed within 2023 |
| 320 traditional healers, 20 Female Community Health Volunteers, 80 parents, 16 teachers, 16 community representatives were trained in the prevention and treatment of eye and ear diseases | The activity accomplished for 2022 | # Traditional healers = 250  # FCHVs = 329  # Parents = 281 | # Traditional healers = 250  # FCHVs = 329  # Parents = 281 | # Already achieved the targets of the period |
| 90 health workers, community and district authority representatives were trained on disability, inclusion and inclusive emergency response. | Trained in Emergency response measures= 75 | Trained in Emergency response measures= 26 | Trained in Emergency response measures= 101 | We have accomplished the targets |
| 16 health care facilities are barrier- free. | Completed in Q2 of 2022 | Completed = 16 | No. of health care facilities completed their accessibility works = 16 | Targets have been achieved |
| 4 DPOs with 100 members have strengthened their lobbying skills and are committed to inclusion and accessibility. | # No. of DPOs members trained on disability and inclusion = 49 | # No. of DPOs members trained on disability and inclusion = 50 | # No. of DPOs members trained on disability and inclusion = 99 | We have met 99% of the targets |
| Result 2.  In the target districts of Jumla, Mugu, Surkhet and Dailekh professional capacities and infrastructure for affordable IEEC services are permanently guaranteed. | 12 basic health stations and 4 primary health centres are equipped with basic ophthalmic and ear care services in the target communities. | # No. equipped basic health stations = 12  # No. of equipped primary health centres = 4 | # No. equipped basic health stations = 0  # No. of equipped primary health centres = 0  (NNJS only procured equipment in end of 2021) | # No. equipped basic health stations = 12  # No. of equipped primary health centres = 4 | Targets achieved |
| 8 community coordinators and 25 community nurses working in the 16 health stations are trained in ophthalmology. They are integrated into a referral system with 2 eye clinics and 1 ENT department at the tertiary provincial hospital. | # No. of community coordinators trained =8  # No. of community nurses trained = 73 | # No. of community coordinators trained =8  # No. of community nurses trained = 42 | # No. of community coordinators trained =8  # No. of community nurses trained = 115 | Already achieved the total targets of whole project period, the trained nurses and community coordinators are providing services in regular basis. |
| 2 eye clinics and 1 ENT department of the tertiary provincial hospital have received necessary medical equipment for further treatment and work together with health stations. 22 health workers were trained in audiology and 1 technician in maintenance of medical equipment. | # Eye clinics equipped = 2  # ENT Department supported = 1  # Health workers trained in audiology = 10  # Technician trained = 1 | # Eye clinics equipped =0  # ENT Department supported = 0  # Health workers trained in audiology = 10  # Technician trained = 0 | # Eye clinics equipped = 2  # ENT Department supported = 1  # Health workers trained in audiology = 20  # Technician trained = 1 | #Remaining 2 health workers will be trained in audiometry training within 2023 |
| 1126,000 people participated in 32 mass screenings in schools and communities. | # No. of people participated in mass screenings = 74443 | # No. of people participated in mass screenings = 20829 | # Total No. of people participated in mass screenings up to date= 95272 | The project target for mass screening is on track. |
| 3,200 people were screened in 18 community screening programmes for early detection of hypertension, retinopathy and glaucoma. | # No. of people screened for early detection = 621 | # No. of people screened for early detection = 402 | # No. of people screened for early detection = 1023 | # NNJS will keep this activity in high priority in 2023 and achieve the target by 2023. |
| 8,400 poor people from the communities have received cataract surgery and 320 people have received ear treatment. | # No. of people received cataract surgery = 3903(1774 BMZ Support)  # No. of people received ear surgeries = 49 (BMZ support) | # No. of people received cataract surgery = 2887  # No. of people received ear surgeries = 17 | # No. of people received cataract surgery = 6790  # No. of people received ear surgeries = 66 | # Surgical achievement from Surkhet eye hospital (SEH) has been updated from 2021. Till December 2022 from June 2021, total of 6790 cataract surgeries have been done by SEH. Out of them, a total of 2128 cataract surgeries were supported by BMZ Project.  Province Hospital ear surgeries are started to record from 2022, after equipment support. During the reporting period a total 49 ear surgeries have been performed under Project subsidy |
| Result 3. Integration of accessible IEEH services in the state health system is ensured. | In 4 lobbying meetings with representatives of the district and provincial authorities, transfer of established IEEH services to the provincial medical health system was approved and signed. | We could not accomplish this activity in 2022. | Lobbying meeting with Ministry of Social Development (MoSD) = 1 | Total Lobbying meeting = 1 | A provincial level eye health strategy drafted by the MoSD of Karnali Province was widely discussed among stakeholders. The project will organize the lobbying meetings with them in within Q1 2023 This will support/pressurize to address the transfer of IEEH services under the provincial health system., similarly, lobby, coordination at national level will be carried out for endorsement of national eye health strategy. |
| In four workshops, government representatives were given expert advice on the development and implementation of the strategy for IEEH services into government health programmes, and an MoU with an implementation plan was adopted and signed. | # IEEH strategy is under review process both in federal and provincial level. Project supported to have policy discussion and dialogue workshops separately at Provincial and National level in Q3 of 2022 | The project will continuously do lobby and advocacy to make the strategies more inclusive and integrated |  | # Two drafts on eye health strategies have been discussed at the province and national levels. We will organize additional policy review, coordination lobby meetings for the expert advice in 2023 among government authorities and concerned stakeholders. After government endorsement of policy, the MoU with an implementation will happen |
| In 4 lobbying meetings and 4 workshops, DPO representatives have ensured that the agreements and implementation plans take into account the inclusion of people with disabilities. | Policy Review workshops conducted= 2  The review meetings were participated by the DPO representatives and they also provided their feedback to make the policies more inclusive | Policy Review workshops conducted= 0 | Policy Review workshops conducted= 2 | # Lobbying meetings will be conducted in 2023  # Additional Policy reviews and formation workshops planned in 2023 at national and provincial levels |

**2.1 Further Explanations for Changes and adaptions in initial project plan**

*In case there were changes in partner NGOs, Staff, framework, Project results, indicators and project area or target group, this needs to be explained here.*

***a. Status of implementation of activities, in comparison to proposal***

*This is the main part of the report, where the focus is on the progress of the project implementation for the reporting year. Here we give detailed description of all implemented activities in the reporting period with photos, breakdown of target group reached per activities (women, men, girls and boys, person with disabilities, no duplications please). Hereby, we follow the structure of the proposal, describing each activity under each result.*

*If one of the results or activities have not been achieved/implemented although they were planned to be implemented in the reporting period, please describe the reason for delays, variations, challenges, obstacles and how you have or will scope them.*

**Result 1: The population of the 4 target districts of Jumla, Surkhet, Dailekh and Mugu is aware of measures for the prevention and treatment of eye and ear diseases and of the range of IEEH services.**

**1.1 Information on prevention and treatment of eye and ear diseases as well as disability and inclusion**

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| **1.1.1 Radio spots to inform people about eye and ear health** |
| Radio message on eye health awareness broadcasted through 6 FM/Radio stations covering the project districts since 2021 till December 2022. We also developed and aired 3 additional radio jingles on eye trauma, refractive error and glaucoma through 12 rdaio stations in the project districts in December 2022. Since there is no budget allocation for this provision in 2023, we stopped this activity since 1 January 2023. |

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| **1.1.2 Street theatre to raise awareness of eye and ear health** |
| In the month of November, the local cultural agency performed 4 events of street drama on eye and ear health awareness in Mugu and Jumla districts. In the 4 events, almost 2245 community people participated. Out of them, a total of 23 were persons with disabilities.  In the month of September, 4 events were conducted in Surkhet and Dailekh districts where almost 1500 community people were sensitized on eye and ear health and disability. Out of them, a total of 20 were persons with disabilities.  Thus a total of 8 streeet theartes have been conducted in 2022 where around3745 community people have participated.Before performing the event, the organizer coordinated the local municiplaities, local DPOs and our community coordinators. The community people were informed through miking to gather at the sites already fixed. The drama actors performed their local cultural dances to attract the audiences before starting the play. After masses gathered, a total of 10 players performed their allocated role in the drama to aware on eye and ear health and hygiene practices as well as to sensitize on disability and inclusion. At the completion of the street drama, the audiences were to realize the importance of seeking timely treatment of their eye and ear problems from near by health facilities rather to follow the malpractices and superstitions ramphant in the society. The drama also emphasized on the respect, dignity and rights of the persons with disabilities.  At the end of each event, audiences‘ perceptions were sought regarding the street drama from some participants. They espressed their excitement, entertainment and inspirations over watching the drama. Some of their refelections were as such:  ”This street drama on eye and ear health is very new to us, it is really informative and useful for our lives, because eye and ear are very important in our life.“  ”It would have been very good for us if eye and ear camps were conducted along with the drama.““We knew the value of good vision and good hearing, from now we will directly go to health facilities to seek treatment, if any eye and ear problem is with us”. Satement from one of the observers of street drama. |

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| **1.1.3 Design and production of information material** |
| In 2022 we hav already designed and printed 15 stickers, 50 flexes and 2500 brochures on eye health awareness, 50 flexes and 2000 posters on ear health awareness within the Q2 of 2022. We also designed and printed 250 pamphlets on eye and ear health in accessible Braille Format.  We have been displaying them during regular eye and ear screening campaigns, surgical eye and ear camps, schools and other public places like health facilities. We habe been distributing them in the schools where inclusive education is provisioned, during the DID trainings and seminars, surgical eye and ear campaigns and the DPOs working for the welfare of people affected with incurable blindness and visual impairment.  Within the allocated budget, we have accomplished this activity. And we will be focussing onwards on awareness raising campaigns through our published IEEC materials throughout the project period. If needed, we will coordinate with CBM for additional budget. |

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| **1.1.4 Wall paintings in central places in communities** |
| We could not accomplish this activity in 2022. NNJS is coordinating with local govrrnments, ,health facilities, schools and Surkhet Eye Hospital to complete in Q1 of 2023. |

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| **1.1.5 Video spot production** |
| . A video spot has been prepared about **CATARACT** which is the major cause of avoidable blindness in Karnali Province among the elderly population. The video speaks about an old rural woman with difficulty in daily lives due to her bilateral cataract, suggests to go to Surkhet Eye Hospital for operation, its consequences if not treated on time, visually shows the easy life gained after cataract operation.  We will publicly display the video spot through local TV channels, during screening and surgical eye camps, trainings etc. throughout the remaining project period. We will also share it to other eye care providers in Karnali to ensure it to reach to maximum number of people. |

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| **1.1.6 Production of information boards for schools and public places** |
| We could not accomplish this activity in 2022. NNJS is coordinating with local govrrnments, ,health facilities, schools and Surkhet Eye Hospital to complete in Q1 of 2023. |

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| **1.1.7 Competition on health practices** |
| Our community coordinators, in consultation with the respective local municipalities, planned and conducted different school level competition events during 2 important national celebration days: National Education Day (8 September 2022) and Nation Children Day (14 September 2022) with support from the local bodies.  The main purpose of this activity is to raise awareness and sensitize the communities for their good eye and ear health well being in a sustained way.  Different activities such as School Level Quiz, Music, and Speech competitions were held among the school students with major focus for sensitizing them on eye and ear health and hygiene. For this education and health sections of the local municipalities actively participated and involved for planning and accomplishing the events and the project contributed for the snacks and prize provisions for the events.  The participants’ reflections were highly praiseworthy regarding the program and they expressed that such events will encourage and empower students to prevent from harmful practices and to to protect their own eye and ear health.  Some of the local government authorities from project area have committed that they will continue to organize and lead such awareness events in the future.  A total of 7 school competitions were held in 2022 to raise awareness on eye, ear haelth and disability. In 2021, we organized 2 school cmpetitions. Thus a total of 9 events have been conducted to sensitize the students regarding eye and ear health and hygiene. We have planned to conduct additional 7 school level competitions in 2023. |

**1.2 Mobilization and capacity development in the communities**

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| **1.2.1 Training community coordinators (Eye and Ear Health Worker)** |
| 8 Community Coordinators (2 Men, 6 Women) have been trained on eye and ear health in Q2. And this has already been accomplished. We also trained our 8 community coordinators in 2021. |

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| **1.2.2 Training of Female Community Health Volunteers (FCHV)** |
| As part of Community Mobilization on eye and ear health A total of 152 FCVHs were trained on eye and ear health in one day orientation programs in Q2 of 2022.  In 2021, we oriented 177 FCHVs in our project districts. Thus we have achieved 329 againts the target of 320 for the whole project period. |

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| **1.2.3 Training of traditional healers** |
| Traditional healers in Nepal are those persons who do not have any formal medical training, but are considered (by the local community) as being competent to provide health care using animal, plant and mineral substances and certain other techniques based on social, cultural and religious background. The local communities have deep faith on them and many times, are subject to harmful health practices due to deep rooted cultural and harmful religious beliefs.  A total of 83 traditional healers were oriented for awareness on eye, ear and disability in Q2, 2022. In 2021, we trained 167 traditional healers from our project districts. In total, we have trained 250 traditional healers against the target of 240 till 2022.  A total of 320 traditional healers are to be trained to achieve the total target. We have planned to train additional 80 traditional healers from our project sites within Q1 of 2023. |

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| **1.2.4 Training for parents on eye and ear health** |
| A total of 115 parents were made aware of eye and ear health in one day orientation programs in Q1 and Q2 of 2022. In 2021, we trained 166 parents of school children in our project sites. A total of 281 parents have been oriented on eye and ear health till the end of reporting year. We are going to train additional 80 parents within Q1 of 2023. |

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| * + 1. **Capacity development of community nurses on eye and ear diseases and rehabilitation** |
| Community nurses are the important front line health personnel in Nepal who have been playing significant roles for preventing child and maternal deaths. They involve in community health activities such as antenatal care, child birth, post natal care, routine immunization, family planning, nutritional promotion. Enhancing their knowledge and skills on eye and ear health can play an important role for early detection, referral and treatment of eye and ear problems thereby reducing vision and hearing impairments during the critical development periods of human life.  Our total target is train 100 community nurses on eye and ear in 2021 and 2022. A total of 73 community nurses were trained on eye, ear and rehabilitation in 3 days’ advanced training programs in Q1 and Q2. In 2021, we trained 42 community nurses from our project sites. In total we have tarined 115 community nurses thus achieving the target for the project |

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| **1.2.6 Training of health personnel on emergency response measures** |
| Karnali Province is very prone to disastures due to its unique geo physical settings. Storm surge, floods, landslides, heavy snowfall in winter, drought and earthquake are the major natural calamities affecting hundreds of people every year. Health personnel as well as the teachers in schools where children with disabilities are taught should be aware and have knowledge regarding the special vulnerability of the persons with disabilities in emergency situations.  The overall objective of the trainings was to enhance capacity to Health personals and teachers of Mugu, Jumla and Dailekh on Disability Inclusive disaster risk reduction, climate change adaptation and response to incorporate in to the development activities at local level.  Three training events: 1 in Gamghadi(Mugu) 1 in Chandannath(Jumla) and 1 in Narayan(Dailekh) were conducted to train 75 personnel( 57 government health personnel and 18 teachers) on emeregency response measures. The training sessions were facilitated by consultant expert on DIDRR.  **Table 1: Details of the participants**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Designation** | **Health Personnel** | | **Teachers** | | **Total** | | Men | Women | Men | Women |  | | Persons With Disabilities | 37 | 15 | 10 | 6 | 68 | | Persons Without Disabilities | 2 | 3 | 1 | 1 | 7 | | **Total** | 39 | 18 | 11 | 7 | 75 |   Out of total 75 participants, 50 Men and 25 Women. There were a total of 7 persons with disabilities(3 Men and 4 Women).  In 2021, we trained 26 health personnel on emergency response measures. In total we habve trained 101 personnel including 4 project staff, 18 teachers, 79 health personnel thus already achieving the total project targets. |

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| **1.2.7 Training in Disability and Inclusion**  **ealth personnel on emergency response measures** |
| Blindness, vision impairment, deafness and hearing impairment are the most common disabilities in the project sites. Reduction of the causes of these impairments with disability inclusion is the main purpose of the project. The main purpose of this training is to enhance the knowledge and skills of the DPOs members lobbying and their committment to disability and inclusion.  Two workshops (each for 3 days) were organized in Chandannath (Jumla), and Chhayanath Rara (Mugu) to train DPO members about disability inclusion development in November 2022. There were total of 49 participants with different disabilities (37 men, 12 women). We also managed reasonable accommodation for 16 caretakers of persons with disabilities during the 2 training events.  **Participants’ Reflections**  **Kamala Budha**,45 years old from the Chandannath-4 Jumla, a member of DRDC says “Thank you to the organizer team for organizing the training, especially for the disabled people’s organization. Learned the policies and rights of a disabled person but I would like to request you that please organize the same kind of training including local elected, municipality personnel and other stakeholders too.”  **Surya Bahadur Adhikari,** a Member of Pragatishil Apaanga Sanjal-Jumla Says “Training is so good, there used to be so much training but no one called us for the training, So feeling so happy for getting the opportunity to participate in this training. Being the person with a disability we were facing so many problems, especially we wheelchair users, we don’t have easy access to anywhere so we face more problems. In conclusion, training was fruitful, I will implement in my place what I learned here.”  **Hasa Devi BK**,35 years old, Secretary of DADO Nepal-Mugu (DPO) says “I am also the person with a disability I have a problem in my legs and I can’t walk like other normal people. People with disability have to face so many problems in normal life but no body speaks about problems and rigts. Thanks to NNJS for this training. This training has empowered me and others too. We learned about advocacy and many more things.” |

**Result 2: Result 2: In the target districts of Jumla, Mugu, Surkhet and Dailekh the professional capacities and infrastructure for affordable IEEH services are permanently guaranteed.**

**2.1 Building inclusive eye and ear health services**

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| **2.1.1 Regular screening in communities and schools** |
| Regular screening in communities and schools is the single major activity of our 8 community coordinators. They work in close coordination with the local government authorities, school teachers, FCHVs and government health personnel for conducting community and school screening campaigns. In the screening campaigns, they mainly aware the community people and students on promotive and preventive measures on eye health, screen for eye and ear problems and make referrals to different health facilities and also inform them about the availability and provision of IEEH services.  In the reporting period, a total of 74443 (17514 Men, 17610 Women, 20049 Boys and 19319 Girls) community people and students were screened for their eye and ear problems. Out of the total 74443 people screened, 446 were persons with disabilities (180 Men, 182 Women, 61 Boys and 72 Girls).  A total of 2702 people were referred for management of their eye and vision problems to nearby eye health facilities. A total of 882 people were referred for management of their ear and hearing problems to nearby health facilities. |

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| **2.1.2 Early detection in mass screening** |
| The main purpose of this activity is to timely detect the cases of glaucoma, hypertension and diabetics, among at risk groups of the population, as the emerging causes of blindness and visual impairment.  2 Comprehensive targeted mass screening camps were conducted at Lekfarsa and Dashrathpur of Surkhet district. The main purpose was to identify the cases of diabetes and diabetic retinopathy, Hypertension and Hypertensive retinopathy as well as glaucoma which have been found to be the emerging causes of blindness and vision impairment among the elderly population. A Technical team led by an ophthalmologist from NRCS Surkhet Eye Hospital was deployed to accomplish the camps. Local coordination and management were supported by the local Red Cross volunteers and the local government.  In the 2 mass screening camps, a total of 621 people (306 Men and 315 Women) were examined. A total of 37 people (20 Men and 17 Women) were found to be hypertensive and out of which 4 people (3 Men and 1 Women) were found to be affected with any grade of hypertensive retinopathy. They were referred to Surkhet Eye Hospital for further clinical management.  A total of 33 People (18 Men and 15 Women were found to have diabetes out of them, 5 people (3 Men and 2 Women) were found to be affected with any grade of Diabetes retinopathy and referred to Surkhet Eye Hospital for further management.  A total of 9 people (4 Men and 5 Women) were found to be suspected with glaucoma and were referred to Surkhet Eye Hospital for further diagnosis and management.  During the mass screening camps, we also screened for the cataract as the leading cause of blindness and vision impairment among the elderly people. There were total of 68 people with operable cataract (33 Men and 29 Women) who were referred to Surkhet Eye Hospital for the surgery and thier surgery carried out under BMZ financial support.  Out of 621 people examined, a total of 296 people (145 Men and 151 Women) were provided eye medicines for their different ocular problems. There were total of 23 persons with disabilities (11 Men and 12 Women) who received the eye care services in the accomplished mass screening campaigns.  In 2021, we were able to screen for 402 at people at risk for hypertension, diabetes and glaucoma. We had a target of screening 1800 people in 2022 which we could not accomplish due to time constraints of implementing other project activities. We are planning to complete this activity within Q2 of 2023. |

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| **2.1.3 Special Public celebration days** |
| This activity is conducted by organizing events on special days such as World Sight Day, World Diabetics Day, International Day of Persons with Disabilities (IDPD) etc. The main purpose is to draw attention government authorities, DPOs and communities on prevention of eye and ear diseases as well as disability and inclusion.  In 2022, 5 Events on World Sight Day on 13 October and 15 events on International Day of Persons with disabilities on 3 December were organized for the special day celebration. A total of 20 events have been accomplished in 2022 for the special day celebration.  World Sight Day is celebrated on Thursday of 2nd week of October each year. This year it was on 13 October. So, our community coordinators in coordination with the respective local municipalities, and health facilities conducted the One-day free Special Eye screening and awareness program with the support of an Ophthalmic Assistants in different targeted communities, organizations, and schools with the slogan of “Love Your Eyes”.  A total of 5 targeted eye screening and awareness events were conducted at Gurvakot Municiplaity (Surkhet), Barahatal Rural Municiplaity (Surkhet), Narayan Municiplaity (Dailekh), Dullu Municiplaity (Dailekh) and Chandannath Municiplaity (Jumla). The events were organized with financial support from the HEALTH RIGHT Project and in collaboration with the local municipalities and other eye care service providers.  A total of 457 community people (140 Men, 110 Women, 109 Boys and 98 Girls) were provided free eye examination and awareness services on the special day of world sight day celebration. There were 6 persons with disabilities participating in the events.  International Day of Persons with DisabilityDay is celebrated on the 3rd of December each year. So, our community coordinators in coordination with the respective local municipalities, and health facilities, and with coordination with OPDs conducted 15 events on the celebration of the International Day of Persons in different targeted communities, organizations, and schools with the slogan of *“Transformative solutions for inclusive development: the role of innovation in fueling an accessible and equitable world”.* There was a major financial contribution by the HEALTH RIGHT PROJECT (BMZ FUNDED) in all the events.  A total of 1791 people (458 Men, 387 Women, 442 Boys and 504 Girls) including 754 Persons with Disability (205 Men, 232 Women, 148 Boys and 169 Girls) participated in the 15 events organized on the occasion of International Day of Persons with Disabilities on 3 December 2022.  In 2021, we organized 6 events on World Sight Day Celebration at the local municipality levels. Thus a total of 26 events have been done for special day celebration which we have accomplished targets of 2021 nad 2022.  **Reflection**  The local government authorities, community people and the participants highly acknowledged and appreciated our initiation and active involvement in celebration of the International Day of Persons with Disabilities as well as advocating and raising awareness for prevention of blindness through World Sight Day Celebration. They have also requested us to continue such events massively among the community people in the coming future. |

**2.2 Building integrated eye and ear health services**

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| **2.2.1 Baseline study on ear and hearing care** |
| Budget planned in project is not sufficient to carry out ear survey based on WHO guideline in whole Karnali. In consultation with CBM and recommendation from CBM technical advisor, ear survey proposal is revising to accommodate it with available budget. NNJS will soon come up with revised financial and technical proposal for survey |

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| **2.2.2 Equipment of the state basic health stations** |
| To maximize the utilization of provided equipments, project have been providing equipment to those health facilities from where health personnel have participated on one-month basic otology training. Doing this project has ensured the utilization of provided equipment and those who have received training have equipment to practice their learned knowledge and deliver services.  In the reporting year, we have supported 12 government health facilities especially promoting the primary ear and eye care services. With this support, we have completed the overall target of equipping the 12 basic health stations and they have been functional.  During the reporting year, a total of 1065 community people (men-302, women-302, boys-229, girls-232) people have received the basic ear service through the supported health facilities at the community levels where the primary care was not accessible previously.  **Main Challenges**  Few of the supported government health facilities have not reported regularly and their service output is also less because they do not regularly work at their designated places and go for temporary transfer to other facilities in urban areas. |

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| **2.2.3 Establishment of an integrated eye and ear health service in Primary Health Centres** |
| The 4 PEECs established under the BMZ support are functional to provide regular primary services in rural community. They are established at Patarasi(Jumla), Kanakasundari (Jumla), Dullu (Dailekh) and Simta(Surkhet) municipalites. The local governments have taken the ownership to manage HR and operational costs. Regular monitoring and supervision is being done by the management committee formed for running the PEECs.  In 2022, a total of 3236 community people (910 Men, 1104Women, 632 boys, 590 girls) have received eye care services from newly established 4 PEECs including 12 persons with disabilities(5 Men, 6 Women and 1 Boy).  **Challenges**   * Service at the PEEC at Kanakasundari, Jumla has been paused for some time beign because of regisnation of opthalmic assisstant . NNJS is collaborating with municipality for fulfillment of vacant position. * The service ouput of PEECs especiaaly in mountainuous regions is very less because of non publicity of the srrvice availability. NNJS will support for publicity of the established eye care service through FM station and awareness materials. |

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| * + 1. **Upgrade of one primary health center to an eye clinic**     2. **2.1.2 Early detection in mass screening Building up an eye clinic** |
| Gurvakot eye care center has been upgraded to surgical center with equipment support from this project. Locally formed eye care center management committe manage this surgical center. Local governemet also allocate fund for this eye care center anually about NPR 700000 to 1000000. Additionnaly, this center receive annual support of NPR 1000000 from NNJS for HR, admin and other logistic expenses. Local goverment and NNJS are agreed to upgrade this surgical center further as secondary eye hospital in future.  NNJS is planning to ensure periodic regular cataract surgeries from the centre in the near future with the provision of an Ophthalmologist being deployed.in collaboration with local and provincial government.  In 2022, 280 catarct surgeries of 137 Men and 143 Women were performed at the upgraded surgical centre including 9 persons with disabilities. |

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| * + 1. **Establishment of a low vision department at Surkhet Eye Hospital** |
| We had handed over the following necessary low vision equipments for establishing the low vision Department at Surkhet Eye Hospital:   |  |  |  | | --- | --- | --- | | **S.N.** | **Devices For Low Vision Clinic at SEH** | **No** | | **1** | Streak retinoscope | 1 | | **2** | Direct ophthalmoscope | 1 | | **3** | Trial lens set (full aperture) | 1 | | **4** | Universal trial frames | 1 | | **5** | Pediatric trial frames (2 pairs of different sizes) | 2 | | **6** | Long handle occluder with pinholes | 2 | | **7** | Pen torch | 1 | | **8** | Distant LogMAR test charts | 3 | | **9** | Near vision tests | 4 | | **10** | Symbol pediatric tests for matching and pointing (with and without crowding) | 2 | | **11** | PV-16 Color Vision Test (double set) | 2 |   Surkhet Eye Hospital has not yet started to provide the low vision services due to not availability of low vision expert.  In the month of December, we finalized the procurement of additional low vision devices and we have planned to hand over them within January 2023. The following low vision devices have been procured:   |  |  |  |  | | --- | --- | --- | --- | | **S.N** | **Particulars** | **Unit** | **Qty.** | | 1 | **Prismatic Spectacle +8D standard** | Pcs | 10 | | 2 | Prismatic Spectacle +10D standard | Pcs | 10 | | 3 | Aspheric Spectacle +16D | Pcs | 10 | | 4 | Aspheric Spectacle +20D | Pcs | 10 | | 5 | Spectacle Mounted Monocular Telescope 3.25x | Pcs | 5 | | 6 | Telescope Monocular Hand Held 6x | Pcs | 5 | | 7 | Binocular Spectacle Telescope 3x24mm | Pcs | 2 | | 8 | Stand magnifier 2.5x50mm, 10D | Pcs | 10 | | 9 | Adj. Stand magnifier 8x35mm, 28D | Pcs | 5 | | 10 | Hand magnifier 2.5x50mm,10D | Pcs | 5 | | 11 | Hand magnifier 3x32mm,12D | Pcs | 5 | | 12 | Bar Magnifier 5x152mm, 16D | Pcs | 5 | | 13 | Bar Magnifier 2x120mm, 8D | Pcs | 5 | | 14 | Ambermatic Filter Raybon type | Pcs | 2 | | 15 | NOIR Filter Ambermatic Fit Over USA | Pcs | 2 | | 16 | CCTV Mouse Camera For TV and USB | Pcs | 1 | | 17 | Dell Monitor S2421HM | Pcs | 1 | |

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| * + 1. **Improvement of eye health services at the Surkhet Eye Hospital** |
| The project supported the following equipments under the project funded by BMZ grant for upgradation of the ophthalmological services:   |  |  | | --- | --- | | Name of Equipments | Quantity | |  | | Humphry | 1 |  | | Slit Lamp | 1 |  | | Loose prism | 1 |  | | Kitmus Set | 1 |  | | Computerized vision drum with magic chart | 1 |  | | Pachymetry | 1 |  | | Edging machine | 1 |  |   We have tracked the service delivery performance of Surkhet eye hospital from June 2021, inception of this project. In the year 2022, SEH provided service to 51481 people (men-19402, women-27266, boys-2580 and girls-2233). The service utilization rate is increasing in SEH after the equipments and partially salary support from the project. The service utilization at the hospital is increasing because of also its wide publicity during massive eye screening surgical eye camps that have been undergoing through BMZ financial support.  From June to December 2021, the hospital provided eye care services to 18891 people at the hospital base. Thus, total of 70372 people have received eye care services from the hospital from June 2021 to December 2022. |
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| * + 1. **Strengthening the ENT department at Karnali Provincial Hospital in Surkhet** |
| The following Ear equipments have been handed over to Karnali Province Hospital under the financial support from BMZ for strengthening the ENT department:   |  |  |  | | --- | --- | --- | | **S.N.** | **Name** | **No.** | | **1** | Myringoplasty set | **2** | | **2** | MRM set | **2** | | **3** | Tympanometer | **2** | | **4** | Pure Tone Audiogram (PTA) | **2** | | **5** | General ENT OPD working MRM Dril | **1** | | **6** | PTA Tympanometry unit with Audiogram | **2** | | **7** | Head Lights | **4** | | **8** | Suction machine | **3** | | **9** | Tunning Forks (256,512,1024 HZ) | **6** | | **10** | Ear OPD Instruments | **1** | | **11** | Ottoscope | **5** | | **12** | Portable Microscope | **1** |   In 2022, a total of 2302 people (718 men, 556 women, 475 girls, 540 boys) received the ear care services at province hospital including 61 Persons with disability (28 Men, 13 Women, 10 Boys, 10 Girls). |

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| **2.2.8 Improvement of accessibility at the primary health center** |
| The following supported health facilities completed their their accesibility work in Q2, 2022 and we have completed the whole targets of the project.   |  |  |  | | --- | --- | --- | | S.N. | Name | Address | |  | Kunathari Health Post | Barahatal, Surkhet | |  | Lekhgaun Health Post | Barahatal, Surkhet | |  | Sahare Health Post | Gurvakot, Surkhet | |  | Dahachour Health Post | Gurvakot, Surkhet | |  | Primary Eye Care Center | Narayan Municiplaity, Dailekh | |  | Belaspur Health Post | Narayan Municiplaity, Dailekh | |  | Tribeni Health Post | Narayan Municiplaity, Dailekh | |  | Community Eye Care Center | Dullu Municipality, Dailekh | |  | Gamaudi Health Post | Dullu Municipality, Dailekh | |  | Paduka Health Post | Dullu Municipality, Dailekh | |  | Dhapa Health Post | Sinja Rural Municiplaity, Jumla | |  | Narakot Health Post | Sinja Rural Municiplaity, Jumla | |  | Sanigaun Health Post | Sinja Rural Municiplaity, Jumla | |  | Primary Eye Center | Chandannath Municipality, Jumla | |  | Talium Health Post | Chandannath Municipality, Jumla | |  | Mahat Health Post | Chandannath Municipality, Jumla | |

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| * + 1. **Cataract surgery at Surkhet Eye Hospital** |
| In 2022, a total of 2398 cataract surgeries of 1058 Men, and 1337 Women were performed at Surkhet Eye Hospital. Out of them, 272 cataract surgeries of 130 Men and 139 Women, 3 Boys were done under the subsidy by BMZ funded Project. National Insurance scheme covered for 666 cataract surgeries and remaining 1663 were either supported by other entities or out of pocket expenditures.  Similarly, in 2021, SEH has performed 2664 cataract surgeries from June to December 2021. Among them 128 (66 men and 62 women) surgery were performed with support from BMZ subsidy and 477 were from health insurance and remaining 2059 were either supported by other entities or out of pocket expenditures.  Thus, from June 2021 to December 2022, a total of 5062 cataract surgeries have been performed by Surkhet Eye Hospital at its base.  From June 2021 to December 2022 a total of 397 cataract surgeries have been performed at Surkhet eye hospital under BMZ subsidy.  Compared to 2021, surgical performance of Surkhet eye hospital is less in 2022 because there were 2 ophthalmologists working in 2021. Senior eye surgeon left the hospital early 2022 and there was only one ophthalmologist till October 2022. As a result, hospital could not provide surgical service when single ophthalmologist mobilized for outreach camp.  Due to geographical remoteness, lack of transportation, and peoples’ excessive dependence in outreach surgical camps, many people don’t visit base hospital (SEH) for eye surgeries. Among them who visit SEH for surgeries, if they are financially able to cover the cost of surgeries, they cover themselves, those clients who have health insurance, their surgeries are covered by health insurance. If client from project district is poor and unable to cover surgery cost then, surgeries are done under project subsidy scheme. |

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| * + 1. **Implementation of cataract surgery campaigns in remote regions** |
| In 2022, 14 cataract surgical camps were conducted in Dailekh, Surkhet, Jumla and Mugu districts with technical support by NRCS Surkhet Eye Hospital (10 camps), NNJS Himalaya Eye Hospital (3 camps) and NNJS Fatebal Eye Hospital (1 camp) under the financial support from BMZ HEALTH RIGHT Project.  A total of 1505 cataract surgeries of 766 Men and 739 Women were performed. Out of 1505 surgeries, a total of 51cataract surgeries of 29 Men and 22 Women belonged to the persons with disabilities.  Prior to conducting the surgical camps, the project team, the NRCS Surkhet Eye Hospital team, NNJS Himalaya Eye Hospital team an NNJS Fatebal Eye Hospital planned, coordinated with the local stakeholders and finalized the sites for cataract prescreening and surgical camps.  In the year 2022, a total of 68 cataract screening camps were conducted for implementing the planned 14 surgical outreach camps. Through the screening camps, a total of 6091 community people (2560 Men and 3531 Women) got eye care services. Out 6091 people, a total of 95 persons with disabilities (43 Men and 52 Women) were able to access the outreach eye care services through the screening camps. |

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| * + 1. **Ear surgery campaigns** |
| In 2022, a total of 49 ear surgeries of 10 Men, 15 Women, 16 Boys and 8 Girls were conducted at the ENT Department of Province Hospital. Out of them, 15 ear surgeries of 5 men, 5 woman, 1 boy and 4 Girls) were conducted under the BMZ subsidy support.  Similarly, 17 surgeires were performed in 2021 under BMZ subsidy.  So a total of 32 ear surgeries have been conducted at province hospital under the BMZ subsidy till December 2022.  **Challenges**   * All types of ear surgeries cannot be performed at the department due to not availability of all kind of medical logistic in department and skillfull human resource. As a result karnali provincial hospital can provide very limited ear surgical services. * It is challenging to organize surgical camp for ear surgeries in remote districts, because ear surgeries demand 15to 30 days prior pre-surgical medication of ear to be ready for surgery that demand prior identification and treatment of case which is not possible from camp, operation setup for ear surgies cant be done in other than hospital setting because it requires strict infection prevension and special equipments. * The cost of ear surgeries is high even in governemtn hospital. subsidy amount provisioned under the BMZ project is less likely to encourage poor client for ear surgeries |

* 1. **Capacity development in the state health sector**

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| **2.4.1 Training on maintenance of medical equipment** |
| NNJS explored the maintenance trainign institute in Nepal. We could not get institute that train people for maintenance of medical equipment. So with approval from CBM, 1 Ophthalmic Assistant from Surkhet Eye Hospital was sent to Arvind Eye Institute, Madhurai, India for the same training. Now surkhet eye hospital has one trained maintenance technician who will support the maintenance of medical equipment at local level  There is scarcity of trained human resource regarding repair and maintaenance of medical equipmenrs particularly the ophthalmic eqipments in Karnali. The optimal utilization and long term durability of the equipments is always a concern of health institution. The training imparted through the BMZ finacial suppport is going to fulfil this gap and it will ensure the optimization and efeeciency of the equipments supported by project in Karnali. |

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| * + 1. **Audiology training of state health personnel** |
| In 2022, a total of 10 health personnel (4Woman and 6 Men) from Jumla, Dailekh and Surkhet were trained for 1-month basic otology in the ENT department of Province Hospital at Surkhet. In 2021, we trained 10 health personnel on basic otology under the BMZ financial support. Thus, a total of 20 health personnel have been trained so far. We have plan of 22 health personnel training including 2 for 3 months audiometry training. Since, there was no any functional training institute in Nepal for this training, we could not do this in 2022.  In 2023, we have been informed that a government recogzied training istitute is going to be functional. We are coordinating with the institute for this training and we have planned to start this by March 2023.  The main purpose of training is to impart the health personnel knowledge and skills on audiology so that primary ear care service is ensured at the basic level. This will contribute to the prevention of deafness and hearing impairment in the province. After the training, they will provide regular primary ear services from their respective health facilities and the project will support basic ear equipments so that the service will start on time. They will report to the project on monthly basis regarding the achievement of their service provision. |

**Result 3: The integration of integrated ophthalmic and otologic services in the public health system is ensured**

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| **3.1.1 Lobbying meeting with representatives of local, district and regional authorities** |
| The main purpose of lobbying with local, district and regional authorities is to advocate for the integration of eye and ear care services into the mainstream health system and ensure the inclusion of people with disabilities in plans, policies and programs. The provincial, district and local, government authorities, DPOs members, representatives from Surkhet Eye Hospital and Province Hospital are to participate in the 2 lobby meetings.  As per recommendation of Ministry of Social Development(MSD) and Surkhet Eye Hospital, organizing this meetign is more fruitfull when province have its own eye health strategy. It was planned to endorse by early December 2022 and we had planned this meeting on 3rd week of december, as governemtn in last hour post-poned endorsement plan, project could not make it happen. NNJS is plannign to have this meeting by 1st quarter of 2023. |

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| **3.1.2 Eye and ear health committee at district level** |
| A total of 8 Eye and ear committee have been formed within the reporting period to review, feedback and facilitate the project activities at the local levels.  Participation of DPOs members is mandatory and our field staff coordinate for the meetings and in the reporting period (July-Dec 2022), a total of 12 meetings have been held in the project sites among the local government authorities, DPOs members during reporting period. During the meetings, they have discussions regarding the implementation of project activities, progress, challenges faced and ways forward.  The committee have been very useful for implementing the project activities mainly regular eye and ear screenings, conducting surgical eye and ear campaigns, and many other activities regarding system and capacity enhancement. |

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| **3.1.3 Revision of the National Health Strategy** |
| There has been very minimal role of the government in eye care service delivery in Nepal since long. The eye care service has not yet been integrated into the government health system, rather being dominantly run by the non-governmental sectors.  As per the national and international policies and documents, health care delivery, is the main shared legal responsibility of the Federal, Provincial and local governments in Nepal. Recent national and provincial health policies and strategies have prioritized eye care as one of the major parts of health care system. Based on this background, Ministry of Social Development, Karnali Province has recently finalized the proposed draft on Provincial Eye Health Strategy with the main emphasis on integrated eye health within the government health system.  In this context, the NNJS Integrated Eye and Ear Health Program, with support from CBM\BMZ, organized a day panel discussion workshop on the proposed National Eye Health Strategy dated on 16th August, 2022 in Kathmandu among the representatives from Ministry of Health and population, key eyecare stakeholders and external development partners in the country.  Likewise, the NNJS Integrated Eye and Ear Health Program in collaboration with Surkhet Eye Hospital and MoSD, with support from CBM Global, organized a day discussion workshop on the proposed Provincial Eye Health Strategy dated on 28 September, 2022 in Birendranagar, Surkhet among the high-level officials from Ministry of Social Development (MoSD), key eyecare stakeholders and DPOs representatives.  Both the national and provincial workshops were highly effective and participatory for discussion and expert opinion regarding the proposed draft on the proposed Eye Health Strategies. The MoHP and MoSD authorities committed themselves to incorporate the opinions and feedback to improvise the strategy. According to them, the strategy will further be discussed among the wide networks of concerned stakeholders before endorsing by the government. NNJS Integrated Eye and Ear Health Program will continuously follow up and lobby and advocate for making the strategy more comprehensive and inclusive.  Both the National and Provincial level eye health strategies have been submitted to the respective ministries and our project will continuosly lobby, advocate and reinforce to make them more comprehensive, integrated and inclusive as well as facilitate and support for dissemination in 2023. |

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| **3.1.4 Disability Inclusive Development (DID) Training** |
| The aim of this activity is to ensure that state actors take inclusion into account when planning their programs. For this, representatives of health, social and educational authorities along with DPOs representatives are called for a 3 Day seminar to be discussed on the concept of Disability Inclusion and Development.  The main aim of this activity is to ensure that government authorities take into account inclusion of persons with disabilities while planning, implementing different programs and policies.  Two seminars on DID were conducted in Rarachhayanath Municipality (Mugu) from 29 November to 1 December 2022 and in Chandannath Municipality (Jumla) from 3 December to 5 December 2022. In the seminars, a total of 38 people (16 Men and 22 Women) attended including 21 Persons with Disabilities (9 Men and 12 Women). There were total of 20 DPO members, 16 government representatives from educational, social and health authorities and 4 project staff who attended the DID seminars. there was provision for sign language interpreter for persons with hearing disabilities as well as we managed reasonable accommodation to the persons with disabilities who needed accompany and care takers.  The seminars were facilitated by an expert hired consultant from Kathmandu. The approaches adopted were group discussion and assignment, interaction, lectures, experience sharing, video display and presentation of the best practices etc.  The major learnings from the DID seminars were based on Rights of the Persons with Disabilities, Disability Inclusive Development, National and International Policy Provisions and Legal Status regarding the persons with disability, human right based approach for inclusion of persons with disability, challenges, opportunities and solutions DID.  There was a significant improvement on the knowledge and awareness level of the participants after the post test assessment. It was 6 out of 15 in pre test and it came 14 out of 15 on an average after the training.  In 2021, a total of 23 personnel (11 women, 12 men) from Health, Education and Social department of Gurvakot Municipality, Barahatal Rural Municiplaity of Surkhet and Dullu and Narayan Municipalities from Dailekh district, Ministry of Social Development and DPOs were trained on Disability Inclusive Development at Birendranagar, Surkhet.  Thus, we have met the targets of the project(60) by training 61 personnel on DID till December 2022. |

**2.2 Cooperation with other actors in the reporting period (beyond project partners)**

* We coordinated and collaborated with Ministry of Health and Population, Ministry of Social Development, Karnali Province, national eye care stakeholders and external eye care partners to plan and conduct national and provincial level discussion workshops on the proposed eye health strategies.
* We coordinated and collaboratively worked with the municipalities regarding establishment of new primary eye centres, implementing cataract surgical camps, basic otology training of state health personnel and supporting equipments for basic eye and ear services.
* We worked in cooperation with the local governments for accessibility audit of their health facilities and renovation for their accessibility work.
* We coordinated with the local and provincial DPOs, local and provincial government authorities for implementing eye community and school screening, DID trainings, seminars and workshops.
* We implemented regular community and school eye and ear screening activities, competition on health practices, special day celebration in cooperation and support with the local leaders, teachers, FCHVs, community volunteers, local DPOs.

**Activities Planned for 2023**

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| R01 | The population of the 4 target districts of Jumla, Surkhet, Dailekh and Mugu is informed about prevention, treatment options and IEEH services. |
| A01.04 | Wall paintings in central places in communities |
| A01.05 | Vide Spot Display |
| A01.06 | Production of information boards for schools and public places |
| A01.07 | Competition on health practices |
| A01.10 | Training of Traditional healers |
| A01.11 | Training of parents on eye and ear health |
| R02 | **In the target districts of Jumla, Mugu, Surkhet and Dailekh the professional capacities and infrastructure for affordable IEEH services are permanently guaranteed.** |
| A02.01 | Regular screening in communities and schools |
| A02.02 | Early detection in mass screening |
| A02.03 | Special Public Celebration Day |
| A02.04 | Baseline study on ear and hearing care |
| A02.12 | Cataract surgery at Surkhet Eye Hospital |
| A02.13 | Implementation of cataract surgery campaigns in remote regions |
| A02.14 | Ear surgery campaigns |
| A02.16 | Audiometry training of state health personnel |
| R03 | **The inclusion of integrated ophthalmic and otologic services within public health system is ensured** |
| A03.01 | Lobbying meeting with representatives of local, district and regional authorities |
| A03.02 | Eye and Ear Health Committee at district level |
| A03.03 | Revision of the National Health Strategy |

**Findings of the Project (Challenges and Lessons learned)**

*Please complete the table below with challenges that were encountered during the reporting period and the lessons learned. Include any solution that you plan to implement in the next reporting period. (If you have used the Status Column in the Indicator Tracking Sheet (Column K) to report Challenges against specific indicators, make sure you elaborate on the challenge in the table below.)*

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| **Challenge** | **Lessons Learned / solutions** |
| Local elections planned and held in March 2022 and elections protocols promulgated by the Election Commission greatly limited implementation of most our project activities | We rescheduled most of the planned activities, planned proactively ensuring implementation immediately after the elections and we implemented few activities by coordinating with the bureaucrats cautiously not to violate the election protocols |
| A senior ophthalmologist from Surkhet Eye Hospital left for joining the government job thereby limiting the technical capacity of the hospital to perform the cataract surgeries | We interacted, discussed with the hospital team and CBM focal person and we utilized eye surgeon by outsourcing for some time for performing the cataract surgeries in the surgical outreach camps |
| There were road blockades, landslides, floods causing great loss of lives and properties in our project areas in the month of October thus interfering the mobility and smooth execution of the activities | Rescheduled the most of the planned activities to be conducted immediately after the season through proactive rescheduled planning |
| Federal elections planned and held in November 2022 and elections protocols promulgated by the Election Commission greatly limited implementation of most our project activities planned for November | We rescheduled and postponed activities for December, planned parallelly, delegated responsibilities to our community coordinators for planning as per the local situations and accomplished all of them within December |
| Hospital based subsidy cataract cases are too low to meet the targets | Coordinated with CBM for shifting the unmet targets in 2023 and plan and implement more surgical and screening eye camps |

1. Risk Update

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| **Risk** | **Effects** | **Mitigation Strategies** |
| Lengthy way of coordinating with government entities | Might lead to delay in implementing project activities | Regular and frequent pro-active communication on time, ensure strategies for convincing them regarding the project |
| Too low no. of cataract surgeries at Surkhet Eye Hospital | Targets not meet | Plan and implement comprehensive mass screening camps, coordinate with local government authorities for supporting hospital base cataract surgeries |
| Too low no. of ear surgeries at Karnali Province Hospital | Targets not met | Identify other alternatives ways: increase ear screening campaigns, engage other ear care providers |
| Staff Turn over | Project implementation may be delayed/targets not met | Staff motivation with annual salary increment/proper staff performance appraisal/ensure staff capacity development activities |
| Extreme cold and snowfall in the mountainous regions | Hinder the planned community and outreach project activities | More emphasis on carrying out the planned activities after. Prioritize the activities to the areas with less climatic extremities |

**Figure 11 CatarcT Surgical camp at Kimugaun, Dailekh**

# **Annexes 8 (PHOTOS**

Figure 1: Cataract Surgical Camp at Chandannath, Jumla

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| Figure 2: Celebration of International Day of Persons with disabilities in Surkhet |



Figure 4: World Sight Day Celebration at Barahatal, Surkhet

**World Sight Day Celebration at Barahatal, Surkhet**

**World Sight Day Celebration at Gurvakot, Surkhet**

Figure 3: World Sight Day Celebration at Gurvakot, Surkhet



Figure 5: Regular School Eye Screening at Dullu by a community Coordinator