Students in areas devastated by earthquakes are continuing their learning unhindered - gifts of school bags and stationery are happily received.
HOW CAN YOU GET INVOLVED?

**PRAY** – receive our regular prayer updates, ask a member of INF to visit your home / house group / bible study, join a Nepal prayer group, start a new one….

**GIVE** – share the gifts God has given you: financially through regular giving, one off donation or a bequest, volunteer your skills and time, volunteer to sell INF’s handmade products at local fairs or shops, use your talents and passion to fundraise for INF…

**GO** – serve in Nepal or amongst the Nepali diaspora either short term, long term or let us take you on a 2 week vision trip…

**SHARE** – Speak at your church about INF; host an INF night; screen an INF film; and ‘share’ the INF story with your friends on social media…
This past year has been dominated by the destructive earthquake in April and subsequent aftershocks. We are immensely proud of the way that the whole INF family responded to bring help, hope and comfort to people who have suffered so much. Our response teams were the first to reach some of the devastated villages. Our planners and organisers were able to purchase and transport needed supplies to shattered communities within days. Our in-depth knowledge of Nepal and strong relationships with Local Government meant we were able to work effectively in complex situations. Our Nepali church partners provided fantastic local knowledge and co-ordination as well as many volunteers to help with sorting, packing, organising and distribution. Our communications team was able to get people to affected areas quickly to share the needs, images and stories with supporters and partners around the world. Our INF organisations in the UK, Australia, New Zealand and North America worked around the clock to communicate needs with supporters and process the many donations and offers of help. And many of our long term partners have given generously to support our work.

There are currently seven legally registered INF organisations around the world – but our INF family stretches beyond this to include thousands of individual supporters and many dedicated partner organisations. Sometimes this rich diversity of people and cultures creates challenges, but the earthquakes showed that this diversity is also one of our greatest strengths and demonstrated the way that we can collaborate so effectively when we are united by a common sense of purpose.

A key feature of the past year has been a process of prayer, reflection and planning for the future. Through this process, we have developed a clear and exciting vision for INF for the next five years. We look forward to reporting on progress in our next annual report!

Alastair Seaman  
International Director, INF International

Chris Drew  
Nepal Country Director, INF International

Prem [Ganga] Subedi  
Executive Director, INF Nepal

RELIEF

Having spent over 60 years building relationships in Nepal, we were able to respond quickly and generously to communities in need.

25 April 2015
Deaths: 8,900+
Injured: 23,000+
Damaged Houses: 500,000+

4,044 PACKS OF FOOD SUPPLIED
1,417 TENTS DISTRIBUTED
5,113 BLANKETS AND MATTRESSES DISTRIBUTED
BAGS AND STATIONERY FOR 4,000 STUDENTS
180 BUNDLES OF TIN SHEETING FOR 90 HOUSEHOLDS
115 TRANSITIONARY LEARNING CENTRES BUILT

We are committed to Nepal for the long term. Our second phase of response is REHABILITATION [our staff and facilities are equipped to provide holistic long-term medical treatment and community-based rehabilitation in some of the worst affected villages] and our third phase RESILIENCE [we will work alongside communities in five of the poorest districts to increase their disaster resilience].
Kebal (43) lives in Bajura. His family was extremely poor when he was growing up. He became depressed and worried about his family’s future when his attempt to run his own shop left him with a serious debt. When he started working in his village, he became a member of an infomred self-help group (SHG). INF’s training with the villagers about how to plan for their future made him realize he needed to think carefully about his own future.

From the ‘revolving fund’ provided by INF to his village group Kebal borrowed funds to open a tea canteen and hotel. This is running very well now and he is able to repay his debt to the SHG. His children now go to school regularly.

Bishnumaya (36) was married at age 23. Having experienced several miscarriages she also lost four babies soon after delivery due to premature or protracted labours. Despite recovering from each of these traumatic experiences Bishnumaya became incontinent, constantly leaking urine.

She travelled for four days, two days on foot and two days by bus, to reach the fistula camp in Surkhet with her husband. She was examined and found to have a simple vesico-vaginal fistula.

She received surgery during the camp at the mid-western regional hospital in Surkhet. After the surgery she was finally dry and very happy. Bishnumaya and her husband still hope that one day they will have a baby but she knows she needs to wait to give the fistula repair time to heal well.

Junu (27) arrived at the health clinic in Dang in late February and was assessed as a month overdue for giving birth. Although INF staff and female community health volunteers (FCHV) gave her information about post-dated pregnancy, its dangers and recommended she go immediately to the health post, after failing several times to keep her promise to visit the health post Junu began leaking amniotic fluid and the FCHV were immediately informed about her condition. She was admitted to the health post for delivery where she waited nearly a half a day without any progress. From there she was referred to the regional hospital where Junu delivered a healthy baby boy by normal delivery. Both baby and mother were in good health when they were discharged the following day the FCHV have visited her regularly, providing information about neonatal care, breast feeding and other helpful information.

Junu is thankful to the FCHV for their advice during her pregnancy and regular follow-up.

Rash (32) from Gorkha district, the district hardest hit by the April earthquake, has lost almost everything after his accident but he and his wife have maintained their hope for life.

When the first earthquake struck Nepal in April 2015, Rash’s roof fell on him when he ran inside the house to save their thirteen-month-old son who was sleeping. Tragically, not only was he unable to save his child but he severed his spinal cord in attempting to do so.

After receiving treatment and therapy at Green Pastures Hospital and rehabilitation centre he can now move on and off his bed to his wheelchair, and can use his wheelchair to get around. On his fifth week at the hospital Rash Bahadur said, “I feel alive.”
FINANCES

TOTAL INCOME
NRS 570,086,015
5,700,860 USD

52%
From institutional donors
296,550,327

37%
From INF’s national offices
212,457,741

0.3%
From individual donations
1,821,898

6%
From local sources
33,478,999

4%
From other sources
25,777,051

Note: 16% of this year’s income was donated for our earthquake response.

TOTAL EXPENDITURE
NRS 415,754,179
4,157,541 USD

INF’s vision:
Nepali people in Nepal and beyond experiencing fullness of life in Jesus Christ, and serving with others to promote health, peace, justice, and harmony with God and His world.

INF’s Mission:
To live out the good news of Jesus Christ in word and deed by serving Nepali people through promoting health, fighting poverty and social injustice, working with and encouraging churches, and caring for creation.

Note: most of INF’s earthquake response to date has been relief. In addition INF will be carrying out rehabilitation and community resilience activities.
Community Health and Development [CHD]

The transformation of communities is at the heart of INF’s vision, and CHD work is a key strategy for realising this vision. INF implements its CHD work through community groups, user groups, and various other local committees. Activities include capacity building, awareness raising, non-formal and other educational support, income generation, savings and credit, climate change awareness raising, safe drinking water, livelihood support, small infrastructure support, disaster response, and community health activities including mother and child health.

INF facilitates CHD programmes in 22 Village Development Committees across our working clusters. In 2014-15 there were 527 INF co-ordinated self-help groups. Women accounted for 95% of members.

2014-15 ACHIEVEMENT HIGHLIGHTS:
- 348 PEOPLE RECEIVED HELP TO START SMALL BUSINESSES
- 122 PEOPLE GRADUATED FROM ADULT LITERACY CLASSES
- 143 CHILDREN RECEIVED GRANTS TO HELP THEM ATTEND SCHOOL

Community Based Rehabilitation [CBR]

Rehabilitation of those with disabilities reflects the core of INF’s vision and is strongly linked with the other technical areas of work. INF implements its CBR work both directly and in partnership with local/community based organisations. CBR activities included capacity building, awareness raising, reduction of stigma through advocacy, socio-economic rehabilitation and vocational training, house modifications and the provision of disability aids.

The aim is to see people with disabilities empowered and taking an active part in their communities.

2014-15 ACHIEVEMENT HIGHLIGHTS:
- 6 PUBLIC BUILDINGS WERE MODIFIED TO BECOME DISABLED-FRIENDLY
- 28 COMMUNITY VOLUNTEERS RECEIVED SOME BASIC TRAINING IN THERAPEUTIC TECHNIQUES
- 28 HOUSES RECEIVED SOME BASIC TRAINING AND IN-HOME MODIFICATIONS
- 247 PEOPLE WITH A DISABILITY RECEIVED HELP TO START INCOME GENERATION SCHEMES

HIV/AIDS and Substance Abuse

The Mid- and Far-Western Regions are relatively poorly served by HIV/AIDS services compared to other regions of the country, and have a growing need, due in part to the number of migrant workers infected with HIV returning to these areas from India. INF is working to address this need. HIV/AIDS services include awareness raising, voluntary counselling and testing, treatment and management of sexually transmitted infections including HIV infection, advocacy for people living with HIV/AIDS, and support for people infected and / or affected by HIV/AIDS. It also supports education and advocacy through its CHD work and provides outreach to “at risk” groups, including drug users in Nepalgunj.

2014-15 ACHIEVEMENT HIGHLIGHTS:
- 790 PEOPLE LIVING WITH HIV/AIDS RECEIVED COUNSELLING
- 10 PEOPLE AFFECTED BY HIV RECEIVED HELP TO START SMALL BUSINESSES
- 348 SCHOOL CHILDREN RECEIVED HIV/AIDS AND DRUG ABUSE AWARENESS CLASSES

General Disability [incl Spinal Cord Injury [SCI]]

INF provides rehabilitation services for SCI and other disabilities in both its Green Pastures Hospital and Rehabilitation Centre [GPHRC] in Pokhara and Surkhet Rehabilitation Centre. These centres provide 36 inpatient beds for rehabilitation and treat a range of conditions from spinal cord injuries to strokes, amputees and cerebral palsy patients. Both centres have qualified physiotherapists and occupational therapists, run outpatient as well as in-patient services, and provide assistive devices. Other centres of INF, most notably Banke and Dang, provide wheelchairs to other disabled people, also including those with SCI.

2014-15 ACHIEVEMENT HIGHLIGHTS:
- 171 INPATIENTS ADMITTED FOR REHABILITATION
- 11,998 THERAPY TREATMENT SESSIONS COMPLETED (OCCUPATIONAL AND PHYSIOTHERAPY)
- 297 ASSISTIVE DEVICES (WALKERS, CRUTCHES, SPECIAL CHAIRS, MATTRESSES ETC) AND 235 WHEELCHAIRS GIVEN TO CLIENTS
- 22 CHILDREN WITH CEREBRAL PALSY AND THEIR PARENTS PARTICIPATED IN TWO SPECIAL CAMPS
Health Support Services [HSS]

Inpatients in Nepali hospitals need to provide their own caterer to support them and provide for their daily needs. HSS offers assistance to those who are a long way from home, alone, or too poor to pay for their treatment. Health Support Services are offered in Surkhet and Nepalgunj. HSS staff and volunteers provide advocacy for patients and poor fund management in each location.

Fistula awareness raising and training, gynaecological surgery support and pharmacy support is also offered by the Surkhet service.

2014-15 ACHIEVEMENT HIGHLIGHTS:

11,412 POOR PATIENTS ATTENDING HOSPITALS WERE HELPED TO RECEIVE FREE TREATMENT
775 PEOPLE RECEIVED TRAINING OF OBSTETRICAL FISTULA AWARENESS OF WHICH 658 WERE GOVERNMENT HEALTH STAFF
46 WOMEN UNDERWENT FISTULA SURGERY AND 69 GYNAECOLOGICAL OPERATIONS WERE SUPPORTED BY INF SURGEONS
15 PEOPLE RECEIVED FINANCIAL SUPPORT TO ACCESS HEALTH SERVICES IN SPECIALIST CENTRES

Nutrition

INF runs an eight-bed nutrition rehabilitation centre in Jumla. It provides support to severely malnourished children and their mothers. INF is also carrying out malnutrition prevention activities at the community level across Jumla District through awareness raising in self-help groups, training and teaching to mothers of malnourished children, training to school teachers, mothers groups, and traditional healers.

2014-15 ACHIEVEMENT HIGHLIGHTS:

176 MALNOURISHED CHILDREN RECEIVED TREATMENT IN JUMLA’S NUTRITION CENTRE
138 MOTHERS RECEIVED TRAINING ON HOW TO MAKE ‘SUPER FLOUR’ [A BLEND OF HIGHLY NUTRITIOUS, LOCALLY AVAILABLE GRAINS] AND OF THOSE 58 ALSO LEARNED HOW TO MAINTAIN A SMALL KITCHEN GARDEN
NUTRITION TRAINING WAS CONDUCTED WITH 152 TRADITIONAL HEALERS, 61 HEALTH VOLUNTEERS, 774 MEMBERS OF MOTHERS GROUPS AND 903 COMMUNITY SELF-HELP GROUP MEMBERS
1,751 SCHOOL STUDENTS LEARNED ABOUT THE IMPORTANCE OF GOOD NUTRITION

Tuberculosis [TB]

In 2014-15, INF ran the Jumla TB Centre, providing new TB diagnosis and management, and treatment of TB patients with complications. After diagnosis, the majority were referred to their nearest health post for treatment.

2014-15 ACHIEVEMENT HIGHLIGHTS:

1 NEW CASES OF TB WERE DIAGNOSED AND REFERRED FOR TREATMENT
47 SPUTUM TESTS WERE COMPLETED

Earthquake response

An earthquake of magnitude 7.8 hit Nepal on 25 April and triggered a series of aftershocks, leaving nearly 9,000 dead and 23,000 injured. It was the worst natural disaster to strike Nepal since the 1934 Nepal–Bihar earthquake.

INF was one of the first to reach the hardest hit areas with initial relief. It is committed to Nepal’s future: relief, rehabilitation and resilience for the long run.

INF has been asked by the government of Nepal to lead in the long term rehabilitation of communities in 10 villages in Gorkha district, which is a new working area for us in the aftermath of the earthquakes.

2014-15 ACHIEVEMENT HIGHLIGHTS:

A 24 HOUR DELIVERY SERVICE WAS PROVIDED AT THE BIRTHING CENTRES AT ALL HEALTH POSTS
1,625 CLIENTS VISITED MCH CLINICS
40 DELIVERIES AT GADAWA HP AND 33 DELIVERIES IN GANGAPARASUHP WERE SUPPORTED ON AVERAGE EACH MONTH

Mother and Child Health [MCH]

The Mother and Child Health projects aim to improve maternal and under-five child health in Nepal. The major interventions are to mobilise and strengthen existing Female Community Health Volunteers and Mothers Groups with the standard healthcare practices set by the government. The projects have equipped targeted health posts and sub health posts by providing quality services at their birthing centres and at MCH clinics. Developing the capacity of Health Facility Management Committees to manage their health institutions responsibly and effectively is also part of INF’s work. The work has equipped the neonatal unit of the Sub-Regional Hospital Ghorahi, Dang, to now be established as a referral centre for the zone.

2014-15 ACHIEVEMENT HIGHLIGHTS:

20 DELIVERIES AT GADAWA HP AND 13 DELIVERIES IN GANGAHPARASUHP WERE SUPPORTED ON AVERAGE EACH MONTH

Campas

INF’s Medical Camps provide specialised surgery to the people of remote areas where no such services are available. INF runs various medical camps, such as gynaecology, general surgical, ear and dental camps. A group of specialist volunteer doctors from overseas countries come to Nepal at their own cost and run the camps supported by the ‘Camps team’ and other Nepali countries.

A group of specialist volunteer doctors from overseas run the gynaecology, general surgical, ear and dental camps. INF’s Medical Camps provide specialised surgery to the people of remote areas where no such services are available.

2014-15 ACHIEVEMENT HIGHLIGHTS:

271 NEW CASES WERE DETECTED THROUGH 928 SLIT FOOTWEAR
211 PEOPLE RECEIVED SPECIALISED SELF-CARE TRAINING
627 PATIENTS WERE ADMITTED FOR TREATMENT OF LEPROSY COMPLICATIONS
971 LEPROSY-AFFECTED CLIENTS RECEIVED PROTECTIVE FOOTWEAR

Leprosy

INF works closely with the Government of Nepal to support leprosy elimination through its three clinics in Surkhet, Jumla and Nepalgunj, and Green Pastures Hospital and Rehabilitation Centre in Pokhara.

Leprosy is completely curable if diagnosed and treated early. If left too long before treatment, patients can suffer life-long effects even after the leprosy has been cured. There are currently 91 beds available across the four locations where leprosy services are offered.

2014-15 ACHIEVEMENT HIGHLIGHTS:

15 PEOPLE RECEIVED FINANCIAL SUPPORT TO ACCESS HEALTH SERVICES IN SPECIALIST CENTRES
3 NEW CASES OF TB WERE DIAGNOSED AND REFERRED FOR TREATMENT
46 WOMEN UNDERWENT FISTULA SURGERY AND 69 GYNAECOLOGICAL OPERATIONS WERE SUPPORTED BY INF SURGEONS
1,751 SCHOOL STUDENTS LEARNED ABOUT THE IMPORTANCE OF GOOD NUTRITION

SANJAAL

Following changes in the constitution of INF International, INF’s Partnership Programme and Diaspora Initiative were brought into a single management structure under the direction of the Nepal Country Director. This work is characterised by providing technical advice and support to partner organisations and is reflected in the new name: Partnership Sanjaal [sanjaal means network].

The Partnership Programme works in the areas of hospital management training, palliative care, support to mission hospitals, pastoral care and counselling, and community and support to community based organisations.

The Diaspora Initiatives aim to give holistic assistance to some of the many Nepalis living in, and travelling to and from, the diaspora - especially migrant labourers working in Asia [including India]. The initiatives have continued to develop throughout the year.

In 2014-15 Partnership Sanjaal continued to work together with and support its partners with technical advice. With its partner organisations it was also involved in relief efforts in their working communities as well as provided earthquake aftermath psycho-education and basic trauma counselling training following the earthquakes.

2014-15 ACHIEVEMENT HIGHLIGHTS:

NICK SIMONS INSTITUTE FACILITATED WORKSHOPS IN 18 DISTRICT HOSPITALS THIS YEAR WHERE THE HOSPITAL ASSESSED ITSELF AGAINST THE SERVICE STANDARDS AND DEVELOPED AN ACTION PLAN TO MEET THE GAPS
INF RECRUITED A CONSULTANT IN PALLIATIVE CARE AND MADE AN AGREEMENT WITH THE NATIONAL ACADEMY OF MEDICAL SCIENCES [BHU HOSPITAL]
214 MIGRANTS’ CHILDREN WERE HELPED BY NINE TUITION CENTRES, 11 WOMEN ATTENDED A LITERACY COURSE HELD AT TWO LITERACY CENTRES, AND 27 WOMEN WERE TAUGHT TAILORING SKILLS AT THREE TAILORING CENTRES
11 MIGRANTS’ CASES IN BHU WERE INVOLVED IN THE SAFE MIGRATION OUTREACH
117 MIGRANTS AND THEIR FAMILIES WERE PROVIDED WITH HOSPITALITY AND 50 WITH ADVOCACY AND LEGAL ASSISTANCE

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