Building community resilience across western Nepal

Combating Climate Change
Over the last few decades, many new infectious diseases (such as SARS and Ebola) have emerged often reaching humans via domesticated animals or wildlife. Destroying wilderness areas and intensive factory farming brings people into ever closer contact with particular animals and their viruses. This trend is accelerating.

This is not just a problem for poorer nations. The factors that help incubate and spread viruses are global. Demand for timber, minerals and meat among wealthier nations drives deforestation and environmental damage. The globalisation of supply chains, education and work; constant international travel; and the politics of self-interest, all help to facilitate its spread.

As for the response, we have a long way to go. Closing borders and maintaining physical distance and good hygiene is necessary right now to save lives. Eventually, though, we will need greater levels of global cooperation and coordination to address the challenge of COVID-19 and prevent future pandemics.

INF stands with the poor and vulnerable of Nepal to get through this crisis. We call on all nations to prioritise protection for the most disadvantaged and to support the capacity of poorer nations to provide health care to all who need it and respond to disease outbreaks.
It's hard to imagine two countries more different than Australia and Nepal. One is a vast island, largely flat, dry and sparsely populated. The other is a tiny, landlocked nation, steep and rugged, densely populated and inundated each year by monsoon rains.

By Ben Thurley
Climate change exposes some of these differences but also reveals similarities. Despite their differences, both countries are highly exposed to the negative impacts of climate change.

2019 was Australia’s hottest and driest year on record. From the middle of the year, destructive fires began raging, often at times and places never previously recorded. As summer began, smoke haze choked the skies. Over the next few months, more than 18 million hectares of forest exploded into flame, with many firestorms fierce enough to create their own weather systems. An estimated one billion animals burnt to death. Thousands of homes and buildings were destroyed. Tragically, at least 34 people perished.

These fires were followed by torrential rainfall, gale-force winds, hailstorms and flooding across much of the East Coast. Within weeks of the fires, excess heat in the oceans caused the Great Barrier Reef to undergo its third major bleaching event in just five years, with corals damaged along the entire length of the reef.

Nepal is among the developing nations most at risk of climate-related disasters and other impacts of climate change. Two-thirds of the population depend on agriculture and the monsoon rains for life and livelihoods. As a result, every change in the climate has a big impact on subsistence farmers and vulnerable communities. Climate disruption is changing monsoon rainfall, delaying its onset and contributing to more intense downpours. Loss of snow cover and decreasing snow-melt reduces seasonal water availability and exposes winter crops to harsher winds, storms and frosts. Flowers which once signalled the imminent onset of rain are responding to the warming climate and now blossom months earlier than a generation ago. It’s hard to plan for planting and protect crops under these changing conditions.

"we are on track to heat the planet by more than 3°C before the end of the century"

Climate change contributed to widespread destruction and loss of life in Nepal during 2019. Widespread flooding and landslides in July drove 10,000 people from their homes and killed at least 55 people. Just months earlier, a tornado—the first ever recorded in Nepal—tore through the districts of Bara and Parsa in southern Nepal, destroying more than 1,200 homes, overturning cars, snapping trees, destroying crops, and killing at least twenty-eight people.

Meanwhile, the Himalayan glaciers are losing eight billion tonnes of ice each year because of warmer temperatures. Families are leaving high mountain communities, which have been their homes for generations, as water becomes more scarce and marginal soils cease being able to support even the hardest of crops.

Greenhouse gas emissions over the twentieth century have heated the Earth’s surface by 1°C. This extra energy in the climate system fuels heatwaves and wild weather. Climate disruption is already dangerous and, despite international commitments, we are on track to heat the planet by more than 3°C before the end of the century, creating additional hardship for all, especially the poor.
All nations must reduce emissions to zero as quickly as possible and switch to cleaner and more sustainable forms of energy, transport and food production. All workers and communities must be supported in this transition.

Each nation must also help communities prepare for the climate disruption they are experiencing now and which will increase in the future. Every country must do this not only for its own citizens but also to provide support for the most vulnerable in our global community.

God is good and has created a good world that he wants us to look after. We must take action to preserve a safe climate for all and protect the vulnerable from harm.

Living responsibly and responding to climate disruption isn’t about playing God or denying God’s sovereignty. When God said that human beings should have dominion in the earth, He meant it – for better and for worse. All of us must exercise our dominion the way Jesus would, not to serve ourselves, but to serve all. Not to hoard up blessings but to be a blessing to a world in need.

"It is urgent that we respond rapidly and decisively. The time for denial and delay is well and truly over."

Remains after bushfire in Australia  Photo: Freepik

<table>
<thead>
<tr>
<th></th>
<th>AUSTRALIA</th>
<th>NEPAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>PROPORTION OF GLOBAL POPULATION</td>
<td>0.3%</td>
<td>0.3%</td>
</tr>
<tr>
<td>GLOBAL GREENHOUSE GAS EMISSIONS</td>
<td>1.3%</td>
<td>0.08%</td>
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<tr>
<td>(about 4.4% if coal, oil and gas exports are added)</td>
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<tr>
<td>MAJOR CLIMATE-RELATED HAZARDS</td>
<td>heatwaves, bushfires, droughts, sea-level rise</td>
<td>floods, landslides, glacial lake outburst, droughts, heatwaves</td>
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<tr>
<td>CLIMATE ACTION TRACKER RATING</td>
<td>If all other countries were to follow Australia’s “Highly Insufficient” current policy trajectory, warming could reach over 3°C and up to 4°C</td>
<td>Nepal’s current climate action pathways is consistent with holding warming well below 2°C</td>
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Source: https://climateactiontracker.org/
INF has always cared for the poorest and most vulnerable people in Nepal. Our response to the global Coronavirus [COVID-19] pandemic is no different.

The country is in lockdown and the virus continues to spread in the community. The Government of Nepal is coordinating efforts to identify and isolate cases, to prepare for larger-scale treatment and to provide food and other relief to poor and vulnerable people. INF is working to support these efforts.

Our communications team is developing and promoting public health information and resources, particularly for people with disabilities. Our hospitals and community clusters are working with provincial and local governments to provide critical supplies and share clinical knowledge. Ten medical staff from Green Pastures Hospital are on call to respond to Coronavirus cases. In many districts, we have provided essential goods packages [food, oil and soap] for vulnerable families and supported government food distribution efforts.

Our hearts go out to all who suffer with COVID-19, from those who are on the frontlines of medical response and community support, to all who face greater uncertainty and deeper poverty. We will continue to stand with the poor, and we hope and pray that the international community will continue to stand with Nepal and all nations to meet this common threat.

This pandemic poses unprecedented challenges and is causing terrible suffering across the world.
Please pray with us for INF’s COVID-19 response work throughout the community in partnership with the Government of Nepal. Thank God that the experience and expertise of INF staff in emergency response, health and community support can be used during this pandemic.

INF Banke Shining Hospital is helping transport Coronavirus infected patients to the dedicated COVID-19 Hospital. Photo: INF Banke

Distributing relief packages to people with disabilities in Surkhet. Photo: Mahesh Chaudhary
Bajura in Sudarpaschim Province is one of the most remote and mountainous districts in Nepal and is divided into two regions: Kunda and Naubish.

Swamikartik Rural Municipality [RM] in Kunda is made up of three former Village Development Committees: Wai, Jukot and Sappata. Due to the lack of proper irrigation facilities, these villages are entirely dependent on rainwater for cultivation. Each year, these villages face famine due to irregular rainfall patterns.

The Wai canal, which flows through Jukot village, is the only source of irrigation water in the area. The locals believe that a deity bestowed it, and around nine hundred households in Jukot, Faita and Wai use the water from this canal to irrigate their crops.

Many Thakuris [royal and high caste people] lived in Jukot, and during Nepal’s monarchy, the people of Faita and Wai were not allowed to irrigate until the people of Jukot had taken their fill for irrigation.

This trend continued for generation after generation, leaving the people of Faita and Wai with little water and little chance for change. Because of this, villages have developed a system of sharing water alternately. For example, Jukot village has until 30 June to irrigate, Paimati village irrigates from 1 – 15 July and Wai village receives water only after that time. This system is far from perfect and causes tensions among the villages.

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On top of this, water flow is decreasing each year as a result of increased population, unmanaged settlements and ongoing deforestation.

Millet, barley and buckwheat grown in the area, generally produces only enough food to last two or three months, while the rice provided to people by the World Food Program [WFP] lasts about another two or three months.

The scarcity of water, irregular rainfall, and poor irrigation have forced the people of Wai to minimise farming.

This has become the cycle of life for many people in Bajura and surrounding districts. More than 85% of children are malnourished due to the lack of a balanced diet and the communities don’t have a sustainable solution to their problems.

Soon after the WFP project ended in 2015, the food crisis worsened again. During the farming season, locals stare at the sky looking for the clouds to rain, but the sky did not rain, and nothing grew on their fields. It was not possible to eat enough to fill one’s stomach, and the food had to be prepared by calculating the number of days the grain would last. The communities had no practice of cultivating and eating green vegetables.

At around this time, INF launched the Himali Livelihood Project. Self-help groups were formed. The groups started discussing their common problems and often came up with locally-appropriate solutions. However, due to a lack of resources, groups were unable to respond to the problem of drought effectively.

At INF’s initiative, a separate program was established, and the sky water collection project for sustainable agricultural upliftment was prepared and implemented from April 2018. The project constructed six large community-level water collection tanks and twenty small tanks for domestic wastewater collection.

The local farmers were able to irrigate their fields with tank water and were able to cultivate their barren fields after many years. Some are now also planting olive trees which require less water to grow. The construction of these water tanks has brought a wave of happiness in Wai village.

A girl drinking water from a water tap built by INF in Wai, Bajura Photo: Rowan Butler
Climatic change is now on everyone’s lips – from deniers to activists calling for urgent action. I like a quote I heard a few years ago by Dr J Marshall Shepherd, President of the American Meteorological Society. He summed up the difference between short term weather changes and long-term climate trends: “weather is your mood and climate is your personality.” Extreme weather events don’t necessarily indicate climate change, but a changing climate can influence the weather, making extreme events more likely.

At the beginning of February, I was in the remote mountainous districts of Jumla and Mugu in the west of Nepal where subsistence farmers are facing extreme weather and less predictable patterns to each season, making the cycles of planting and harvesting more difficult to plan.

INF’s Community Programmes focus increasingly on improving resilience to climate change and helping people to adapt to its effects. This looks different in different contexts but can include flood protection, rain-water harvesting, diversifying or improving the sustainability of livelihoods by growing more drought-resistant crops, planting higher-value crops such as walnuts, or using different agricultural methods.

Often those who contribute the least to the human-made causes of climate change are affected the most by its impact. Regardless, education and awareness-raising about climate change encourage people to ‘do their bit’ to reduce the causes and effects of climate change, for example by using more fuel-efficient cooking stoves, more effective forest management and better management of waste.

The language of ‘climate change’ may not be regularly used in Nepal’s remote districts but the effects of climate change are felt most by the poor and disadvantaged who are at the heart of INF’s work in supporting the most vulnerable communities in Nepal.

Adapting to climate change in the mountains

By Stephen Brown

The locals of Jyari, Mugu taking their herds of cattle to graze. Photo: Sharon Joshua Tiwari
Tell us about your background and your family
Namaste. I am Sahara Mishra, and I’m 28 years old. I’m a permanent resident of Kathmandu although I currently live in Pokhara. I’m from a Christian family. We found Christ about twenty years ago. My father is a pastor, my mother cares for the home and my brother is a web and app developer. We’re a small and happy family.

What were you doing before working with INF Nepal?
I have completed a Bachelors degree in Environmental Science and a Masters in Population Studies. I lived in the UK for two years to grow my spiritual life, living with the global Christian community and gaining cross-cultural experience. I’m also a licensed trekking guide!

Prior to joining INF, I was a trainee at United Nations Development Program [UNDP] for about a year in their Environment Unit. The traineeship introduced me to a lot of learning about international and national policy, and project formation relating to environmental management and climate change

Tell us about your previous role with INF?
I joined INF Nepal in November 2018 as a Donor Project Officer for the Disaster Response and Resilience Department [DRRD]. My main tasks were donor liaison, reporting, and providing support to formulate climate change and disaster-related projects, as well as helping to implement DRRD's projects and emergency responses.

Why were you interested in taking on the role and what do you hope to contribute?
I was interested in working with INF because I’ve always had compassion and concern for those in need. I have also developed an interest to work on climate change and disaster risk reduction. This role provides an amazing opportunity to combine my interest and passion with my profession!

The role of Climate Change Adaptation Officer combines many issues and aims to support effective responses to social and environmental issues.

"I want to work holistically so that we can identify and address issues related to climate change throughout INF’s work"

What do you see as the major climate challenges faced by poor communities in Nepal?
We have a lot of poverty, poor infrastructure, limited awareness of climate change, and the geography of Nepal makes people vulnerable to climate-related disasters like floods, landslides, storms and droughts. We can see the monsoon rainfall patterns changing, more crop pests and diseases like dengue and malaria affecting different areas. People’s health, their food security and access to safe drinking water are adversely affected by climate change.

Climate change is forcing some communities to migrate, especially from high altitude communities like Manang and Mustang, because of loss of water availability and soil quality. Being forced from the place people were born, raised and lived their whole lives in, leads to the loss of tradition and cultural heritage for these communities and negatively affects their mental health and wellbeing.

How are you coping with the lockdown?
The situation of lockdown from the COVID-19 pandemic has brought turmoil to everyday life. Positively for me, the lockdown brought me back to my family in Kathmandu and I have been able to spend quality time with them. I am praying in solidarity for a quick end to the COVID-19 pandemic. Please stay!

PRAY | DONATE | JOIN US | SHARE
Please pray for Sahara Mishra in her new role with INF as she uses her experience and study to integrate climate change policy throughout INF’s working areas and programs.
What's happening around the world?

Inf Australia

Living faith webinars

In 2020, INF Australia has been coordinating a series of webinars featuring experts and leaders from Australia and Nepal to explore hot topics of faith and life. Engaging and informative, the webinars are scheduled to cover the topics of:

- Climate change for Christians
- Compassion & Contagion [COVID-19 response]
- Counter-consumerism
- Raising kids who care
- The First 1,000 Days [fullness of life for Nepal’s children]

Accessible anywhere in the world, you can register for future webinars, or view and download resources from previous webinars at https://www.inf.org/webinars.

We stand together with Nepal

INF Australia has launched a new fundraising resource to help people raise vital support for INF’s life-saving work. We are asking people to set themselves a fundraising challenge and tag their friends to support INF’s COVID-19 response to:

- prevent, control and treat any cases of COVID-19 through INF’s hospitals & health services
- educate and inform the community about health and hygiene
- provide food relief and other support to the vulnerable.

How far and how fast and how much can you walk, run, climb, bench-press, knit, bake, read, poetry-slam, or anything else to support INF’s live-saving work?

Find out more or set up your own fundraiser at: https://www.inf.org/stand-together.

Inf UK

Team changes

There have been quite significant staff changes in the UK office over the past year. John Reynolds is now supported by senior staff who have all joined since last summer: Lata Shrestha [Programmes Manager], Emma White [Philanthropy and Trusts Manager] and Olly Du Croz [Marketing and Communications Manager].

Community and healthcare

As well as working with us on the response to Coronavirus, since the last edition of Today in Nepal INF/UK has also been raising support for the new community resilience and development project in Kalikot. They are also partnering with us on the IDEAL project in Bajura and various healthcare programmes, including the new Palliative Care building at Green Pastures Hospital.

Inf International

Office relocation

After over twenty years in the same place, Nepal Country Office [NCO] moved offices at the end of last year. Although we have many good memories of the old office, our new place is a great blessing – please come and visit!

Kiran Poudel is our new Liaison Coordinator, responsible for visa processing and relationships with the government. Please pray for wisdom and grace for Kiran in his role.

Medical supplies handover

NCO partnered with fourteen other INGOs in coordination with the Association of INGOs in Nepal [AIN] to handover much needed medical equipment worth USD 370,000 to the Ministry of Health and Population [MoHP]. The protective equipment that INFI purchased will mainly be used for INF staff, but some was handed over to the MoHP.

Letters and emails are most welcome and should be addressed to TiN, e Editor, INF, PO Box 5, Pokhara, tin@inf.org or get in touch via Facebook or Twitter. Readers are welcome to re-use articles from ‘Today in Nepal’ with due acknowledgement to INF – Ed.

If inspired or encouraged

If you’ve been encouraged or inspired by any of these activities, get in touch with your local INF office [see back cover for details] or our website on how you could support us through praying, donating, serving with us, or sharing our stories!
Nepal connection

Recently the INF New Zealand director [Sean] spoke at a ‘tramping club’. In New Zealand there are tramping [trekking] clubs throughout the country who meet to go tramping and hear stories about places to go tramping. We decided to email various tramping clubs to see if they would like to hear about our work in Nepal and one of the clubs asked Sean to come and speak. There is a natural connection between New Zealand and Nepal in regards to topography and tramping and also historically and so it was easy to draw people into the country, people and needs and the work of INF there. From this meeting we received various donations and an opportunity to speak at another group.

MNCH closure video report

As INF’s Maternal, Newborn and Child Health [MNCH] Project came to an end in May 2020, a short video was produced. MNCH project was supported by HealthBridge Canada and undertaken with the financial support of the Government of Canada provided through Global Affairs Canada. Video link: https://bit.ly/31sLJDs

COVID-19 related video messages

INF, in collaboration with the Ministry of Health and Population, World Health Organisation and other stakeholders, produced a series of videos during the lockdown period as home-based rehabilitation initiatives, particularly for people with disability.

These videos are made for Nepali audiences. You can find these videos at https://bit.ly/3hxt5zN

PASS IT ON

After reading it, why not pass on your copy of ‘Today in Nepal’ to a friend? Or share the magazine online at www.inf.org.
Kalikot district in Karnali province is one of the poorest in Nepal. Its remoteness and poverty sees residents forced to migrate in search of food and work - mainly to India.

The fight against this poverty is hampered by the marginalization of women. Women have low social status and are subject to harmful traditional practices and discrimination. There is a lack of awareness of women’s rights, and their opportunity to participate in income generation is limited.

INF Nepal is committed to serving marginalized groups in remote and under-developed communities like Kalikot. In the Naraharinath Rural Municipality INF is running its Community Resilience and Development Project [CRDP].

INF began working with the Naraharinath communities by trying to understand key areas of risk and need. A community survey found natural disasters, food insecurity and a lack of opportunities for earning an income, alongside issues of gender inequality and poor practices around health and hygiene were key issues.

Wealth ranking exercises found almost 20% of households fell into the ultra-poor category and do not have adequate food for one month or less, do not have land and have to rely on labor for their daily wage earnings. Fifty percent of households were considered poor.

Food production across the municipality was found to be extremely insufficient, in fact only 1% of households had adequate food production for twelve months. Across Naraharinath, drought, heavy rainfall, hail storms, snow fall, landslides and fire are the main natural disasters affecting lives and crops every year.

The Chhaupadi system - isolation and exclusion of menstruating women - is still practiced amongst a significant portion of the population. Nearly one third of respondents said women still practiced living in separate Chhaupadi sheds during menstruation.

INF’s project will focus on poor and marginalized people, which includes women, persons with disabilities, children, Dalits [lower caste people] and other vulnerable people.

A total of 3,000 people [2,250 women and girls and 750 men and boys] will directly benefit, including 592 people with disabilities. 15,000 residents will be impacted more broadly.

The Kalikot project will implement a wide range of activities to develop inclusive and empowered communities, to create sustainable livelihoods, to improve health, and strengthen community resilience to disaster and climate change. Much of this work will be delivered through self-help groups led by community members, which will take collective actions to resolve common issues and implement action plans to help improve their situation.

Only 2% of women are involved in income generating work.

Communities of resilience

By Hira Mani Adhikari
INF is an international movement that exists to serve poor and disadvantaged Nepali people so they can experience Life in All its Fullness and live in fellowship with their communities and environment.

INF is seeking skilled and experienced personnel who passionately believe in our mission and values to serve alongside Nepali staff and support Nepali leadership to achieve our vision.

All expatriates in INF serve as volunteers. They should have relevant experience and a Masters level qualification, have a strong faith and be supported by a sending organisation in their home country. Candidates must be fluent in English. Nepali language and orientation will be provided. Below are details of key opportunities to serve with INF. More information can be found at www.inf.org/join-us or by emailing recruitment@inf.org.

Primary/Middle School Teachers
INF runs a small school in Pokhara to provide a western education for the children of expatriate families. Candidates need to be fully qualified, able to teach children of different ages and be able to use various international English curricula.

Many of INF’s expatriate families live outside Kathmandu where the needs are greatest. To enable families to stay in these areas we need primary and middle school teachers to work in our small study centre in Pokhara. We have an urgent need for teachers for the 2020-21 academic year.

Monitoring and Evaluation Specialist
INF is looking for people with up-to-date experience in M&E to support the development of research and evaluation throughout INF and its partners to bring international best practice in planning, monitoring, evaluation and research to improve the programmes and their service to patients, clients and community.

Communications/Social Media Specialist
INF engages with thousands of people around the world through its web and social media channels. We want to develop strategic communications plans to connect with and inform a wide range of people [including clients, donors, prayer partners, and government stakeholders] in Nepal and around the world.

Nepal Country Director
INF International is recruiting a new Executive Director to lead its work in Nepal including strategy and planning, recruitment and care of expatriate volunteers, management of its office in Kathmandu, fulfilling the terms of its government agreements and supporting the leadership of INF Nepal. This post is vacant from December 2020.

Human Resources Specialist
The effective recruitment, deployment and support of INF’s staff and volunteers is vital for our ministry. We’re looking for an experienced manager, with HR or organisational development experience, who can help us to support, nurture and develop our team of amazing personnel. Cross-cultural understanding; communication, listening, mentoring and negotiation skills; and an ability to work in a complex organisation will all be needed in this job.
The Banke Maternal, Newborn and Child Health [MNCH] Project drew to a close at the end of May 2020 after four years of working closely with communities in the region to improve health outcomes of women and children.

The project began in April 2016 with a central focus to reverse the unacceptably high maternal and child mortality and morbidity rates in Nepal. While overall Nepal has made huge progress in addressing these, gains have not been equitable across the country. Promising improvements can be seen in urban centres, yet, in rural and remote areas where INF works, still too many women and children die during and around childbirth. Many of these deaths are preventable, so INF worked hard to address the underlying causes.

Poor health outcomes for women and children are caused by a lack of knowledge, discrimination, harmful cultural practices, poor nutrition as well as poor provision and utilisation of appropriate health services.

Crucial health indicators for the project included antenatal attendance, delivery at a health facility assisted by a skilled birth attendant, post-natal care visits as well as growth assessment for children under two. All of these improved as trust and confidence grew within the community of the locally available health services. Deliveries at home have decreased, women are now meeting regularly to learn and discuss their family’s health, and awareness and support for women and children is growing in the community.

Health facilities are now well equipped; staff have been well trained; and health post management committees and local government been trained and strengthened to continue offering high quality services. In addition, communities are mobilized and determined to advocate for and support vulnerable women and children.

Working within the existing government health structures – rather than developing new organisations. We made a conscious decision to invest in existing government structures and build their capacity as these government structures will always be present in the community beyond INF’s project. This work has included remobilizing and strengthening mothers’ groups; supporting and retraining female community health volunteers and local health facility management committees; and conducting joint monitoring visits with government health staff.

Mothers and babies growing strong

By Dr Inge Baumann-May and Rekha Rawal

To ensure sustainability into
### HIGHLIGHTS

| 132 | Local mothers’ groups formed. |
| 6000 | Over 6,000 mothers’ group meetings facilitated over the project period. |
| 132 | In 132 settlements mens’ groups were formed to discuss the role of men in supporting women and children and gender equality. |
| 9 | Nine health facilities are now offering high quality and gender sensitive MNCH services, due to receiving urgently needed construction and renovation support, provision of relevant equipment, training of their staff and management committees. |
| 26,422 | A total of 26,422 women and children under the age of two were the direct project beneficiaries. However, the benefits of this project reached much wider, with entire families and communities benefitting from increased health awareness and considerably better equipped and managed local health services. |
| 22 | Twenty-two local auxiliary nurse midwives from eight Health Posts, one Primary Health Care and one Bheri hospital received comprehensive ‘skilled birth attendance’ training. |

Emergency Obstetric Neonatal Care [EONC] Fund was established in 132 mothers’ groups with the aim of providing easy access to funds for pregnant women, postnatal and neonatal emergency treatment.

Enhanced knowledge of community youth and child clubs which conducted different awareness programmes, through street dramas in their communities as well as by being engaged in social work.

Adolescent participants expressed new-found confidence for talking about Adolescent Sexual and Reproductive Health topics and asking for help when they need it.

INF would like to thank our partners, Health Bridge and Global Affairs Canada for their financial and technical support as well as the Government of Nepal and local governments for the successful collaboration to improve health and gender equality in Nepal.

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### THE FUTURE INF HAS BEEN:

1. **Recruiting local women as community facilitators [paid volunteers] wherever possible to work in their own home communities.** One advantage is that they have very intimate knowledge about their community context and issues, but also that they will likely remain in their community as a resource person after the project ends. In fact, end of project data has shown that a number of the community facilitators have found ongoing employment during or at the end of the project. This means they will not only serve as an informal local resource person, but also utilize their learnings and continue to practise in their local community.

2. **Working closely with local government.** As health is now decentralized and the responsibility of the rural municipalities, the project put a strategic focus on building the capacity of this local body. Through training and workshops about MNCH, joint monitoring visits and attendance of meetings to raise awareness of its importance for public health and to work with the rural municipality to identify interventions and strategies that they might want to continue after the project’s completion.

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**PRAY | DONATE | JOIN US | SHARE**

Please thank God for the maternal child and newborn project and its work in Banke. Pray that the training and building up of local health authorities and structures will continue to help reduce maternal and child mortality rates.
Is it really true? ‘Are you sure, the report is his?’ she asked with an anxious face. ‘Yes’, I replied. She blinked in disbelief.

I could feel her distress, but being the doctor, I couldn’t just stand there being sad too. I gathered myself together and told her it wouldn’t be as difficult as in her case. She looked at me and nodded.

Jyoti is just 16 years old, but life has made her wise beyond her years. She was diagnosed with leprosy one year ago at Green Pasture Hospital, and her life changed in ways she could never imagine.

She had the type of leprosy that harbours larger germ loads and had severe reactions that required multiple admissions throughout the year.

One year after she’d started treatment she came to the hospital with her six-year-old brother. He had a reddish skin rash on his cheek, and because of her diagnosis, he was tested too. Tests were done, and when we discovered he too was affected – our whole department felt for their family.

Jyoti wondered whether she had given the disease to her brother, but our staff explained it wasn’t her fault.

“I can’t explain this to my mother, you have to do it for me”, she managed to say as tears rolled down her cheeks. We agreed to do whatever we could to make it easier for her.

Jyoti shared more about how she had been treated by some of her neighbours. She said some had been making fun of her behind her back.

One of the leprosy drugs causes temporary darkening of skin and Jyoti told me she had fabricated all kinds of stories when people asked why.

A few days later I asked how her stepmother was coping with the news and she told me that she was still crying frequently.

This disease that is said to be eliminated from Nepal is definitely not eliminated. Leprosy is still being diagnosed and in some areas, infection rates are on the rise. The stigma associated with leprosy is as strong as ever. Many people with leprosy remain undiagnosed because of this stigma, or fear, and a lack of information or awareness. Many people find themselves battling the unknown.

One night duty, I saw Joyti sitting with two other girls, a few years older, who were also admitted for treatment from leprosy related complications. I saw them smiling and chatting excitedly about something, and suddenly all of them burst into laughter. I watched them from afar, smiled and thanked God.

* Name changed for anonymity
INF is committed to reducing leprosy transmission and the burden of disability through early case detection and care by improving access to timely and complete treatment including complication and reaction management. INF also works with communities to reduce stigma and discrimination due to leprosy. Each year INF clinics diagnose more than 400 new leprosy cases; admit more than 1,000 leprosy patients for complication management; and provide self-care education and training to leprosy patients to prevent deformity of their hands and feet. INF also provides on the job practical training to health professionals and sees over 30,000 outpatient visits [new and returning]. And each year the number of patients continue to grow — as leprosy is still spreading in Nepal.

To donate please visit: www.inf.org/donate

There are hundreds like Jyoti that need your support. Even the smallest contribution can help to provide an effective cure, expert care and vital restoration. Together we can help beat leprosy.

PRAY | DONATE | JOIN US | SHARE
Please pray for those diagnosed with leprosy that they would get a timely diagnosis, treatment and care; and that through INF’s education and training discrimination towards those with leprosy would cease.

LEPROSY CAMPAIGN

A leprosy patient during the follow-up checkup at GPH Photo: Anil Rai
Twenty-eight-year old Bauddha Singh Tamang from Letang in the Morang district in eastern Nepal had a serious fall which damaged his neck and spine. As he lay unconscious, his friends rushed to help. They took him to a hospital where he was admitted to the intensive care unit.

Paralysed from the waist down, Bauddha was then taken to another major hospital. In total, he and his wife spent almost 400,000 rupees [over USD 4,000] in less than three months but there was still no sign of improvement. Instead, Baudda’s condition deteriorated, and he developed a back infection.

Sarita, his wife, described the situation as hopeless for the couple and their son.

Finally, they were referred to INF’s Green Pastures Hospital [GPH].

Bauddha was given the necessary treatment for his wounds and began rehabilitation exercises. His condition began to improve dramatically, and he is now able to use a wheelchair independently, something he was unable to do when he arrived at the hospital.

"we are incredibly thankful for INF’s love and care during this crisis"

The COVID-19 crisis began unfolding just as Bauddha was in rehabilitation. After the country’s second case was confirmed, the Government of Nepal imposed a nationwide lockdown. The lockdown has helped contain the spread of the virus, but it has also made it difficult for people like Bauddha who lives off his wages week to week.

After the accident, the family has had to spend a considerable amount of money. Fortunately at GPH, Bauddha is not only getting much-needed medical care but also shelter for his family. The hospital also provides meals to the family. "We are incredibly thankful for INF’s love and care during this crisis", says Sarita.

You can watch a video featuring Bauddha, which we produced in coordination with the World Health Organisation [WHO] as a part of home-based rehabilitation initiative: https://bit.ly/2XN5RxP

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Prayer request for INF Nepal

We join with everyone around the world in the fight against this global pandemic; mindful of those families that have already lost loved ones to the virus, those suffering in hospitals, those living in fear and those who are suffering in other ways because of loss of jobs and security. Please join us as we pray for God’s heart of love, mercy and truth to dwell in us and show us how to face the challenges posed by COVID-19.

Prayer is the foundation of INF’s work.

Please pray for the INF COVID-19 response team, who have been implementing our response and supporting the efforts of Government and authorities to manage and mitigate the impact of Coronavirus inside the organisation and communities we work with and beyond.

• Pray for encouragement for INF Leaders and the INF COVID-19 response team in their decision making and operations as they respond to the current challenges posed by the pandemic.
• Pray for all the INF staff that they may have wisdom and strength to administer their duties in supporting INF projects, hospital work and communities even under lockdown.
• Pray that our medical staff at Green Pasture Hospital and the other Hospitals are motivated and are mentally and physically prepared to respond to the work demands in the face of COVID-19.
• Give thanks for the positive relationships with the local Government and pray that INF and the COVID-19 response team are equipped to respond efficiently and continue to support the local Government.

• Pray for all our expatriate volunteers who are away from their home countries, and are living here in Nepal. May they experience the comfort and peace amid all these situations.
• Pray for leaders in INF that they find a strategy that meets the needs of all parts of INF’s work and addresses the expected funding gap in upcoming years and its impact due to the worldwide pandemic.
• Pray that INF and the COVID-19 response team remains adaptable to the changing needs and all other preparations for the expected full outbreak are in place.
• Please pray for the health and wellbeing of all our staff members and volunteers and their families.
How do you start talking about climate change in Nepal in the biblical context in a time when everything in the whole world is spinning around a tiny 120 nanometre virus? What do the worldwide phenomena of climate change and the SARS-CoV-2 virus have in common in light of the Bible? The answer is short and simple. The negative impact on poor and disadvantaged people all over the world.

God calls all people to take care of God’s creation [Gen 2:15]. But we all know that we are pretty good at messing up tasks like this. God gave us a clear task to take care for the needy, poor and disadvantaged people in this world. Dr Katharine Hayhoe wrote in The New York Times last October: “Climate change will strike hard against the very people we’re told to care for and love, amplifying hunger and poverty, and increasing risks of resource scarcity that can exacerbate political instability, and even create or worsen refugee crises.” And this was published even two months before the SARS-CoV-2 pandemic started. So our current situation just amplifies God’s call to take care of needy and poor people. The thread of taking care of the poor and disadvantaged is woven through the whole Bible from the beginning to the end. This covers the full range from speaking up for justice to sharing so that everyone has enough to live decent lives. Proverbs 31:8–9 tells us to “Speak up for those who cannot speak for themselves, for the rights of all who are destitute. Speak up and judge fairly; defend the rights of the poor and needy.” While Proverbs 19:17 reminds us, “Whoever is kind to the poor lends to the Lord.”

Climate Change Adaptation [CCA] activities help to deal with the impact that climate change has on the life of the people in Nepal, especially the poor. Over the last decade it has become an important theme in INF Nepal’s daily work, long before the whole world started talking about Greta Thunberg. INF includes environmental protection activities in our community projects, including renewable energy, rainwater harvesting, waste management, organic pesticides and smokeless stoves.

In response to the challenges of climate change and environmental degradation, INF will increase its focus on environmental protection and sustainability. In 2020-21, we are planning to launch three new CCA projects. INF’s Vision is: “Life in all its fullness for poor and disadvantaged people of Nepal.” It is our calling to serve the vulnerable and needy. Whether through CCA or community health and development or our hospitals, it makes little difference. As long as we are true to God’s calling.

Especially in these challenging times, it’s good to focus on INF’s vision, drawn from John 10:10. So let’s fight together the harmful impacts of climate change in Nepal and work to help bring life in all its fullness to those in need around us, whether in Nepal or all over the world [1 John 3:17]. We have been blessed to be a blessing.

CALM-DOWN DICE

Due to the COVID-19 crisis, many people, including children, may be feeling anxious. A simple calm-down dice can help reduce anxiety.

Please print out the die and ask your child to colour the images and talk about them while they paint.

1. Slowing your breathing can help you feel calmer. A good exercise is to breath in for the count of seven and breath out for the count of eleven.

2. Exercise is incredibly helpful because it helps burn off all the adrenaline that is building up when you are anxious or angry. Any form of exercise is essential. It also enables you to focus on something else rather than what is making you worried or upset.

3. Counting either forwards or backwards from any number can be helpful. Again it gives your mind a different focus.

4. Self hugging can feel calming.

5. Just letting yourself flop on the beanbag or cushion and try and relax all your muscles and your mind can be helpful.

6. Thinking happy thoughts can shift your focus from anxious or angry feelings.

Source: ©ELSA Support

You can download the artwork from: https://bit.ly/2Bqz4X0
Journey with Jumla connects you with communities in Jumla, Nepal, as they work with INF towards ‘life in all its fullness.’

By supporting INF’s new work in Jumla in prayer and finance ($25 per month), you will also take your own learning journey, joining us for an inside view of community development.

Sign up now at www.inf.org/journey-with-jumla