





In fiscal year 2018, CARE worked in **95 countries**, contributing to saving lives, defeating poverty and achieving social justice.



Globally CARE directly reached 56 million people in FY 18

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.

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 dig-

nity 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, 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

Program 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

Outcomes

Socio-Economic Empowerment

Marginalised women and adolescent girls have the knowledge, skill, agency, power and resources to claim their rights

Transformed Social Norms & Structure

Nepalese society in all its forms (cultural, political, religious, social, economic, psychosocial), values and upholds the rights of women and girls; and assures their access to quality services

Social & Political Power

Women and Adolescent Girls are able to exercise their citizen power (as full rights holders) and effectively engage with accountable and gender-responsive institutions (at all levels)

Impact Populations

Marginalized Women

Who are poor, vulnerable and socially excluded

Adolescent Girls

X

Who are poor, vulnerable and socially excluded

HUMAN RESOURCE

+

CARE Nepal has an inclusive human resource policy. As of June 30 2018, the organization had 241 staff, composed of 93 women and 148 men out of which 18 were Dalits, 13 belonged to the Terai region, 2 Muslims, 54 Janajatis, 30 Newars, 38 Chhetris, 83 Brahmins and 2 International staff. There were 9 women, 1 of whom is a person with disability, out of the 18 staff in senior leadership positions.

WHERE WE WORK - 2018

Geographical Coverage of CARE Nepal's Ongoing Projects



OUR DONORS

- 1. Access Additional Fund
- 2. Aktion Deutschland
- 3. CI Secretariat
- 4. Convention De Mecenat (AXA)
- 5. Danish Emergency Relief Fund (DERF)
- 6. Danish International Development Agency (DANIDA)
- 7. David P. Tenberg Charitable Foundation
- 8. Department for International Development (DFID)
- 9. Department of Foreign Affairs, Trade and Development, Canada

- 10. European Civil Protection And Humanitarian Aid Operations (ECHO)
- 11. GlaxoSmithKline (GSK) Foundation
- 12. Hartman Group
- 13. MAE Luxembourg
- 14. Ministry of Foreign Affairs Luxembourg (MoFA)
- 15. Supporting Access to Family Planning & Post Abortion Care (SAFPAC)
- 16. Taiwan ICDF
- 17. The Kendeda Fund
- **18.** The Patsy Collins Trust Fund Initiative (PCTFI)
- 19. The World Bank

CARE MEMBER PARTNERS

- 1. CARE Australia
- 2. CARE Canada
- 3. CARE Denmark
- 4. CARE Germany
- 5. CARE France
- 6. CARE India
- 7. CARE Interna-
- tional Japan
- 8. CARE Nether-lands

- 9. CARE Norway
- 10. CARE Austria
- 11. CARE Peru
- **12. CARE Thai** Foundation
- 13. CARE International UK
- 14. CARE USA

OUR PARTNERS

- 1. Action Nepal, Dhading
- 2. Backward Society Education (BASE), Dang
- Backwardness Eradication Society (BES), Nawalparasi
- 4. Backwardness Eradication Society (BES), Palpa
- 5. Bheri Environmental Excellence (BEE) Group, Banke
- Centre for Community
 Development Nepal
 (CCDN), Makwanpur
- 7. Community Human Resource Development Program Golmatar (CHURDEP), Ramechhap
- 8. Community Rural Development Society (CRDS), Darchula
- Community Self Reliance Centre (CSRC), Sindupalchowk
- Dalit Social Development Center (DSDC), Kapilvastu
- 11. Dalit Bikash Samaj (DDS), Salyan
- 12. Diyalo Pariwar, Chitwan
- Environment Conservation and Development Forum (ECDF), Taplejung
- 14. Everest Club (EC), Dailekh
- 15. Forum for Awareness and Youth Activities (FAYA), Kailali
- Forum For Rural Development (FORD), Okhaldhunga
- 17. Generating Income to Foster Transformation (GIFT)
- Good Neighbour Service Association (GONESA), Kaski

- Groups for Social and Technical Development Service (GSTDS), Bajhang
- Hamro Prayash Nepal, Sindhuli
- 21. Hilly Region Development Campaign (HRDC), Jajarkot
- 22. Human Right, Local Development, Drinking Water and Environment Nepal (HEEHURLDE), Bhojpur
- 23. Human Rights & Environment Center (HURENDEC),Udaypur
- 24. Integrated Rural Development Society (IRDS), Gulmi
- 25. Integrated Village Development Service (IVDS), Makwanpur
- 26. Jalpa Integrated Development Society (JIDS), Udaypur
- 27. Jana Jagaran Mahila Sangh (JJMS), Bardiya
- 28. Jana Sewa Samaj Nepal (JSSN), Khotang
- 29. Kakani Community
 Development Center
 (KCDC), Nuwakot
- 30. Kalika Self Reliance Social Center Nepal (KSSC), Kapilvastu
- 31. Kot Gadhi Shikhar Samaj (KOSIS), Okhaldhunga
- 32. Lumbini Social Development Centre (LSDC), Arghakhanchi
- 33. Mallarani Rural Development Concern Center (MRDCC), Pyuthan
- 34. Mahila Atma Nirbharta Kendra (MANK), Sindupalchok
- 35. Multidisciplinary Institute for Livelihood Enhancement and Natural

- 41. Nepal Janauddhar Association (NJA), Panchthar
- 42. Nepal National Dalit Social Welfare Organization (NNDSWO), Dadeldhura
- 43. Nepal National Social Welfare Association (NNSWA), Kanchanpur
- 44. National Empowerment and Equity Development Society (NEEDS), Kanchanpur
- National Network of Community Disaster Management Committee (NCDMC), Kathmandu
- 46. Pahadi Samaj Kalyan Kendra, Ramechhap
- 47. Peace Win Nepal, Bajura
- 48. Rural Community Development Center (RCDC), Lamjung
- Reconstruction and Research Development Centre, RRDC
- Resource Identification and Management Society Nepal (RIMS-Nepal), Dhading
- 51. Rukumeli Social Development Centre (RSDC) Rukum
- Rural Development & Awareness Society Nepal (RUDAS) Rolpa
- 53. RURAL DEVELOP-MENT TUKI ASSOCIA-TION (RDTA), Dolakha
- 54. Rural Women's Development and Unity Center (RUWDUC) Dadeldhura
- SAHAKARYA Nepal, Sindhuli
- SAHAS (Group of Helping Hands), Lalitpur
- 57. Sahayatri Samaj Nepal
- 58. Shilichong Club Social Development Center (SCSDC)- Sankhuwasa-

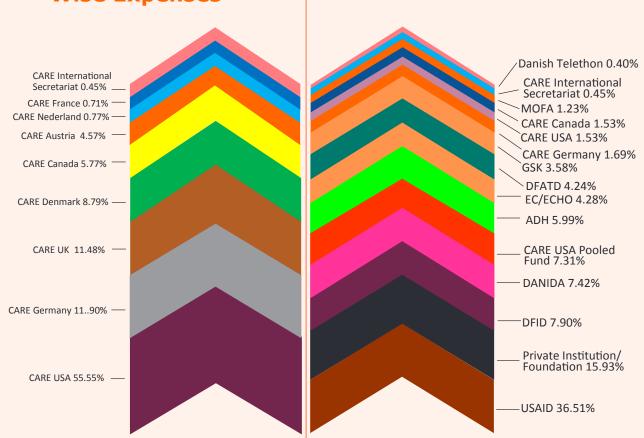
- bha
- 59. Siddhartha Samudiyak Samaj (SSS), Rupandehi
- 60. Siddhartha Social Development Centre (SSDC), Kapilvastu
- 61. Sindhuli Integrated
 Development Service
 (SIDS) Nepal,
- 62. Social Awareness Center (SAC) Nepal, Surkhet
- 63. Social Development and Awareness Society (SODEAS) Baitadi
- 64. Social Empowerment Building and Accessibility Center Nepal (SEBAC Nepal) Achham
- 65. Society for Environmental and Human Resource Development Nepal (SOURCE) Doti
- 66. SICDC (Shree Swanra Integrated Development Center), Gorkha
- 67. Sunshine Social Development Organization (SSDO), Kapilvastu
- 68. Sustainable Enterprise & Environment Development Society (SEEDS) Rasuwa
- 69. System Development Service Center (SDSC) Gorkha
- 70. Tuki Association Sunkhoshi, Sindhupalchowk
- 71. Unity for Sustainable Community Development (USCD), Rupandehi
- 72. University of New South Wales, Australia
- 73. We Women, Kavre
- 74. Women Development Forum (WDF) Bajura
- 75. Working for Access and Creation Nepal (WAC-Nepal), Achham
- 76. Young Star Club (YSC)

Together along with our partners, we form a powerful movement in pursuit of a world free from poverty. On behalf of our dedicated staff and the women and adolescent girls that we work with in Nepal, we offer our deep gratitude to our generous donors and partners.

Financial Statements for Fiscal Year 2018

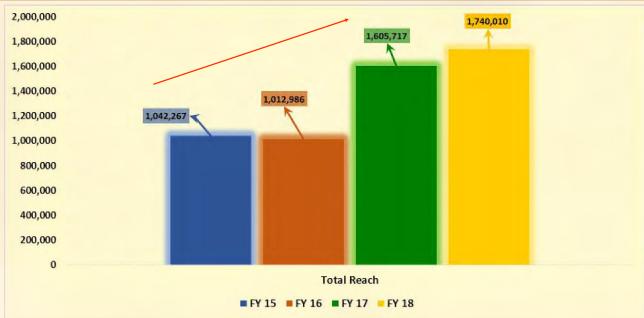




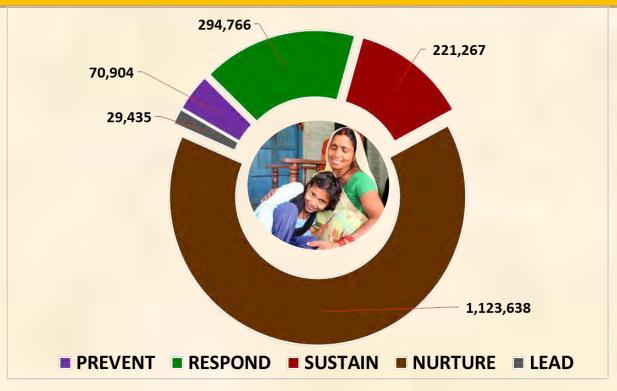


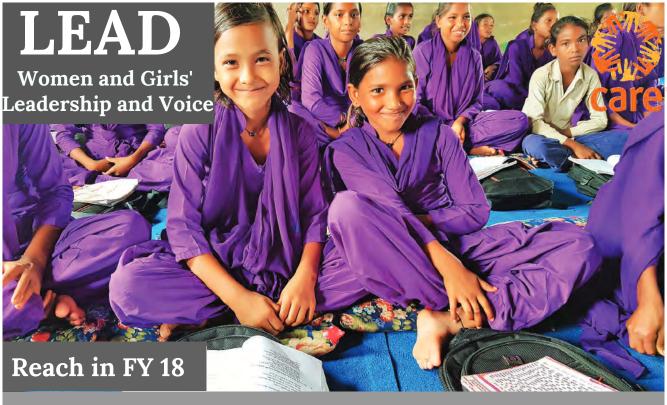
TOTAL REACH by CARE'S PROGRAMS

TOTAL REACH BY THEMATIC PROGRAMS FOR FISCAL YEARS 15, 16, 17 AND 18









Total - 29,435 individuals | Men & Boys - 10,264 | Women & Girls - 19,171

CARE Nepal's LEAD program places women and girls' 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.

The program placed primary focus on strengthening girls' collectives this year to mold the adolescent girls into leaders who strongly advocate for their rights regarding Child, Early and Forced Marriage, increasing girls' access to education, ensuring gender friendly Water, Sanitation and Hygiene Facilities in schools and ensuring safe school environment for girls. Multiple trainings on life skills, public speaking, radio programming and event management were provided to these girls. The girls also participated in many local, district and national level events and went on exposure visits to gain hands-on experience in leadership and advocacy. These girls are now taking on visible leadership roles in community events in support of girls' rights challenging society's gender stereotypical roles. Through these events, the girls engage with allies and champions who are potential advocates for girls' rights to leverage their strengths in their fight. Members of these collectives from ward levels are now participating in discussions of collectives at the municipal and district level to further strengthen solidarity and collaboration in their journey to attain their rights.



TIPPING POINT

This Kendeda/CARE USA funded initiative works with adolescent girls from areas with high child marriage prevalence rates in Kapilvastu and Rupandehi districts with an aim to address the underlying causes of child marriage through a dynamic process of innovation, analysis, learning and advocacy.

MAITRI

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

HAUSALA

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

UDAAN

This OFID/CARE Austria funded initiative works with 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

Empowered and empowering others

Mina Dhawal, Member Sagarmatha Adolescent Group, Kapilvastu district

"I will be completing the 10th grade soon. And I am really excited about pursuing my further studies. A feeling of pride and satisfaction gushes over me as I look back at the last few years of my life. Ever since I joined this adolescent group which was part of the Hausala initiative of CARE, my life has changed for the better. I have been involved in so many discussions about the rights of adolescents & have received trainings on safe and secure education. Most importantly, as the secretary of the group, I have also been able to transfer this knowledge to other girls around me.

What's more, through this platform I was also able to be a part of Ward and Municipality level adolescent groups. Through these bigger platforms I, along with the other members, am able to advocate for the rights of other adolescent girls like me in my district. We also campaigned for and were successful in ensuring enrollment of many out of school children in my district. I vow to continue this advocacy for our rights."

Socio-economic empowerment

(Marginalized women and adolescent girls have the knowledge, skill, agency, power and resources to claim their rights)



208 women and adolescent girls are aware about financial literacy out of which 124 have started their own enterprise & invested their earnings in health, girl children's education, repaying loan, meeting daily expenses and re investing in enterprise.

How is LEAD contributing to CARE Nepal's overall Domains of Change?

Transformed Social Norms & Relations

(Nepalese society in all its forms (cultural, political, religious, social, economic), values and upholds the rights of women and girls; and assures their access to quality services)



1,821 adolescent girls are creating spaces for discussions around menstruation taboos at their homes and are negotiating for girl friendly spaces to include toilet facility and pad availability in schools

1,772 out of school girls are continuing their education in formal schools to achieve their life aspiration.

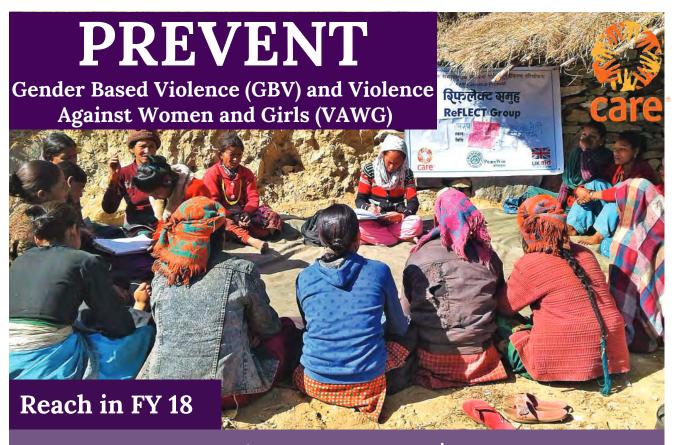
Socio-political power

(Women and Adolescent Girls are able to exercise their citizen power (as full rights holders) and effectively engage with accountable and gender responsive institutions (at all levels)



Through the action of 244 girls from girl collectives, 500 adolescent girls and boys were enrolled into school.

20 adolescent girls participated in local planning process and negotiated with the local government to allocate a budget of NPR 38,000 from 4 RMs for celebration of Children's day.



Total - 70,904 individuals | Men & Boys - 16,124 | Women & Girls - 54,780

Adopting a DO NO HARM approach, CARE's work on Gender Based Violence (GBV) aligns itself to achieve 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.

For decades, women and girls have been subject to discrimination under the suppression of negative social norms. These norms have developed a severe culture of silence which has led to cases of violence to go unreported and not even discussed. In order to break this culture and to empower the marginalized communities, interventions like ReFLECT and Social Change Plans have been introduced through the PREVENT program. These interventions support the communities to identify and reduce burning issues related to injustice which have been promoted by negative social norms.

The ReFLECT classes provide a platform for survivors of GBV to discuss their issues and learn about their rights whereas the Social Change Plan brings together members of the marginalized community and decision makers to change harmful social norms by agreeing on actions for local changes in behavior, and practice that communities can control.



SAFE JUSTICE

SAMBODHAN

This DFID funded initiative works with poor and marginalized populations with a focus on women and girls in Sindupalchowk, Dhading, Gorkha, Achham and Bajura districts of Nepal with an aim to ensure that communities have improved experiences of safety and access to better quality security and justice services, particularly for traditionally excluded and marginalized groups.

This World Bank funded initiative works with women and girl survivors of gender based violence in Kathmandu, Bhaktapur, Lalitpur and Nuwakot districts of Nepal with an aim to improve the response to gender based violence in Nepal by improving the quality and reach of services for its survivors through a helpline, promoting greater awareness among key stakeholders and strengthening the capacity of National Women Commission.

Speaking up is the new norm!

Kamala Sutar, 45 years old, Achham district



"I finally gathered the courage to file a case of domestic violence against my husband. While I was filing the case, my thoughts kept going back to those many instances when I was beaten up and felt helpless. I have been assaulted by my husband from the age of 15, ever since I got married. It is very unfortunate that I grew up believing that violence is common in a marriage. I am a very shy person by nature so I did not have the confidence to speak or express myself in front of anyone before today. But my engagement in the REFLECT group as part of the Safe Justice initiative, turned things around for me. As I took part in the sessions, I began learning about my rights & expressing my views on various social issues.

The next morning my husband was taken into custody and later released after he presented a written commitment stating that he would not repeat such acts. It will take some time before our husband-wife relationship is back to normal. But I hope that women speaking up against any act of oppression is the new normal."

Socio-economic empowerment

(Marginalized women and adolescent girls have the knowledge, skill, agency, power and resources to claim their rights)



Due to continued interface between REFLECT groups and locally elected representatives, NPR 9.7 million was allocated by 11 rural municipalities in Gorkha, Dhading, Sindhupalchowk, Achham and Bajura districts for activities related to women economic empowerment, women group formation, rehabilitation support for survivors, building safe houses, etc.

How is PREVENT contributing to CARE Nepal's overall Domains of Change?

Transformed Social Norms & Relations

(Nepalese society in all its forms (cultural, political, religious, social, economic), values and upholds the rights of women and girls; and assures their access to quality services)



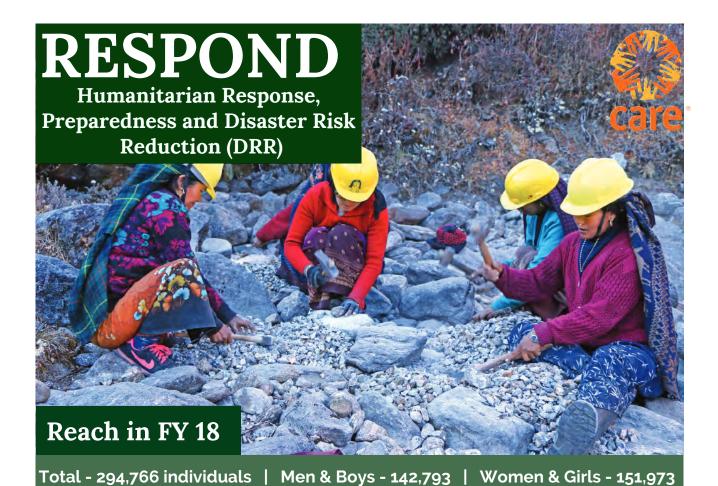
Incidences of abuse by a spouse or partner has decreased by 2.6% in Gorkha and 1% in Achham from overall baseline of 12.7%, indicating that the local communities have become less tolerant of harmful social practices such as IPV.

Socio-political power

(Women and Adolescent Girls are able to exercise their citizen power (as full rights holders) and effectively engage with accountable and gender responsive institutions (at all levels)



814 cases related to Gender Based Violence have been referred for justice and other forms of services through the Helpline operated by National Women Commission and through the Safe Justice Initiative



Globally, CARE is among the first to arrive and the last to leave during a humanitarian crisis. Through the various initiatives under the RESPOND program, CARE Nepal supports people to respond to, prepare for, and recover from disasters. Further, self-recovery support is also provided to the communities with a focus on marginalized women and adolescent girls.

The 2015 earthquake in Nepal impacted different communities on different scales out of which the single women, elderly individuals, child-headed homes and people with disabilities were adversely affected. While the capable households moved onto their new homes, many extreme poor households were still out in their temporary shelters having to face the adversity of nature on a daily basis. With the motto of 'leaving no one behind', we worked with these extreme poor families to support and provide them with the necessary support to construct their houses. Through this, they were able to meet the criteria to claim the financial grant provided by the government. These groups have now moved into their own permanent homes and are equipped with an improved set of livelihoods. The happiness of these individuals reflects in their warm smiles every time we greet them today. Whenever we visit these communities, their new independence and pride of being homeowners make us proud as well.



EARTHQUAKE RESPONSE & RECOVERY

This initiative funded by various donors namely ADH, CARE Canada, GAC, DFID, Hartmann group, Taiwan ICDF, Ministry of Foreign Affairs-Luxembourg, CARE USA, ZF, etc. works with communities affected by the April 2015 earthquake in Gorkha, Sindupalchowk and Dhading with an aim to provide life saving shelter, water sanitation and hygiene, reproductive health, gender based violence and livelihood assistance to help the affected communities to recover.

PRAYAAS I & II

This ECHO and ADC funded initiative works with communities (including persons with disabilities) that are most vulnerable to disaster with special focus on marginalized people in Sindupalchowk, Dhading, Gorkha, Dolakha, Gorkha and Makwanpur districts of Nepal with an aim to strengthen resilience of said communities to natural disasters through risk informed programming.

FLOOD RESPONSE

This initiative funded by CARE Denmark, AXA, DERF, CARE USA (Pool Fund) and SAFPAC, works with communities affected by the August 2017 floods in Banke, Bardiya, Kailali and Siraha with an aim to provide life saving shelter, water sanitation and hygiene, reproductive health, gender based violence and livelihood assistance to help the affected communities to recover.

SCHOOL BASED DISASTER RISK REDUCTION

This CARE DL MUNICH RE funded initiative works with communities most vulnerable to disaster with a special focus on marginalized people in Makwanpur with an aim to strengthen the institutionalization of school based disaster risk reduction, safe, inclusive and resilience schools post earthquake at local and district levels.

Journey to empowerment

Sunita Tamang, Mason, Bhotang, Sindhupalchowk



"I had been working as a laborer for 4 years making a simple income of NRs 600 per day, when I received a masonry training from CARE 2 years ago. Now, I make more than NRs 900 a day and it is so much more easier to make ends meet.

A woman would only be hired as a laborer before. But now, thanks to this training and because of my example people have started believing that even women can be skilled at masonry. I have also further trained 5 other females from my village in masonry. We will be building a house in a few months. I feel so proud when I see the confidence of my fellow community members in my work. They even gather around me to watch me work because they are so impressed that women are capable of doing something that was predominantly a man's job!"

Socio-economic empowerment

(Marginalized women and adolescent girls have the knowledge, skill, agency, power and resources to claim their rights)



87% of 1,496 extremely poor households (Including 76% women) who were supported with livelihood improvement plans have started saving their income in groups & financial institutions. 13% of their income was used for shelter construction, 12% was saved and 18% was reinvested in livelihood.

77% of 1,745 trained masons have constructed 20,310 safe houses & an additional 276 vulnerable households were supported to construct safe houses.

How is RESPOND contributing to CARE Nepal's overall Domains of Change?

<u>Transformed Social</u> <u>Norms & Relations</u>

(Nepalese society in all its forms (cultural, political, religious, social, economic), values and upholds the rights of women and girls; and assures their access to quality services)



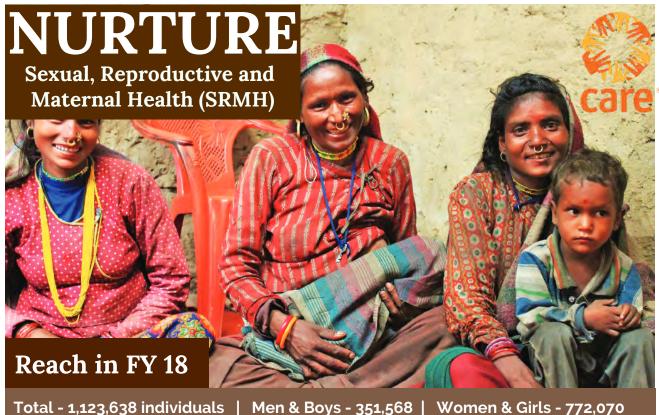
Endorsement & implementation of 2 Palika level & 15 ward level disaster risk management plans, 23 school based disaster risk reduction plans, 4 Palika level water and sanitation hygiene plans, 31 community level water safety plans, 1 ward level commercial production plan, 6 cooperative level business plans & 2 palika level standard operating procedure on GBV has ensured risk sensitive planning and preparedness at all communities including the most vulnerable communities.

Socio-political power

(Women and Adolescent Girls are able to exercise their citizen power (as full rights holders) and effectively engage with accountable and gender responsive institutions (at all levels)



17,940 people are receiving safe & adequate water supply round the year in their own yards due to the CARE supported water schemes' constructions which has significantly decreased women's workload in terms of fetching water. This has provided them more time to get meaningfully involved in the community through the Water User Sanitation Committees, Disaster Management Committees, reconstruction committees, etc.



10tat - 1,123,030 marviadats | Men & Boys - 351,500 | Women & ants - 7/2,070

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. CARE Nepal intends to bring this change by facilitating to improve health governance & service delivery and by increasing awareness, engagement and empowerment of the community to demand for quality SRMH services.

One of the many approaches employed by the NURTURE program to achieve these goals is the Community Health Score Board (CHSB) tool which is a hybrid of techniques such as social audit, participatory rural appraisal techniques, and community score-cards which enables community members to assess and rate performance of service providers using a community defined grading system. This is done through an interface where user perceptions on access, utilization, and quality of facilities are solicited along with which information regarding services and progress are communicated fostering transparency and informed service users. Implemented over a wide geography throughout the NURTURE initiatives, CHSB has served as a tool to reflect the current status of service delivery and service users' satisfaction in institutional level and also a basis to advance and advocate budget allocation for a potential solution of the issues and problems as pinpointed in the interface meetings and dialogues. Realizing the importance, few local bodies have started to allocate budget for the continuation of CHSB reviews after the handover to the local body at the end of the initiative at the Far-west region of Nepal.



SUAAHARA II

This USAID funded initiative works with 1,000 days mothers, children under 5 years of age and women of reproductive age in 40 under-served rural districts of Nepal with an aim to improve the nutritional status of women and children.

Supporting Access to Family Planning and Post Abortion Care (SAF-PAC)

This Covance funded project works with women of reproductive age in Gorkha to reduce unintended pregnancies & its consequences, including death due to unsafe abortions. The major areas of focus are family planning, safe abortion, post abortion care and basic emergency obstetric care (BEmOC).

SAMMAN III & IV

This Glaxo Smith Kline/CARE UK funded initiative works with women of reproductive age, pregnant women, new-born children and children under 5 years of age in Kailali, Doti, Dadeldhura, Kavre, Sindhuli, Rasuwa, Nuwakot & Sindhupalchowk districts of Nepal with an aim to improve maternal & neonatal health outcome by strengthening and increasing effectiveness of frontline health workers to positively impact maternal, neonatal, and child health goals.

AWASAR

This DANIDA/CARE Denmark funded initiative works with school going girls & boys, teachers, farmers groups & mothers groups in Bajura and Mugu with an aim to improve the nutritional & educational status of hard to reach children.

Saving lives, one child at a time

Aarti Sah, Auxiliary Nurse Midwife, Sindhuli

"When I was first transferred to this health post, I was surprised because in spite of being a birthing centre, there were no equipments here to ensure safe delivery. I would hear about so many child/maternal deaths taking place in the villages nearby. I would request and encourage the community members to come to the health post but due to the harsh geographical terrain and lack of proper facilities at the health post, people prefered to give birth at home. Thankfully, we received the proper equipments required for a birthing centre from Sahakarya Nepal with support from CARE. Not only that, I was also fortunate to receive the Skilled Birth Attendant training provided by the same organizations. Now I have full confidence in my self and my health post facilities to encourage the community to give birth with my support at the health post."



Socio-economic empowerment

(Marginalized women and adolescent girls have the knowledge, skill, agency, power and resources to claim their rights)



86% women have involvement in decision making (own and joint) regarding contraceptive use and reproductive health care indicating a better access to health care and reproductive right.

Contraceptives prevalence rate of modern means of contraception is 33% among CARE program districts.

How is NURTURE contributing to CARE Nepal's overall Domains of Change?

<u>Transformed Social Norms & Relations</u>

(Nepalese society in all its forms (cultural, political, religious, social, economic), values and upholds the rights of women and girls; and assures their access to quality services)



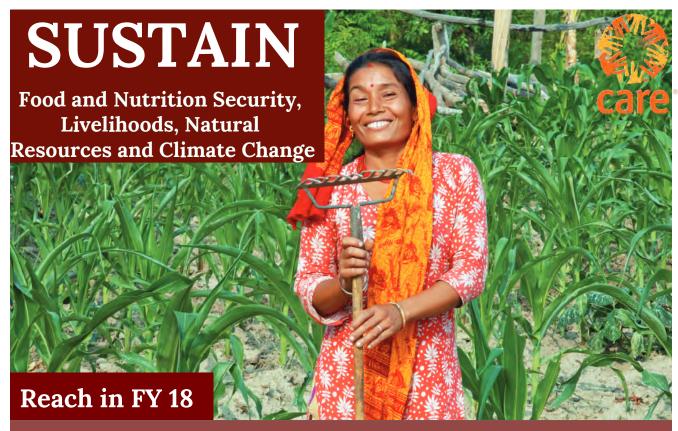
77.2% of births are delivered by Skill Birth Attendants in Suaaharaa project areas, while 87.3 % of birth are delivered by Skill Birth Attendants in Samman project areas which has ensured better antenatal and postnatal health for mother and the child including protection from life threatening infection.

Socio-political power

(Women and Adolescent Girls are able to exercise their citizen power (as full rights holders) and effectively engage with accountable and gender responsive institutions (at all levels)



75% of woman participation is observed in the Community Health Score Board (CHSB) meetings due to which women are better informed about the various services being provided by health institutions. These meetings have also provided the women a platform to raise their voices for quality health services.



Total - 221,267 individuals | Men & Boys - 67,890 | Women & Girls - 153,377

Through its various initiatives, the SUSTAIN program has brought significant changes in the lives and livelihoods of the most marginalized women and adolescent girls from poor, vulnerable and socially excluded groups. The initiatives have contributed to mobilizing the natural resource dependent communities (including landless farmers), and poor marginalized female and male farmers to participate in decision-making roles and also claim their rights. Our partners engage proactively with all three tiers of governments to raise the voices of these communities and tender policy positions on issues of land rights, agriculture, climate change resilience, women's rights, and gender equality.

Furthermore, our pilot approach to Contract Farming for empowerment of Musahar women in personal, social, economic and political spheres is a promising & successful venture that we take pride in. Due to which, the Musahar women have experienced a tremendous change in their lives . Today, their increased interaction with formal and informal power holders such as the municipality, ward officials, and landlords shows their confidence. They are influencing change in the attitude and practice among the duty bearers and are also demanding policies and practices which reflect the needs and interests of the marginalized and landless women and men.



HARIYO BAN II

This USAID funded initiative works with the community members involved in Natural Resource Management Groups in Kailali, Syangja, Tanahun, Lamjumg and Gorkha districts of Nepal with an aim to increase ecological and community resilience in Chitwan Annapurna Landscape (CHAL) and Terai Arc Landscape (TAL) areas.

SABAL

This USAID funded initiative works with the most marginalized vulnerable and food insecure households of Makwanpur, Sindhuli, Ramechhap, Udaypur, Okhaldhunga, Khotang, Kavrepalanchowk, and Sindupalchowk districts of Nepal with an aim to ensure that these households are more resilient and food secure.

RIGHT to FOOD

This DANIDA/CARE Denmark funded initiative works primarily with small holders and landless farmers with specific focus on marginalized groups such women, Dalits and Janjatis in Okhaldhunga, Siraha and Udaypur districts of Nepal with an aim to ensure that representative civil society organizations have contributed to the realization of right to food to the benefit of impact groups.

From subsistence to contract farming

Dalit Women Farmers Group, Siraha



"No minimum wages any more, we work hard in our own fields", says the united voice of the Dalit farmers group-its members all smiles. Previously, they had been working on daily wages in other people's fields. They were engaged in agricultural work but all of them are landless people.

Now, they have started taking plots of land on lease to grow vegetables. The National Farmers Group Federation initiated contact farming in early 2015 with support from CARE in Siraha. The group has taken 2.6 hectares of land on lease for a period of ten years where they have been growing vegetables and selling it in the local market. Each household has succeeded in earning minimum NPR. 5,000 and maximum NPR. 60,000. The Government of Nepal has also recently addressed the issue of contract farming in its policy which has increased small holders'/landless farmers' access to the land and assured landowners that their land will remain safe from encroachment.

Socio-economic empowerment

(Marginalized women and adolescent girls have the knowledge, skill, agency, power and resources to claim their rights)



46,627 women have increased knowledge on climate change and variability along with climate resilient practices out of which 34,208 women are implementing practices/actions that reduce vulnerability and increase food security and resilient livelihood

Transformed Social Norms & Relations

(Nepalese society in all its forms (cultural, political, religious, social, economic), values and upholds the rights of women and girls; and assures their access to quality services)



204 couples have acquired Joint Land Ownership Certificate. This has enhanced women's access to civil and political rights and empowered them both in the domestic and public spheres due to which they have been able to challenge gender inequality, develop access to financial resources and feel the worth of their hitherto ignored role in agriculture and household welfare

Socio-political power

(Women and Adolescent Girls are able to exercise their citizen power (as full rights holders) and effectively engage with accountable and gender responsive institutions (at all levels)



12,767 women are organized in Farmers groups, Village Land Rights Forums, Community Disaster Risk Management Committees and Natural Resource Management Groups through which they can voice their rights.

How is
SUSTAIN
contributing
to CARE
Nepal's
overall
Domains of
Change?



GENDER EQUALITY AND SOCIAL INCLUSION (GESI)

Achieving GESI is an integral part of CARE Nepal's programming and institutional response. CARE's approach to GESI adheres to its holds that to bring about holistic empowerment, it is critical to address women's agency (capacities, skills, confidence), the relationships of power that affect their choices (particularly household relationships and community groups), and the structures (such as market and local government institutions, laws policies, and values, exclusionary practices & social norms) that govern their lives and choices. CARE's programs and initiatives analyze the gender & caste specific differentiated needs, challenges, risks, power dynamics, and opportunities that may affect program outcomes and impacts on participants, allocate organizational budget for capacity building, collect, analyze, and use sex- and age-disaggregated data, risk assessments and response strategies, tracks specific indicators to measure progress toward GESI and establishes accountability mechanisms within organization and program level to monitor the status of GESI. In the year 2018, CARE directly reached 1.04 million people including the most marginalized through its gender equality activities.

GOVERNANCE

CARE recognizes that poverty is created and sustained through unequal power relations that result in the inequitable distribution of resources and opportunities, between women and men, between power-holders and marginalized communities, and between countries. Promoting inclusive governance is at the core of CARE's approach to "addressing the underlying causes of poverty and tackling social injustice". Across all of its initiatives, CARE promotes inclusive governance via governance models namely social accountability (mechanisms such as community score card, social audit, etc.); participatory development to support local authorities and citizens to engage in dialogue and participatory decision making, voice and advocacy; capability, accountability and responsiveness of the state and other power-holders to improve their ability to fulfil their obligations and be more responsive, transparent and accountable to marginalized groups particularly & organizational accountability towards program participants, partners, donors and governments. One such example of this being the Right to Food project - an initiative of CARE that focuses on strengthening the institutional governance and operational capacity of Nepali civil society organizations to enable them to raise legitimate voices of the most marginalized communities. Also, it strengthens the public sectors' institutional capacity to enable them to respond to the demands.

RESILIENCE

CARE's approach to increasing resilience is not an outcome that can be achieved within a specific time frame, but an ongoing process. If the capacities and assets to manage various shocks, stresses, risks & transform their lives in response to new hazards, opportunities & uncertainty are built and supported & if drivers of risk are reduced & if these actions are supported by an enabling environment, then resilience is increased. Prayaas, an initiative of CARE implements an inclusive risk reduction modeling with the most marginalized and vulnerable community and households at its center investing on building local Disaster Risk Reduction champions for identifying social, economic and ecological vulnerabilities, capacities, and underlying causes of vulnerabilities along with future risks that have high potentials impact on the most marginalized lives and livelihoods. The initiative executed detailed risk reduction and mitigation actions that not only addressed the current shocks and stresses coming from the community action plans but also the underlying causes through specific actions by bringing a nexus between disaster risk reduction and development, promoting resilient reconstruction and in particular building capacities and asset creations of these most marginalized to manage the future risks.



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