

# **CARE NEPAL**

**ANNUAL REPORT 2020** 



## **CARE INTERNATIONAL**

CARE is a leading humanitarian organization committed to saving lives and fighting poverty and social injustice. It has been working in over 100 countries across the globe. Working alongside a vast network of partners globally, CARE works to rebuild and improve lives of the most disadvantaged, poor and vulnerable communities. Through community based efforts, CARE works to prevent spread of diseases, increase improved health awareness and access to safe drinking water and sanitation, build awareness and bring communities together to expand economic opportunities as well as access to natural resources while protecting the environment. CARE seeks to influence policies and challenge social norms that affect the lives of women, children and the most vulnerable communities through strong networking of partners, advocacy and awareness on gender and women's rights, leadership campaigns and skills trainings. CARE also works actively in emergencies by providing aid to survivors of war and natural disasters. CARE has zero tolerance towards any form of gender based violence, sexual harassment and fraud; with a strong belief in equality, diversity and inclusion.

CARE Nepal aims to ensure that 2.5 million women and girls of Nepal have economic, social and political power and resilience to overcome poverty and social injustice by 2025.

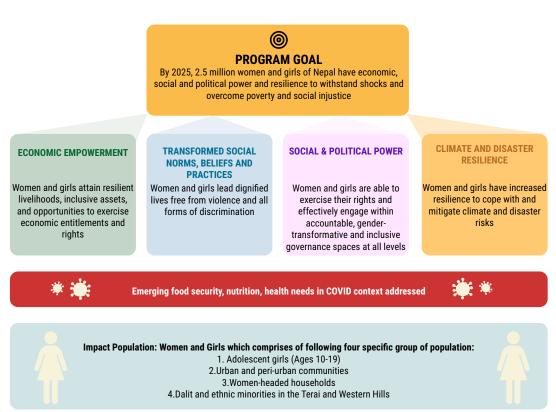
## **CARE NEPAL**

CARE started its operations in Nepal in 1978 and is one of the first international aid agencies to work in the country. During the last 4 decades, CARE Nepal has been working with the most vulnerable communities of Nepal to address the issues of poverty and social injustice, along with challenging harmful social practices, building capacities and empowering livelihoods. Today CARE Nepal works to address systemic and structural causes of poverty and social injustice such as discrimination based on gender, caste, class, ethnicity or geography. CARE supports humanitarian actions to address vulnerabilities from climate change and natural disasters. CARE works with marginalized women and adolescent girls to ensure their empowerment, wellbeing and dignity through social transformation and access to quality social and economic services. To achieve this, CARE partners with a range of stakeholders, including local NGOs and other civil society organizations, social movement, government agencies, research and academic institutions, private sector and donors to support the most vulnerable communities and populations. CARE Nepal aims to ensure that 2.5 million women and girls of Nepal have economic, social and political power and resilience to overcome poverty and social injustice by 2025.

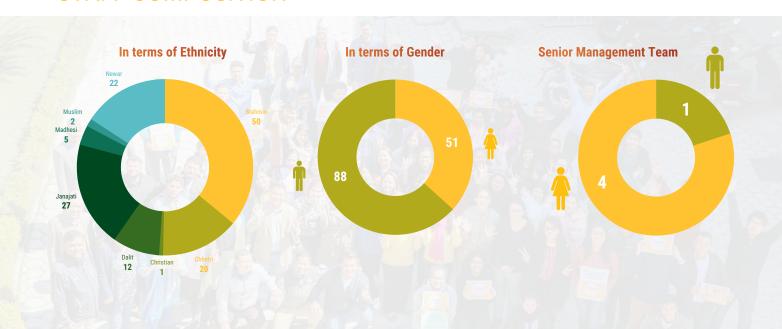
# TRANSITIONING INTO A NEW STRATEGY FRAMEWORK 2020-2025

CARE's commitment to saving lives and fighting poverty with a focus on justice and equality for women and girls continues. Yet, with the advent of the COVID-19 pandemic in early 2020, CARE Nepal has adapted and re-focused its strategic framework for the coming five years. We recognize that the challenges facing Nepal's most vulnerable women and girls and their families will grow and evolve. Therefore, we continue to tackle not only the immediate health needs posed by this virus but also the secondary effects. Significant consultations and assessments shaped our planning for this new strategy throughout 2019, and the arrival of COVID-19 only sharpened our emerging and innovative thinking, leading to responsive programming and operations. Even as we review accomplishments from the fiscal year 2020, we look forward to sharing this vision and focus for the next five years in the days to come. However, we remain committed to reviewing the strategy midway to assure authenticity to rapidly changing contexts.

## CARE NEPAL'S THEORY OF CHANGE



## STAFF COMPOSITION





17 PROJECTS + 49 DISTRICTS = 852,510 (TOTAL DIRECT REACH IN 2020)



Reached

**40,952 people** to support their food & nutrition security and resilience to climate change, indirectly benefiting a further 1,318,121 people



Reached **584,840 people** directly to support women's rights to sexual, reproductive and maternal health, indirectly benefiting a further **1,324,995** people



Reached 218,524
disaster affected
people with lifesaving
humanitarian assistance,
indirectly benefiting a further
600 people



Reached **55,945 people** directly with the Water,
Sanitation and Health (WASH) support, indirectly benefiting a further **1,209 people**.



Reached **4,962 people** directly to support women and girl's rights to a life free from violence, indirectly benefiting a further **12,514 people** 



Reached 14,233 women and girls directly to promote their access to and control of economic resources, indirectly benefiting a further 30,116 people



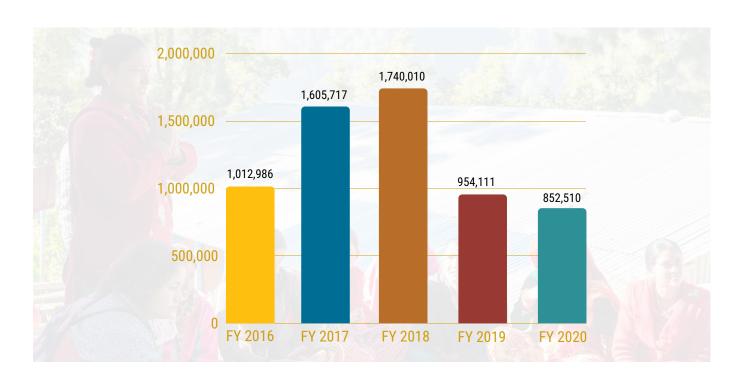
Reached 1,645 adolescent

**girls** directly to support their right to education, indirectly benefiting further

504 people

## TOTAL PEOPLE REACHED THROUGH CARE'S PROGRAMS

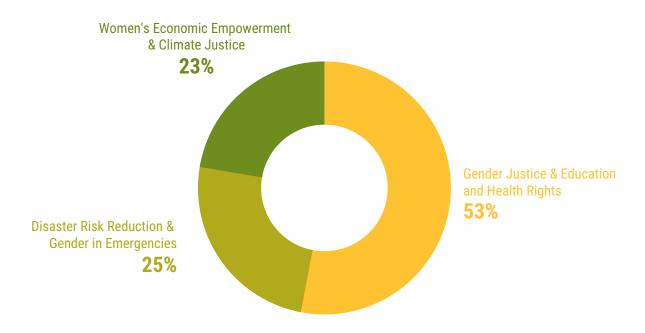
(FY 2016 to 2020)



# TOTAL NUMBER OF PEOPLE DIRECTLY REACHED IN EACH THEMATIC AREA IN 2020

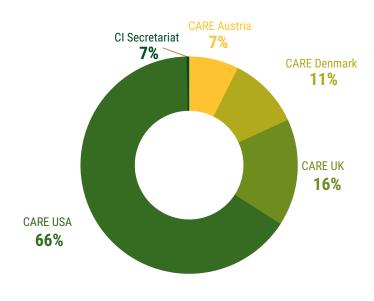


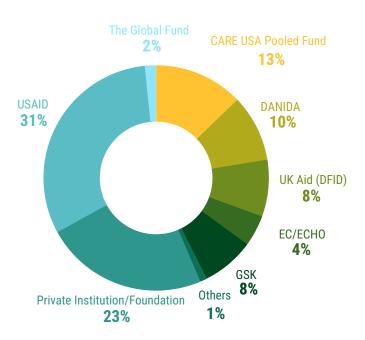
# CARE NEPAL'S PROGRAM-WISE EXPENSES



# CARE'S MEMBER PARTNER WISE EXPENSES

# CARE NEPAL'S DONOR WISE EXPENSES





# CARE Nepal Income and Expenditure Statement

for the period ended on 31 Ashad 2077

(Corresponding to period ended on 15 July 2020)

Particulars	Sch. no.	Current \	ear ear	Previous Year	
		NPR	USD	NPR	USD
Revenue					
Grants & Contracts Direct Revenue	10	498,375,016.43	4,379,840.52	934,856,294.11	8,394,203.52
Intra-Company Grants and Support	11	270,238,823.20	2,038,937.16	260,629,860.15	2,357,028.86
Contributions/Grants from CI Members	12	21,356,273.57	188,400.01	68,186,843.09	620,301.96
Total		789,970,113.20	6,607,177.69	1,263,672,997.35	11,371,534.34
Less: Expense			The state of the second	■ C.	
Sub-Grant Expenses	13	261,526,643.28	2,301,829.24	507,279,875.33	4,552,343.04
Personnel expenses	14	349,202,448.84	3,066,052.27	421,907,098.96	3,777,269.50
Materials/services and consumables	15	52,510,943.51	455,506.76	162,546,664.09	1,463,665.55
Intra Company Grants and support	16	25,358,884.80	221,785.84	33,465,060.08	303,113.26
Professional Services	17	21,959,381.40	191,735.14	49,038,478.85	438,954.83
Travel and Transportation	18	18,694,366.69	166,074.56	46,186,758.45	414,232.26
Financing/Miscellaneous	19	3,676,043.84	32,396.26	10,270,836.38	92,834.27
Occupancy related expenses	20	16,038,110.97	140,891.05	17,312,556.47	155,293.42
Equipment Purchased	21	3,481,820.36	31,072.14	20,414,313.18	184,349.00
Realized exchange gains/losses	22	37,521,469.50	(165.57)	(4,748,644.43)	(10,520.79)
Total		789,970,113.20	6,607,177.69	1,263,672,997.35	11,371,534.34
Surplus/(Deficit)		-	_	~	-21

Notes to the Accounts

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Schedules 10 to 22 and 23 form an integral part of this Income and Expenditure Statement

This is the financial statements referred to in our report of even date

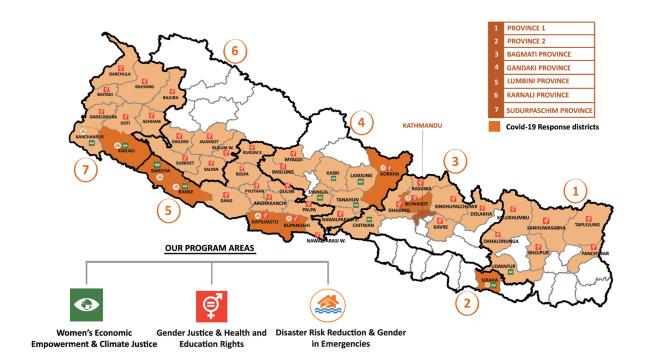
Shivani Dixit Adhikari Assistant Country Director-Program Support and Finance CARE-Nepal

Date: 14 October 2020 Place: Kathmandu, Nepal Rachel E. Wolff
Country Director
CARE-Nepal

Shashi Satyal
Partner
PKF TR Upadiya & Co.
Chartered Accountants



# GEOGRAPHICAL COVERAGE OF CARE NEPAL





# **OUR DONORS**

OPEC Fund for International Development (OFID)	Patsy Collins Trust Fund Initiative (PCTFI)	
European Civil Protection And Humanitarian Aid Operations (ECHO)	The Kendeda Fund	
CARE Internatioanl Secretariat	United States Agency for International Development (USAID)	
Danish International Development Agency (DANIDA)	UN Women	
Erik Tune Fond	Margaret A. Cargill Foundation	
Glaxo Smith Kline (GSK)	Jeff Peierls Foundation	
UK Aid (DFID)	Allison Cornell	
UK Aid (DFID) via Mott MacDonald	The Global Fund	
START Network	Latter Day Saint Charities (LDSC)	

Every year numerous donors and technical partners make it possible for us to carry out our shared mission. Great thanks to all!

## **MEMBER PARTNERS**

1. CARE Australia
2. CARE Canada
3. CARE Denmark
4. CARE Germany
5. CARE France
6. CARE India
7. CARE Japan
8. CARE Netherlands
9. CARE Norway
10. CARE Austria
11. CARE Peru
12. CARE Thai Foundation
13. CARE International UK
14. CARE USA
15. CARE Switzerland



# CARE NEPAL'S PARTNERS

PROVINCE 1	ActionAid Nepal	Biratnagar		Action Aid Nepal	Banke	
	Child Development Society (CDS)	Udaypur		Backward Society Education (BASE)	Dang	
	Community Self Reliance Centre (CSRC)	Udaypur, Okhaldhunga		Backwardness Eradication Society (BES), Nawalparasi	Nawalparasi	
	Environment Conservation and Development Forum (ECDF)	Taplejung		Backwardness Eradication Society (BES), Palpa	Palpa	
	Human Right, Local Development, Drinking Water and Environment Nepal (HEEHURLDE)	Bhojpur		Bheri Environmental Excellence (BEE) Group	Banke	
	Humanity and Inclusion (HI) International	Biratnagar	핑	Dalit Social Development Center (DSDC)	Kapilvastu	
	National Farmers Group Federation (NFGF)	Udaypur	$\leq$	Humanity and Inclusion (HI) International	Banke	
	National Land Rights Forum (NLRF)	Udaypur, Okhaldhunga	8	Integrated Rural Development Society (IRDS)	Gulmi	
	Nepal Janauddhar Association (NJA)	Panchthar	교	Jana Jagaran Mahila Sangh (JJMS)	Bardiya	
	Rural Reconstruction Nepal (RRN)	Biratnagar	S N	Kalika Self Reliance Social Center Nepal (KSSC)	Kapilvastu	
	Shilichong Club Social Development Center (SCSDC)	Sankhuwasabha	<b>LUMBINI PROVINC</b>	Kamaiya Mahila Jagaran Samaj (KMJS) Nepal	Bardiya	
	Young Star Club (YSC)	Solukhumbu		Lumbini Social Development Centre (LSDC)	Arghakhanchi	
	Community Self Reliance Centre (CSRC)	Siraha		Mallarani Rural Development Concern Center (MRDCC)	Pyuthan	
	Family Planning Association of Nepal (FPAN)	Dhanusha		Rukumeli Social Development Centre (RSDC)	Rukum	
E 2	National Farmers Group Federation (NFGF)	Siraha		Rural Development & Awareness Society Nepal (RUDAS)	Rolpa	
<u>S</u>	National Land Rights Forum (NLRF)	Siraha		Siddhartha Samudiyak Samaj (SSS)	Rupandehi	
$\equiv$	Rural Development Center (RDC) Nepal	Rautahat	ALI PROVINCE	Siddhartha Social Development Centre (SSDC)	Kapilvastu	
PROVINCE	SABAL Nepal	Saptari		Dalit Bikash Samaj (DDS)	Salyan	
_	SABAL Nepal	Saptari		Everest Club (EC) Dailekh	Dailekh	
	Centre for Community Development Nepal (CCDN)	Makwanpur		Hilly Region Development Campaign (HRDC)	Jajarkot	
	Clean Energy Nepal (CEN)	Kathmandu		Karnali Integrated Rural Development and Research Centre (KIRDARC)	Kalikot	
	Diyalo Pariwar	Chitwan	MAI	Rukumeli Social Development Centre (RSDC)	Rukum	
	Gerkhutar Youth Club (GEYC)	Nuwakot	KAR	Social Awareness Center (SAC) Nepal	Surkhet	
	Mahila Atma Nirbharta Kendra (MANK)	Sindhupalchowk		Community Rural Development Society (CRDS)	Darchula	
<b>ICE</b>	Nepal Bar Association	Kathmandu		Conscious Society for Social Development (CSSD)	Kailali	
<b>PROVINC</b>	Rural Development Tuki Association (RDTA)	Dolakha	PROVINCE	Forum for Awareness and Youth Activities (FAYA)	Kailali	
280	Rural Reconstruction Nepal (RRN)	Chitwan		Groups for Social and Technical Development Service (GSTDS)	Bajhang	
	SAHAS Nepal	Dhading		Humanity and Inclusion (HI) International	Kanchanpur	
MA	Sahayatri Samaj Nepal	Dhading		Nepal National Social Welfare Association (NNSWA)	Kanchanpur	
BAG	Sustainable Enterprise & Environment Development Society (SEEDS) Rasuwa	Rasuwa		National Empowerment and Equity Development Society (NEEDS)	Kanchanpur	
	Tuki Association Sunkhoshi	Sindhupalchowk	$\equiv$	Peace Win Nepal	Bajura	
	Unity for Sustainable Community Development (USCD)	Sindhupalchowk	SCI	Rural Women's Development and Unity Center (RUWDUC)	Dadeldhura	
	We Women	Kavrepalanchowk	RPA	Social Development and Awareness Society (SODEAS)	Baitadi	
	Diyalo Pariwar	Gorkha	SUDURPASCHIM	Social Empowerment Building and Accessibility Center Nepal (SEBAC Nepal)	Achham	
	Diyalo	Syanja		Society for Environmental and Human Resource Development Nepal (SOURCE)	Doti	
	Good Neighbour Service Association (GONESA)	Kaski, Syanja, Tanahun		Women Development Forum (WDF)	Bajura	
ш	Kakani Community Development Center (KCDC)	Nuwakot		Working for Access and Creation (WAC) Nepal	Achham	
VINC	Local Initiatives for Biodiversity, Research and Development (LI-BIRD)	Pokhara	OTHER PARTNER	Association of Community Radio Broadcasters' (ACORAB) Nepal	All over Nepal	
<b>PROVINCE</b>	Multidisciplinary Institute for Livelihood Enhancement and Natural Resource Management (MILAN)	Myagdi		Children as Zone of Peace National Campaign (CZOP)		
4K	Nepal Gaja Development Foundation (NGDF)	Baglung		Center for Disaster Management Studies (CDMS)		
ND/	Rural Community Development Center (RCDC)	Lamjung		National Campaign for Education Nepal (NCE- Nepal)	All over Nepal	
GANDAKI	Student's Association for Forest and Environment (SAFE) Nepal, Institute of Forest	Kaski		Prakriti Resources Centre (PRC)	Across Country (Research and Policy Initiative)	
	Shree Swanra Integrated Development Center (SSICDC)	Gorkha		Home Net Nepal	Across the country (policy advocacy)	
	System Development Service Center (SDSC)	Gorkha		Save the Children		
	University of New South Wales, Australia	Gorkha	ΑĮ	Apart from the implementing partners, CARE Nepal works with		

Apart from the implementing partners, CARE Nepal works with several thematic collaborators and alliances as strategic partners across the country.



Gender-based violence continues to be rampant, driven by unequal power and harmful social norms, with variations across provinces and population groups. Two out of three women in Nepal still do not report incidences of physical or sexual violence, and in the far and midwestern regions of Nepal, 44% of girls are still compelled to practice *Chhaupadi*. Almost half of all *Dalit* women encounter violence and only 4% of these incidences are reported. Likewise, women (especially from marginalized communities) do not have access to basic health and other services, and they continue to live very difficult lives.

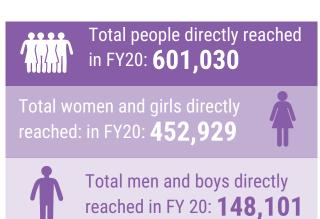
To ensure that women and girls from vulnerable and marginalized communities of Nepal are empowered to lead healthy, violence-free, and dignified lives, CARE works with communities and other stakeholders to ensure gender transformation by increasing women's control and participation in the use of resources; equality in public and private spheres through transformed social norms; fulfillment of fundamental human rights through access to basic services; and incorporating impact populations' lens in all of the humanitarian programs.

As CARE believes that empowerment is the sum of the interplay of changes in agency, structure, and relation, various tools and techniques are applied to build agency, change power relations and transform social structures to make them more convenient for women and girls to negotiate their paths for better choices in their lives. It has helped to ensure that the service delivery system and mechanism are more pro-poor and gender-responsive.

CEDAW, ICPD POA, Beyond Bejing+25, and CRC for improving gender justice and access to basic services. CARE also aims to work with private sectors to make them more accountable towards our impact population and emphasize strengthening delivery of inclusive and quality services.

In the past year, CARE has successfully provided technical support to local governments in the planning of health programs. Budget allocation to health / SRMH is one of the indicators of community health scoreboard, a participatory accountability tool pioneered by CARE, which has created pressure for increased budget allocation in comparison to previous years. Some local governments have provided additional support to pregnant and new mothers for their nutrition and other incentives. The local governments have allocated more budget for the establishment of birthing centers and hiring staff for safe delivery services. 544 girls of Kapilvastu district graduated from the learning center formed by Udaan II and Our Daughter's Education. Out of these, around 489 girls are ready to enroll in the mother schools. However, this process has been halted due to COVID-19.

Similarly, CARE has facilitated Girls Right Forums (GRF) of Kapilvastu and Rupandehi districts to directly engage with the Chief Minister and the Minister for Social Development in Province 5. They were able to submit an appeal for the provincial level's actions to reduce child marriage. Linking the GRF with the national network has resulted in girls being able to share their issues in national-level media.





**SAMMAN IV:** This Glaxo Smith Kline/ CARE UK funded initiative works on sexual, reproductive, maternal, and child health in Kavre, Sindhuli, Rasuwa, Nuwakot, and Sindhupalchowk districts of Nepal to improve maternal and neonatal health outcomes by strengthening frontline health workers' capacity to positively impact neonatal and child health goals.

Increasing Access to Maternal Health at Remote Communities: This Allison Cornell/CARE USA funded initiative works with women and school adolescents in Sindhupalchowk District of Nepal with the aim of increased institutional childbirth and improved WASH and menstrual hygiene behaviors among school adolescents with the help of construction of birthing centers and female-friendly toilets.

**SUAAHARA II (Year 4):** This USAID funded consortium, where CARE is responsible to implement health, integrated adolescents, GESI, and resilience components of the program, works with 1,000 days women, children under 5 years of age, and adolescents in 42 districts and 389 local governments of Nepal to improve the nutritional status of women and children.

**UDAAN (II):** This OFID/CARE Austria funded initiative works with the marginalized and vulnerable adolescent girls in Kapilvastu district. It supports the girls who are out of school by providing them a second chance to continue their education through accelerated learning program and leadership development.

**Haushala:** This PCTFI/ CARE USA funded initiative works with girls from vulnerable and marginalized communities of Kapilvastu and Rupandehi districts who have dropped out of after early grades or have never been to school to ensure that these adolescent girls have better life opportunities by building their capabilities to pursue opportunities and realize their aspirations.

**Maitri:** This CARE USA funded initiative works with Dalit and marginalized girls of Kapilvastu and Rupandehi districts of Nepal and selected regions of India to ensure that they have access to safe and secure education that enables them to develop the necessary skills for improved life opportunities.

**Tipping Point II:** This Kendeda/ CARE USA funded initiative works with adolescent girls from Kapilvastu and Rupandehi districts to address the underlying causes of child marriage through a dynamic process of innovation, analysis, learning, and advocacy.

**Chhori ko Shikshya:** This Tune Foundation-funded initiative works with adolescent girls from vulnerable and marginalized communities in Kapilvastu District who have dropped out from or have never been to school to empower them to complete their primary and/or secondary education.

**SOAR I: Accelerated Learning & Life skills for Empowering Adolescent Girls:** This Jeff Peierls funded initiative works for the marginalized and vulnerable adolescent girls in two rural municipalities of Rupandehi district with aims to provide educational opportunities for girls through accelerated learning programs and life skills.

**SOAR II: Girls Take Charge:** This Jeff Peierls funded initiative is working for the adolescent girls aged between 15-19 to empower them through training, entrepreneurship, and skill development. Girls will be empowered through skill development on literacy & numeracy, financial literacy along with entrepreneurship development. It is being implemented in two rural municipalities of Rupandehi district.

Safe Justice (Post Project Activities): This DFID-funded Integrated Program for Strengthening Security and Justice (IP-SSJ) program in Nepal, successfully contributed to building trust between poor and marginalized communities particularly women and girls and formal and informal justice service providers, to enable marginalized populations to access fair and equitable justice. This post-project aims to create a conducive operational environment for the institutionalization of ReFLECT and CSC in Achhma, Bajura, Dhading, and Gorkha districts.

**Global Fund:** This is a partnership between CARE and the Global Fund where CARE is a Country Coordination Mechanism's (CCM) funding recipient for receiving and managing funds from global fund to support in fighting AIDS, Tuberculosis, and Malaria.



Jugnu Yadav from Kapilvastu and Gopal Bist from Baitadi have nothing in common at first glance. They live in different parts of Nepal, speak different languages, and have never met each other. But there is striking similarities in their zeal they have shown towards giving their children a better future.

Bist, a migrant returnee who is a father of a toddler and an infant, left the country in search of better employment opportunities soon after his first child was born. The separation was tough for both him and his wife who now had to raise the newborn on her own. "As I struggled to take care of my child and myself, the baby became malnourished, and I felt weak all the time," said Hira, Gopal's wife. After he returned, the couple decided to have a second child and plan a better life together. Hira gave birth to a baby boy.

Through USAID funded SUAAHARA program, Gopal realized about his additional responsibilities as a father. He was introduced to the importance of men's engagement towards the wellbeing of his family by improving maternal and child health. After this, he started taking equal responsibility for the household chores, which is unusual for men in the rural outskirts of Nepal. Within a few months, there were positive changes in Bist family. As Gopal started lending hands to the household work, Hira could spend more time taking care of the health and nutritional needs of her children. Their daughter started to grow remarkably well compared to the time when she took care of her daughter alone. She shares that she had more time to breastfeed her infant and visit the health posts regularly. The couple has decided to start a business in their home town and work together for their better future.

Similarly, Jugnu Yadav, a father of five, had three adolescent daughters who dropped out of schools and were staying idly at home. The girls were willing to continue their education. Jugnu and his family live in southern Terai region of Nepal, where many rural communities don't send girls to schools because of entrenched social norms. As a result, the girls are often married off early, become mothers at a young age and get trapped into a vicious cycle of poverty.

CARE Nepal through its accelerated learning program, UDAAN approached Jugnu with an offer to provide a second chance to his daughters to complete their school education. Societal perceptions around safety and character restricts free movement of girls in many rural pockets of Nepal. Jugnu, too, was initially reluctant to let his daughters leave the house to continue their education.

He was involved in various activities like intergenerational dialogues where the girls shared their dreams and aspirations with their family. This was unusual for Jugnu as girls rarely shared their feelings with their fathers and brothers. As a result, the decision-makers of their family never knew what they felt. These activities made Jugnu understand his daughters' feelings and the importance of education for them. As a result, Jugnu agreed to send his daughters to UDAAN classes.

Presently, the girls have graduated from UDAAN and are continuing their education in a local school. "UDAAN has improved my life along with my daughters' lives. I have seen a lot of positive changes in my daughters. I feel that my daughters have now stepped towards independence. I feel extremely proud as a father. We interact daily and I am happy to do my part for educating my daughters," said Jugnu.



We are committed to ending hunger and malnutrition – but in the face of environmental degradation, climate change, power imbalances and the current COVID-19 pandemic, it is becoming a greater challenge than ever.

To combat this, CARE Nepal under this theme has been working with our target communities to achieve improved and diversified food and nutritional security; equitable natural resources management; dignified livelihoods and economic opportunities; and resilience against the impacts of climate change.

This year we succeeded in a) cultivating innovative and scalable models, b) collaboration with government at all levels, and c) capacitation and mobilization of people's organization and networks. Some of the models with wider scalability for sustainable development include Climate Change Adaptation and Disaster Risk Reduction; Integrated Sub-watershed Management Plans; Local Adaptation Plans of Action that incorporates Differential Impact Assessment and Response Plan; Climate Resilient Leasehold Farming Practices; Localized Agricultural Insurance Scheme; Agro-met Advisory Services; and Nutritional Behavior Change.

In FY 2019, CARE Nepal was successful in cultivating Leasehold Farming Practices in 11 communities, Localized insurance schemes in 3 municipals, Agro-met advisory service in 3 municipals, Farmers ID card with categorization in 2 municipals, Community based land management practice in 3 municipals, and Nutritional garden in 4 communities.

Furthermore, to bring lasting change in the lives and livelihoods of our impact population, we collaborated with governments at all levels as well as civil societies and private sector stakeholders such as agricultural insurance companies and seed companies for piloting, documenting and scaling up of results, for policy changes and replication of good practices through resource leverage.

Many groups have championed in raising voices and leveraged resources from local government, which is being productively utilized for group strengthening and creating a critical mass to influence government in policies.

Our actions have been designed to mobilize networks and people's organizations such as Federation of Community Forestry User Groups Nepal (FECOFUN), National Land Rights Forum (NLRF), National Farmer Groups' Federation (NFGF), National Network of Community Disaster Management Committees (NCDMC), women entrepreneurs group, HomeNet Nepal, and the federation of home based workers. By working together with these organizations, we use evidences, learning and innovations from our programs to influence broader social change at a significant scale. As a result, this program theme has contributed to local governments' GESI policy formulation and planning; endorsement of [WHAT] models by local governments; and received acknowledgement of Differential Impacts Assessment - Response Plan (DIA-RP) by Ministry of Forests and Environment.

The COVID-19 pandemic has brought additional risks and vulnerabilities, posing serious challenges and problems to the PVSE, landless, forest dependent and smallholder farmers in Nepal. Acknowledging the seriousness of the issue, initiatives under this theme immediately redirected their funds toward COVID-19 response and distributed relief items (food items, dignity kit, quarantine kits) prioritizing food insecure pregnant and lactating mothers.



Total people directly reached in FY20: **28,585** 

Total women and girls directly reached: in FY20: **16,180** 





Total men and boys directly reached in FY 20: **12,405** 

# **OUR INITIATIVES**

Hariyo Ban Program II: This USAID funded initiative builds on the achievements from the first phase and works with the community members and Natural Resource Management Groups from 15 districts of Nepal with an aim to conserve biodiversity and increase ecological and community resilience in Chitwan Annapurna Landscape (CHAL) and Terai Arc Landscape (TAL).

SAMARTHYA: Building on the experience and learning from the Civil Society Support Project on Right to Food (RtF), the new phase of CARE Denmark- supported project (July 2018 - December 2021) is named "SAMARTHYA: Promoting Inclusive Governance and Resilience for the Right to Food". The project focuses on developing climate resilient scalable models in land and agriculture, and strengthening peoples' organizations.

POSHAN: CARE Nepal has been implementing "Improved Nutritional Outcome (POSHAN)" project in alignment with "Samarthya" project. The beneficiaries include PVSE, Musahar and Dalit communities of Bhagwanpur Rural Municipality of Siraha District (State 2) with particular focus on pregnant women, lactating mothers and children below five.

Dignified Work: CARE Nepal has been implementing Made by Women (MbW) initiative since 2018 which aims to contribute to the CARE's over-all framework of 'dignified work'. It is focused on the nationalization and socialization of ILO 190 and recommendation 206 for wider range of actors and also supports the government to harmonize the national acts on work place harassment in-line with the convention.

**Livestock Insurance** gives assurance to Okhaldhunga Locals The 4-step process constituted

of the following steps:

- 1. Local government's effort to bring insurance company in the community
- 2. Ensure local government's contribution to subsidize the premium in addition to the subsidy provided by the Federal government
- 3. Develop local insurance agents to bridge farmer and company
- 4. Support from local government and agents to claim insurance amount upon loss of livestock

Across Nepal's flatlands, hills and high mountains, Nepali farmers rely on livestock rearing as a major source of income, food, and nutrition. Nepal's agricultural and natural resources are vulnerable to the impacts of climate change, with extreme events such as landslide, flood, and drought causing damage to livestock, farm production, and infrastructure.

Nature's wrath in many cases are unavoidable. But what is more unfortunate is that many farmers in remote parts of the country fail to take advantage of livestock insurance subsidy provided by the government. Despite being susceptible to high earthquake risks and more than three different types of climatic hazards, a majority of small farmers of Okhaldhunga district had no awareness about the government's provision for a 75% premium for livestock insurance. Only those engaged in commercial animal husbandry were receiving this benefit. The local government and other stakeholders weren't actively working to create awareness about the subsidy.

Identifying this issue and realizing the need to increase the access of small farmers, landless, women and Dalits to the Ministry of Agriculture and Livestock, the Federation of National Farmers Group Nepal began their efforts and submitted letters of attention to the Ministry. NFGF, Okhaldhunga piloted the livestock insurance program in wards 3, 8, and 9 of the Sunkoshi Rural Municipality.

Through numerous advocacy efforts, a discussion took place on the topic of services, facilities, and opportunities provided by agricultural and livestock insurance. To ensure diverse input and perspectives, the participants included district level stakeholders, Mayor of Sunkoshi Rural Municipality, bank representatives, IME, General Insurance staff, media partners, and working committee members of NFGF, Okhaldhunga. As step two of the process, coordination meetings were done with the ward and community people of the selected three wards to discuss and finalize the agriculture and livestock insurance, the amount of assistance to be provided by the federation, and the amount that the ward will leverage. For the third step, one local representative was chosen by the insurance company for orientation. With sufficiently aware and capacitated locals and government bodies, the last step was to provide insurance to the most vulnerable households.

As a result of this 4-step process, a total of 502 households in Okhaldhunga have gotten their livestock insurance. The outcome of the joint efforts of the Samarthya Project and the local ward office have helped the total insured amount has reached NRs. 32,313,000.

Given the current difficulties resulting from the COVID-19 pandemic, the ward was able to get livestock insurance for an additional 665 households as well as 69 staff from the other municipalities and wards. Having set a great example by the Sunkoshi Rural Municipality, the work is being replicated in other areas. For instance, Chisankhugadhi Rural Municipality has already initiated the 4-step process.

The success of livestock insurance is seen when people claim it. Of those who got their livestock insured, 24 locals have received compensation for their loss equivalent to NRs. 352,800. The visible benefits have encouraged other local bodies to adopt the activity through resource leverage and sharing and mobilization of human resource.



CARE works holistically integrating preparedness, response, and recovery program for building resilience and linking humanitarian response with long term development program. The preparedness and recovery actions are focused on addressing humanitarian risks faced by vulnerable households through innovative approaches of risk-informed programming, strengthening community structures, and inclusive risk governance for better preparedness and response.

This year, CARE Nepal primarily focused on three key areas: livelihood and Water, Sanitation and Hygiene (WASH) recovery of earthquake-affected households, and community-based disaster preparedness with build back better, COVID 19 response, and monsoon disaster response.

Livelihood recovery activities under Earthquake Response and Recovery Program (EQRR) included the execution of the Livelihood Implementation Plan (LIP), skill-based training, and construction of agricultural structures like irrigation schemes, gray water management tanks, rustic storages, improved animal sheds, and creation of local markets. In FY 2019, 2389 people received the Livelihood Improvement Plan (LIP) support, and 41 youths received skill-based training. In addition to that 16 irrigation schemes, 26 gray water management tanks, 3 rustic storages, 184 improved animal sheds, and 3 local markets were established in the communities.

As a result of this, households have made additional income from the enterprises. The average income earned was NPR 18,312 (n=123), making a contribution of 13 percent to the average annual income of households (Outcome Assessment Report 2019). This income was used to rebuild earthquake resilient houses..

Similarly, WASH recovery activities included rehabilitation and reconstruction of 83 drinking water schemes as well as sanitation and hygiene promotion leading to revival and declaration of Open Defecation Free (ODF) in 74 communities. Likewise, the DRR interventions included strengthening coordinated response, increasing access of vulnerable groups to social safety nets, risk-sensitive planning, mainstreaming of DRR in the development plan, corpus fund establishment, and promotion of risk transfer mechanism.

The COVID 19 response primarily focused on risk communication and community engagement, infection prevention and control, and WASH, food security, livelihoods, GBV, and protection. The monsoon disaster response action included the distribution of relief materials like ready to eat and ready to cook food, hygiene kits, dignity kits, basic shelter kits, and safe drinking water.

As CARE Nepal transitions to a new strategy framework, the EQRR program is aligned with the new strategy framework for the period 2020-2025. According to which, it envisions establishing nexus of humanitarian response with long term development through a) Integrated gender-transformative WASH, GBV, DRR, and emergency preparedness, linking with participatory local development processes to produce scalable models, co-designed and implemented together with local governments, b) Establishment of localized humanitarian network and platform for preparedness, risk reduction and gender-responsive coordinated response in the western Terai, and c) Research on gender in emergencies and dissemination of learnings.



Total people directly reached in FY20: **222,895** 

Total women and girls directly reached: in FY20: **121,234** 





Total men and boys directly reached in FY 20: **101,661** 

# **OUR INITIATIVES**

**Earthquake recovery:** The initiatives funded by various donors, such as DFID, Pool Fund, worked with communities affected by 2015 earthquake through an integrated multi-sectoral programming in Gorkha & Makwanpur.

**PRAYASS-II:** This initiative funded by ECHO and ADC worked with communities and institutions from Gorkha, Sindhupalchowk and Makwanpur affected by 2015 earthquake and were at high humanitarian risk. It focused on integrated risk governance, safe reconstruction and risk transfers mechanisms.

**Monsoon & landslide response:** This initiative funded by DFID-NERF supported communities affected by monsoon flooding and landslides by providing them with immediate relief items.

**Co-designing risk-sensitive local government development plans:** This initiative funded by Pool Fund is designed to create a nexus between development and preparedness, emergency response and recovery, co-designing and co-implementing initiative together with local government at Siranchowk Rural Municipality, Gorkha.

**Humanitarian Partnership Platform (HPP):** The initiative funded by Pool Fund serves as an avenue for CARE Nepal and local partners to strengthen coordinated humanitarian actions focusing on Gender in emergency (GiE) through effective and efficient preparedness planning, coordination, capacity building, collective action and resource leveraging.

**COVID-19 response:** This initiative funded by different donors like Pool Fund, ERF and START fund network works with people affected by COVID-19 through risk communication, health equipment support for infection prevention, quarantine center management, WASH and protection support.



Manju was able to acquire her citizenship four years after the earthquake as the mother of two would be too busy with her household work and farming to initiate the process to get it.

"After the earthquake, there were organizations that came to our village with relief support. My neighbors went home with their hands full, sometimes it was bags of rice, other times it was plastic buckets and toiletries. But I was denied access to these packages just because I could not produce a form of identification," laments Manju Praja.

The 28 year old resident of Bhimphedi, Makwanpur district had never made a citizenship card.

"My family members would say that there was no actual benefit to getting a piece of documentation, and the administrative process was cumbersome," said Praja. However, she realized the disadvantage of not having the document after the earthquake as personal identity documents became a prerequisite to access humanitarian support from NGOs and the government.

Lack of documentation, more significantly, lack of citizenship, proof of land ownership or permanent residency among others, acted as a major barrier for several earthquake affected victims in the aftermath of the earthquake. Many who had these documents lost them during the earthquake, but many didn't have any formal documents to begin with. The latter was particularly true for many in rural villages, where among other reasons, low levels of literacy, limited awareness on country's legal provisions, patriarchal structures that deter women from acquiring citizenship and passing the citizenship to their children, marginalization of people of scheduled castes, etc., meant that the most vulnerable in these communities did not possess the necessary documentation.

In 2018, Praja started going to the local ReFLECT center, where she learnt about disaster risks and potential mitigation measures that could be taken at household level. She also became more aware of her family's financial vulnerability in the event of a future disaster. After discussions with her REFLECT group and with their support, Praja finally completed the necessary procedure to acquire her citizenship card in 2019.

This simple act has opened many doors for her. "As soon as I received the citizenship card, I applied for and got a job in the local school as an office helper. I also became eligible to access loan facilities for the first time in my life. It feels like my world has opened up to so many possibilities." said Praja.

One of the first things that Manju did after getting her citizenship was to register her marriage and the birth of her two children. She also took out a loan of Rs 50,000 from her local savings and credit group to start ginger farming. She hopes to use the income she will get from selling ginger to buy buffaloes.

"It might seem that my plans are ambitious, but I feel like they are achievable. If our family has to go through another disaster in future, I know that we will not be completely knocked out like the last time. I will be able to access support from the government and NGOs, and I will have my own financial safety net in place so that our family does not have to go through a similar hardship." explains Manju.

# **COVID-19 RESPONSE**

# (MARCH 2020 - JUNE 2020)

CARE Nepal has been actively engaging in COVID-19 response since its outbreak in Nepal in March 2020. CARE is working with multiple partners to reduce the transmission and minimize the negative impact of the outbreak in the communities through new funds as well as redirection of funds from the existing programs. The implemented programs have been focusing on various pillars suggested by WHO, mainly on risk communication and community engagement, infection prevention and control, food security and nutrition, WASH, and protection.

Also, country-level coordination through clusters, Association of International NGOs (AIN), HCT, and supporting local government in preparing COVID-19 response plan, SOPs, and other various local policies and plans to operationalize quarantine and holding centers to safeguard vulnerable people are the actions adopted to strengthen the response system.



#### Risk communication

- 16.5 million people reached through 300 FM radios
- Over 700,000 HHs received SMS on Gender Based Violence (GBV) and protection related messages
- Risk messaging aired through local FMs in various local languages in Kapilbastu, Rupandehi, Siraha, Sindhuli, Sindhupalchowk, Rasuwa and Nuwakot
- 10,000 copies posters printed and disseminated.



#### Infection prevention and control

- 4 hub hospitals supported with 800 PPEs (Cat I), 800 pieces of N95 Masks, 2000 pieces of disposable caps, 60 boxes of surgical gloves, 8 thermal guns, 2,000 pairs of boot cover and 6,000 surgical masks.
- 1,009 quarantine kits distributed to 983
   HHs (4,047 beneficiaries of which 1,921 are male and 2,125 are female) and 26 health facilities.
- 72 health facilities (29 health centers and 43 birthing centers) supported with 250 PPE sets (Category II), 3,000 disposable caps, 3,000 pairs of boot cover, 144 box medical gloves, 35,520 pieces of surgical masks, 100 pieces thermal gun, 1,513 bottles of hand sanitizer (500 ml and 100 ml bottles).



Photo: unsplash.com/@anshu18

 13 quarantine centers received 100 bottles of hand sanitizer, 500 pcs of Liquid Hand Wash soap, 40 bottles of liquid hand washing soap, 20 litres of chlorine, 2,000 pcs of disposable masks, 258 boxes of surgical gloves and 8 pcs of IR thermometer



### **Food Support**

349 HHs from Siraha and Udayapur received food support that included 20 Kg of half boiled rice, 2 Kg of Dal, 1 liter cooking/edible oil, 1 kg Salt, 1 Kg gram, and 2 Kg sugar per HHs.



#### WASH

- 4 foot-operated handwashing stations installed at 4 quarantine centers in Banke.
- 1,810 migrant returnees at holding centers received drinking water bottles (1ltr)
- 475 people staying at quarantine centers received health and hygiene kit.



#### Protection

Conducted Rapid Gender Assessment (RGA) instead of just RGA at Gorkha and Bardiya



#### Logistic support to quarantine center

100 pieces bedsheet, 70 pieces thin blanket, 120 pieces P-foam mattress (100mm), 60 pillows, 10 Quilt (cotton), 60 pieces mosquito net, 50 set of slippers, 10 set of Gumboot supported to quarantine centers in Gorkha.

For the latest update on CARE Nepal's COVID-19 response, please contact npl.carenepal@care.org

# **ADVOCACY ACHIEVEMENTS** OF CARE NEPAL

ADVOCACY ASKS	CARE'S CONTRIBUTION	IMPACT		
Integration of Gender in Emergency in DRR act, policies, plans and local response capacities.	<ul> <li>Establishment of accountability mechanism at local level</li> <li>Orientation and technical support to draft the local level documents (act, policies), DRR mainstreaming in local government planning process, budgeting and implementation</li> <li>Private sector engagement for investments in DRR</li> </ul>	Marginalized and vulnerable groups' access to safe shelter and livelihood opportunities to enhance coping capacity for future shocks and stresses.		
The most vulnerable landless, displaced and land poor marginalized individuals, households and communities have the coping capacity to shocks and stresses.	<ul> <li>Partnership with (CSRC), a land rights organization working with landless, resource poor, small and marginal farmers in Nepal</li> <li>Agree for integration of landless issues (i.e. landless HHs don't have land ownership certificate which limits them from reconstruction grants), as common issues of the state by coordinating with National Land Rights Forum and associated institutions.</li> <li>Discussion with NRA through forums</li> <li>Four orientation events on Joint Land Ownership (JLO) were facilitated with participation of 273 individuals.</li> </ul>	<ul> <li>2,270 Households were able to receive grant from National Reconstruction         Authority to buy land at safer areas and rebuild their house. Of this, 21 landless         HHs were from project working location (Indrawati RM)</li> <li>A total of 103 couples (89 from Sindhupalchowk and 14 from Dhading) received land under joint ownership over the land that was under the control of husband before.</li> </ul>		
Sufficient resources, planning and monitoring to ensure the implementation of the Child Marriage Strategy to valuing	Engaging with the federal, provincial and local governments through workshops, technical assistance, lobbying, etc.,      iming to strength on the health systems.	Increased budget allocation at local levels for strengthening health and nutrition governance, birthing center actablishment and biring skilled health.		

- girls.
- Effective implementation of holistic development of adolescent's 'Plan of Action' (NPC-MWCSW) focusing on adolescent girls empowerment.
- Allocation of at least 7% budget of local government to the health sector by 2020 as envisioned in Nepal Health Sector Support strategy 2016-2020 for improved health sector financing and reduced health inequity in SRMH
- aiming to strengthen the health system and ensuring quality, timeliness and responsive services through allocation of local fund.
- Reviewed strategies and provided feedback on child marriage strategies including education as an important tool to reduce child marriage. Also provided feedback at child marriage strategy of GoN during the consultative meetings.
- establishment and hiring skilled health personnel in the working districts, allowing pregnant women to have safe institutional delivery by skilled birth attendants, which ultimately contributes to decreasing maternal and child mortality rate.
- MoHP/Family Welfare Division included some of the major project initiated interventions in the GoN Annual Work Plan and Budget (AWPB) with significant budget allocation to support scaling up of the interventions in 77 districts of Nepal as part of Equity and Access Program.
- Policy level change in revised FCHV strategy: inclusion of mapping and plotting of 1,000 days households in the map based on SATH approach, covering hard to reach areas and marginalized/ vulnerable communities.
- Onsite coaching at the service centers and Rapid Data Quality Assessment (RDQA) have been supported for the assurance of quality service and data.





CARE has identified 5 flagship approaches in new strategy framework 2020 – 2025 with a commitment to support women and girls to live dignified life free from poverty and injustice. The first and foremost approach is to promote the **Gender Equality and Social Inclusion** with a specific focus on women and girls, mainly the specified impact populations, and also by engaging men and boys to transform unequal power relationships at all levels.

CARE has been advocating and emphasizing changing harmful Social Norms as the second flagship approach. Social norms play a huge role in gender role transformation and it is complex and hard to overcome. CARE believes and places a particular emphasis on building agency of women and girls, changing power relations, and transforming structures which will ultimately strengthen the voice of women and girls to claim and exercise their human rights, change social norms, and enable them to influence decisions that affect their lives. Social Norms Analysis Plot (SNAP), a social norms measurement tool, is used to measure the effect of prevalent social norms in specific geographical areas and specific groups and understand the dynamics of harmful traditions and practices.

CARE has been promoting inclusive Governance and Accountability in three key areas of change: a) empowering poor people to know and act on their rights and represent their interest; b) influencing those in power, such as governments, traditional leaders, and the private sectors, to be more responsive and accountable; c) brokering linkages and convening spaces which enable effective and inclusive relation and negotiate between right holders and power holders. CARE enriches, enhances, and streamlines GA approach and tools across all thematic priority areas and continues to adopt core governance models.

Partnership and Alliances is to mobilize, convene and support alliances to connect the issues of impact population to larger civil society groups and social movements to amplify their voice and concerns to overcome poverty and injustice at large. CARE is diversifying the partnership model to collaborate and build relationships with multiple actors such as state and government stakeholders, civil society, media, academia, research organization, and private sectors.

Resilience is to increase capacities and assets to deal with various shocks, stresses, and uncertainties, reduce drivers of risk and initiatives, and actions are supported by an enabling environment. In a context of increased unpredictability from climate change, disasters, and social and political conflict, CARE strengthens people's capacity to anticipate, absorb and adapt to shocks, manage growing risks, address underlying causes of vulnerability and transform their lives in response to new hazards and opportunities.

Different guideline and document have been developed such as reviewing CARE's GESI strategy, position paper on Gender Marker, document on Understanding Social Norms, Gender Political Economic Analysis (GPEA) guideline, Community Score Card guideline, Cash support and guidance, brief paper on Partnership and Alliances, Stakeholder Mapping, Operational Guideline for Strengthening Impact Population's Engagement In Participatory Local Planning and Budgeting Framework for Municipal Co-designing and Co-implementing and New Ways of Working: An analysis of Tools and Approaches, etc. These are the key achievements to institutionalize these cross-cutting approaches.



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