

INF NEPAL
ANNUAL
REPORT
2079/80
(2022-23)

**This Annual Report
marks INF's remarkable
journey of resilience,
innovation, and lasting
change in Nepal.**



INF NEPAL

INF Nepal is a Nepali non-government organisation serving Nepali people through health and development works to improve the quality of life of individuals and communities since 1952. INF Nepal is currently working in 11 districts of Gandaki, Lumbini, Karnali and Sudurpashchim provinces of Nepal.

Three INF hospitals include Green Pastures Hospital and Rehabilitation Centre in Pokhara and Shining Hospitals in Banke and Surkhet. INF also runs a dedicated Fistula Centre within the Karnali Province Hospital in Birendranagar, Surkhet.



VISION

Life in all its fullness for poor and disadvantaged people of Nepal.



VALUES

- Love
- Service
- Excellence
- Integrity



CHARACTER

- People Focused
- Servant Hearted
- Accountable
- Sustainable

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MESSAGE FROM THE CHAIRPERSON



RAM CHANDRA TIMOTHY
CHAIRPERSON

I'm honoured to celebrate our 70th anniversary and achievements such as the Zero Leprosy Strategy. Thanks to our dedicated team and partners, we're transforming lives and communities. Your support drives our success.

As the Chair of INF Nepal, I am honoured to share the remarkable achievements and milestones we have accomplished together throughout this past fiscal year 2079/80 [2022-23].

This report provides a glimpse into our community development and medical initiatives, showcasing the transformative effects of our services.

We proudly celebrated INF's 70 Years of Service in Nepal with various programmes followed by other major accomplishments, including the launch of INF Nepal's Zero Leprosy Strategy and the inauguration of the Eileen and Betty Centre—a specialised leprosy inpatient ward at Green Pastures Hospital & Rehabilitation Centre.

Throughout the year, the INF Nepal Board was engaged in comprehensive discussions with the management team to strengthen and align our organisation's priorities. As a Board, our utmost priority was to cultivate a sense of teamwork within INF Nepal, recognising its key role in achieving our collective goals. I confidently affirm that our plans and projects aligned with INF's Vision and Mission. We strived to reflect our core beliefs and values through our work and actions.

The Board was committed to maintaining the highest transparency and accountability standards within INF Nepal. We have consistently ensured that our staff adhere to the highest level of professionalism and ethical conduct.

We want to express our sincere gratitude to our esteemed partners for their unwavering support. Through close collaboration between our dedicated staff, expatriate volunteers, funding partners, and government stakeholders, we have successfully reached vulnerable communities and provided essential support and services.

My sincere appreciation extends to the Management Team for their commitment and leadership. The collective guidance has been invaluable in steering the organisation towards achieving INF's planned objectives.

On behalf of the INF Nepal Board, I would like to express my gratitude to all our esteemed Board Members, General and Life Members. Their support and dedication have been instrumental in delivering the success of our organisation and furthering the impact in the communities we serve.

Reflecting upon the past years' achievements, we find great encouragement in the positive changes we have witnessed and the lives that have been touched. As we look ahead, we remain steadfast in upholding our mandate, vision, mission, values, and character, and we are confident that with the collective efforts of our partners, staff, and volunteers, we will continue to reach even greater heights in the coming year.

Once again, we express our sincere appreciation for your continued support, and we invite you to explore this Annual Report to gain deeper insights into the far-ranging work carried out by INF Nepal.

MESSAGE FROM THE EXECUTIVE DIRECTOR



KRISHNA ADHIKARI
EXECUTIVE DIRECTOR

As we celebrated 70 years in Nepal, we renewed our healthcare partnership, launch the Zero Leprosy Strategy, and opened the Eileen & Betty Centre. Thanks to our dedicated team and partners, we're building a legacy of compassion and transformation.

As I reflect on the past year, I am filled with immense pleasure and gratitude for the journey we have embarked upon together. Last year marked a significant milestone in INF's history, as we celebrated 70 Years of Service in Nepal.

We are pleased to present our Annual Report 2079/80 (2022-23), which commemorates this special occasion of our 70th anniversary in Nepal. We extend our heartfelt thanks to everyone who has played a role, in INF's work in Nepal.

Our 70-year anniversary celebration was a time of reflection and celebration. It gave us the opportunity to look back on our rich history, celebrate our present achievements, and envision a future filled with continued innovation and impact. Looking ahead, we remain steadfast in our commitment to our vision of "Life in all its fullness for poor and disadvantaged people of Nepal".

We are delighted to announce the renewal of INF's Hospital and Health Services tripartite project agreement with the Government of Nepal's Social Welfare Council (SWC) for the next five years. This renewal underlines our enduring partnership and commitment to continue delivering vital healthcare services to those in need.

We also took a significant stride towards achieving the Government of Nepal (GoN)'s vision of a leprosy-free nation by launching INF Nepal's Zero Leprosy Strategy. This momentous event was graced by the presence of the

Honourable Chief Minister of Gandaki Province and other esteemed stakeholders.

We inaugurated the Eileen & Betty Centre, a dedicated leprosy ward within Green Pastures Hospital & Rehabilitation Centre. This purpose-built facility will greatly enhance the care provided to patients suffering from leprosy, ensuring their well-being and comfort.

In the pages that follow, we will share with you our remarkable progress, major achievements, and stories of transformation in lives and communities. These accounts serve as a testament to our commitment to creating lasting change.

As we celebrate the successes of the past, we are not content to rest on our laurels, but are planning our future growth. I am pleased to announce that INF Nepal's five-year strategic plans for both health and community services has begun. As we embark on the next phase of our journey, we are filled with hope and anticipation.

We recognise that none of this would have been possible without the support and commitment of each individual in the wider INF family. We extend our heartfelt gratitude to our dedicated team, partners, government and non-governmental stakeholders, supporters for the continued partnership. Thanks to the INF Nepal Board for all the guidance and support they bestowed to us during this period. I believe, together, we have created a legacy of service and compassion that will continue to transform lives for many years to come.

INF NEPAL WORKING AREAS AND PROJECTS DURING FISCAL YEAR 2079/80 [2022-23]

- ☑ IDEAL - Inclusive Development, Empowerment and Livelihood
- ☑ Y4M - Youth for Economic Empowerment and Resilience Mugu
- ☑ SAMRIDHI - Community Based Inclusive Development
- ☑ POWER - Promotion of Women Empowerment and Rights Targeting to Rural Women
- ☑ Inclusive Health Project

- ☑ WEAL - Woman Empowerment and Livelihood
- ☑ SRIJANA - Creating Opportunities for Youths and Migrant Returnees amidst COVID-19
- ☑ SAMRIDHI - Community Based Inclusive Development
- ☑ ACTIVE - Action at Community on Trafficking Intervention and Violence End
- ☑ POWER
- ☑ Inclusive Health Project

- ☑ CCA - Climate Change Adaptation
- ☑ EES - Environmental and Economic Sustainability
- ☑ IDEAL
- ☑ POWER

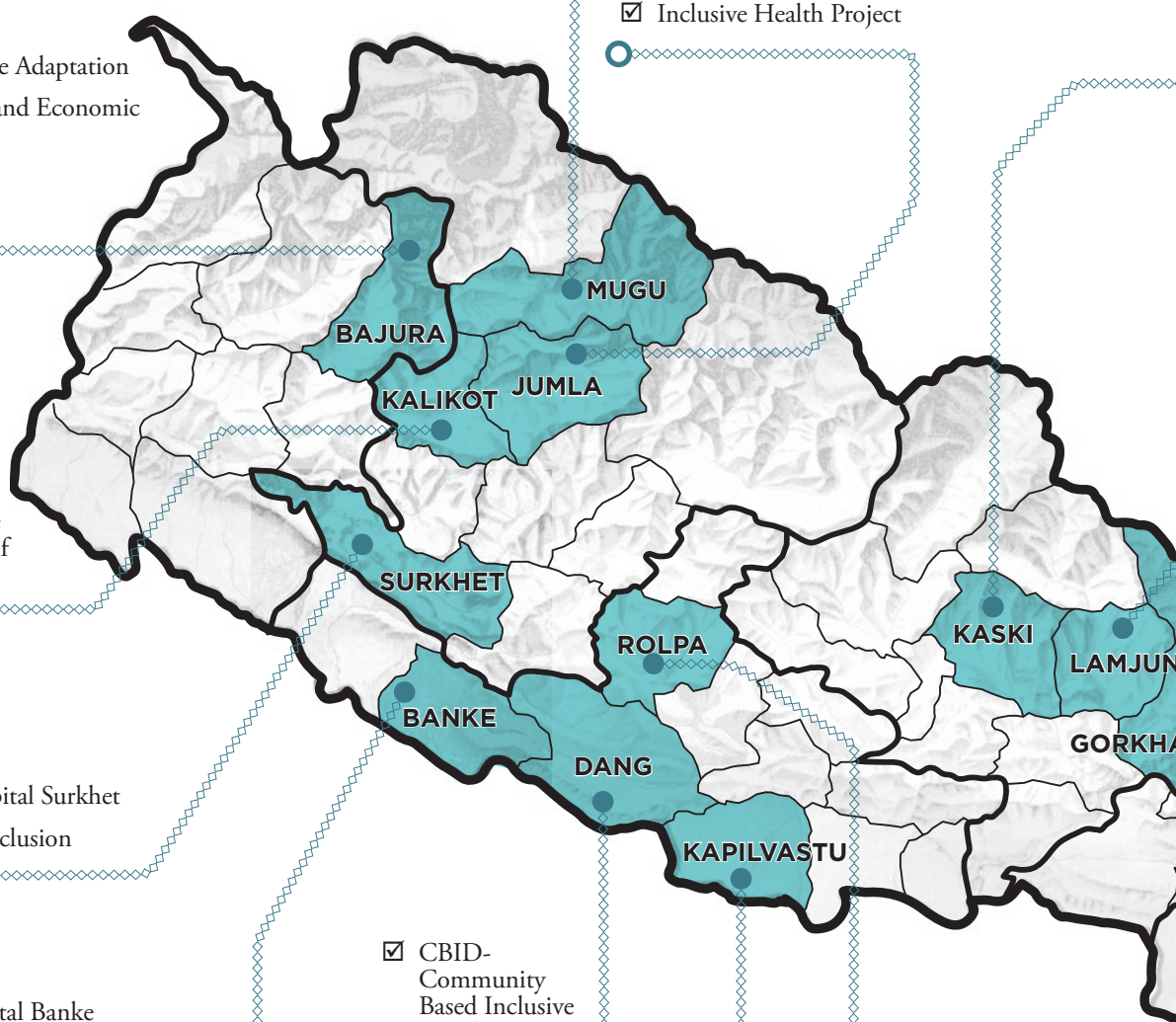
- ☑ WASH - Water, Sanitation and Hygiene
- ☑ Improving Reproductive Health and Prevention of Child Marriage

- ☑ Shining Hospital Surkhet
- ☑ Access and Inclusion

- ☑ Shining Hospital Banke
- ☑ HEAL - Cutting-edge treatments and care to end suffering and disability caused by Leprosy, Lymphatic Filariasis
- ☑ SATH - Strengthening Against Trafficking of Human
- ☑ ACTIVE

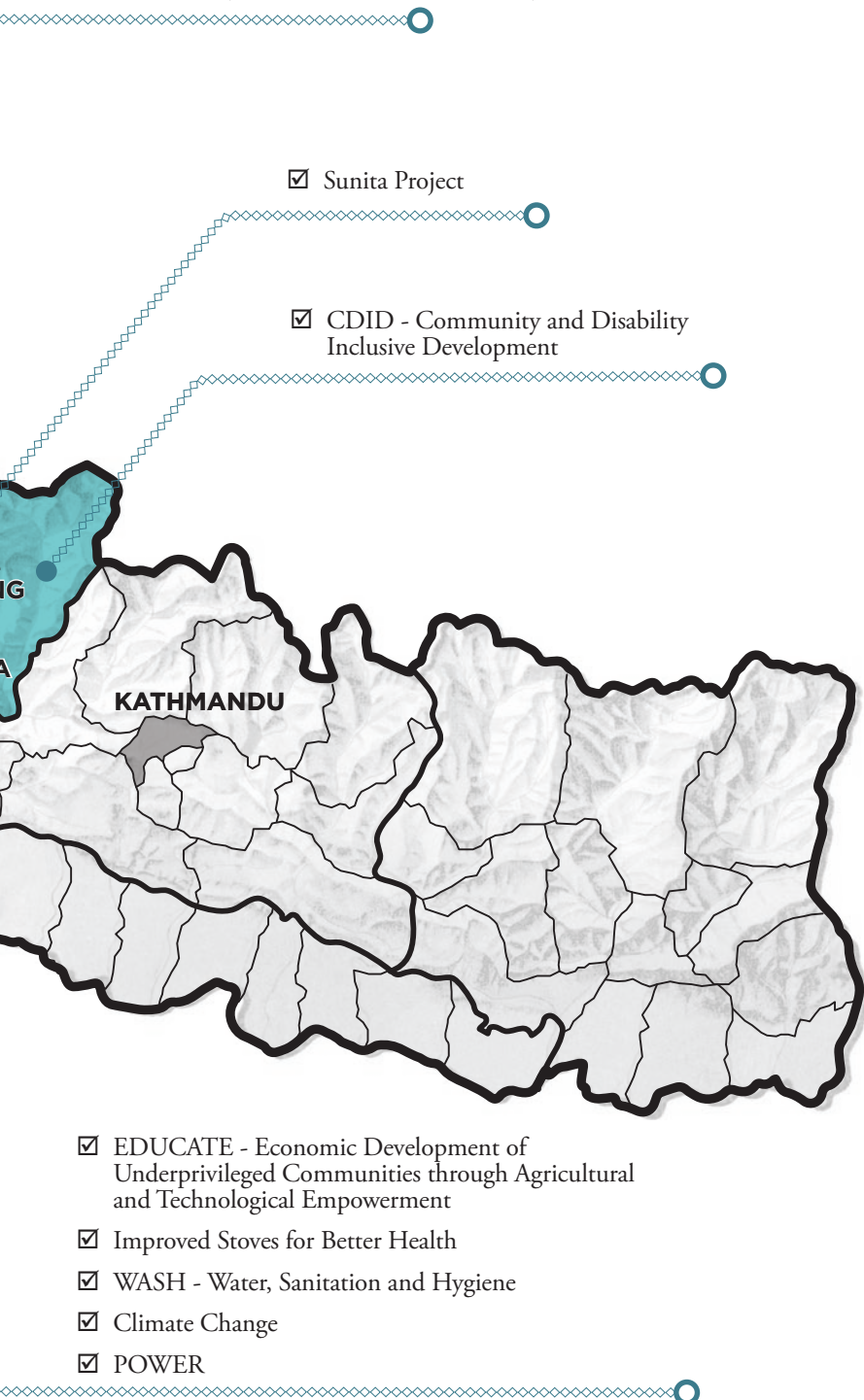
- ☑ CBID-Community Based Inclusive Development
- ☑ ACTIVE

- ☑ SIMPLE - Sustainable Improvement in People's Livelihood through Empowerment
- ☑ ACTIVE
- ☑ Climate Change
- ☑ POWER





- ☑ INF Nepal Central Office
- ☑ Green Pastures Hospital and Rehabilitation Centre
- ☑ Sunita Project - Ensuring access to Palliative Care among rural community
- ☑ Aasha Project - Post-COVID Rehab Project



- ☑ EDUCATE - Economic Development of Underprivileged Communities through Agricultural and Technological Empowerment
- ☑ Improved Stoves for Better Health
- ☑ WASH - Water, Sanitation and Hygiene
- ☑ Climate Change
- ☑ POWER

SUSTAINABLE DEVELOPMENT GOALS

Our work contributes to the Sustainable Development Goals – the global blueprint for a better and more sustainable future for all.



1 NO
POVERTY

THEMATIC AREA

LIVELIHOOD**End Poverty in all its forms
and everywhere**

Adopting environmentally friendly farming and food security practices and strengthening the capacities of the poorest and vulnerable to earn sustainable livelihoods in communities served by INF. Creating networking and linkage opportunities for income generation through quality agro-based activities and cooperatives at the local level.

2 ZERO
HUNGER

THEMATIC AREA

LIVELIHOOD**End hunger, achieve food security
and improved nutrition and
promote sustainable agriculture**

Adopting environmentally friendly agro-farming practices, including home kitchen gardens and strengthening capacities of the poorest and vulnerable to improve food security and reduce child and maternal malnutrition.

3 GOOD HEALTH
AND WELL-BEING

THEMATIC AREA

**LEPROSY &
DERMATOLOGICAL
DISEASES**

INF Nepal is contributing to GoN's 2020 Leprosy Roadmap: 'zero transmission', 'zero discrimination' and 'zero disability' through early case detection, provision of inpatient services, provision of health care education and self-care techniques, reconstructive surgeries and provision of assistive devices through hospitals.

3 GOOD HEALTH
AND WELL-BEING

THEMATIC AREA

HEALTH**Ensure healthy lives and promote well-being
for all at all ages**

Objective-focused capacity building training and strengthening of health systems and health staff at rural municipality and district levels, including trainings for a cadre of health volunteers to improve access to quality health services and well-being for community members. Additionally, training is also focused at the community level to raise awareness of significant health issues.

3 GOOD HEALTH
AND WELL-BEING

THEMATIC AREA

**PHYSICAL DISABILITIES
& REHABILITATION**

INF Nepal is providing treatment and rehabilitation to people affected by spinal cord injury and other disabilities at affordable cost through its Medical Charity Fund, thus contributing to access to quality treatment.

3 GOOD HEALTH
AND WELL-BEING

THEMATIC AREA

**PALLIATIVE CARE
AND CHRONIC
DISEASES**

INF Nepal is contributing to Nepal Palliative Care Strategy 2017: Everyone with a serious, complex and Life-limiting illness in Nepal will have access to palliative care that includes relief of pain and other physical symptoms, psychological, social and spiritual distress and of family members' psychosocial and spiritual distress.

We also link with SDG 1 (No Poverty) as palliative care contributes to reducing catastrophic health expenditure, the main reason households fall into poverty in Southeast Asia.



THEMATIC AREA GENDER

Achieve gender equality and empower all women and girls

Implementing Gender as a cross-cutting issue and empowering women and girls within the organisation and in the community. Our projects' aim is to give equal rights and opportunities to women and girls.



THEMATIC AREA CLEAN WATER AND SANITATION

Ensure availability and sustainable management of water and sanitation for all

Promote equitable and adequate access to water and sanitation practices and pay special attention to the needs of women and girls and those who are in vulnerable situations.



THEMATIC AREA ECONOMY

Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all

Strengthening capacities of the poorest and vulnerable to earn sustainable livelihoods in communities. Creating networking and linkage opportunities for income generation through quality agro-based activities and cooperatives at the local level.



THEMATIC AREA CLIMATE CHANGE

Take urgent action to combat climate change and its impacts by regulating emissions and promoting developments in renewable energy

Promote climate resilient agriculture practices. Thus, to increase awareness on the issues of climate change, disaster risk reduction, and enabling communities to seek options for adaptation from the impact of climate change and further contributing to environmental protection.



THEMATIC AREA LIFE ON LAND

Protect, restore and promote sustainable use of terrestrial ecosystems, sustainably manage forests, combat desertification, and halt and reverse land degradation and halt biodiversity loss

The project will help reduce desertification and flood by decreasing firewood consumption and increasing forests.



THEMATIC AREA PEACE AND JUSTICE

Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels

The project will ensure that the peace and justice are maintained throughout our work approach in the target communities. The project intervention aims to bring peace and security not only for the duty bearers but for the community as a whole with the right-based approach of a safer working environment, up-scaling the quality of life of trafficked survivors and other high-risk groups and promoting inclusive development and access for the disabled and marginalised in communities.

Reflecting the Past Celebrating the Present Innovating the Future



Years of Service in Nepal

Nepal, a land of mountains, serene landscapes and beautiful people, has witnessed a profound transformation since the 1950s.

Amidst this tapestry of nature's grandeur and its people's resilience, another remarkable journey took place, reflecting the love, service, integrity, excellence and unwavering dedication towards the people of Nepal — the 70 Years of Service of the International Nepal Fellowship (INF).

Established in 1952, INF's inception was marked by the vision of a group of expatriate volunteers and Nepali friends. This visionary endeavour began with a clinic in Pokhara, laying the foundation for the first hospital in western Nepal, the "Shining Hospital". Over the years, this humble beginning blossomed into a comprehensive organisation that embodies transformation, empowerment, healing and compassionate care.

The path INF embarked upon was marked with significant milestones that redefined healthcare, community development, and social inclusion in Nepal, particularly in the western half of the country. Through its unwavering commitment, INF pioneered innovative health and development work approaches. The milestones echoed stories of lives changed, futures brightened, and communities revitalised.

70+ events

A year of commemoration

The year 2022 marked a significant juncture in INF's long journey in Nepal as it celebrated its 70th Anniversary with zeal and purpose.

The theme for the celebration — “Reflecting the past, celebrating the present, and innovating the future” encapsulated the essence of this remarkable journey. The celebration began on the 69th INF Day when the organisation promised to commemorate this milestone through 70 different events and programmes throughout the year across all the INF offices.

INF's 70th anniversary in Nepal marked a year of exceptional events and achievements. The celebration commenced with the laying of the foundation stone for the “Eileen & Betty Centre,” a dedicated leprosy ward within Green Pastures Hospital (GPH). This new facility, now fully operational, stands as a testament to our commitment to working towards Zero Leprosy in Nepal.

The anniversary was further graced by the inauguration of Shining Nepal Multipurpose Company (SNMC)'s Ark Bazaar. SNMC, a non-profit organisation in Nayagaun, Pokhara, operates within the Green Pastures Complex. This endeavour not only supplies organic produce to the local market, from vegetables and meat to dairy products, but it also generates employment opportunities for some of the leprosy-affected patients of GPH. SNMC was established to support INF's charitable mission.

Some of the other remarkable events included the inauguration of the Oxygen Plant at GPH, with the presence

of Australia's Ambassador to Nepal. This vital medical resource, funded by the Australian Government (DFAT), proved indispensable during the COVID-19 crisis.

The pinnacle of our 70th-anniversary celebrations occurred in October, graced by the Chief Minister of Gandaki Province. These gatherings were an opportunity to felicitate our long-standing partners and like-minded organisations.

Simultaneous events took place in Surkhet and Banke, within INF's two Shining Hospitals, featuring various provincial and local stakeholders. In the programmes, we extended our gratitude to funding partners and expatriates who have contributed to the projects in those regions.

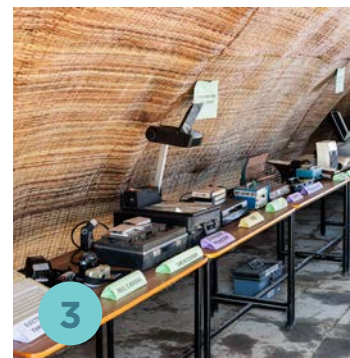
Two days before the grand 70th anniversary, we hosted a special event to acknowledge the significant contributions of former and current expatriates, the wider INF family, and funding partners in GPH, Pokhara.

The culmination of our jubilant year took place on November 17th, celebrating the 70th INF Day, in the presence of Pokhara Metropolitan City's Mayor. He warmly acknowledged INF's immense contribution to the region and beyond. The day also featured the felicitation of long-serving Nepali staff, dedicated expatriates, invaluable funding partners, and esteemed government stakeholders.





SOME GLIMPSES



1. GPH entrance decorated for the celebration programmes
2. Then Chief Minister of Gandaki Province addressing the one of the programme in GPH, Pokhara
3. Display of historical INF tools and gadgets
4. Funding partners attending one of the programme
5. Programme participants in GPH, Pokhara
6. Programme participants in SHIS, Surkhet
7. Programme participants in SHIB, Banke
8. Felicitating long serving staff
9. Felicitating current and former expatriate

70 years and beyond

As the pages of INF's story continue to unfold, it echoes the tales of compassion, empowerment, and transformation. The celebration is a testament to INF's relentless pursuit of holistic well-being, embodying physical, mental, social, economic, and spiritual growth. It was a fitting tribute to the pioneers, the dedication of Nepali staff and expatriate volunteers, and the shared journey with communities.

And now, INF's gaze remains fixed on the future. As Nepal evolves, so does INF, which collaborates with government agencies and like-minded organisations such as aligning with the government's vision of eliminating leprosy by 2030.

Guided by the Mandate, Vision, Mission, Values and Characters, INF will continue to serve and help bring life in all its fullness to the poor and disadvantaged people of Nepal.

The journey continues ...

Kishan Tamang

Read an inspiring story of one of INF staff who has been serving for the last seven years as a Gardener at INF Nepal Central Office.



Namaste! My name is Kishan Tamang. I was born in Sardikhola, Machhapuchchhre RM-2, 26 km north of Pokhara.

I have a family of four: my wife, two sons and myself. Both my wife and myself have a hearing disability (deafness), though our two sons have no such issues, and they can hear and speak normally.

I was born with hearing ability. A high fever at age 4 took away that ability. In a desperate search for a cure, my family turned to a local Jhankri since health posts were distant and urban hospitals were a luxury.

I was fortunate to attend a local school that educates students like me. From grades 1 to 5, I studied there. For higher education, from grade 6 onwards, I studied at Sirjana Residential Secondary School for the Deaf in Pokhara. I specialised in Education studies during my 11th and 12th. After grade 12, I couldn't continue my education for financial and other reasons.

I found the job market challenging, and opportunities were scarce for people like me. Determined to capacitate myself, I joined Gandaki Bahira Sangh (Gandaki Association of the Deaf), dedicating my efforts to advocating for the rights of individuals with hearing disabilities. I also actively contributed to a network for individuals with disabilities in Machhapuchchhre Rural Municipality.

The quest for meaningful employment persisted, and during this search, I met one of the INF staff. I discussed with him the opportunity to work at INF. He indeed informed me that INF encourages application for people with a disability.

I finally joined INF Nepal in 2073 BS (2016). Since then, I've been diligently tending to the gardens at the INF Nepal Central office, grateful for the chance to contribute to an organisation that values diversity and inclusivity. The synergy of knowledge, ability, training, and support within INF is commendable. This journey also allowed me to explore other working areas of INF Nepal, such as the Banke and Surkhet districts, an experience for which I'm immensely thankful.

Though my education could have opened doors in related fields, my role as a gardener holds immense value. The INF Nepal team has become a second family, embracing me with warmth and kindness. Their support has fostered an environment where my disability fades into the background, allowing me to pursue a life of independence and dignity.

In 2019, I was honoured to represent Nepal at the Annual General Meeting of the World Federation of the Deaf in Paris, France. This journey introduced me to fellow deaf individuals worldwide, exposing me to diverse cultures, sign languages, and the services available to the deaf community. Furthermore, I travelled to Thailand as a representative of the Gandaki Association of the Deaf, exchanging insights and enriching cross-cultural understanding.

In conclusion, I sincerely thank INF Nepal for all their support throughout my journey. I look forward to witnessing this remarkable organisation's continued growth and prosperity. Thank you for standing by me and empowering individuals like me to flourish despite life's challenges.



INF NEPAL

Hospital and Health Services

INF provides essential medical care, with an emphasis on leprosy treatment, disability management and physical rehabilitation through three of its hospitals in western Nepal.

Green Pastures Hospital

INF provides essential medical care, with an emphasis on leprosy treatment, disability management and physical rehabilitation through three of its hospitals in western Nepal.

Green Pastures Hospital and Rehabilitation Centre (GPHRC or GPH in short), Pokhara is a 100-bed multi-disciplinary hospital and rehabilitation centre caring for persons with disability. GPH is the only such centre in western Nepal. It has specialist services in dermatology and leprosy, hearing disabilities, orthopaedic and spinal surgery, spinal cord injury and spinal disorders, plastic and reconstructive surgery, palliative care and chronic disease, and rehabilitation.

A dedicated multi-disciplinary team consisting of medical, nursing, paramedical, allied health professionals, and administration work as a cohesive team to provide holistic care to address the physical, psychological, social, and spiritual needs of the patients.

GPH has accomplished another year towards achieving its goal of “Excellence in Services”. Fiscal Year 2022/23 has been a fruitful year of providing patients with compassionate Care and rehabilitation services.



Leprosy and Dermatology

The leprosy programme continues to contribute to 'zero transmission', 'zero discrimination, and 'zero disability' through early case detection, provision of inpatient services, health care education, self-care techniques, reconstructive surgeries, and provision of assistive devices.



Physical Disabilities and Rehabilitation

GPH provided surgical and rehabilitation services to spinal cord injury and other disabilities patients such as cerebral palsy, stroke, ortho-related cases, etc. The hospital provided health education, essential equipment, assistive and mobility aids such as wheelchairs, food, and medicine to these patients to reduce secondary complications.



Hearing Disabilities

The Ear Centre at the GPH continues to provide treatment to hearing impairment and ear related disease through its quality yet affordable services.



Palliative Care and Chronic Disease

Palliative care (PC) services at GPH have gradually developed over the past five years and the construction of a separate complex for Palliative Care and Chronic Disease (PCCD) in 2021 through funding of **EMMS International** has provided the foundation for significant expansion this year. The 14-bed PCCD unit started its service in June 2021.



Community Outreach

This unit in the hospital provides holistic care to its patients covering hospital-based treatment and rehabilitation to community-based rehabilitation. The outreach activities primarily focus on the early detection of leprosy and disability cases to prevent further damage.

Timely diagnosis can prevent disability

Read how GPH's community awareness initiatives led to early leprosy diagnosis and treatment for a woman with blisters.

Sharmila* a 42-year-old lady from the Kaski district found herself facing a health challenge when she developed blisters on her hands. Sharmila was diagnosed with leprosy three years ago with no deformity.

Sharmila initially noticed blisters forming on her hands, causing discomfort and concern. She tried home remedies and local treatments, hoping for relief. However, her condition worsened, and she soon developed red spots all over her body. Sharmila's nephew, who had heard about good skin treatment at Green Pastures Hospital (GPH), immediately took her there.

Upon arrival at GPH, Sharmila underwent a thorough examination by a team of experienced doctors. After careful evaluation and testing, the doctors confirmed the presence of leprosy.

With the diagnosis, the hospital promptly initiated contact tracing for Sharmila's immediate family. Her daughter's tests



turned negative, luckily. However, Sharmila's son and her husband were scheduled for further contact tracing to ensure their health and prevent any potential transmission. Sharmila's husband is reluctant to go through the test. GPH is planning for a counselling session to encourage and convince Sharmila's Husband to go through the test.

One of the crucial factors that worked in Sharmila's favour was the absence of any incorrect or delayed treatment before her visit to GPH. This can be attributed to the hospital's extensive awareness-raising activities within the community. Through their efforts, they educated people about the early signs of leprosy, and emphasized the importance of seeking professional help.

Sharmila is now admitted to GPH for the treatment of her neuritis reaction. Sharmila has been provided with a supportive environment, ensuring her physical and emotional well-being during her stay.

** Name changed to protect person's identity*



Major Clinical Highlights



Infrastructure

- A new leprosy inpatient ward the Eileen and Betty Centre was inaugurated in June 2023 in the presence of the Honourable Chief Minister of Gandaki Province. This building aimed to enhance healthcare infrastructure and provide specialised care for leprosy patients in a compassionate and inclusive environment.
- The physio hall extension was completed with the support from overseas donors. The extended hall has been dedicated for providing outpatient services.



New Specialist Services

- Radiography Specialist Service has been set up in GPH. Under the services, CT Scan service has been started in December 2022.
- **INF UK's** support has enabled Green Pastures Hospital (GPH) to acquire a vHIT device, enhancing the diagnostic capabilities of audiologists. This specialised equipment aids in identifying inner ear conditions that lead to vertigo and dizziness by recording eye movements during controlled head movements, facilitating precise diagnosis and treatment guidance.
- The Speech and Language Therapy department has been strengthened to provide a more comprehensive range of services.

Academic Development

- GPH has achieved a significant milestone, as it has been recognised as a centre of palliative care excellence. The Patan Academy of Health Sciences included GPH's PCCD as a designated Postgraduate Training Centre as a part of a new 18-month fellowship. This underscores GPH's commitment to advancing palliative care (PC) and solidifies its position as a PC leader in Nepal.
- Likewise, GPH's Ear Centre organised a two-day temporal bone dissection course, the first of its kind in Nepal. The course was attended by ten ENT Surgeons, who had the opportunity to explore real bones and learn the 3D anatomy of structures such as the inner ear, the small hearing bones of the middle ear, and the nerve that controls facial movement.



Major Clinical Highlights

Networking and Partnership

- GPH celebrated special days like World Leprosy Day, International Disability Day, and World Hearing Day. The objective of these celebration is to raise awareness among people about the causes and the relevant services available at GPH.
- The internationally accredited palliative care toolkit in Nepali language was launched on August 2022. The toolkit was launched by the Director General of the Health Service Department of the Ministry of Health and Population and the President of the Nepalese Association for Palliative Care.
- GPH supported the 17th Pokhara International Marathon in February 2023 by installing medical booth and sponsoring the prizes for the winners.
- INF Nepal participated in the 7th mountain festival organised at the International Mountain Museum, Pokhara, on 10-11 December 2022 by showcasing photos and banners depicting INF's 70 Years of Milestones. The Honourable Vice-President of Nepal inaugurated the festival.
- Collaborating closely with **INF UK, Joni & Friends** and **Sundar Dhoka Sathi Sewa Nepal**, the Wheelchair Distribution Camp was held on 5-9 June 2023 inside GPH Premises. The team of therapists, wheelchair assemblers and technicians assessed, customised and fitted 165 wheelchairs during the camp.
- On September 2022, GPH organised a Partnership Completion Programme to express gratitude towards International Committee for Red Cross (ICRC) for their long-term support and collaboration that started in 2004.



INF celebrated International Mountain Day by showcasing photographs providing glimpses of organisational history.



INF staff during the inauguration of Palliative Care Toolkit



Major Project Highlights



Aasha Project

The Project started in September 2021 and ended in December 2022. This programme aimed to develop, test, and evaluate the feasibility, acceptability and effectiveness of a multi-disciplinary post-COVID-19 rehabilitation programme in the Nepal context, especially for persons with disability who have been infected with COVID-19.

1611 tele-screening tests were conducted, and out of them, 94 patients received tele-consultation during the 15 months (project period including three months extensions). Among 42 in-person patients, nine patients were admitted to the hospital for complication management, and 33 received services as outpatients. Most of the admitted patients had a problem with shortness of breath, fatigue, myalgia and multiple joint pain. During the lifetime of the project, excellent levels of recovery of all the patients who had undergone medical care were achieved.



Care for Cure

33 leprosy-admitted patient were provided with nursing care for their complication management with generous support from **EMMS International**.

Complete Care for Children with Development Disorder

Funded by **INF UK**, Complete Care for Children with Development Disorder Project is being run in the hospital to provide diagnostic and rehabilitation care for children. The expansion of service from just the cerebral palsy (CP) clinic to the developmental paediatrics clinic has been very rewarding. We have not only been able to provide services to children with cerebral palsy but also to children with various dystrophy, developmental delays, congenital deformities and many more.



Basic Nursing Assistant Training

Basic Nursing Assistant Training is being funded by a German-based donor **pro filia**. The Project is focused on training human trafficking survivors. Nine candidates/survivors received training in the reporting period.



Major Project Highlights



Community Medical Outreach Project

The Community Medical Outreach Project was started in April 2021 to improve the access of vulnerable people (affected by leprosy, persons with disabilities, and people living in disaster-prone areas) to appropriate and affordable medical as well as disability and disaster-specific services, particularly in remote and isolated areas of western Nepal.

Seven leprosy-related skin and disability medical camps were organized during the reporting period. 3398 patients received direct medical treatment and counselling, and 180 patients were referred to GPH for further treatment.

78 People with disabilities and deformities diagnosed with leprosy persons who directly received free of cost reconstructive surgeries and received necessary follow-up. It is expected to help reduce social stigma and reintegrate the patients into society so they can become independent and conduct their day-to-day activities with ease. The project covered the cost of meals and lodging for the patients during the surgical procedures.

148 health professionals received training in basic leprosy case detection and emergency medical response.

558 people were provided with orthopaedic (assistive device) aids and prostheses, making it simpler for them to live in the community with dignity and respect.

257 people participated in workshops on disability interaction and disaster response training in different locations. A total of 406 health workers received leprosy case detection and emergency medical response training.

558 members of 7 local-level government institutes learned about real life-saving emergencies and received disaster preparedness materials through simulation exercises.



Sunita Project

The Sunita Project is a three-year, UK Aid-matched project between **EMMS International** and INF Nepal (started on April 2022). The project helps develop GPH's PCCD services as a Centre of Excellence through clinical services, research, and education/training. This project supports the National Strategy for Palliative Care, developed by palliative care experts in Nepal and was adopted by the Government of Nepal's Ministry of Health and Population. The project is implementing its rural healthcare intervention in palliative care in Lamjung, Rukum, Surkhet, Kapilvastu, and Banke.

984 individuals (239 health workers, 200 GWT workers, 55 FCHVs, 55 students, 19 teachers, and 416 community members) were trained about palliative care (PC) through 82 training events. The training has been practical in imparting PC (new concept) knowledge among community members and health professionals.

Task force meeting and palliative care toolkit launch: The official task force of the Sunita Project involves government health officials at the central level, representatives from NAPCare and Sunita project partners. The 6-monthly task force meeting informs the government of the PC findings of the Project and gathers feedback on creating a successful PC model by the Project. Two task force meetings were conducted in FY 2079/80. On 11 August 2022, the official launch event of the Nepali edition of the Palliative Tool Kit took place with the participation of high-level government officials.

PC research and presentations: The Sunita project this year presented 1 poster in Indonesia, 2 papers & 4 posters in India at IAPCON and 1 discussion led on primary palliative care in EAPC's 18th World Congress in Rotterdam, the Netherlands. Clinical audits are ongoing through Nepali Palliative Care Outcome Scale and on menthol oil for neuropathic pain at PCCD.

Empowering Communities through Palliative Care

Read how a community health volunteer, used her palliative care training to help a bedridden patient, showcasing the impact of training.

Kopila, a dedicated Female Community Health Volunteer (FCHV) from Besisahar, Lamjung, had been serving her community for 15 years. She is responsible for 45 households, among which 12 have patients with chronic illnesses such as diabetes, hypertension, and thyroid disorders. Her role involves disseminating health-related information and promoting healthy behaviours among community members.

In January 2023, Kopila had the opportunity to participate in PC training conducted by the Sunita project. During the training, she gained a deeper understanding of PC and learned about providing home-based care for bedridden patients. The training also equipped her with the skills to identify PC patients and deliver essential care within their homes.

After completing the training, Kopila returned to her community with new-found knowledge and skills. It didn't take long for her to apply what she had learned. She came across a bedridden female patient who had been in such a condition for the past two years due to complications during her pregnancy. Despite receiving medical treatment, her condition showed no signs of improvement, and the doctor informed her that she had a rare neurological problem that couldn't be cured.

Drawing upon her training, Kopila recognized that this patient was in need of palliative care. She took it upon herself to share her knowledge of PC with the patient's husband, who served as her primary caregiver. Kopila explained the concept of PC and discussed the importance of providing home-based care to enhance the patient's quality of life. Kopila demonstrated how to properly position the patient in bed, emphasizing the need for regular position changes every two hours. She also educated the caregiver on maintaining proper hygiene to prevent complications. Thanks to Kopila's attentive care, the patient has not developed any pressure sores in the last two months.



The patient's husband was amazed by Kopila's expanded knowledge and skills. He expressed his gratitude and curiosity, asking her – "How did you acquire such valuable expertise? You seem more knowledgeable and skilled in managing bedridden patient than before." Kopila humbly explained her participation in the PC training, which empowered her to provide better care and support to patients with chronic illnesses.

With Kopila's continued dedication and the application of her new-found knowledge, she became an invaluable asset to her community. Her story serves as a testament to the positive impact that Sunita project's PC training has on the quality of care provided by healthcare volunteers like Kopila.

GPH Services in Numbers



Leprosy and Dermatology



2142 leprosy outpatient visits

253 leprosy inpatient admissions

49 dermatology inpatients admission

434 skin smears test performed

45 septic surgeries performed

29 reconstructive surgeries performed

29108 dermatology outpatient visits

96 new leprosy cases detected

462 self-care sessions provided to leprosy patients

376 health education sessions provided to patients

434 patients received assistive devices and footwear



Hearing Disabilities



18991 outpatient visits

408 inpatient admissions

488 ear surgeries conducted

466 assistive devices (hearing-aid) provided

7565 audiology test conducted

6472 outpatient procedures conducted



Physical Medicine & Rehabilitation



85 spinal cord injury patient visits

211 cardio-cerebral accident cases

62 neurological disorder (TBI, MND, Parkinson etc.) cases

64 cerebral palsy visits

50 club-foot cases

207 paediatrics disabilities (DSL, GDD, MD, DS, Autism) cases

11378 physiotherapy sessions provided

6751 occupational therapy sessions

3989 speech & language therapy sessions provided

1086 Prosthesis and Orthosis devices provided

28 wheelchairs provided



General Disability

15609 outpatient visits

928 inpatient admissions for rehab & general disability

710 surgeries conducted

GPH Services in Numbers



Diagnostics Services

4818 X-ray tests conducted

247 CT scan tests conducted

721 USG tests conducted

32718 lab tests conducted



Palliative Care

136 outpatient treated

409 home visits carried out

64 inpatient admissions

140 community visits carried out



Community Medical Outreach

3398 patients seen in Camps

558 assistive devices provided

78 patients' surgeries supported

78 patients given charity support for treatment



180 patients referred to hospital base services

148 health worker and community groups trained

722 people provided with training and workshop



Post-Covid Rehab

11 consultancy services provided

11 outpatients treated

3 inpatient admissions



Medical Charity

989 general rehab patients provided with charity support

170 hearing disabilities patients given charity support

103 palliative care & chronic diseases patients given charity support



Shining Hospital Surkhet (SHIS)

Founded in 1977 as a leprosy clinic in Surkhet, Shining Hospital Surkhet (SHIS) has evolved into a 25-bed hospital.

Shining Hospital INF Surkhet (SHIS) is dedicated to serving the poor and disadvantaged people of its catchment area, notably within the Karnali Province, SHIS stands as a beacon of hope and care.

Our primary mission at SHIS is to provide comprehensive support to individuals affected by leprosy and disabilities, fostering their journey towards holistic transformation. Through a blend of clinical interventions and community outreach initiatives, we strive to make a positive impact on their lives and well-being.

Leprosy and Dermatology



SHIS through its medical services in leprosy and dermatology aims to reduce leprosy prevalence and contribute to providing quality diagnosis and treatment services available at centre

43 new leprosy cases were diagnosed, and 604 leprosy complications were effectively managed through the outpatient department. This particular care led to improved health status for our patients, while concurrently preventing disability and interrupting the transmission of leprosy.

9,975 dermatology outpatient treatments were conducted and 11,951 lab tests were facilitated. For leprosy specifically, we conducted 105 skin smear tests to ensure accurate diagnosis and follow-up.

Our dedication to collaboration was evident through strong coordination with local and provincial governments. Our veteran leprosy in-charge provided vital technical support, including training for basic health services staff within the Karnali province.

Outreach efforts for leprosy diagnosis were also extended, reflecting our commitment to extending our expertise beyond the hospital walls.

Physical Disabilities and Rehabilitation



The general rehabilitation unit provides high quality care, treatment and rehabilitation services including spinal cord injury to people with disabilities including leprosy with the aim to improve their mobility.

45 admissions of people with disability, and 660 patients having some kind of disabilities were screened and treated through the outpatient department.

In line with our commitment to transparency and effective healthcare management, data regarding new leprosy and disability-related cases were accurately shared with the Government of Nepal through the DHIS-2 platform.

22 prosthetic and orthotic devices and 34 wheelchairs were provided to people with disability to enhance their lives, fostering their independence and promoting an environment of inclusivity and compassion.



Fistula Treatment Centre

Providing high-quality and free of cost holistic treatment for women who have suffered from obstetric fistula.

Established in 2018 through the joint effort of INF Nepal and Karnali Province Hospital, this 17-bed Fistula Centre offers both medical and surgical services to fistula patients. It is situated within the Karnali Province Hospital premise in Birendranagar, Surkhet. The main aim of this centre is to provide a free of cost, high quality and holistic treatment service for women suffering from obstetric fistula.

Women in need of treatment are identified in the community chiefly through the activities of fistula outreach team. They present information about fistula, the cause, symptoms, treatment and prevention to different target groups including health workers, FCHVs, community and mother's groups and schools. They co-ordinate their activities with government offices at all levels and also network with other organisations working in the field of women's health to identify fistula patients in the community. The ultimate aim is to contribute the campaign to end obstetric fistula in Nepal.

Similarly, the SHIS's Hospital Support Service aims to strengthen government health services by developing their capacity and by providing expert technical assistance for gynaecological/obstetric fistula treatment.

Award for fistula work

The International Federation of Gynaecology and Obstetric awarded INF Surkhet's fistula service in year 2022-23 to conduct outreach activities with the purpose of increasing patient flow in the Fistula Centre. The main objective of this award is to raise awareness among Doctors and Nurses in remote places like Baitadi, Darchula, Bajhang, Bajura and Bardiya districts.



Major Project Highlights

Nepal Patient Navigation Project

SHIS implemented the Nepal Patient Navigation - INF New Life for Disabled Children project with a financial partnership from Samaritan's Purse Canada. This Project aimed to refer ten children for further treatment with the support of the project. As of the reporting date, the project team has successfully referred six children to Sundar Dhoka Sathi Sewa, where they can receive improved treatment. Additionally, the team has supported 14 children in their follow-up efforts, surpassing their initial target of 3 follow-up cases. All the children who received support were under 16.

Home adaptation and orthotics support

SHIS has been implementing a Home adaptation and orthotics support to people with disabilities project in partnership with BMS. The Project's aims to support individuals with potentially disabling conditions, particularly those with spinal cord injury and cerebral palsy, by offering home adaptations and orthotics to enhance rehabilitation services and deliver comprehensive care to them.

This initiative focuses on providing a comprehensive rehabilitation process for individuals reliant on wheelchairs. It involves crucial home modifications, with a special

emphasis on creating wheelchair-friendly toilet facilities and enabling independent movement within both the home and rest-room areas. Additionally, some individuals require orthotics to ensure proper limb support and positioning.

Through the provision of suitable home environments and necessary orthotics, we are enabling these individuals to harness their new-found skills and lead lives filled with purpose and potential.

A noteworthy outcome of this project is the liberation of family members from constant care-giving responsibilities. This new-found freedom empowers them to pursue their own goals, such as education and income generation, thereby contributing to the well-being of the entire family unit. Furthermore, our advocacy efforts aimed at local governments have resulted in a reduction of social stigma associated with individuals with spinal cord injuries (SCI). These local authorities are now extending support and assistance to these individuals, alleviating the burden they once carried with dignity.

The Home Adaptation and Orthotics Support Project is a testament to our commitment to empowerment and inclusivity. Through this initiative, we have positively impacted the lives of 10 individuals with disabilities, marking another step towards fostering a more equitable and supportive society.

SHIS Services in Numbers



604 leprosy outpatients' visits

9975 dermatology outpatients' visit

66 leprosy inpatients admission

43 new leprosy cases detected

105 skin smears test performed

158 patients received assistive devices and footwear

66 patients provided with health education

11951 other lab test performed



4622 physiotherapy sessions provided

680 occupational therapy sessions provided

22 prosthesis & orthosis equipment provided

34 wheelchair provided



83400 patients provided with hospital information

1704 patients assisted for poor fund support from Karnali hospital

936 patients provided with advocacy and counselling services

4 patients provided with medical charity support from INF Nepal

Empowering Family

Read how SHIS provided therapy to a child with Cerebral Palsy and how his mother attended the camp for supporting him later.

Kamal* from Surkhet is six-years old and has Cerebral Palsy (CP). He is first child of his parents and has a younger sister (3-years old). Kamal's sister has no signs of developmental issues so far.

Mina gave birth to Kamal in a health post through a normal delivery procedure. Within a few hours of Kamal's birth, he suffered from Asphyxia. This could be the probable reason for Kamal's condition. When Kamal was six months, his parents started noticing a problem as he didn't show development milestones.

In despair, the parents took Kamal to India and later to Kathmandu. The couple spent all their savings in search of treatment for their child. They were suggested to conduct therapy sessions under the close supervision of physio and occupational therapists. Mina took Kamal to SHIS. He was provided with therapy sessions for six months. This was about five years ago.

Recently, Mina heard about the CP Camp being organised in GPH, Pokhara through SHIS's Community Mobiliser. She wanted to renew her knowledge and therapy skills. She requested her enrolment in the camp.

Mina and Kamal are among the ten families who participated in the nine-day camp led by Dr Amrita Shrestha, paediatric consultant at GPH. Mina is happy that she learnt new exercises for her son. She also learnt about a better feeding technique, which has helped Kamal to swallow food easily.

Mina is thankful as she says, "My sincere thanks to INF family for all the support. I am very happy with all the arrangements including food and lodging provided during the camp in Pokhara."

** Name changed to protect person's identity*



SHIS Services in Numbers



Physical Disability

660 outpatient visits

45 inpatient admissions



Obstetric Fistula Services

76 fistula outpatient visits

12 urodynamic tests performed

63 fistula surgeries performed

46 new fistula patients identified

27 people received urogynaecology consultation services

1 fistula expert visit for fistula surgery skill transfer

22 patients received gynae outpatient services

45 clients involved in patient satisfaction survey of fistula patients



Fistula Outreach Project

3111 FCHVs oriented on Fistula

862 health workers trained on fistula

2974 members of mother's groups oriented

2793 community people oriented on fistula

90 coordination meetings conducted at province, district and local level

45 skilled birth attendance trainee oriented on fistula

167 members of different NGO's oriented on fistula

186 doctors and nurses provided with fistula orientation

Shining Hospital Banke (SHIB)

Shining Hospital INF Banke (SHIB) focuses on leprosy and dermatology care, serving a wide population. It also supports social restoration and reintegration for people affected by leprosy.

Shining Hospital INF Banke (SHIB) is located in Janaki Rural Municipality-3, Banke. It is a 24-bed hospital with special focus on leprosy serving the wider population of the Banke, Bardiya and neighbouring districts. SHIB focusses its activities to bring about positive changes in the attitude of the general public towards leprosy and leprosy-affected people, through various awareness raising activities at a grass roots level. It runs a leprosy clinic, providing examination and diagnostic services to people with signs and symptoms of suggestive leprosy. The hospital also serves patient with dermatological conditions and also operates its services in the

area of tuberculosis and non-tropical disease in the agreed project basis.

To this end SHIB's aim is social restoration for and reintegration of People Affected by Leprosy (PAL) into their local communities. This is achieved through establishing self-help groups which support advocacy for the rights of PAL and through income generation and skill development activities. These interventions reduce stigma and give dignity to PAL; empowering them to take an active part in their own development and that of their communities.

Major Project Highlights

Comprehensive Intervention for Leprosy-free Community and Leprosy-free Community Project Banke

Comprehensive Intervention for Leprosy-Free Community and Leprosy Free Community Project Banke are two projects which was implemented by Shining Hospital INF Nepal Banke with financial support from **PWS&D** and **INF UK** respectively. These projects' main goal was to identify and treat leprosy patients early. To achieve this objective, the project is being run in SHIB, organised outreach camps, conducted screenings for potential cases, and provided training to government health

professionals. Additionally, the project focused on community engagement by forming and facilitating the self-help groups for leprosy patients who received treatment at SHIB. A crucial aspect of these projects was combating stigma. While these projects' geographic coverage spans the Banke and Bardiya districts, the hospital welcomes patients not only from these areas but also from other districts within the Lumbini, Karnali, and Sudurpashchim provinces.

A former leprosy patient and leader of a self-help group (SHG) formed by leprosy-affected individuals and persons with disabilities, having a monthly group meeting.



SHIB Services in Numbers



Leprosy and Dermatology



2289 leprosy outpatient visits

14167 dermatology outpatient visits

692 skin smears test performed

51 leprosy patients trained in self-care

120 patients provided with health education

120 leprosy inpatient admissions

126 new leprosy cases detected

13 septic surgeries performed

175 patients received assistive devices and footwear

11517 other lab tests performed



Health Capacity Building



115 people provided with basic leprosy training

10 people provided with the refresher training on slit-and-smear

42 FCHV's provided with basic leprosy orientation

409 participants provided with basic leprosy orientation in school

11 people provided with the basic training on slit-and-smear

18 faith-based leaders & traditional healers provided with basic leprosy orientation

267 participants provided with basic leprosy orientation in church



Community Medical Outreach Project



669 people benefited from skin and leprosy camp

185 people served through skin and leprosy Camp in Banke Baijanath

245 people served in skin and leprosy Camp in Bardiya Jail

239 people served in skin and leprosy Camp in Barbardiya RC Tharu Memorial Hospital Bardiya







INF NEPAL

Community Health and Development

The transformation of communities is at the heart of INF's vision. Community Health and Development (CHD) is a key strategic initiatives for realising the vision.

INF Nepal serves the poorest and most vulnerable communities across western Nepal to bring 'Life in all its fullness.'

INF's transformational development strategy focuses on a community-led inclusive development approach (CIDA) through its implementation across all its community development activities.

The participatory CIDA approach focuses on strengthening people's capacities and strengths through collaborative action implemented through the formation of self-help groups

(SHG) at the community level in all its health and development programmes.

INF Nepal helps communities to access resources and gain the confidence necessary to implement the planned activities. The groups are strengthened and supported through appropriate facilitation and training. The CHD projects aim to bring changes in the lives of the most vulnerable and disadvantaged people of Nepal by empowering poor and disadvantaged people to take collective actions for their development, improving the livelihood status and health status of the target communities.

Major Highlights of CHD

686 SHGs were regularly facilitated (24 new SHGs formed), addressing community issues like human trafficking, GBV, disaster resilience, livelihood, and disability.

3,035 action plans implemented through SHGs.

15 SHGs registered as Cooperatives. This registration of SHGs into the cooperative will support sustainability and ensure its presence in the long run. 4,676 households have financial access through SHG.

1,561 HH received an improved cooking stove. Smokeless improved cooking stoves reduce firewood usage, help environmental protection, and even lower the workload while cooking food.

11 disability-friendly infrastructures were constructed. Thus, improving access and justice.

33 Drinking water system benefiting 938 HH. These drinking water systems were constructed in collaboration with the local government and the community.

66 Irrigation Canal constructed. A total of 2,466 HHs benefited from improving agricultural productivity.

102 Migrant returnees were provided with vocational training. Returnee migrants and marginalized people were supported with agriculture supplies and skill development.

175 Female Community Health Volunteers were provided with the training. The training focused on target communities' health issues and improved the quality of service in government health facilities.

22 Disaster Management Committee formed at ward and municipal level.

119 SHGs set up separate disaster emergency funds and seasonal grain collection for disaster preparedness.

2,112 people trained in climate change and disaster management.

369 Community people were provided with livestock-rearing training.

921 Community people were provided with modern farming training.

203 Community people were provided with income generation support through entrepreneurship.



SUB-SECTOR

Livelihood and Resilience

INF Nepal's community work aims to reducing poverty and sustainably improving the life in empowered and inclusive communities.



From arid hills to flourishing fields

This is the resilience of the villagers of Lakhudanda, working to construct water tanks for year-round farming in this rugged, mountainous region.

It is the story of Gajindra Bahadur Khadka, a committed individual who was elected as the coordinator of the water tank construction committee. Their mission was to collect rainwater to grow seasonal crops, vegetables, and fruits throughout the year.

With the support of INF Nepal's Climate Change Adaptation for Sustainable Livelihood Project, the local ward office, and the tireless efforts of the community members, a water collection tank came to life in April 2022. Gajindra recounts the immense challenges they faced while building this vital structure. Seated on a steep hill, huge rocks posed a tough challenge, making their work difficult. The sands had to be painstakingly transported up to the village from the Budhiganga River down at the bottom of the hill. Initially, neighbouring villagers scoffed at their audacity, doubting the possibility of such an endeavour.

Yet, with the support from the Project and the local government and their enduring resilience, they triumphed over hardship. Gajindra reflects, "We overcame every obstacle to construct this tank, standing as a testament to our collective perseverance." Today, the fruits of their labour nourish the lives of 22 households. Now, bananas, oranges, rice, and a tapestry of crops thrive in the village. Gajindra joyfully shares,

"This season, we have cultivated wheat, barley, potatoes, onions, and an array of grains and vegetables. Our hearts are filled with relief and a renewed hope."

In humble gratitude, Gajindra extends his heartfelt appreciation to all who participated in this cause. "To all who lent a helping hand and eased our suffering, we offer our deepest thanks." He gratefully acknowledges.

Gajindra's vision extends beyond the present achievements. He envisions further growth and prosperity, longing for additional support to enhance the irrigation system.

As a testament to their dreams, they have already planted 600 apple trees. Gajindra emphasises the importance of providing technical training and orientation to the locals, empowering them with the necessary skills to harness the potential of the apple plantation and secure a sustainable livelihood.

Gajindra concludes by expressing his admiration for INF, "An unwavering ally to the poor, a voice for the voiceless, and a beacon of hope. INF's compassion has traversed great distances, reaching remote villages like Kordha and tenderly soothing the wounds of those in need."





SUB-SECTOR

Health and Disability Inclusion

Disability is a significant cross-cutting concern in INF, influencing both of its health services and community programmes.

Community Based Rehabilitation (CBR)

INF Nepal empowers people with disabilities through CBR, providing treatment, physiotherapy, and assistive devices while fostering inclusion and support at the grassroots level.

People with disabilities are among Nepal's most vulnerable and least empowered groups. Within many families, a person with a disability is considered a burden and is disfavoured because disability is perceived to be a result of past life sins. They often experience stigma and discrimination, with limited access to health, education, and livelihood opportunities and full social participation. INF Nepal has been serving such groups of people to meet their disability-specific and social needs.

Rehabilitation of those with disabilities remains at the core of INF Nepal's vision and is also interlinked with other areas of its work.

Community-Based Rehabilitation programmes empower people with disabilities to improve their quality of life and play an active role in their communities.

We provide treatment, physiotherapy, and assistive devices to help people with disabilities and help to train them and their careers. We work with and through local partner organisations, SHGs, Organisation of People with Disabilities (OPD). We also coordinate with government line agencies to create a supportive environment and obtain access to mainstream support mechanisms and facilities for people with disabilities. We empower people with disabilities and their families at the grassroots level by forming and strengthening self-help groups and networks and promoting meaningful inclusion in their families and society.

639 persons with disabilities received disability cards. This will enable PWDs to get the government services such as social security allowances and other health services.

146 self-help groups were formed. Government registered Organisations of People with Disability (OPD) is growing with their capacity and advocacy. 22 OPDs of Mugu, Jumla, Surkhet, and Dang, including ward-level OPDs, were able to access the local government budget of NRs 3,328,000.

218 persons with disability received assistive devices. This will help to increase mobility, functional ability, and independence.

88 people with disability received vocational training. Vocational training has enhanced PWDs' skills resulting in higher pay and self-employment.

34 accessible infrastructures constructed and modified. This makes it safer and easier to move around and do the daily chores, including cooking, cleaning, and using the toilet.

80 people with disability engaged in income generation activity. This has helped increase in family income of the PWDs.

9,678 people sensitized on disability and inclusion.

25 health workers and FCHVs trained in disability.

34 people received Primary Rehabilitation Training (PRT)

358 people with disabilities were involved in the decision-making forum.

A new-found independence

Maya's transformation from a debilitating spinal injury to new-found independence and accessibility.

Maya*, is a 38-year-old resident of Panchapuri-9, Surkhet. She lives with her daughter, two sons, husband, and mother-in-law, relying primarily on agriculture and labour work for income.

In July 2020, a life-altering incident occurred as Maya fell from a tree while collecting fodder for her goats, severely injuring her spine. The accident left her unable to move her lower body. Despite seeking treatment at various medical facilities, her recovery remained incomplete. To cover her medical expenses, Maya borrowed NPR 700,000 from relatives.

The physical disability changed the family's dynamics and brought economic hardships. Maya required a wheelchair for mobility, but her home was not wheelchair-friendly. Her room was inaccessible, and the yard had uneven terrain. Even the simplest tasks, like using the toilet, were a challenge, requiring her family's assistance.

However, hope arrived in the form of the Access and Inclusion project. The occupational therapist assessed Maya's needs and discussed potential solutions with her family. Together, they decided to modify their home to make it more accessible. The family pledged their labour, and with the project's financial support, they transformed their home.



The modifications included a wheelchair-friendly kitchen and living room, an indoor toilet, and a water tank, all recommended by the project's occupational and physiotherapist. These changes made a world of difference in Maya's life.

Now, she can independently use the toilet, cook, wash dishes, and do laundry. Maya contributes to her family's daily chores, providing invaluable support, while her husband continues to work as a labourer to meet their needs.

With improved accessibility, Maya has found joy and fulfilment in her daily life. She appreciates the project team for transforming her life, allowing her to live with ease and happiness. Maya is grateful for these changes that have enabled her to embrace life to the fullest, enjoying every moment with new-found independence and accessibility.

** Name changed to protect person's identity.*

Mother and Child Health

Empowering mothers for health and well-being

Despite early marriage and limited education, Gauri, a mother from Kalikot, transformed her life securing a better future for her daughter.

Gauri*, a 19-year-old mother from Nuwaghar Tole, Kalikot, had to discontinue her education after grade 8 due to her family's financial constraints. Her parents, who were also not educated and poor, arranged her marriage without her understanding the implications. Within a year, she became pregnant and gave birth to a child, living in a joint family and taking on numerous responsibilities.

As the only daughter-in-law, Gauri's life revolved around household chores and farming, isolating her from the outside world. Her shyness and fear of judgment prevented her from participating in social activities.

During her pregnancy, she missed vital Health Mother Group meetings and antenatal check-ups due to household work and a lack of support from her mother-in-law. She didn't take the necessary iron, folic acid, and calcium supplements recommended for pregnant women. She followed the same regular meals as the rest of the family. Only after experiencing labour pains did she seek medical care, delivering her child with a low birth weight.

One day, a community facilitator, Ms Kalpana visited Gauri's home and noticed the child's poor health. Concerned, she



encouraged Gauri to attend mother group meetings and provided counselling to the family. They realized the baby's malnourishment was a result of neglect during pregnancy and insufficient care after birth. The health worker initiated treatment and provided ready-to-use therapeutic food.

Gauri began attending mother group meetings, where she learned about family planning, ANC/PNC check-ups, and the consequences of child marriage. She now confidently discusses birth spacing and sexual reproductive health services. Gauri has opened a Daughter Protection Account for her child and plans to provide her with a good education, advocating against child marriage.

Through small but impactful steps, Gauri is transforming her life and ensuring a brighter future for her daughter.

** Name changed to protect person's identity.*

Major Highlights

8 Health workers (1 nursing officer, and 7 ANMs) received Skilled Birth Attendance (SBA) training which contributes to reducing Nepal's maternal and child mortality rate.

21 Health workers received refresher training on Sexual Reproductive Health (SRH) services, including safe motherhood, adolescence, family planning, and menstrual hygiene.

35 FCHVs were trained on key knowledge and skills on SRH provision to facilitate Mothers Group Meetings.

11 Health Facilities (1 District Hospital, 2 Birthing Centres, and 8 Basic Health Care Centres) were provided with equipment such as ultrasound sonography machines, delivery beds, delivery sets, baby warmer, oxygen cylinders, etc.

33 teachers and nurses were trained on knowledge and skills to facilitate Comprehensive Sexuality Education (CSE) sessions in schools and supported to create action plans for conducting CSE in their classrooms.

16 religious leaders and traditional healers (ward level) received training on Sexual and Reproductive Health and Rights, Gender Equality, Sexual Gender Based Violence, and child marriage.

INF Nepal is committed to ensure the dignity and rights of all especially children, women, and vulnerable adults are protected and promoted.

Gender is one of the key cross-cutting thematic areas of INF's work. The overall goal of gender inclusion as a cross-cutting issue in INF is to 'integrate and mainstream gender throughout the organisation and its communities to achieve gender-focused development outcomes'.

INF focuses on increasing women's leadership and gender main-streaming in its projects, strengthening women's leadership and participation in the local organisation and governance structures with an intentional focus to advance the status and rights of women within INF and in communities.

INF Nepal supports the efforts of the Nepal government to address gender inequalities and commits to gender equality at the organisation level and also through its development work in Nepal. INF's project engages and empowers community people through education, awareness activity, training, campaign, orientation, and workshop, providing income generation support to uplift their livelihood status.

Through our project intervention, we aim to create a gender-friendly environment in the community. We are prioritizing social inclusion in our project and giving equal importance and voice to both genders. INF contributes to achievement of the sustainable development goals including SDG 5 Gender Equality. The project will ensure women's effective participation and equal opportunities.

Coordination and collaboration continued with government representatives at the district level. Ward-level discussions on gender-responsive planning and budgeting were also organised involving the ward office and ward-level gender network

Gender equality and women's empowerment



(which was established by the project) and the elected representatives of the local government.

POWER Project (Promotion of Women Empowerment and Rights targeting Rural Women) is a collaborative action between four ANCP partners (LWF, ADRA, CN, INF) to advance the position of women in Nepal to effectively contribute to good governance and inclusive development. This project is implemented in INF working areas in five districts namely Bajura, Mugu, Jumla, Rolpa, and Kapilvastu.

Major Highlights

178 people received various training and orientations on GBV legal aid, advocacy, case management, and counselling which helped them to identify GBV cases in the community and provide counselling and referral support.

47 GBV cases were identified, 12 cases have been resolved and 35 are referred to concerned authorities. Cases concerning gender-based violence, child marriage, polygamy, and human trafficking were identified.

48 campaign events held in occasion of the 16-days Against GBV & Women's Day, collaborating with local government & communities for gender advocacy.

183 SHGs (245 male and 2,952 female) were part of a Gender Analysis Tools study, uncovering gender disparities in community leadership and resource allocation, addressed via advocacy.

15 Regular Networking, Coordination, and collaboration meetings between local government authorities, like-minded organisations, and networks were held during this year.

3,000 Comprehensive Sexuality Education IEC materials and 250 Gender-related information flip charts were distributed in project areas, schools, and networks for community awareness.

155 students (70 M and 85 F), received orientation on gender equality, stereotypes, child marriage and chhaupadi in Rolpa, Kapilvastu, and Jumla.

Power to Empowerment

Read a remarkable story of a woman from Jumla who has been taking action to address many social issues.

Mansara*, a 37-year-old resident of Kankasundari, Jumla, has been actively taking action to address issues like violence against women, child marriage, and discrimination. She lives with her extended family of five but tirelessly works for the betterment of women and children in her community.

As a Women Human Rights Defender, Mansara has been actively involved in the POWER Project, receiving valuable training and participating in advocacy campaigns. Through group meetings, she sheds light on prevalent social problems, especially the silent suffering of women facing violence. Mansara's mission is to raise awareness about existing laws and policies among the people and elected representatives.

She recalls a time when she hesitated to intervene in cases of domestic violence, but now, she and others have found their voices. The daily wages gap between men and women in agriculture work is narrowing thanks to the efforts of human rights defenders like her.

Mansara understands that misconceptions about gender persist among the community members, emphasizing the need for change to combat violence, child marriage, and discrimination.



In just six months, Mansara and other women's rights defenders have resolved five cases of violence against women in their community, with two cases referred to the judicial committee. Her success is attributed to close coordination with local authorities, the police, women, and human rights defenders, with strong support from the community and stakeholders.

As a Women's Human Rights Defender, Mansara's confidence has grown, and she takes pride in her work. Her primary goal is to prevent discrimination, and she expresses gratitude to INF Nepal for empowering her and her community to combat gender-based violence.

** Name changed to protect person's identity.*



MAJOR HIGHLIGHTS OF ACTIVE and SATH Projects

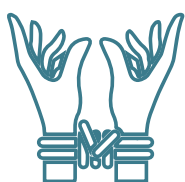


The overall goal of the SATH and ACTIVE projects is to reduce the vulnerability to human trafficking (HT) and exploitation while improving community resilience in livelihoods.

The SATH project aims to enhance community resilience in livelihoods and reduce vulnerability to HT. The ACTIVE project focuses on reducing HT and gender-based violence

(GBV) in western Nepal through community mobilisation, livelihood support, capacity-building, and government collaboration.

Both projects prioritise sustainability by integrating anti-trafficking and GBV efforts into existing community structures.



19 HT cases were prevented



271 self-help groups (SHGs) were formed and mobilised

5544 SHGs members were trained on HT and GBV



953 male members of SHGs were trained on HT, GBV, and safe migration



325 GBV cases were addressed and settled



76 SHGs members started businesses for income generation



226 FCHVs were trained on the HT and GBV



69 SHGs members were provided with vocational training on tailoring, mushroom farming, house-wiring, carpentry and beauty parlour work to increase income



29 ward-level committees for combating human trafficking were formed and mobilised to prevent HT cases



1286 adolescent boys and girls received awareness training on appropriate behaviour



179 faith-based religious leaders were trained on HT and GBV issues



74 public vehicle drivers were educated on HT and where to report HT cases



32 police were trained on HT during the orientation programmes

SUB-SECTOR

Climate Change Adaptation and Disaster Resilience

INF empowers communities for climate resilience, preparing them for disasters and enhancing adaptation to changing environments

Improving Resilience to Climate Change and Disasters

INF Nepal has been conducting different activities through the initiation of community resilience and immediate disaster response projects. The central aim is to enhance the disaster resilience capacity of the community and to provide immediate disaster response affected people of Nepal.

INF Nepal provides immediate relief, alleviates human suffering, addresses vulnerability from the impact of disaster and climate change for poor and disadvantaged people and communities, and supports to build resilient communities.

Through these projects, INF Nepal has been empowering communities to implement adaptive measures, reduce vulnerabilities and develop coping mechanisms.

Major Highlights

3 INF Hospitals (GPH, Shinning Hospitals in Surkhet and Banke) updated their Hospital Earthquake Contingency Plan and Hospital Disaster Preparedness and Response plan.

3 drill exercises were conducted in all three INF hospitals to test the Hospital Earthquake Contingency plan.

Technical support to develop District Disaster Preparedness and Response Plan (DPRP) Kapilvastu, Rolpa, Bajura and Kalikot.

91 INF staff received Basic training on climate change, Community-Based Disaster Risk Reduction, Core Humanitarian Standards, and SPHERE standards.

200 disaster response sets (tarpaulins, blankets, kitchen utensils) were prepared and stored for emergency humanitarian response.

Developed INF Nepal Monsoon Preparedness Plan and Central office and District office Climate Action plan.

INF Nepal led Disaster Preparedness Network (DP-Net Nepal) in, Gandaki province and enhanced networking for like-minded organisations.

Earthquake Drill exercise conducted in INF Nepal Central office.

Journey towards bountiful harvests

Explore Jaya Sarki's inspiring journey as he shares his remarkable journey, from struggling with meagre crop yields to bountiful harvests with INF's support.

Jaya Sarki, a dedicated farmer from Gaumul Rural Municipality 6, provides for his six-member family. As his primary occupation, he tills the land, cultivating seasonal crops such as wheat, barley, rice, and vegetables. However, despite his diligent efforts, the yield from his farm has not been sufficient to meet their needs, compelling Jaya to take on additional work as a daily wage labourer.

Jaya actively participates in the local Ujwal Dalit Farmers Group, which embodies the spirit of cooperation among like-minded individuals who share similar challenges.

Together, they endeavour to transform their agricultural practices and livelihoods. The group primarily focuses on sustainable farming techniques, crop diversification, and effective pest management.

A significant turning point in Jaya's journey came a year ago when INF intervened with a novel approach to boost his vegetable cultivation. They installed a tunnel, a transformative asset that significantly enhanced his vegetable production. The introduction of the tunnel led to a remarkable reduction in the incidence of pests, insects, and, most notably, the voracious grasshoppers that had previously wreaked havoc on his crops.



But INF's support didn't stop there. Jaya and his fellow farmers were also equipped with valuable training and essential tools, which synergistically complemented the presence of the tunnel. This holistic approach empowered Jaya with the knowledge and resources to manage crops effectively. As Jaya remarks, "After INF provided the tunnel, vegetable production has improved tremendously. Insects and grasshoppers are now far less common. The training and tools have made farming much more manageable."

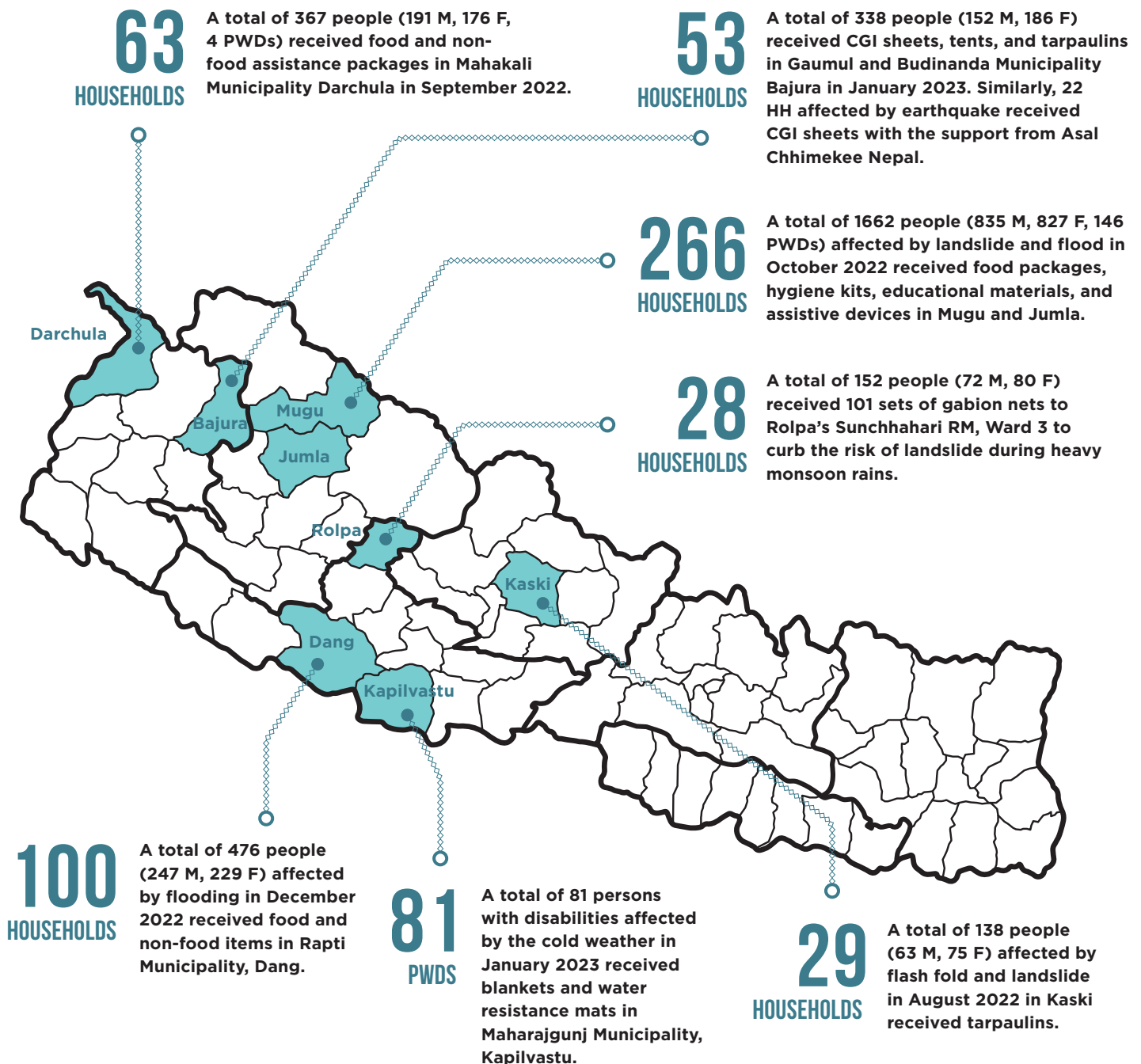
Jaya's dedication extends beyond vegetables; he also manages a thriving orchard, home to 300 lemon and 200 orange trees. With this increased yield, he is determined to venture into the nearby Martadi market, with a vision of selling his surplus produce.

Reflecting on his journey and the transformative impact of INF's support, Jaya says, "I am immensely thankful to INF for providing us with the tunnel, training, and tools. These have not only enhanced our farming but also uplifted our spirits. We have witnessed a remarkable improvement in our crop yields and, consequently, our livelihoods."



Immediate Disaster Response

INF Nepal provided immediate disaster response to affected families in eight disaster-prone districts (Mugu, Jumla, Dang, Darchula, Kaski, Kapilvastu, Bajura, and Rolpa) from July 2022 to June 2023 where a total number of 642 households (HHs) and 3385 community people (1590 M and 1795 F) were directly benefited.



The Yeti Airlines ATR72 crash near GPH on 15 January 2023, was one of Nepal's deadliest aviation accident. INF Nepal's Disaster and Medical Response Team swiftly aided the rescue efforts.



Rebuilding hope after earthquake

An earthquake brought turmoil to Man Bahadur's life. Read how INF help bring safety and gratitude in his family.

Man Bahadur Rokaya, a 56-year-old farmer from Gaumul, Bajura, had always been prepared for life's unpredictable twists. With a family of 19 members to look after, his days were a blend of tilling the earth and tending to their livestock. But there are events you can only partially prepare for.

One chilly morning in January, while he was overseeing his cattle in the open fields, the earth trembled beneath him. The ground shook so violently that he felt as if the mountains themselves were about to tumble. His heart sank with worry for his family, who were back at their house. Without a second thought, he raced back, his heart pounding with every step.

Upon reaching home, he found his family members huddled together outside. The earthquake had forced them all out in a state of panic, but they were safe. Realising that many of their neighbours were in a similar situation, they contacted the village office for assistance. However, the help they desperately needed took time, with authorities only making it to their location the following day.



Forced to spend a day and night exposed to the elements, they took shelter in a tent provided by the government office, providing a modicum of comfort amidst the chaos.

It wasn't until a few days later that relief came in the form of INF, an organisation committed to assisting communities even in the aftermath of disasters. INF supported Man Bahadur to build a two-room house for his family. This new dwelling brought both respite and renewed hope. He said, "I can't express how thankful I am for this support. We feel safe and secure now, and we are so grateful to the organisation."



Shining Nepal Multi-purpose Company (SNMC)



Shining Nepal Multipurpose Company (SNMC) is a profit-not-distributing company established with the vision of Sustainable Income, Fullness of Life on 30 June 2020. It was initiated by INF Nepal to help generate funds business initiatives to support INF Nepal’s charitable work.

Located within the Green Pastures Complex, SNMC is committed to delivering quality products and services across various business offerings. Its ultimate vision is to bring about sustainable income that can be channelled into INF Nepal’s charitable work.

SNMC provides employment opportunities to marginalised and disadvantaged individuals, including leprosy patients who often face societal exclusion and limited prospects for employment.

Moreover, organic produce such as beans and lentils, produced by SHG members from remote villages where

INF serves, are available for purchase at SNMC’s Ark Bazaar.

SNMC’s contributions extend beyond its financial support. All of its business activities are designed with a keen focus on environmental and financial sustainability.

SNMC is a shining example of a company with a strong social conscience. By not just chasing profits but directing its efforts towards serving the community. We believe, this unique approach sets a positive precedent, showcasing how the corporate sector can be a powerful driver of change and hope for people in need in Nepal.



A woman from Jumla, a member of INF facilitated SHG, in Ark Bazaar with her locally produced Jumli Marsi Rice.

SNMC’s Business Initiatives

Trading

SNMC provides a range of products, including groceries, locally sourced vegetables, hand-crafted items from Ark Bazaar, and farm-fresh produce.



Hospitality

SNMC offers diverse hospitality services, spanning from guest house “Beth Eden” to the cafeteria at the GPH main entrance.



Agriculture & Livestock

SNMC runs buffalo, poultry, pig farms, and organic vegetable farming, employing staff from underprivileged backgrounds, some affected by leprosy.



Financial Overview 2079/80 (2022-23)

Figures are in NRs/Crore (NRs 1 Crore = NPR 10 Million)

Consolidated Income and Expenditure - Summary

INCOMING RESOURCES	AMOUNT	% OF TOTAL INCOME	OUTGOING RESOURCES	AMOUNT	% OF TOTAL EXPENDITURE
			Operating Expenditure		
Overseas Grants/Donations	43.76	62.21%	Green Pastures Hospital	29.27	37.80%
Local Grants/Donations	6.72	9.55%	Shining Hospital Banke	3.36	4.34%
Hospital Local Revenue	17.89	25.43%	Shining Hospital Surkhet	4.66	6.02%
Other Local Revenue	1.96	2.79%	Community Programmes ¹	26.59	34.34%
			Central Office – Projects ²	1.27	1.64%
			Total Operating Expenditure	65.15	85.14%
Non Operational Income	0.01	0.02%	Management and Other Expenditure		
			Management & Governance	4.10	5.30%
			Designated Funds Expenditure ³	4.91	6.34%
Total Income (A)	70.34	100%	Total Expenditure before Capital Expenditure (C)	74.16	95.78%
Opening Balance⁴ (B)	7.09		Capital Expenditure/Investment		
			Green Pastures Hospital	1.76	2.27%
			Shining Hospital Banke	0.10	0.13%
			Shining Hospital Surkhet	0.08	0.10%
			Community Programmes	0.50	0.65%
			Central Office-Projects	0.32	0.41%
			Central Office	0.51	0.66%
			Total Capital Expenditure (D)	3.27	4.22%
TOTAL INCOME (A+B)	77.43		TOTAL EXPENDITURE (C+D)	77.43	100%

- Community Programmes: Projects are implemented in Banke, Jumla, Rolpa, Bajura, Mugu, Kapilvastu, Dang & Kalikot.
- Central Office - Projects: Directly managed under the central office that includes DRR, COVID Response and partnership with Government.
- Designated Funds Expenditure includes non-programmatic cost and depreciation of fixed assets.
- Opening Balance utilized to cover excess expenditure than income is shown here (Balance of Fixed Assets Management Fund NRs. 4.35 crore to cover depreciation cost and remaining NRs. 2.74 for other expenditure).

INDEPENDENT AUDITOR'S REPORT
International Nepal Fellowship

Opinion

We have audited the accompanying financial statements of **International Nepal Fellowship, Nepal** (herein referred to as **INFN**, or the NGO), which comprise the Statement of Financial Position as at Ashad 31, 2080, (July 16, 2023), the Fund Accountability Statements, the Statement of Income and Expenditure and the Statement of Cash Flows for the year then ended on that date, and a summary of the significant accounting policies and notes to accounts (hereafter referred to as "the financial statements").

In our opinion and to the best of our information and according to the explanations given to us, the aforesaid the financial statements presents fairly, in all material respects, the financial position of the INFN as at Ashad 31, 2080 (July 16, 2023), and its financial performance, cash flows for the year then ended, and a summary of significant accounting policies and notes to accounts, in accordance the relevant accounting practices and accounting policies disclosed in notes to account and other prevailing laws.

Basis for Opinion

We conducted our audit of the financial statements in accordance with Nepal Standards on Auditing (NSAs). Our responsibilities under those Standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the NGO in accordance with the Handbook of The Code of Ethics for Professional Accountants issued by The Institute of Chartered Accountants of Nepal (ICAN), and we have fulfilled our other ethical responsibilities in accordance with the ICAN's Handbook of The Code of Ethics for Professional Accountants. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion on the financial statements.

Key Audit Matters

Key audit matters are those matters that, in our professional judgment, were of most significance in the audit of the financial statements of the current period. These matters were addressed in the context of the audit of financial statement as a whole, and in forming the auditor opinion thereon, and the auditor does not provide a separate opinion on these matters.

We have determined that there are no any key audit matters to communicate in our report.

Information Other than the Financial Statements and Auditor's Report Thereon

The NGO Management is responsible for the preparation of the other information. The other information comprises the information included in the Management report and other progress reports but does not include the financial statements and our auditor's report thereon.

Our opinion on the financial statements does not cover the other information and we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained during the course of our audit or otherwise appears to be materially misstated.

If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Responsibility of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial Statements in accordance the relevant accounting practices and accounting policies disclosed in notes to account and for such internal control as management determines is necessary to enable the preparation of the financial statements that are free from material misstatement, whether due to fraud and error.

In preparing the financial statements, management is responsible for assessing the NGO ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the NGO or to cease operations, or has no realistic alternative but to do so.

The members of Executive Committee are responsible for overseeing the NGO financial reporting process.



Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with NSAs will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with NSAs, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal controls relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the NGO internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the NGO ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the NGO to cease to continue as a going concern.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

We also provide those charged with governance with a statement that we have complied with relevant ethical requirements regarding independence, and to communicate with them all relationships and other matters that may reasonably be thought to bear on our independence, and where applicable, related safeguards.

Report on Other Legal and Regulatory Requirements

Based on our examination, we would like to further report that:

- i. We have not come across cases where NGO had carried any activities contrary to its objectives.
- ii. We have not come across cases where NGO is in non-compliance of chapter 17 of Income Tax Act, 2002.

Place: Kathmandu
Date: 2023/09/14
UDIN: 230914CA00485BqGlp

For, S. R. Pandey & Co.
Chartered Accountants


Arun Raut, FCA
Partner



International Nepal Fellowship Nepal: Consolidated Financial Statements
Statement of Income and Expenditure for the year ended 16 July 2023
(In Nepali Rupees)

	Note	Unrestricted - Operating Funds	Unrestricted - Designated Funds	Restricted - Operating Funds	Restricted - Other Funds	Capital - Endowment Funds	Total 2022/23 Nrs	Total 2021/22 Nrs
Incoming resources								
Incoming resources from generated funds								
Donor Grants	3	2,985,114	-	466,713,931	12,478,125	-	482,177,170	545,497,956
Donations and Gifts	3	29,799	164,150	18,616,952	3,743,366	-	22,554,267	20,051,560
Donated Equipment	4	-	-	1,537,450	-	-	1,537,450	86,450
Local and Other Operating Income		-	-	-	-	-	-	11,223,644
Investment Income	5	9,395,957	1,538,055	2,324,517	280,239	-	13,538,768	15,367,568
Other incoming resources	6	733,209	-	175,897,590	6,907,735	-	183,538,534	160,142,249
Total incoming resources		13,144,079	1,702,205	665,090,440	23,409,465	-	703,346,189	752,369,427
Resources expended								
Activities for Raising Funds								
Cost of Raising Grants and Donations		-	-	-	-	-	-	15,919,452
Cost of Local Income Generating Activities		-	-	-	-	-	-	-
Total Activities for Raising Funds		-	-	-	-	-	-	15,919,452
Charitable activities								
Programme Expenditure								
Livelihood & Resilience		-	-	183,165,699	-	-	183,165,699	211,209,243
Mother and Neonatal Child Health		-	-	14,078,613	-	-	14,078,613	3,952,761
Disability Inclusion		-	-	59,673,795	-	-	59,673,795	31,878,349
Leprosy and Other Neglected Tropical Diseases		-	-	79,889,445	18,693,306	-	98,582,751	74,047,588
Climate Change Adaptation and Disaster Resilience		-	-	4,619,065	-	-	4,619,065	1,591,549
Ear Disorders		-	-	46,259,058	-	-	46,259,058	38,511,088
Disability and Rehabilitation		-	-	94,649,472	-	-	94,649,472	66,285,582
Palliative Care and Chronic Diseases		-	-	64,300,153	-	-	64,300,153	29,703,132
Obstetric Fistula		-	-	21,594,715	-	-	21,594,715	19,471,393
Hospital Services Support		-	-	-	3,775,110	-	3,775,110	3,458,000
Community Outreach		-	-	27,085,543	-	-	27,085,543	37,186,546
Disaster Response		-	-	5,794,676	-	-	5,794,676	22,702,379
COVID-19 Response		-	-	3,264,049	-	-	3,264,049	51,160,877
Poor Funds		-	-	-	10,024,673	-	10,024,673	13,779,839
Hospital Development		-	-	8,938,409	-	-	8,938,409	4,409,689
Others Charitable activities		-	-	5,704,110	-	-	5,704,110	6,722,143
		-	-	619,016,802	32,493,090	-	651,509,892	604,120,159
Designated Funds (Income)/Expenditure								
Staff Scholarship & Development Costs		-	(1,249,491)	-	-	-	(1,249,491)	(926,711)
Staff Retirement Benefit Scheme		-	193,275	-	-	-	193,275	147,700
Staff Redundancy Expenditure		-	(1,407,017)	-	-	-	(1,407,017)	(918,311)
Staff Hospitalisation & Death Insurance Scheme		-	(280,214)	-	-	-	(280,214)	26,298
Fixed Asset Depreciation Charge		-	43,528,045	-	-	-	43,528,045	36,072,470
Hospital Development		-	-	-	-	-	-	-
Other Designated Funds Expenditure		-	8,380,348	-	-	-	8,380,348	1,407,176
		-	49,164,947	-	-	-	49,164,947	35,808,622
Total charitable activities		-	49,164,947	619,016,802	32,493,090	-	700,674,838	639,928,781
Other (Income)/expenditure								
Governance and Management Cost		18,151,343	-	22,268,512	562,617	-	40,982,473	30,034,355
Foreign currency (gain)/loss		7,110	-	(9,402)	-	-	(2,292)	1,884
(Gain)/Loss on disposal of fixed assets		-	-	(82,000)	-	-	(82,000)	(1,106,764)
Total Other (Income)/expenditure		18,158,453	-	22,177,111	562,617	-	40,898,181	28,929,454
Total outgoing resources		18,158,453	49,164,947	641,193,913	33,055,707	-	741,573,019	684,777,687
Net incoming/(outgoing) resources before transfers		(5,014,374)	(47,462,741)	23,896,527	(9,646,241)	-	(38,226,830)	67,591,740
Transfers								
Fixed Assets Management Fund Transfer		(5,109,718)	32,688,401	(27,537,183)	(41,500)	-	(0)	0
Gross Transfer between Funds		6,263,862	(19,820,803)	7,917,532	5,639,410	-	0	(0)
Total Fund Transfers		1,154,144	12,867,598	(19,619,651)	5,597,910	-	0	(0)
Net movement in funds		(3,860,230)	(34,595,144)	4,276,875	(4,048,332)	-	(38,226,830)	67,591,740
Total funds brought forward	20	13,538,842	614,737,217	27,200,259	7,272,933	9,607,000	672,356,250	604,764,510
Total funds carried forward	20	9,678,612	580,142,073	31,477,134	3,224,601	9,607,000	634,129,420	672,356,250

All income and outgoing resources arise from continuing activities

There are no recognised gains or losses, or movements in funds, other than those disclosed above

Approved on behalf of the INF Nepal Board by:

CA Manju Thapa
Director - Finance
Date: 14-04-2023

Krishna Bahadur Adhikari
Executive Director

Dhansu Lama
Treasurer

**INTERNATIONAL
NEPAL
FELLOWSHIP**

Ram Chandra Twati Timothy
Chairman

As per our audit report
S.R. PANDEY & Co.
Chartered Accountants
Kathmandu
Partner
Chartered Accountants

International Nepal Fellowship Nepal: Consolidated Financial Statements
Statement of Financial Position as at 16 July 2023
(In Nepali Rupees)

		2022/23	2021/22
	Note	Nrs	Nrs
ASSETS			
Non - Current Assets			
Property, Plant and Equipment	8	427,625,705	424,836,456
Capital Work in Progress		895,094	14,678,797
Intangible Assets		227,319	72,508
		<u>428,748,118</u>	<u>439,587,762</u>
Other non current assets			
Long Term Receivables		22,043,299	22,043,299
Total Non - Current Assets		450,791,417	461,631,061
Current Assets			
Stocks	9	25,763,441	17,820,257
Debtors and prepayments	10	11,006,579	11,330,668
Debtor, receivable from INF International		28,479,578	23,221,202
Cash on deposit, at bank and in hand	12b	223,482,808	275,795,548
Total Current Assets		288,732,406	328,167,675
Total Assets		739,523,824	789,798,736
LIABILITIES & FUNDS			
Funds			
Unrestricted Funds			
General Fund		9,678,612	13,538,842
Designated Funds		580,142,073	614,737,217
Restricted Operating Funds		31,477,134	27,200,259
Restricted Purpose Funds		3,224,601	7,272,933
Capital Endowment Funds		9,607,000	9,607,000
TOTAL FUNDS	20	634,129,420	672,356,250
Creditors: amounts falling due within one year	11	105,394,404	117,442,486
Provisions	14	-	-
Total Current Liabilities		105,394,404	117,442,486
Total Liabilities & Funds		739,523,824	789,798,736

Approved on behalf of the INF Nepal Board by:

As per our audit report


CA Manju Thapa
Director - Finance
Date: 14-09-2023


Krishna Bahadur Adhikari
Executive Director


Dhana Lama
Treasurer


Ram Chandra Twati Timothy
Chairman


**INTERNATIONAL
NEPAL
FELLOWSHIP**


Anun Raut, FCA
Chartered Accountants Partner
S.R. Pandey & Company
Chartered Accountants
Kathmandu

International Nepal Fellowship Nepal: Consolidated Financial Statements

Cash Flow Statement for the year ended 16 July 2023

(In Nepali Rupees)

	Note	2022/23 Nrs	2022/23 Nrs	2021/22 Nrs	2021/22 Nrs
Net cash inflow/(outflow) from operating activities	12a		(33,245,107)		(27,234,519)
Returns on Investment and servicing of finance					
Investment income		-	-	-	-
Interest received on bank deposits		13,538,768		15,367,568	
Other interest received		-	-	-	-
Interest payable		-	-	-	-
			13,538,768		15,367,568
Capital expenditure and financial investment					
Payments to acquire tangible fixed assets		(32,688,401)		(111,398,498)	
Receipts from sale of tangible fixed assets		82,000		10,474,010	
Acquisition of fixed asset investments		-	-	-	-
Disposal of fixed asset investments		-	-	-	-
			(32,606,401)		(100,924,487)
Net cash inflow/(outflow) before management of liquid resources and financing			(52,312,740)		(112,791,438)
Management of liquid resources					
Cash used to increase short term deposits		-	-	-	-
Cash from a decrease in short term deposits		-	-	-	-
			-		-
Financing					
Increase in loans		-	-	-	-
Decrease in loans		-	-	-	-
Movement in endowments		-	-	-	-
Transfers between funds		0		(0)	
			0		(0)
Increase/(decrease) in cash in the year			(52,312,740)		(112,791,438)
Net cash resources at the beginning of the year	12b		275,795,548		388,586,987
Net cash resources at the end of the year	12b		223,482,808		275,795,548

Approved on behalf of the INF Nepal Board by:

As per our audit report

CA Manju Thapa
Director - Finance
Date: 14-09-2023

Krishna Bahadur Adhikari
Executive Director

Dhana Lama
Treasurer

Ram Chandra Twati Timothy
Chairman



Arun Raut, FCA
Partner
Chartered Pandey & Company
Chartered Accountants
Kathmandu

Governance and Management

Governance

General Assembly

INF Nepal General Assembly (GA) is the highest body of the organisation. The role of the GA is to approve the annual report, audit report, plans and budgets. Elect office bearers of Executive Committee, ratify documents presented in General Assembly, carry out actions and make decisions as required by the Statute, Act and Regulations and amend Statute if necessary.

In this fiscal year the GA approved and made the decision on the following:

- Minutes of 30th GA meeting
- Annual Report for 2078-79
- Annual Plans and Budget for 2079-80
- Selection of the Auditor
- Renewal of the organisation
- Renewal of accreditation at Social Welfare Council (SWC)
- Election of 3 Members for the Executive Committee

Executive Committee (Board)

The Board is the governing body of the organisation. It comprises of 9-11 members nominated/elected by the GA where one female member is mandatory. At least three meetings need to be held in a year. The Board oversees the work of the organisation as a steward and provides strategic direction, decisions and guidance to management ensuring organisational level accountability and transparency. It presents the annual report, audit report, plans and budget each year to the GA for endorsement. The Board also monitors the programmes and services of the organisation and encourages management to better the outcomes and provide feedback during the filed visits.

This fiscal year the Board had 6 meetings. The program of 70 years celebration was approved, the issues raised in Audit Committee meeting were taken into consideration and management was actioned accordingly. Decision and delegation of authority for the renewal of Tax Exemption Certificate at IRD Kaski. Approval of the tripartite Project Agreements with SWC. Approved of the partnership strengthening plans of the ED. Approved the changes in the Employment Manual and assets scrap proposal, made field visit to Banke Shining Hospital and Community Health & Development projects in Janaki and Raptisonari RMs, held Governance–Management workshop and finalized organisational statement on practicing appropriate level decision making authority with accountability at all levels. The Board also had time together with senior staff, approved annual plans and budget for 2080-81 for tabling to the GA etc.



RC Timothy
Chairperson



Rajendra Adhikari
Vice-Chairperson



Madhu Thapa
Secretary



Dhana Lama
Treasurer



Karishma Bhattarai
Member



Bhim K Shrestha
Member



Yam Joshi
Member



Madhav Neupane
Member



Dr Shiva Ram Srimal
Member



Dr Deependra Gautam
Advisor

Audit & Risk Committee (ARC)

The ARC is a Sub-Committee of the Board. As such, the Chairperson of the ARC reports to the Board regularly regarding the major issues and observations that come from both internal and external audits. The ARC is a part of the overall framework of the governance of INF Nepal. It reviews annual audited accounts and internal and external auditor's reports and analyses organisational risks. It works closely with the Board and assists the Board in fulfilling its oversight responsibilities.

This year, ARC had two meetings, and the proposal for Purpose, Status, Functions and Procedures (PSFP) review was taken to the Board.



L-R: Sujata Adhikari, Manju Thapa, Dhana Lama, Krishna Adhikari, Arjun Bhandari, Prakash Chhetri, RC Timothy

Strategic Management Team (SMT)

The Strategic Management Team has a delegated authority by INF Nepal Board to oversee and manage the organisation. The purpose of this Team is to facilitate and ensure good coordination and cooperation between different parts and departments of the organisation.

The SMT develops strategic plans in line with mandate, vision, mission of the organisation, oversees the liaison and coordination with Government, line agencies, funding partners, stakeholders and it is also responsible for overall management, safety and security of the organisation and its assets. It also ensures appropriate allocation of the resources (finance, land, building or any other) required for implementation of operational plans.

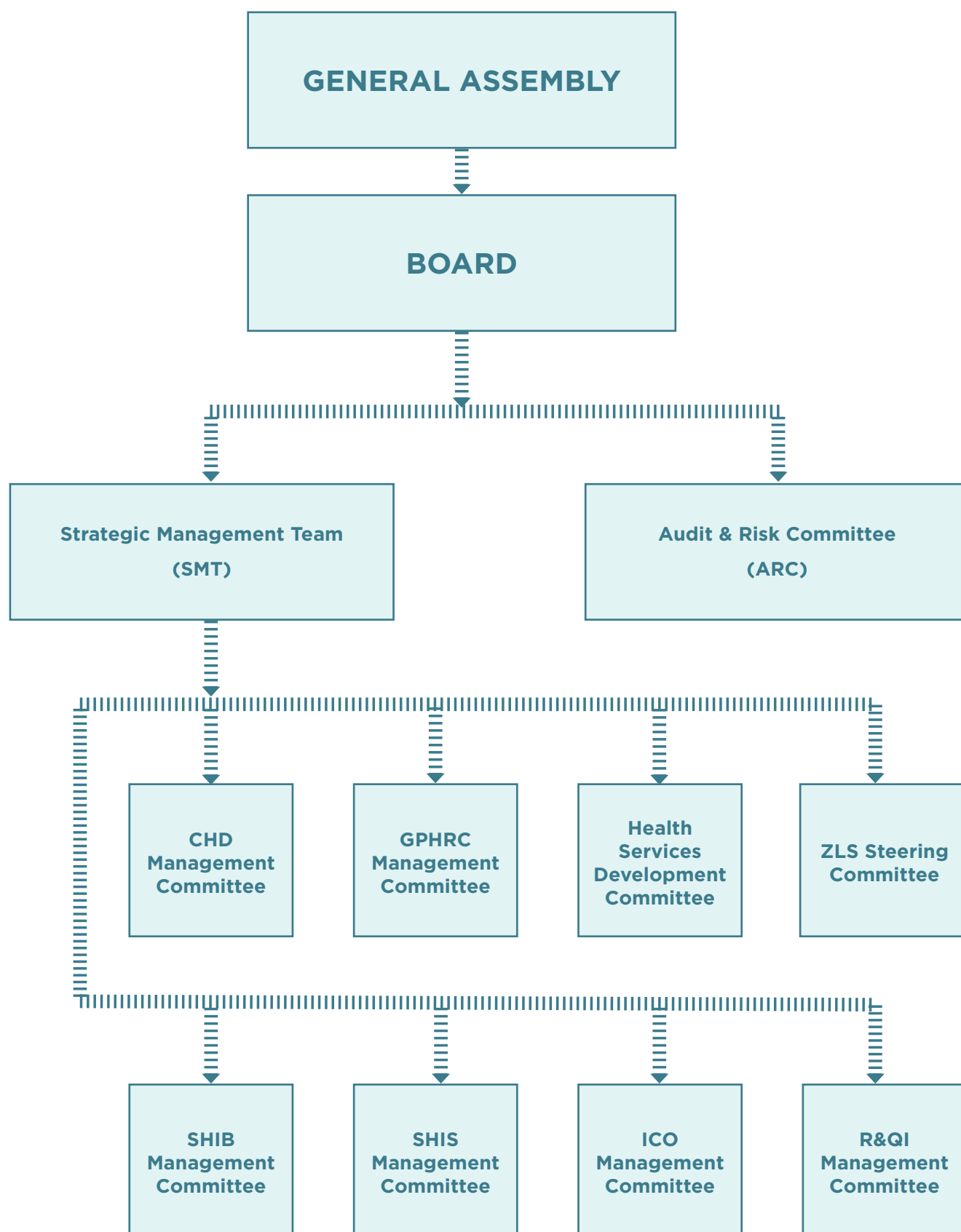
This year nine SMT meetings were held. The major issues tabled by SMT to the Board were: organisational Identity content and structure finalization, review organisational structure and make it relevant, finalization of the of Care for Cure campaign, approval of annual plans and budget followed by departmental plans, finalize and ensured 70 years celebration programme, developed



L-R: Lekhnath KC, Manju Thapa, Krishna Adhikari, Sean Sokhi, Dr Arun K Budha

5 year Project Agreements with SWC in coordination with INF International, finalized and launched Zero Leprosy Strategy, approval of new funding proposals and projects, approved the plan of the impact assessments of the CHD work and made responses to the recommendation of final evaluation of SWC Projects.

Organogram



Acronyms

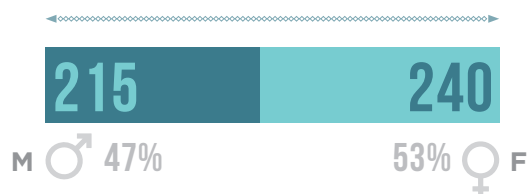
CHD: Community Health & Development
 GPHRC: Green Pastures Hospital & Rehabilitation Centre
 ZLS: Zero Leprosy Strategy
 ICO: INF Nepal Central Office

SHIB: Shining Hospital INF Banke
 SHIS: Shining Hospital INF Surkhet
 R&QI: Research & Quality Improvement

Staff Distribution

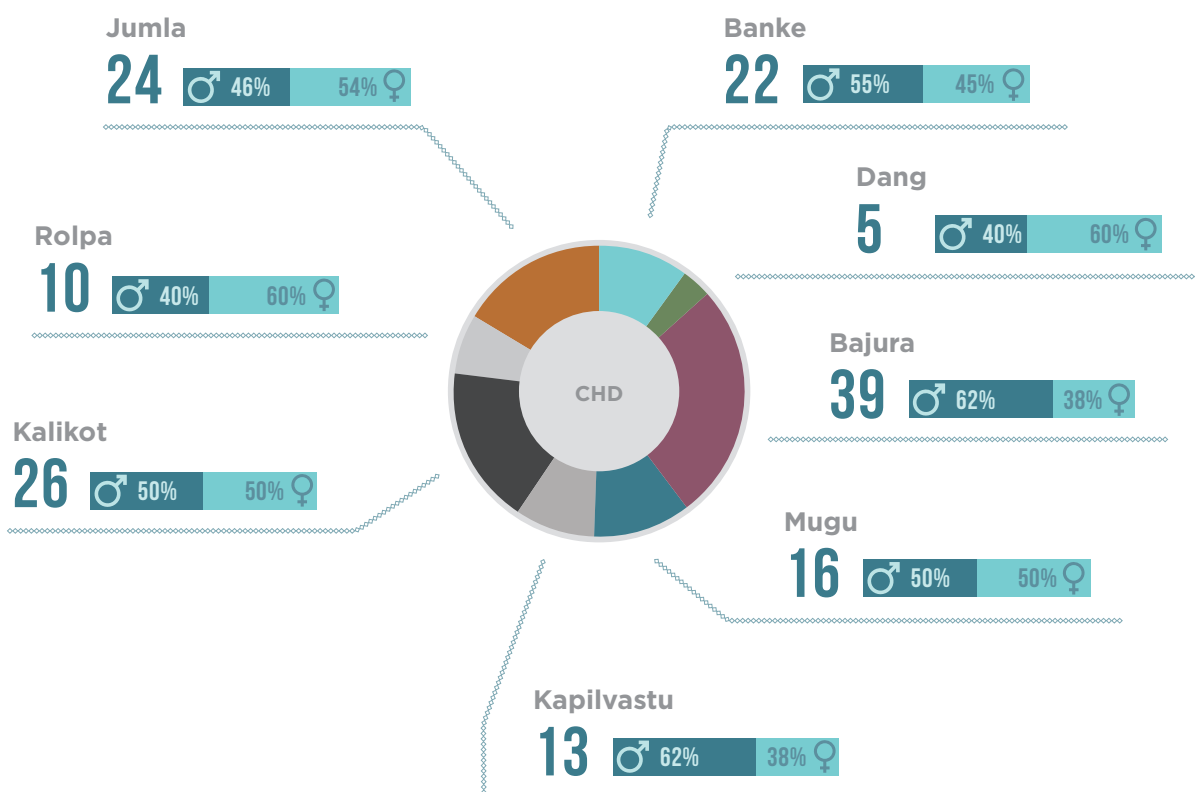
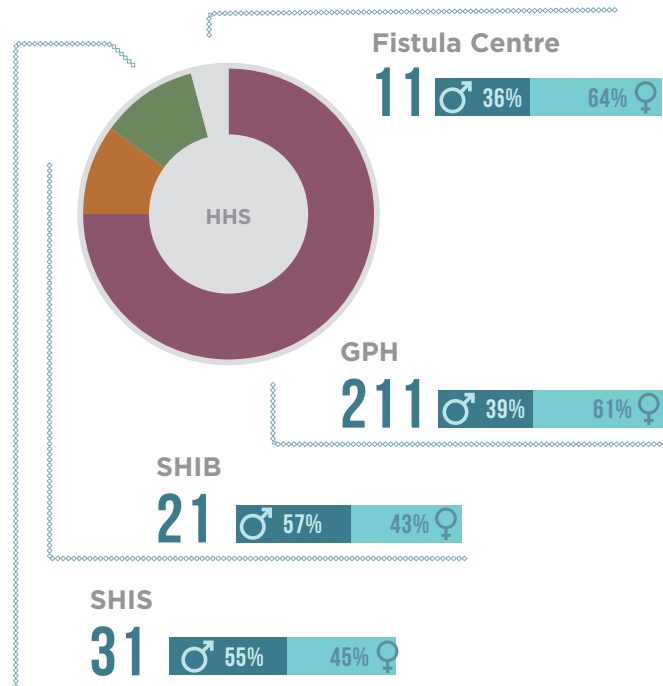
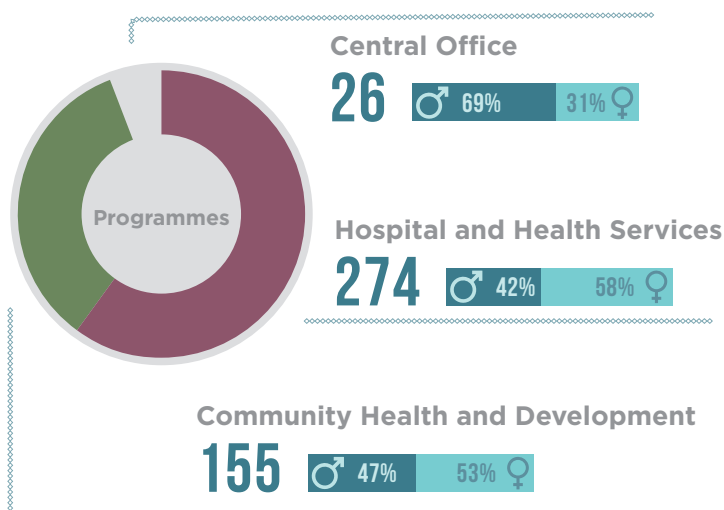
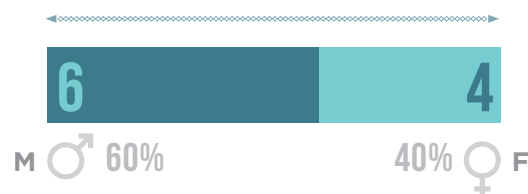
Total Staff

455



Total Expatriates

10



Partnership

INF Nepal works in Nepal through agreements with the Government of Nepal's Social Welfare Council that are jointly signed by INF Nepal and INF International. INF International is responsible for international funding and the evaluation of INF Nepal's projects, and the recruitment and ongoing care of its expatriate volunteers.

INF Nepal's Direct Partner



INF International

Wider INF Family



INF UK



INF International
INF Canada



INF Australia



INF New Zealand

International Partners and Institutional Donors



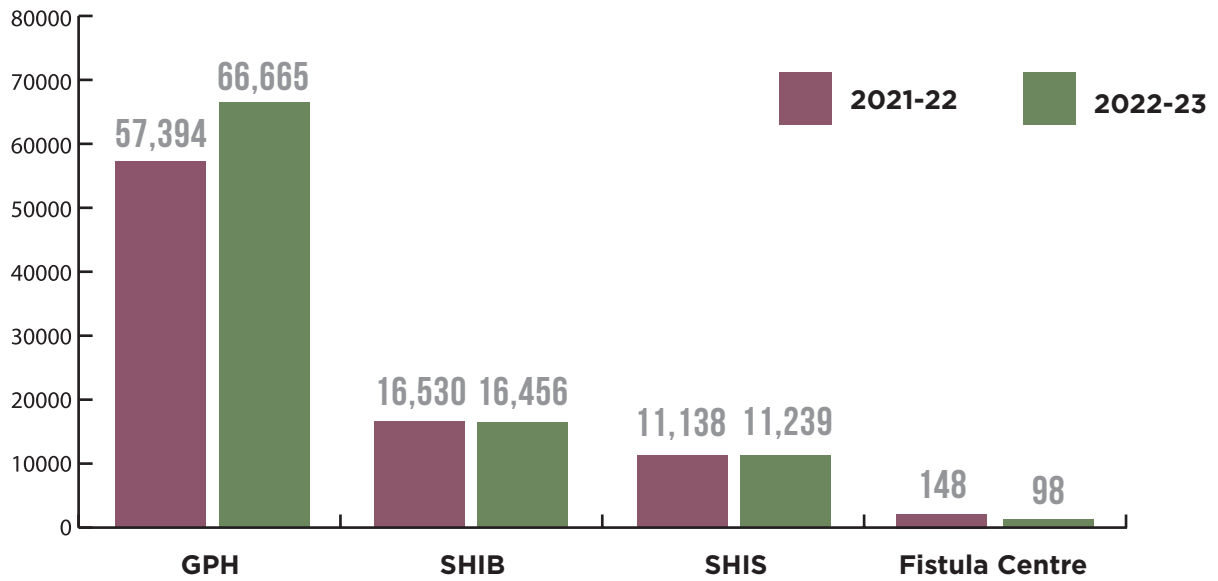
National and Local Partners



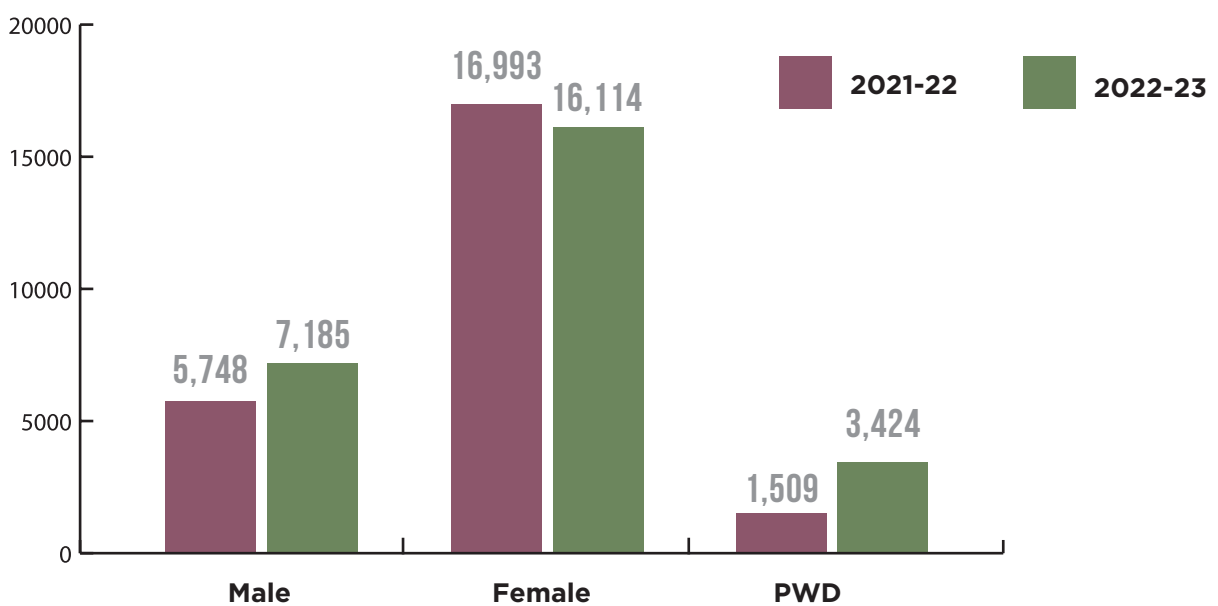
Ministry of Health and Population
Ministry of Women, Children and Senior Citizens
Ministry of Social Development, Gandaki Province
Ministry of Population, Health and Family Welfare, Lumbini Province
Pokhara Metropolitan City

We are also very grateful for all the other international, national, local and individual partners who are not listed here - those who are generous and often anonymous.

Comparative analysis of patients served in four hospitals



Comparative analysis of beneficiaries of CHD programmes regarding gender and people with disability (PWD)



ACRONYMS

ACTIVE	Action at Community on Trafficking Intervention and Violence End
AHT	Anti Human Trafficking
ANM	Auxiliary Nurse Midwife
ANC/PNC	Antenatal Care / Postnatal Care
ANCP	Australian NGO Cooperation Program
ADRA	Adventist Development & Relief Agency
ARC	Audit & Risk Committee
BMS	Baptist Missionary Society
BS	Bikram Sambat
CBID	Community Based Inclusive Development
CBO	Community Based Organisation
CBR	Community Based Rehabilitation
CC	Climate Change
CCA	Climate Change Adaptation for Sustainability
CDID	Community and Disability Inclusive Development
CGI	Corrugated Galvanised Iron
CHD	Community Health and Development
CIDA	Community-led Inclusive Development Approach
CN	Caritas Nepal
CT Scan	Computed Tomography Scan
DFAT	Australian Government's Department of Foreign Affairs and Trade
DHIS-2	Dynamic Host Information System (Health Information Management System)
DPO	Disabled Peoples' Organisation
DRR	Disaster Risk Reduction
DP-Net	Disaster Preparedness Network
DS	Down Syndrome
DSL	Delayed Speech and Language
EAPC	European Association for Palliative Care
ED	Executive Director
EDUCATE	Economic Development of Underprivileged Communities through Agricultural and Technological Empowerment
F	Female
FCHV	Female Community Health Volunteer
FY	Fiscal Year
GBV	Gender Based Violence
GDD	Global Development Delay
GoN	Government of Nepal
GPH/GPHRC	Green Pastures Hospital and Rehabilitation Centre
GWT	Gurkha Welfare Trust
HEAL	Cutting-edge treatments and care to end suffering and disability caused by Leprosy, Lymphatic Filariasis
HH	Household
HHS	Hospital and Health Services
HSS	Health Support Services
HT	Human Trafficking
IAPCON	International Conference of Indian Association of Palliative Care

ICO	INF Nepal Central Office
IDEAL	Inclusive Development, Empowerment and Livelihood
INF	International Nepal Fellowship
Int'l	International
IRD	Inland Revenue Department
LWF	Lutheran World Federation
M	Male
MD	Muscular Dystrophy
MND	Motor Neurone Disease
NAPCare	Nepalese Association of Palliative Care
NGO	Non-Government Organisation
NRs/NPR	Nepali Rupees
OPD	Organisation of Person with Disability
PAL	People Affected by Leprosy
PC/PCCD	Palliative Care / Palliative Care and Chronic Disease
POWER	Promotion of Women Empowerment and Rights Targeting to Rural Women
PRT	Primary Rehabilitation Training
PSFP	Purpose, Status, Functions and Procedures
PWD	Person with disability
RM	Rural Municipality
R&QI	Research and Quality Improvement
SATH	Strengthening Against Trafficking of Human
SAMRIDHI	Community Based Inclusive Development
SBA	Skilled Birth Attendee
SCI	Spinal Cord Injury
SDG	Sustainable Development Goal
SHG	Self-Help Group
SHIB	Shining Hospital INF Banke
SHIS	Shining Hospital INF Surkhet
SIMPLE	Sustainable Improvement in People's Livelihood through Empowerment
SMT	Strategic Management Team
SRH	Sexual Reproductive Health
SRIJANA	Creating Opportunities for Youths and Migrant Returnees amidst COVID-19
SUNITA	Ensuring access to palliative care among rural community
SWC	Social Welfare Council
TBI	Traumatic Brain Injury
WASH	Water, Sanitation and Hygiene
WEAL	Women's Empowerment And Livelihood
Y4M	Youth for Economic Empowerment and Resilience Mugu
ZLS	Zero Leprosy Strategy



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