CARE Nepal Annual Report 2017



ABOUT CARE





In fiscal year 2017, CARE worked in **93 countries**, contributing to saving lives, defeating poverty and achieving social justice

CARE International

CARE is a leading humanitarian organization dedicated to saving lives and fighting global poverty. Around the world, we work alongside a broad network of partners and allies to help rebuild and improve the lives of the most disadvantaged. CARE places special focus on working alongside poor women because, equipped with the proper resources, women have the power to help whole families and entire communities escape poverty. Women are at the heart of CARE's community-based efforts to improve basic education, prevent the spread of disease, increase access to clean water and sanitation, expand economic opportunity and protect natural resources. We seek to influence the policies and practices that affect the lives of women, girls and the most vulnerable communities through our credible solutions, strong voice on gender and women's rights, and thought leadership. CARE also delivers emergency aid to survivors of war and natural disasters, and helps people rebuild their lives.



Globally CARE directly reached 63 million people in FY 17

CARE Nepal

CARE started its operations in Nepal in 1978 and was one of the first international aid agencies to work in the country. Today, CARE Nepal works to address the systemic and structural causes of poverty and social injustice, such as discrimination based on gender, caste, class and ethnicity; poor governance; and vulnerability from conflict and natural disasters.

CARE Nepal works with marginalized women and adolescent girls to ensure their empowerment, wellbeing and dignity through social transformation. To achieve these goals, we work in partnerships with, for example, state agencies, donors, NGOS, civil society organizations, research institutes and the private sector and also closely collaborate with community members. In particular, we work across the spectrum of humanitarian action and longer-term development programming to address gender based violence, women and girls' leadership and voice,



OUR GOAL By 2020 CARE will support 3.95 million people from the most vulnerable and excluded communities in Nepal to overcome poverty and social injustice.



IMPACT POPULATION Marginalized Women and adolescent girls of Nepal, who are poor, vulnerable and/or socially excluded

inclusive governance, sexual reproductive health, livelihoods, food and nutrition security, migration, disaster risk reduction and climate change. CARE draws on its global experience to address the underlying causes of poverty and social injustice, with a particular focus on the most marginalized and vulnerable women and adolescent girls.

We draw from the strength of the CARE International global network to program across the spectrum of humanitarian action and longer-term development programming. We promote resilient change through investments in capacity building of our impact populations, partners and local institution and engage in research to generate knowledge and evidence to influence policy formulation and implementation. We also support learning and innovation so as to scale up successful practices for social transformation.

CARE is committed to demonstrating diversity, inclusiveness, mutual accountability and cost-efficiencies in all its programs.

CARE Nepal's Theory of Change



Programme Areas

| LEAD : | Women & Girls' Leadership, Voice and Empowering |
|-----------------|--|
| | Education |
| NURTURE: | Sexual Reproductive & Maternal Health |
| PREVENT: | Gender-Based Violence and Violence against Women |
| | and Girls |
| RESPOND: | Humanitarian Response, Emergency Preparedness |
| | Planning and Disaster-risk Reduction |
| SUSTAIN: | Livelihoods, Food Security, Climate Change |
| | Adaptation and Natural Resources |
| | |

Human Resource

CARE Nepal has an inclusive human resource policy. In 2017, the organization had 283 staff, including 171 men and 112 women out of which 108 were Brahmins, 48 Chhetris, 33 Newars, 1 International staff, 90 belonging to marginalized groups (Dalit, Janajati, Madhesi, and Muslims). There were 14 women in senior leadership positions (out of 34).



2017 BY THE NUMBERS







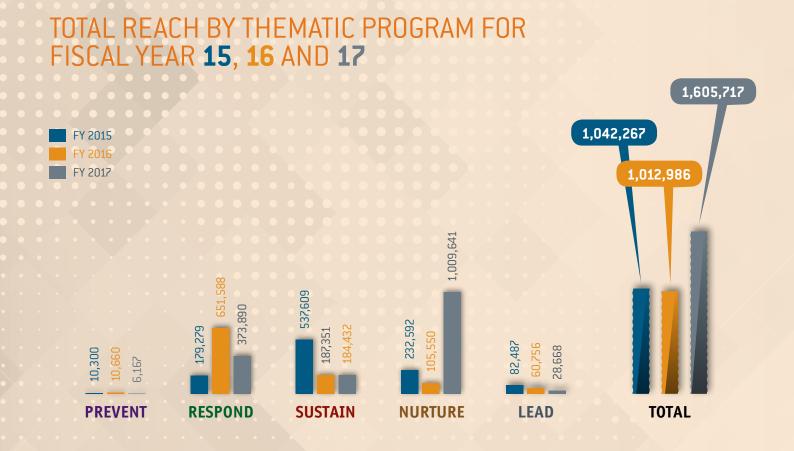


321,788 individuals benefitted from our humanitarian interventions

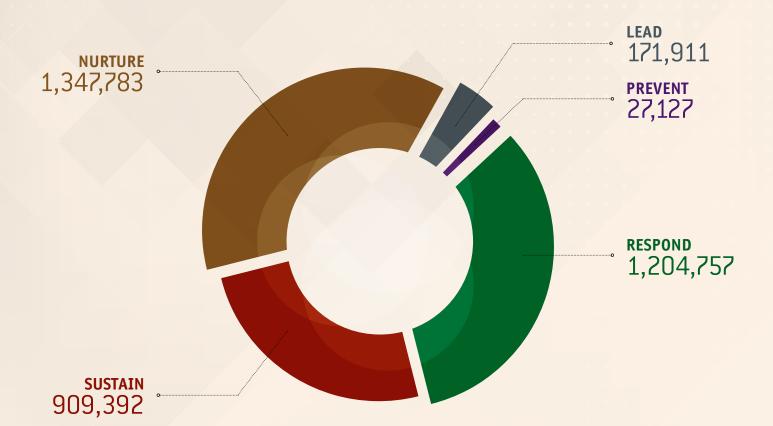


1,283,929 individuals benefitted from our development interventions

IMPACT GROUP REACH AS OF FISCAL YEAR 2017



IMPACT GROUP REACH BY THEMATIC AREAS FOR 2017



LEAD



Mehenaj Hussain (Left) and her sister Subhiya Hussain (Right) are the daughters of Kalab Hussain who is a Muslim priest from the rural outskirts of Kapilvastu district. Their two elder sisters got married without gaining any formal education. Mehenaj and Subhiya have aspirations to grow up as well educated women. After attending various interaction/orientation meetings with CARE Nepal her father proudly shares that he will make sure that his two younger daughters will gain the highest education possible.

Women and Girls' Leadership and Voice

CARE Nepal's LEAD program places women and girl's empowerment at the core of its programming. It focuses on intergenerational dialogue, psychosocial support, advocacy for policy reforms and building skills and educational opportunities for 10-16 year old adolescent girls.

In the year 2017, CARE Nepal reached over 28,668 beneficiaries through it's the various initiatives under this program. Out of this figure, 18,930 women and girls benefitted from the initiatives while 9,738 men and boys were engaged in various activities to ensure their optimum support and to help create an enabling environment for empowering women and girls. Through LEAD's Haushala



In 2017, CARE Nepal was able to reach more than 18,930 Women and Girls through its LEAD program.



The LEAD program supported more than 1,146 adolescent girls with increased access to education.

initiative, CARE has helped school drop-out adolescent girls and girls from marginalized and vulnerable communities who have never been to school with opportunities to pursue their education. Initiatives such as Aba Mero Palo enabled adolescent girls and their communities to practice positive social norms and behaviors which in turn helped prevent child marriage and ensured empowerment of girls to make more informed choices about their future.

PROGRAM INITIATIVES

Adolescent Girls' Program

MAITRI (Regional project of CARE India and CARE Nepal)

Project Goal: To ensure that Dalit girls in selected regions of India and Nepal have access to safe and secure education that enables them to develop necessary skills for improved life opportunities.

Working Districts: Kapilvastu and Rupandehi

Impact Populations: Dalit and Marginalized school going girls Project Period: July 2016– June 2020 Donor: CARE USA

HAUSALA

Project Goal: To ensure that adolescent girls in Nepal have better life opportunities by building their capabilities to pursue opportunities and realize their aspirations.

Working Districts: Kapilvastu and Rupandehi (Nepal) Impact Populations: Girls from vulnerable and marginalized communities who have dropped out after early grades or have never been to school

Project Period: July 2015 to June 2020 Donor: PCTFI/CARE USA

ABA MERO PALO

Project Goal: Address the underlying causes of child marriage through a dynamic process of innovation, analysis, learning and advocacy. **Working Districts:** Kapilvastu and Rupandehi

Impact Population: Adolescent Girls (10-19 years) from areas with high Child Marriage prevalence rates Project Period: May 2014 to June 2017 Donor: Kendeda Fund/ CARE USA

UDAAN

© Riddhika Sharma



Project Goal: To empower approximately 350 school dropout girls of poor vulnerable and socially excluded families to complete their primary and/or secondary education.

Working Districts: Kapilvastu

Impact Populations: Girls from vulnerable and marginalized communities who have dropped out after early grades or have never been to school

Project Period: November 2013 to April 2017

Donor: The OPEC Fund for International Development/CARE Austria

Women Empowerment

SANKALPA

Project goal: Contribute to a transparent and participatory public budget allocation and expenditure process in Nepal that equally benefits marginalized groups, particularly women.

Working Districts: Surkhet, Pyuthan

Impact Population: Women and marginalized groups (Dalits, Janajatis, minorities, differently-abled people).

Project Period: February 2014 to January 2017

Donor: European Union/ CARE Austria

SAMBAD

Project Goal: To promote peace through increased mutual trust and social harmony in the communities of Nawalparasi and Rupandehi districts.

Working Districts: Nawalparasi and Rupandehi

Impact Populations: Individual/families affected during Armed Conflict-killed, missing, injured, displaced, orphaned, ex-combatants.

Project Period: August 2013 to August 2016

Donor: United States Aid for International Development (USAID Nepal)

NURTURE



CARE Nepal aims to see poor and marginalized women of reproductive age and adolescent girls exercise their rights to quality sexual, reproductive and maternal health (SRMH) information and services. We intend to bring this change by working to improve health service delivery and by increasing awareness, engagement and empowerment of the community to demand for quality SRMH services.

Sexual, Reproductive and Maternal Health (SRMH)

In 2017, CARE's NURTURE program supported in increasing access to SRMH services in more than 250 public health facilities in its working districts, through capacity building of service providers, onsite coaching and mentoring and/or supply of equipment at the facilities. We worked with more than 500 mothers groups to help them understand their sexual and reproductive health



In 2017, CARE Nepal was able to reach more than 1,009,641 individuals through this program. rights, provisions and services. CARE continues working in increasing awareness on maternal newborn and child health areas focusing on most disadvantaged population through different means and interventions. Through our initiatives, we have been able to increase the number of institutional delivery attended by frontline health workers in the most marginalized communities from very remote districts such as Bajura, Doti, Dadeldhura, Kailai, and Sindhuli. From innovative approaches such as participatory mapping of pregnant women and newborns at the community level to helping link with the health institutions, CARE Nepal has been able to bring a positive effect in the lives of thousands of mothers and babies from the most disadvantaged population of the country.

CARE ensure close engagement with men and boys as well as the decision makers at the households to bring this change. We worked closely with the Ministry of Health, Nepal to bring the service close to the communities through Policy engagement and scaling the services in remote and hard to reach areas.

PROGRAM INITIATIVES

SUAAHARA II

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Project Goal: Improve the nutritional status of women and children in 40 under-served rural districts of Nepal.

Working Districts: Taplejung, Panchthar, Sankhuwasava, Solukhumbu, Bhojpur, Dolakha Sindhupalchowk, Rasuwa, Nuwakot, Dhading, Rupandehi, Nawalparasi, Gorkha, Lamjung, Syangja, Myagdi, Baglung, Bardiya, Banke, Dang, Kapilvastu, Argakhachi, Palpa, Gulmi, Pyuthan, Rolpa, Salyan, Rukum, Surkhet, Jajarkot, Dailekh, Darchula, Bajura, Bajhang, Doti, Dadeldhura, Baitadi, Achham, Kanchanpur, Kailali.

Impact Population: 1000 Days mother, under five children, women of reproductive age,

Project Period: May 1, 2016 to Dec 31, 2021

Donor: USAID/ Helen Keller International (HKI)



The NURTURE program supported 1,001,356 individuals with SRMH services.

SAMMAN III

Project Goal: To improve maternal and neonatal health outcomes by strengthening and increasing effectiveness of frontline health workers (HWs) to positively impact maternal, neonatal, and child health (MNCH) goals. Working Districts: Kailali, Doti, Dadeldhura, Kavre, and Sindhuli

Impact Population: Women of reproductive age, pregnant women, new-born children (0-28 Days) and children less than five years.

Project Period: Oct 2015 to Sept 2018 Donor: Glaxo Smith Kline (GSK), UK/ CARE UK

AWASAR

Project Goal: Improve the nutritional and educational status of hard to reach children in three districts of the Mid-Western high hills of Nepal.

Working Districts: Bajura and Mugu Impact Population: School going Girls and boys, teachers, farmers groups, mothers groups Project Period: January 2016 - December 2018 (3 years)

Donor: DANIDA/CARE Denmark

ACCESS

Project Goal: To improve maternal and newborn health and reduce mortality of mothers and infants by increasing access and quality of health services.

Working Districts: Bajura

Impact Population: All women of Reproductive age, pregnant women and newly delivered/lactating mothers and their families, new-born children, marginalized/mobile Indigenous groups

Project Period: May 2014-Oct 2016, and extension till May 2018 **Donor:** CARE Denmark





©Christina Holland

66% of Women who have experienced any type of physical or sexual violence have not sought any help or talked with anyone about resisting or stopping the violence they experience - Source NDHS 2016. CARE Nepal through its various programs and initiatives, strives to address Gender Based Violence (GBV) in Nepal.

Continuing the work to reduce GBV, CARE Nepal, with the lead from National Women Commission and economic support from World Bank will be initiating the first ever 24 Hours National Helpline to help the people affected by GBV in the coming months

It is time to Break the Silence and Stop the Violence!

Gender Based Violence (GBV) and Violence Against Women and Girls (VAWG)

Adopting a DO NO HARM approach, CARE's work on Gender Based Violence (GBV) aligns itself to achieving the organization's vision, and goal of supporting people of all genders to exercise their right to a life of dignity, security, freedom and harmony where diversity is celebrated. In 2017, CARE Nepal was able to reach more than **6,167** individuals through this program.



In 2017, CARE Nepal achieved this by working with household, community and broader levels with a focus on transforming drivers and triggers of GBV, including women's empowerment, engaging men/boys, facilitating community dialogues, strengthening community governance, research on GBV for advocacy and practice, and supporting movements and national advocacy for policy change.

Through the various projects, such as Safe Justice and Sambodhan Project, CARE Nepal supported voices from marginalized communities to represent and negotiate their rights in district, national, regional and global forums. This was especially true when the communities conducted awareness rallies and held meetings with regards to the Domestic Violence Act. These activities have strengthened commitments, priorities and plans for action around GBV across global, regional, national and district level.

PROGRAM INITIATIVES

Safe Justice

Project Goal: Women empowerment and improving men's engagement in gender equality

Working Districts: Kapilvastu, Chitwan and Makwanpur Impact Population: Poor vulnerable socially excluded women Project Period: January 2013 to December 2016 Donor: Austrian Development Cooperation, CARE Austria



The PREVENT program supported 3,248 women and girls through its various initiatives.

SAMBODHAN

(Integrated Platform for Gender Based Violence Prevention and Response in Nepal)

Project Goal: The Development objective of this project is to improve the response to Gender Based Violence in Nepal by improving the quality and reach of services for GBV survivors through a helpline, promoting greater awareness among key stakeholders and strengthening the capacity of National Women Commission (NWC).

Working Districts: Kathmandu, Bhaktapur, Lalitpur and Nuwakot

Impact Population: Women and girl survivors of gender based violence

Project Period: May 2016 to April 2019 Donor: World Bank



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RESPOND



As part of RESPOND, in order to ensure that our communities understand the need to prepare themselves to withstand future disasters, our program initiatives organize discussions amongst the community members to make them aware on possible disasters and safety measures.

Humanitarian Response, Preparedness and Disaster Risk Reduction (DRR)

Globally, CARE is amongst the first to arrive and the last to leave during a humanitarian crisis. During the April 2015 Earthquake in Nepal, CARE was one of the first international agencies on the ground – providing live saving supplies to the people affected by the devastation.

During fiscal year 2017, through the various initiatives under the RESPOND theme, CARE Nepal supported the families affected by the 2015 earthquakes to rebuild their lives in a safe and resilient way. Through our initiatives on Disaster Risk Reduction (DRR), we have also helped people and communities better prepare for future disasters. Under the RESPOND theme, we helped people respond to, prepare for, and recover from disasters. Further, we provided self-recovery support to the communities (Especially



In 2017, CARE Nepal was able to reach more than 373,890 individuals through this program. to marginalized women and adolescent girls) to accelerate reconstruction and strengthen community capacity to recover and reconstruct in a manner which reduces vulnerability to hazards and increases resilience of earthquake affected communities. Through our emergency response and recovery programs, we promoted and restored the livelihoods and economic opportunities of the disaster affected households with enhanced resilience ensuring equitable and sustainable food and nutrition security.

PROGRAM INITIATIVES

Nepal Earthquake response and Recovery

Project Goal: To provide lifesaving shelter, water sanitation and hygiene, reproductive health, gender based violence and livelihood assistance, to help the affected communities recover from the 2015 earthquakes.

Working Districts: Gorkha, Sindhupalchowk and Dhading Impact population: Communities affected by the April 2015 earthquake

Project Period: April 2015 to April 2019

Donor's name: DFID, HERMES foundation, Aktion Deutschland Hilft (ADH), DEC, Taiwan ICDF, NORAD

PRAYAAS

Strengthening resilience of local communities and institutions from the impacts of natural disaster along the earthquake affected regions of Nepal.

Project Goal: To strengthen resilience of the most at risk communities including persons with disabilities to natural disasters through risk informed programming.

Working Districts: Sindhupalchowk, Dhading, Gorkha, Dolakha Impact population: Communities most vulnerable to disaster with special focus on marginalized people

Project Period: May 2016 to December 2017

Donor: ECHO, Austrian Development Cooperation (ADC)



Through the RESPOND program, CARE helped **71,698** prepare for future disasters by making them aware about the importance and ways of disaster risk reduction.

VISTAR II

Strengthening resilience of communities and institutions from the impact of natural disaster in Far and Mid-western region of Nepal.

Project Goal: To reduce disaster vulnerability, mitigate the impact of disasters and promote evidence based advocacy

Working Districts: Dadeldhura, Kailali, Dang and Kanchanpur Impact population: Communities most vulnerable to disaster with special focus on marginalized people

Project period: March 2015 to August 2016 Donors: ECHO, ADC, CARE Austria

DRR and Build Back Better Schools in Nepal

Project Goal: Strengthening the institutionalization of school based DRR, safe, inclusive and resilience schools postearthquake at local and district levels."

Working District: Makwanpur

Impact population:Communities most vulnerable to disaster with special focus on marginalized people. Project period: January 2016 to December 2017 Donors: CARE Luxemburg







Issues related to exclusion of women and marginalized groups from conservation and benefits sharing especially heightened by deep rooted social systems are always treated in isolation or as a standalone issue. CARE Nepal, through the SUSTAIN program aims to create a conversation around this aspect of conservation, sensitize the locals about their rights and sensitize policy makers for evidence based investments in gender equality and social inclusion.

Food and Nutrition Security, Livelihoods, Natural Resources and **Climate change**

Globally, CARE seeks to increase resilience by focusing on how women, adolescent girls, children and men can effectively plan for and manage shocks and stresses that threaten their well-being by analyzing the underlying causes of poverty and vulnerability, including gender inequality and social exclusion.



In 2017, CARE Nepal was able to reach more than 187,351 individuals through this program. In 2017, CARE Nepal continued to address governance challenges to promote pro-poor, gender equal and socially inclusive institutions and policies, protecting and promoting food and nutrition security, economic empowerment and resilience to climate change among women and adolescent girls from poor, vulnerable socially excluded groups. CARE Nepal also worked towards building local capacity of civil society institutions related to livelihoods, natural resources and climate change which included improving governance and management of groups such as forestry user groups and the federation, farmer groups and networks, the Land Rights Forum and National Community Disaster Management Committees (NCDMCs).

PROGRAM INITIATIVES

Hariyo Ban Program

Project Goal: To increase ecological and community resilience in (Chitwan Annapurna Landscape) CHAL and (Terai Arc Landscape) TAL

Working Districts: Kailali, Kanchanpur, Banke, Bardiya, Chitwan, Kaski, Syangja, Tanahun, Lamjung and Gorkha Impact Population: People who are involved in Natural Resource Management groups.

Project Period: July 2016 – July 2021

Donor: United States Agency for International Development (USAID) Nepal.

SABAL

Project Goal: To ensure that the targeted populations in the targeted districts of Nepal are more resilient and food secure.

Working Districts: Makwanpur, Sindhuli, Ramechhap, Udaypur, Okhaldhunga, Khotang, Kavrepalanchowk, and Sindhupalchowk districts of Nepal

Impact Population: Most marginalized vulnerable and food insecure households.



Through the SUSTAIN program, CARE Nepal supported in increasing the resilience of 139,758 individuals towards climate change.

Project Period: December 2014 to October 2019 **Donor:** United States Agency for International Development (USAID) Nepal

Right to Food

Project Goal: Representative civil society organizations have contributed to the realization of right to food to the benefit of impact groups.

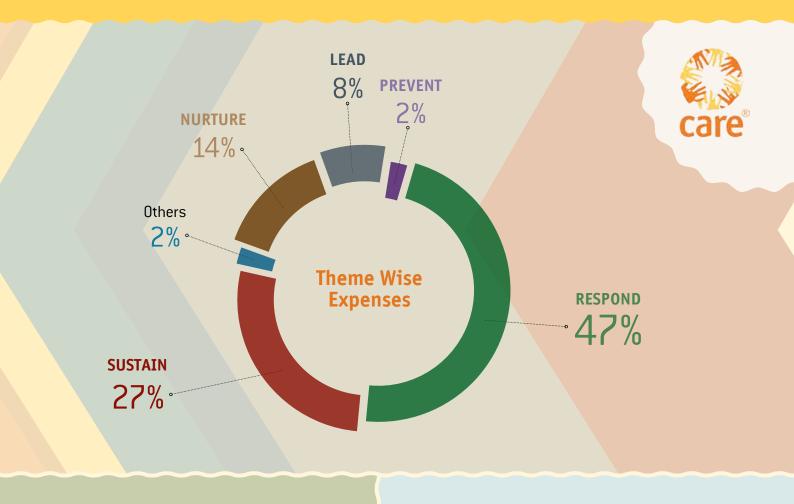
Working Districts: Okhaldhunga, Siraha and Udaypur Impact Population: Small holders and landless farmers with specific focus on marginalized groups such as women, Dalits and Janajatis

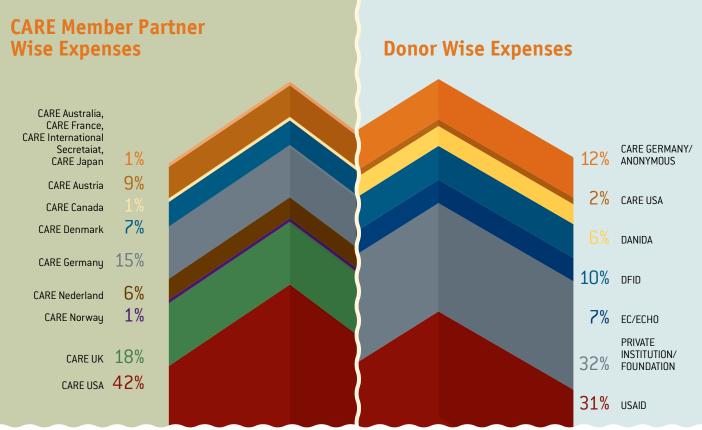
Project Period: July 2013 to December 2017 (next phase to be begin in 2018)

Donor: DANIDA/CARE Denmark



FINANCIAL STATEMENTS FOR FY 17





Independent Auditor's Report

Chartened Accountants Kumari Marg, House No. 43 P.O. Box 8137, Naxal, Kathmandu, Nepal BRS Neupane & Co.

Tel : 977-1-4411314 Fax : 977-1-4420572 E-mail : chartered@brs.com.np Web : www.brs.com.np

BRS Neupane & Co.

INDEPENDENT AUDITORS' REPORT

We have audited the accompanying Financial Statements related schedules thereto, of "CARE Nepal" which comprises the Balance Sheet as at 30^{th} June 2017, and the Statement of Revenue and Expenditure, and a summary of Significant Accounting Policies and Other Explanatory Notes.

Management's Responsibility for the Financial Statements

designing, implementing and maintaining internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud Management is responsible for the preparation and fair presentation of these financial statements in accordance with Generally Accepted Accounting Principles. This responsibility includes: or error; selecting and applying appropriate accounting policies; and making accounting estimates that are reasonable in the circumstances.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with Nepal Standards on Auditing and relevant practices in Nepal. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance whether the financial statements are from material misstatement

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements 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 entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements give a true and fair view of the financial position of "CARE Nepal" as at 30²⁸ June, 2017 and its income and expenditure for the year ended in accordance with Generally Accepted Accounting Principles and relevant practices.

Date: 15th September 2017 Place : Kathmandu, Nepal

Nexia

CA. Gyanendra B. Bhari the Partner

As of 30 June 2017 **Balance Sheet** CARE-Nepal

| Particular | Schedule | FY 2017 (USD) | (asn)9toz Ad |
|--------------------------------|----------|---------------|--------------|
| Assets | | | |
| Cash&Bank | 2 | 557,161.83 | 953,003.11 |
| Grant / Contract Receivable | 3 | 1,994,150.94 | 840,413.99 |
| Other Receivable | 4 | 410,139.01 | 724,924.69 |
| Prepayments / Deposits | s | 2,388.23 | 5,535.67 |
| Fixed Assets | 9 | 153,129.73 | 285,361.66 |
| Intra Company Receivable | 7 | 1,824,982.01 | 4,108,935.40 |
| Total assets | | 4,941,951.75 | 6,918,174.52 |
| Liabilities | | | |
| Account Payable | 8 | 770,535.89 | 420,966.50 |
| Program Advance from Donors | 9 | 698,884.04 | 2,883,748.13 |
| Taxes and Other Deductions | 10 | 47,367.61 | 34,159.94 |
| Employee Accruals & Provisions | 11 | 1,197,337.41 | 936,423.47 |
| Total liabilities | | 2,714,124.95 | 4,275,298.04 |
| Net assets | | | |
| Net Assets | | 2,227,826,79 | 2,642,876.48 |
| Total Net Assets | | 2,227,826.79 | 2,642,876.48 |
| Total Liabilities | | 4,941,951.75 | 6.918,174.52 |

accounts form a significant part of the financial statement (schedule 12)



WHERE WE WORK - 2017



- Gender Based Violence (GBV) and Violence Against Women and Girls (VAW)
- 🔺 Humanitarian Response, Preparedness & Disaster Risk Reduction
- 🖄 Food & Nutrition Security, Livelihoods, Natural Resources and Climate Change
- + Sexual Reproductive and Maternal Health
- Women & Girls' Leadership, Voice and Empowering Education

List of donors (FY 17)

- 1. OPEC Fund For International Development (OFID)
- 2. European Commission
- 3. Danish International Development Agency (DANIDA)
- 4. DANIDA and Danish television
- 5. Kendeda Foundation
- 6. United States Agency for International Development (USAID)
- 7. Patsy Collins (PCTFI)
- 8. World Bank
- 9. Glaxo Smith Kline (GSK)
- 10. Department for International Development (DFID)
- 11. Bill and Melinda Gates Foundation/ARMU
- 12. European Commission Humanitarian Aid and Civil Protection (ECHO)
- 13. Austrian Development Cooperation (ADC)
- 14. David P. Tenberg Charitable Foundation Inc.
- 15. CARE Austria
- 16. European Commission, through CARE Denmark
- 17. H&M Conscious Foundation
- 18. CARE Netherland
- 19. Diageo Foundation

- 20. Microsoft Srilanka
- 21. Red Charity
- 22. Department of Foreign Affairs Trade and Development (DFATD)
- 23. Ministry of Foreign Affairs (MoFA)
- 24. CARE Germany
- 25. Taiwan International Cooperation and Development Fund (ICDF)
- 26. Supporting Access to Family Planning and Post-Abortion Care (SAFPAC)
- 27. Appeal Fund
- 28. Department for International Development (DFID)
- 29. GAC (Global Affairs Canada)
- 30. International Organization for Migration (IoM)
- 31. Austrian Development Agency (ADA)
- 32. Hermes International
- 33. SH0/Giro 555
- 34. Norway MoFA
- 35. Norwegian Agency for Development Cooperation (NORAD)
- 36. Disaster Emergency Committee (DEC)
- 37. Aktion Deutschland Hilft (ADH)
- 38. Munich Re
- 39. Hartman Group
- 40. CARE Germany

CARE Member Partners

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

Partners' List for FY 16

- 1 Working for Access and Creation (WAC), Nepal
- 2 Participatory Effort at Children Education and Women Initiative Nepal (PEACEWIN)
- 3 Forum for Awareness and Youth Activity (FAYA) Nepal
- 4 Society for Environment and Human Resource Development (SOURCE)
- 5 Nepal National Dalit Society Welfare Organization (NNDSWO)
- 6 Sahakarya Nepal
- 7 We Women
- 8 National Farmer Group Federation (NFGF)
- 9 Community Self Reliance Center (CSRC)
- 10 Siddhartha Samudayik Samaj
- 11 Dalit Social Development Center (DSDC)
- 12 Social Awareness Center (SAC) Nepal
- 13 Generating Income to Foster Transformation (GIFT)- Bajura
- 14 Reconstruction and Research Development Centre (RRDC)-Mugu
- 15 Jana Sewa Samaj Nepal (JSSN),
- 16 Nawa Kiran Sewa Samaj Nepal (NKSSN)
- 17 Centre for Community Development Nepal (CCDN)
- 18 Integrated Village Development Service (IVDS),
- 19 Forum For Rural Development (FORD)
- 20 Kot Gadhi Shikhar Samaj (KOSIS)
- 21 Community Human Resource Development Program Golmatar (CHURDEP)
- 22 Pahadi Samaj Kalyan Kendra MSWC
- 23 Hamro Prayash Nepal
- 24 Sindhuli Integrated Development Service (SIDS) Nepal,
- 25 Human Rights & Environment Center (HURENDEC),
- 26 Jalpa Yuba Samuh (JYS),
- 27 SHANTI JANA ADARSHA SEWA KENDRA (SJASK), Kavrepalanchowk
- 28 Rural Development Tuki Association (RDTA), Dolakha
- 29 Tuki Association Sunkoshi, Sindupalchowk
- 30 Langtang Area Conservation Concern Society (LACCoS), Rasuwa
- 31 Community Development Center- Nepal (CDC-Nepal), Nuwakot

- 32 Rural Women Service Center (RWSC)
- 33 Mahila Atmanirvarta Kendra (MANK), Melamchi
- 34 Group of Helping Hands (SAHAS- Nepal)
- 35 Unification Nepal (UN), Gorkha
- 36 Shree Swanra Integrated Community Development Center (SSICDC), Gorkha
- 37 Sahayatri Samaj, Dhading
- 38 Unity for Sustainable Community Development (USCD), Rupandehi
- 39 Sunshine Social Development Organization (SSDO)
- 40 Action Nepal
- 41 Resource Identification and Management Society (RIMS) Nepal
- 42 Environment Conservation and Development Forum, Taplejung
- 43 Nepal Janauddhar Association (NJA)
- 44 Shilichong Club Social Development Center, Sankhuwasabha
- 45 Young Star Club, Solukhumbu
- 46 Health, Education, Human Right, Local Development, Drinking Water and Environment Nepal, Bhojpur
- 47 Sustainable Enterprise and Environment Development Society (SEEDS)
- 48 Kakani Community Development Center, Nuwakot
- 49 Backwardness Eradication Society, Nawalparasi
- 50 System Development Service Center, Gorkha
- 51 Rural Community Development Center, Lamjung
- 52 Diyalo
- 53 Multidisciplinary Institute for Livelihood Enhancement and Natural Resource Management, Myagdi
- 54 Gaja Youth Club, Baglung
- 55 Kalika Self Reliance Social Center Nepal, Kapilvastu
- 56 Backwardness Eradication Society, Palpa
- 57 Lumbini Social Development Centre, Argakhanchi
- 58 Integrated Rural Development Society, Gulmi
- 59 Jana Jagaran Mahila Sangh, Bardiya
- 60 Bheri Environmental Excellence Group, Banke
- 61 Backward Society Education (BASE)
- 62 Mallarani Rural Development Concern Center, Pyuthan
- 63 Rural Development & Awareness Society Nepal, Rolpa
- 64 Dalit Bikash Samaj, Salyan
- 65 Rukumeli Social Development Centre, Rukum
- 66 Hilly Region Development Campaign, Jajarkot
- 67 Everest Club, Dailekh
- 68 Community Rural Development Society, Darchula
- 69 Women Development Forum, Bajura
- 70 Groups for Social and Technical Development Service, Bajhang
- 71 Rural Women's Development and Unity Center, Dadeldhura
- 72 Social Development and Awareness Society, Baitadi
- 73 Social Empowerment Building and Accessibility Center (SEBAC) Nepal, Achham
- 74 Nepal National Social Welfare Association, Kanchanpur
- 75 Diyalo Pariwar
- 76 Good Neighbor Association (GONESA)
- 77 Local Initiative for Biodiversity, Research and Development (LI-BIRD)
- 78 National Network of Community Disaster Management Committee (NCDMC) Nepal
- 79 National Land Right Forum Nepal (NLRF)
- 80 Beyond The Beijing Committee (BBC)
- 81 University of New South Wales

LEAD

Women and Girls' Leadership and Voice



GOAL: 1.2 million PVSE women and adolescent girls are empowered to exercise their rights and identity

Outcomes and Intervention Areas

increased women's leadership & decision making

Increased socio-economic empowerment Increased adolescent girls' empowerment



- Increased representation at all levels
- Increased decision
 making power
- Women are valued
- Improved norms and relations

- Realised property rights
- Equal access to citizenship
- Women's work is equally valued (paid and unpaid)
- Financial inclusion
- Increased, diversified, resilient incomes
- Women have **skills, knowledge and capacity** to participate in economic activities

- Access to empowering education
- Increased voice, leadership and representation
- Sexuality and SRH rights
- Reduction in harmful practices

GESI Resilience Governance

LEARNING: Barriers to delaying marriage the prospects for girls who do not marry young, including alternatives for girls' social and economic opportunities?

INFLUENCING: Sufficient resources, planning and monitoring to ensure the implementation of the Child Marriage Strategy including engagement across all Ministries

NURTURE

Sexual, Reproductive and Maternal Health (SRMH)



GOAL: 1 million marginalized women and adolescent girls will exercise their rights to quality Sexual, Reproductive and Maternal Health information & services

Outcomes and Intervention Areas

increased **access to quality, inclusive, resilient and accountable** SRMH information and services

Increased **utilisation and demand** for quality SRMH information and services

Women and girls are

empowered to demand

quality services from

have increased SRMH

decision making power

providers

behaviour

at HH level

• Improved SRMH

practices and

Women and girls



increase access

- Improved quality and resilience of services
- Effective facility quality improvement initiatives
- Access to **financial support** for SRMH (eg health insurance)
- Mutual accountability for improved services from local to national levels
- Focus on the following issues:
 Maternal, New-born and Child Health
 - Adolescent Health
 - GBV
 - Nutrition

GESI

Resilience

Governance

LEARNING: Barriers to delaying marriage the prospects for girls who do not marry young, including alternatives for girls' social and economic opportunities?

INFLUENCING: Sufficient resources, planning and monitoring to ensure the implementation of the Child Marriage Strategy including engagement across all Ministries

PREVENT Gender Based Violence (GBV) and Violence Against Women and Girls (VAWG)



GOAL: 1.5 million marginalized people, focusing on women and adolescent girls, exercise their rights to a life free from violence

Outcomes and Intervention Areas

Improved knowledge and attitudes related to GBV

Access to quality service provision

Supportive, responsive institutions and structures



- Improved knowledge and information
- Improved social norms relating to violence, relations, harmful practices and gender equality
- Increased individuals' aspirations, confidence, independence and resilience
- Improved quality and resilience of services, including in emergencies
- Inceased access to services
- Increased accountability of service providers
- Improved quality of services and support for survivors
- Supportive laws and policies implemented and enforced
- Monitoring legal frameworks
- Adequate budgets and support for implementation
- Improved safe public spaces
- Increased solidarity networks and fora

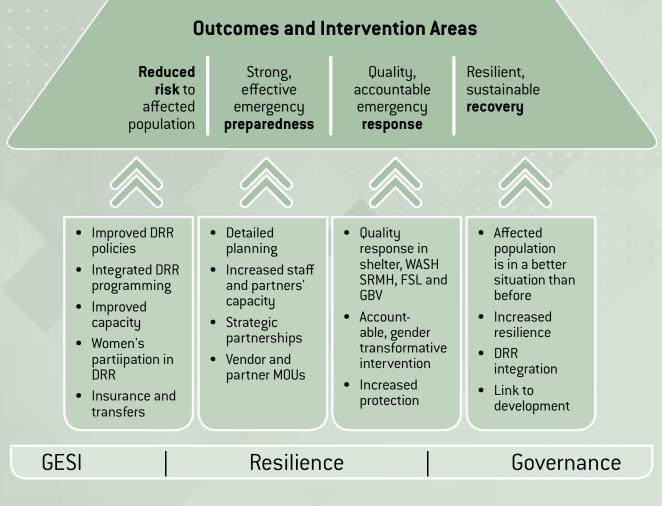
GESI Resilience Governance

LEARNING: Integrated approaches to engage men and boys in preventing and responding to GBV **INFLUENCING:** Effective implementation and monitoring of the Domestic Violence Act to improve legal justice

RESPOND Humanitarian Response, Preparedness and Disaster Risk Reduction (DRR)



GOAL: 500,000 marginalized people, focusing on women and adolescent girls, affected by humanitarian crises will be better able to protect themselves and their families and receive quality, life-saving humanitarian assistance



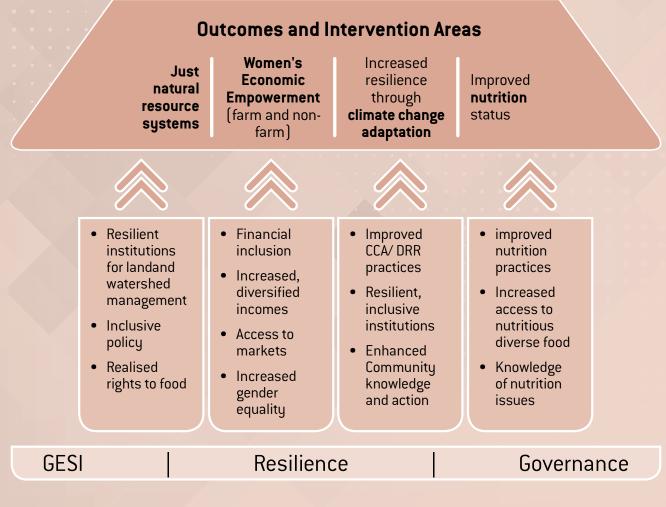
LEARNING: Best practices in humanitarian intervention and disaster risk management related to the 2015 earthquakes

INFLUENCING: Parliamentary approval of the National Disaster Management Act

SUSTAIN Food and Nutrition Security, Livelihoods, Natural Resources and Climate Change



GOAL: 750,000 marginalized people, focusing on women and adolescent girls, have resilient food, nutrition and economic security



LEARNING: Climate smart technologies that increase FNS, promote GESI and have potential for mass replication

INFLUENCING: Effective development, implementation and monitoring of the Right to Food Framework ensuring GESI and inclusion of land use issues.

GOAL By 2020 CARE will support 3.95 million people from the most vulnerable and ovulnerable and excluded communities in Nepal to overcome poverty and social injustice.

GOAL: 1 million

marginalized women and adolescent girls will exercise their rights to quality Sexual, Reproductive and Maternal Health information & services

Outcomes and Intervention Areas

increased access to quality, inclusive, resilient and accountable SRMH information and services

Increased **utilisation and demand** for quality SRMH information and services

Mutual accountabilitu for improved services from local to national levels

• Providers actively target PVSE groups to increase access • Improved quality and resilience of services Effective facility quality improvement initiatives

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GESI

Resilience

Governance

Access to financial support for SRMH (eg health insurance)

GESI

Focus on the following issues: • Maternal, New-born and Child Health • Adolescent Health GBV
 Nutrition

Women and girls have increased SRMH decision making power at HH level

providers Improved SRMH practices and behaviour

Women and girls are empowered to **demand quality services** from providere

Resilience

Governance

BOVENIANCE

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Outcomes and Intervent

Resilience





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