



Nepal

Preventing Avoidable Disability



Ear Care Centre, Rautahat



Ear Care Centre, Birgunj



Far West Ear Care Centre, Kailali



Primary Ear Care Centre, Rajbiraj



Primary Ear Care Centre, Udayapur

Annual Report 2018

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A Brief Profile of Nepal

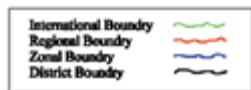
Nepal located between the two gigantic nations, China and India, with their fast-growing economy, is a small landlocked country encompassing a total size of 147,181 square kilometers with a population of about 26.5 million. Despite its richness in biodiversity, natural resources and cultural multiplicity, it still



lags behind in many aspects and is an emerging country where nearly 22 percent of the people live under the poverty line. The impact of poverty is seen in all sectors of the society as: health and hygiene, education, disaster and conflict preparedness, access to and distribution of resources, gender equity as well as respect for humanitarian values. The political situation during the last decade was the reflection of all these problems. The

infrastructure destroyed during the decade long armed conflict and the disastrous earthquake needs to be restored while new avenues have to be explored for the development of Nepal. With the two third majority, the Government is now expected to be stable to gear up the development works in the new federal structure.

MAP OF NEPAL
ADMINISTRATIVE DIVISION
75 Districts, 14 Zones, 5 Regions



KTM - Kathmandu
B - Bhaktapur

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Key indicators for Nepal

Total population (2011)	26,494,504
% of population under 15 years	33.22
% of population above 65 years	5.13
% of urban population	17
Population growth rate	1.35
Population density per Sq. Km.	180
Life expectancy at birth	69
Infant mortality rate per 1000 live births	32
Under-five mortality rate per 1000 live births	39
Maternal mortality rate per 100,000 live births	239
Birth attended by skilled health personnel	58
One year old fully immunized against tuberculosis	87
One year old fully immunized against measles	92
HDI rank out of 189 countries (2017)	149
% of population living below national poverty line	21.6
Literacy rate for population aged 5 years and above	78%
% of population using an improved sanitation facility	62
Number of doctors per 100,000 population	21

(Source: Central Bureau of Statistics & National Planning Commission, Nepal Government)

Situation of Disability in Nepal

Disability is prevalent across the world irrespective of gender, ethnicity, race, etc. In the context of Nepal, disability is viewed as a result of curse passed on from the previous birth. People with disabilities are either pitted or ignored. The notion that people with disabilities have equal rights and duties as any other individual, is largely absent from the popular mindset. There are no comprehensive data on disability in Nepal. Even the statistics on people with disabilities varies according to source. An estimated 7-10 percent of the total population in Nepal is with disabilities of one form or another. The visually impaired, hearing impaired, physically disabled, and mentally challenged are recognized by the Government of Nepal.

It has been recently reported that Nepal has one of the highest incidence of deafness with the deaf and hard of hearing constituting 17% of Nepal's population.

About IMPACT Nepal

IMPACT Nepal (IN) as a partner of the global movement of Impact Foundations was established in 1993 with the mission of preventing disability.

IN has grown into one of the leading organizations working for prevention of disability in the country. It has been striving continuously to serve the most vulnerable sections of the population and is also making constant efforts to build its institutional capacity in order to achieve its mission. It renders its services throughout the country and some specific projects are implemented in the districts of Kathmandu, Sindhupalchowk, Rautahat, Parsa, Bara, Saptari, Udayapur, Kailali, Kanchanpur, Doti and Dadeldhura.

“IMPACT Nepal is committed to combat, prevent and diminish disability”

Regular Activities of IMPACT Nepal

Service to the most vulnerable – In collaboration with UK Impact Foundation, Kadoorie Charitable Foundation Hong Kong, Christoffel Blinden Mission (CBM) Germany, Impact Norway, Impact Bangladesh and Impact Cambodia, IN has been carrying out several programmes in order to prevent needless disability:



Mobile Surgery Camps

One of IN's major activities has been to conduct mobile ear and orthopedic surgery camps in rural areas where specialized health care facilities are non-existent.

Restoration of Hearing

In 2018, six mobile ear surgery camps were held in Parsa, Rautahat and Dolpa districts where a total of 1,035 people were treated and 315 ear surgeries were performed.





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"Committed to Prevention of Disability"

Free Mobile Ear Surgery Camp

कानको निशुल्क शल्यक्रिया शिविर

A Bundle of Joy for Nirmala Kumari

Nirmala Kumari age 15 was born in Mithuwawa VDC of Rautahat and lives with her parents along with her three sisters and one brother. Her family's occupation is farming. Despite many ups and down of life, her family was surviving and had enough to eke out their livelihood. Since last 10 years, her right ear problem had been recurring with pain and discharge along with foul smelling and headache. As a result, her hearing power was decreasing day by day leading to difficulties in her daily life. Her friends started teasing her and the teacher got frustrated with her due to her hearing problem and gradually her academic performance also reduced.

Even though her father took her to many places for her treatment including to an Ayurveda doctor, yet a permanent treatment was out of reach. One day her neighbors informed her father about IMPACT Nepal Primary Care Centre at Gaur and recommended that it is the best place for ear treatment.

Without delay, they went to the Center for treatment. The Ear Assistant prescribed her some medicines and asked her to return within a week. After her visit to the Center after a week



her audiogram test was performed and her hearing capacity was found to be 35 D.B. and was suggested for ear surgery. Due to her financial status and lack of awareness, she was unable to visit the city hospitals so she had to wait for six months to have her ear surgery with the IN Team experts. The team of experts conducted a successful surgery at the ear camp at Gaur.

She along with her parent, have expressed their profound gratitude to IMPACT Nepal family for all the necessary support.

Restoration of Movement

IN has also been holding mobile orthopedic surgery camps in the community for restoration of mobility. In 2018, three camps were held at Devdaha Medical College, Rupandehi from 24th - 27th July, Nobel Medical College, Biratnagar from 24th - 28th September and Janakpur Orthopaedic Hospital, Dhanusha from 23rd - 29th December in collaboration with Orthopedic and Trauma Foundation. A total of 987 patients were examined and treated while 85 of them underwent orthopedic surgery to restore movement. During the camp, junior doctors (Orthopedic Residents) and local doctors who practiced in rural areas were also trained to provide initial basic treatment to trauma patients.



Collaborating and Sharing Skills with other IMPACT Organizations

a. Training programme for ENT Doctors in Cambodia

IMPACT Nepal, in association with IMPACT Cambodia, conducted two training programmes for ENT Doctors at PreahAng Duong Hospital (PADH), Phnom Penh and Chey Chumea Hospital, Takhmao in 2018, one from 7th - 11th May and the other from 15th - 22nd September focusing on clinical and surgical skills in otology. The former team consisting of Dr. Kunjana Acharya, Dr. Arun K.C, Mrs. Nirusha Maharjan, Mrs. Bindira and Mrs. Bindu Shrestha was led by Prof. Dr. Hari Bhattarai and the latter team consisting of Dr. Yogesh Neupane, Dr. Prashant Tripathi, Mrs. Bindeshwori Gurung, Mrs. Basanti Thapa and Mrs. Sangita Basnet Sapkota was led by Prof. Dr. Bibhu Pradhan.



IMPACT Nepal team not only helped with ear surgery cases but also head and neck diseases as well as ENT cancer cases. During this period, a total of 97 patients were benefitted from the surgery.



b. Training Programme to IMPACT Cambodia Staff

IMPACT Nepal provided 4 months long Paediatric Hearing assessment (Behavioural Observation Audiometry, ABR, OAE tests) and Hearing Aid Evaluation & fitting in Audiology & Speech Pathology Trainings to 3 staff of Impact Cambodia in Dr. Lakshmi Narayan National Ear and Hearing Care Centre, Department of ENT and Head & Neck Surgery, T.U. Teaching Hospital, Kathmandu from 15th May – 14th September, 2018.



Safe Motherhood and Child Health

Most maternal deaths in Nepal can be prevented if women have access to appropriate health care during pregnancy, childbirth and immediately afterwards. The single most critical requirement for safe motherhood is to ensure that a health worker with midwifery skills is present during every birth. In order to achieve this, sufficient numbers of health workers are required to be trained and equipped with essential supplies especially in poor and rural communities. IN has developed effective strategies to ensure that people have access to quality maternal and child care services in the areas where it has been working.

IN's project Safe Motherhood and Child Health in Rautahat District includes not only Iron tablet and Vitamin A distribution to pregnant and lactating women, but also motivation of pregnant women to attend antenatal and post natal clinics,

Programme	Rautahat
Vitamin 'A' supplementation	9,240
Iron tablets users	7,095



supply of Emergency Obstetric Care (EOC) kits, and Vitamin A supplementation to under-5 children.

IN has been providing support to the Ministry of Health and Population to scale up and intensify the maternal and neo-natal



support programme. In Rautahat under this programme, a total of 3,387 pregnant women attended ante-natal clinics regularly and about 2,771 deliveries took place either in hospitals or were supervised by trained health personnel.

In view of the scenario that most needless newborn and maternal deaths are a result of conditions and diseases associated with lack of quality care at birth or skilled care and treatment immediately after birth, IN has been constructing a Birthing Centre at Auraiya village in Rautahat district.



Pregnancy and women health in Nepal

IN Community Field Worker, Ms. Sarita Shrivastav met Minakshi Gupta, a pregnant lady, during her field visit at Auraiya - 5, Rautahat and narrated as below.

It was Mrs. Minakshi's first pregnancy and she was found unhealthier as she had no knowledge about pregnancy. Moreover, she was much worried. When we, myself and Female Community Health Volunteer, reached her home, she went inside her room after making us sit on the yard because of the concept that pregnant women should not be exposed to others. I called her out saying 'we have come to meet you'.

During our query, Mrs. Minakshi said that she is 6 months pregnant but still she has problems such as tendency to vomit, headache, limbs sensation, insomnia, gastro-intestinal problems, loss of appetite etc. I asked whether she has gone to health post.



She replied that she feels shame to go outside in this phase.

Then I asked Mrs. Nirmala Gupta, her mother-in-law, regarding her help to Minakshi and she said that despite her best effort, Minakshi's health is deteriorating. Once she had called doctor for her also. However it went same after 10 days and simply 1,000 rupees was wasted. Then I told her that time is not like previous days. Nowadays, Nepal government has done many things for the pregnant, post partum women and infant. Medicines for pregnant women are free. There is a provision of providing Rs.400/- to pregnant women for visiting hospital 4 times and Rs. 500 for delivery at birthing centre or district hospital. Moreover mother and unborn baby remain healthy due to regular health check-up of pregnant women.

Then we myself, FCHV and mother-in-law of Mrs. Minakshi took her to health post for her health check-up. After examining her, Health Post In-charge said that she has less weight and low blood pressure and due to this she has to face many health problems. He suggested her to take meat once a week, egg and green vegetables frequently and plenty of water. Along with this, he suggested her to walk in the morning and evening and rest time to time. He gave iron tablets for one month and other medicines to her. When I was returning Mrs. Minakshi and her mother-in-law thanked me as well as our organization in helping in need and opening their eyes. Nowadays, Mrs. Minakshi and her mother-in-law are happy and she seems healthier too.

Immunization

Reducing infant and child mortality rates, as well as, preventing disability in the country are the priorities of IN. Further it promotes the right of every individual to live a healthier and fuller life.

IN has integrated immunization as an integral part of its programme launched in the communities. The Government of Nepal is responsible for providing immunization services, whereas IN is engaged in motivating and follow-up on persons needing immunization in order to achieve universal immunization. As a result, immunization coverage, as well as, the rate of immunization has increased considerably in the target communities. The details for 2018 are as follows:

Type of Immunization	Total
BCG (children)	777
DPT (children)	841
Polio (children)	841
Measles (children)	1,293
Tetanus Toxoid (pregnant women)	156



Prevention of Hidden Hunger

Some of the major problems caused by micronutrient deficiencies are Iron Deficiency Anemia (IDA) and Iodine Deficiency Disorder (IDD). IDA has been one of the causes of maternal mortality and IDD the cause of irreversible mental retardation including cretinism-associated problems. IDD is present in 38% of children under 5-years of age and also prevalent in more than half of all pregnant women in Nepal.





In order to prevent Hidden Hunger, IN has been implementing this programme in Rautahat district. In addition to distributing Vitamin A capsules and Iron tablets, IN has been educating and encouraging people to start a home garden as a source of naturally available micronutrients by providing seasonal seeds and tools for the garden. In Rautahat district, IN supported to establish home gardens in 2,850 households in 2018. IN has also provided mother goats to 40 families and hens to 70 families of Auraiya village in Rautahat district for further support in much needed boosts to meager diets.



Hard Work Pays Off

IN's Community Field Worker, Ms. Sarita Shrivastav met Brij Mohan Mahato of 71 years, the inhabitant of Dumariya village of Rautahat during her field visit and their conversation went as below:

Me - What do you do?

Brij Mohan - I am a farmer and I run my family by farming only.

Me - You are farmer but why your land is empty ? You can do vegetable farming which can provide you money and good health for your family.

Brij Mohan - My son has gone to work in India. I am old nowadays and I cannot work further.

Me - Your wife and your daughter-in-law will do for it.

Then I started talking with his daughter-in-law.

Me - (with Daughter-in-law Renu Devi Mahato) Do you know if you produce fresh vegetables in your farm, it will provide nutrition to your family and extra vegetables can be sold for generating the income. Moreover, it will not contain toxins which is useful especially during pregnancy and for your

son's health.

Renu Devi - You are saying right but I was unaware about this till date.

Me - You can use the land behind your house for vegetables farming. I will teach you the technique for the management of garden and you have the facility of water for irrigation also.

Renu Devi (smiling) - We will work hard to change the empty land to kitchen garden.

Me - You don't need to worry about the vegetable seeds. I will bring it in my next visit.

During my next visit, I provided seeds of different vegetables like pea, cilantro, spinach, radish to them for which they have already prepared farm land for vegetables seeding. In my regular visit in our project area, Mrs. Patel used to share her happiness and experience with kitchen garden. She said that she produced enough vegetables not only for the consumption for the family but also sold the excess vegetables in the near market to uplift the status.



Tertiary Level Ear Care in the Community

a. IMPACT Nepal Rungta Welfare Ear are Centre, Birgunj, Parsa District

IMPACT Nepal in close collaboration with Relief Society of Commerce Birgunj, is carrying out Community Primary Ear Care Programme since 2016 targeting some areas of Parsa and Bara districts. Besides mobile ear clinics and awareness programmes in communities and schools, it has been providing primary

to tertiary level ear care services from its own IMPACT Nepal Rungta Welfare Ear Care Centre established in Birgunj Metropolitan City Ward No. 14, Bahuari (Approx. 345m east of Gandak Chowk). Advanced ear care facilities including OPD, Audiogram, Tympanogram, minor procedure, ABR, OAE, hearing aid, surgery etc. are available in the Centre.



The Centre became operational in May, however, the facility of ear surgery was started in August. In collaboration with Hospital and Rehabilitation Centre for Disabled Children (HRDC) and Nepal Red Cross Society, IN has supported hearing aids to 43 hearing impaired people of Kavrepalanchowk, Makawanpur, Ramechhap, Kathmandu, Bhaktapur and Lalitpur districts through the Centre. The services provided from the Centre in 2018 are as below:

Activities	Person
Ear Examination and treatment at Centre	13,397
Ear Surgery	204
Tympanogram	42
Audiogram	3,882
Hearing Aid Service	43
Mobile Screening Camp	17,938



b. Primary Ear Care Centre, Gaur, Rautahat District

IN has been providing primary and secondary level ear examination and treatment services through Primary Ear Care Centre, Gaur and mobile ear clinics in the communities and schools in Rautahat district since 2005. In view of the excessive demand of tertiary level ear care services, IN added tertiary level ear care services in September after constructing an Operation Theatre in this Centre. The Centre has been providing services to both Nepali and Indian people bordering that area.



The services provided from the Centre in 2018 are as below:

Activities	Person
Ear Examination and treatment at Centre	21,055
Ear Surgery	91
Audiogram	1,760
Mobile Screening Camp	5,202

c. Ear Care Centre, Attariya, Kailali District

With the support of CBM, IN has been carrying out Far-west Community Ear Care Programme targeting to some areas of Kailali, Kanchanpur, Doti and Dadeldhura districts. It has been providing primary to tertiary level ear care services through newly established Ear Care Centre at Godawari Municipality Ward No. 1, Bankhet in Kailali district.



The services rendered under the programme in 2018 are as below:

Activities	Person
Ear Examination and treatment at Centre	1,876
Tympanometry	31
Audiogram	329
Mobile Screening Camp	34,735

Basic Sanitation Facility

IN has been making people conscious on basic sanitation issues through awareness and support in building family toilets. In 2018, IN supported to build 9 family toilets in Rautahat district.



New Experience in Life

Rautahat is one of the backward districts of Nepal. Mrs. Shabitri Devi Patel of 53 years is permanent resident of Auraiya ward no. 3. There are 7 members in her family comprising of her husband, 2 sons, 1 daughter-in-law and 2 grandchildren. Due to poverty and illiteracy Mr. Patel and their two sons have gone to nearby India for daily wages. They have tube well but they are using open field for defecation.

During IN Field Worker, Sarita Shrivastav's field visit for awareness about sanitation, Mrs. Patel said to her that due to weak economic condition, they could not construct the latrine. One day, when her granddaughter was defecating in open place, local people obstructed her and scolded to the family. They warned the family to penalize if they will be found open defecating next time. Mrs. Patel told the incident to Sarita nodding her head during her effort to convince Mrs. Patel.

Me (Sarita): Yes. It is not good to defecate in open place. Due to this, various infectious diseases such as



Cholera, Diarrhoea, Dysentery may spread in the community which may lead to the degradation of people's health residing in that locality. So, all people must be aware to construct the latrine.

Mrs. Patel: *Then, I will also construct the latrine. I have seen many poor families of Rautahat built family toilet at minimum cost with the support of IMPACT Nepal.*

Me: *Yes. We support those people who are financially weak and could not construct the toilet. We provide 6 concrete rings and 2 covers for building the septic tank that can be used alternatively. You have to build the toilet with pan fixed in it with roofed wall.*

Then, I promised her to provide rings and covers if she will construct the toilet. When I was back in the village after few days, she showed me the newly constructed toilet and I managed for the delivery of six concrete rings and two covers within 5 days. Nowadays, whole family is using toilet and they were aware about the personal hygiene too. Finally, she expressed her gratitude with smiling, "It's all because of IMPACT Nepal. I have never thought to have toilet in my house."

Prevention of Deafness and Physical Disability through IN Support Centers

a. Dr. Lakshmi Narayan National Ear and Hearing Care Centre (LNNEHCC)

Dr. Lakshmi Narayan National Ear and Hearing Care Centre (LNNEHCC) is located within the Department of ENT at Tribhuvan University Teaching Hospital (TUTH), Kathmandu and provides ear examination and treatment, as well as, ear surgery to the patients.

The services provided by LNNEHCC in 2018 are as follows:

Activity	No. of Beneficiaries
Examination and treatment	16,083
Surgery	1,695



b. Sir John Wilson Prosthetic and Orthotic Centre

Established in 2007, Sir John Wilson Prosthetic and Orthotic Centre (SJWPOC) has been producing prosthetic and orthotic appliances at its workshop at Tripureshwor, Kathmandu for the poor and needy persons with physical disability at a subsidized rate. The Centre produces a wide range of appliances for Upper Extremities, Lower Extremities and Spinal Orthotics.

The details of services rendered by the Centre in 2018 are as follows:

Services Provided	No. of Beneficiaries
Persons receiving devices	217
Physiotherapy services	361
Physically disabled persons visiting the centre	705



Tusani Tamang Relieved her Knee Pain

Tusani Tamang, 74yrs female from Khairenitar Nuwakot, Nepal had been suffering from her right knee pain due to Osteoarthritis problem for three months, and was in need of a good hospital that could cure. For this she visited OM Hospital and Research Centre at Chabhil, Kathmandu. She consulted with Dr. Mahesh Prasad Shrivastav, one of the senior Consultant Orthopedic Surgeon in the hospital.

Dr. Srivastav checked and prescribed her some medicines as well as suggested her to use Knee Brace which is especially available in Sir John Wilson Prosthetic and Orthotic Centre (SJWPOC) at a cheaper rate than other places.

On April 9, 2018, she visited SJWPOC Tripureshwor with the prescription letter, X-Ray film and her medical reports. After going through her medical reports and examining her



physically and clinically, the SJWPOC team observed that she had developed some narrowing joint space and osteophytes, along with some degree of various deformities in her right leg. The team saw that as the cause of Osteoarthritis was aging Cartilage; she had to take her measurements for the casting to produce knee brace as using the knee braces was only the solution for this type of treatment especially for the aging human that would reduce the joint stress, relieving pain and not only improving function and mobility but also preventing various deformities.

After the measurement and casting, it took one week to make a complete Knee Brace. We called Tusani Tamang for her training and to see if the knee brace fitted her comfortably. Once she felt comfortable with the equipment she was told to use it. On her follow up, the doctor of SJWPOC inquired as

to how she was feeling after the use of the knee brace to which she responded with great happiness and thanked the doctor and all those involved for the excellent work done because now she can move around with great ease and comfort.

Capacity Building for the Prevention of Disability

Training of Primary Health Care Workers

IN provided one month Basic Otology Training to 17 Primary Health Care Workers (PHCWs) working in Tehrathum, Rautahat, Bara, Parsa and Kailali districts. The training was organized in Dr. Lakshmi Narayan National Ear and Hearing Care Centre, TUTH, Kathmandu to facilitate Primary and Secondary Ear Care for the prevention of deafness and ear diseases.



Likewise, 3 Primary Ear and Hearing Care Workers (PEHCWs) from Parsa and Kailali districts were provided a three month Advanced Otology Training Course and 3 PEHCWs from Rautahat, Kailali and Morang districts were provided two month Audiometry Training. Two PEHCWs from Rautahat and Saptari districts were provided a two weeks Hearing Aid Fitting and Evaluation Training.

Primary and Secondary Ear Care Services in the Community

IN has so far established eleven Ear Care Centers (ECCs) in order to make primary and secondary ear care services available for the people of ten Districts of Nepal: Udayapur, Saptari, Dhanusha, Parsa, Rautahat, Kailali, Rukum and Kathmandu.

IN runs the ECCs in Udayapur, Saptari, Rautahat, Parsa and Kailali Districts, while other ECCs is run by other organizations. Ear Care Centers provide services through mobile ear care clinics as well.





The details of services rendered in 2018 are as follows:

District	Activities	Patients examined and treated
Saptari	Ear Care Centre	13,192
	Mobile ear clinics	2,220
	Audiometry Test	1,416
Udayapur	Ear Care Centre	6,862
	Audiometry Test	497

Public Awareness

Raising public awareness in the rural community has been an integral part of IN's overall activities. It primarily aims at:

- Information dissemination for prevention of disability in the community,
- Raising awareness among the public in general in order to bring about behavioral changes in them towards disability,
- Promotion of networking in the field of disability prevention and participation in such endeavors,
- Encouraging community based rehabilitation (CBR) to empower communities in sustaining disability prevention efforts.



The activities carried out include radio programs, distribution of IEC materials, placing hoarding boards with health messages, campaigns, rallies, community meetings and home visits.

The number of beneficiaries from different awareness sessions is given below:

District	Activity	Persons reached
Rautahat	Health awareness	61,950
Parsa and Bara		122,176
Saptari		3,867
Udayapur		7,359
Doti, Dadeldhura, Kailali and Kanchanpur		36,338



Post-earthquake Reconstruction and Rehabilitation

With the support of Impact Foundation UK and Kadoorie Charitable Foundation Hong Kong, IN helped in resuming the health services in Community Health Post, Bhotechaur of Sindhupalchok district after the retrofitting of the Building. Similarly, it has helped in resuming education after the construction of 28 classrooms in 7 schools under its Post-earthquake Reconstruction and Rehabilitation Project. Constructions of the classrooms in different schools are as indicted below:

Name of School	No. of classroom
Shree Siddhi Ganesh B. S.	2
Shree Shivapuri B. S.	2
Shree Jalkeshwori B. S.	3
Shree Nimugaun B. S.	3
Shree Setika Devi S. S.	8
Shree Jalpa Devi S. S.	8
Shree Saraswoti S. S.	2





As the post-earthquake initiative, IN carried out Disability Inclusive Disaster Risk Reduction (DIDRR) programme in far-west region with the support of CBM in 2018. IN Board members and staff as well as DPOs and other stakeholders in Far-west region were sensitized on DIDRR under the programme.



Looking Towards the Future: Way Forward

IN has been contributing to the reduction of disability through a number of measures taken in the last decade. However, a great deal of effort is yet to be made to meet the numerous challenges that lie ahead in this sector. IN will continuously strive for consolidation of the existing programmes, expansion of community based disability prevention programmes and strengthening of institutional capacity in the years to come.

Partners

IN has a longstanding partnership with:

- a. IMPACT Foundation, UK
- b. Kadoorie Charitable Foundation (KCF), Hong Kong
- c. Christoffel Blinden Mission (CBM), Germany
- d. IMPACT Norway
- e. IMPACT Bangladesh
- f. IMPACT Cambodia

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- » Ministry of Health and Population, Government of Nepal
- Ministry of Education, Government of Nepal

- » Ministry of Women, Children and Senior Citizens, Government of Nepal
- » Social Welfare Council, Kathmandu
- » District Development Committees, Rautahat, Udayapur, Saptari, Parsa, Bara, Sindhupalchowk, Kailali, Kanchanpur, Doti, Dadeldhura and Kathmandu districts
- » Tribhuvan University Teaching Hospital, Kathmandu
- » District Hospital, Gaur, Rautahat
- » Nepal Red Cross Society, Kathmandu
- » Nepal Ear Foundation, Kathmandu
- » Nepal Association of Welfare for the Blind, Kathmandu
- » Hospital and Rehabilitation Centre for Disabled Children, Kaverpalanchowk
- » Rungta Welfare Society, Birgunj
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- » Design Cell, Kathmandu
- » EK-EK Paila, Kathmandu
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Prof. Dr. Prem Krishna Khadka, Executive Director, TUTH,

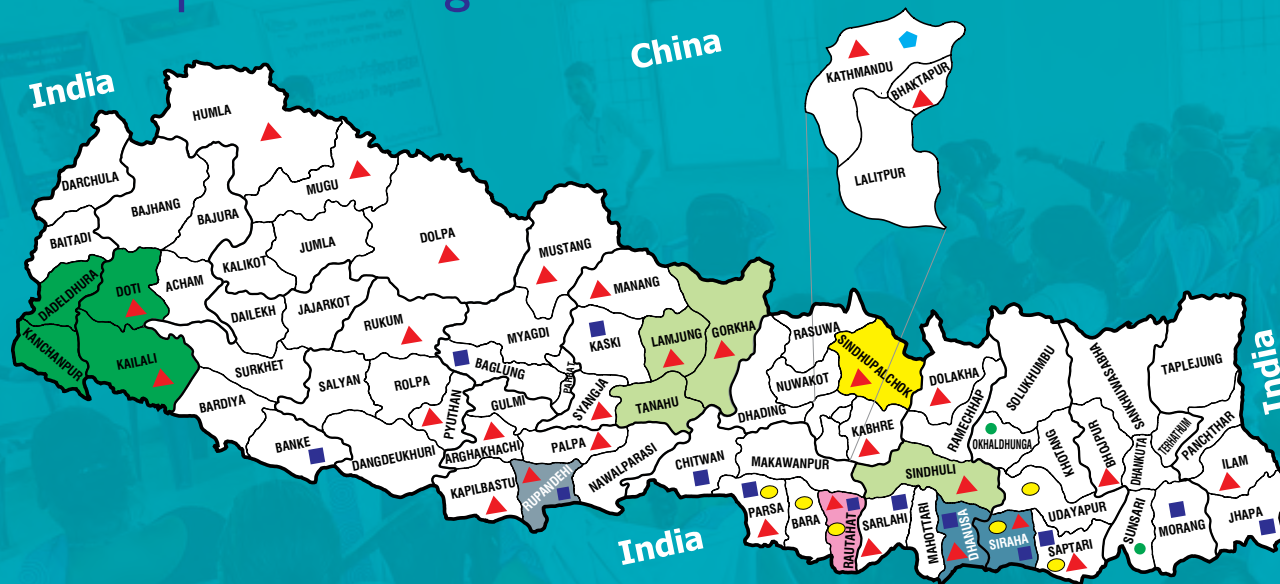
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ENT and orthopedic surgeons, supervisor as well as staff nurses and audiologists for their voluntary services that they provided to IN's mobile surgery camps.

Persons eager to donate funds or personal services to IMPACT Nepal
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IMPACT Nepal Reaching the Unreached



- ▲ Mobile Ear Surgery Camps
- Mobile Orthopaedic Surgery Camps
- Mobile Eye Surgery Camps
- Micro Nutrient Supplementation Project in Sindhuli, Gorkha, Lamjung and Tanahun Districts
- Safe Motherhood and Child Health Project in Rautahat District
- Community Based Prevention of Disabilities Project in Siraha and Dhanusha Districts
- Provision of Health Care Project in Rupandehi District
- Community Based Primary Ear Care Program in Saptari, Udayapur, Siraha, Parsa, Bara and Rautahat Districts
- ⬠ Dr. Lakshmi Narayan National Ear and Hearing Care Centre in Kathmandu District
- Far West Community Ear Care Programme in Kailali, Kanchanpur, Daddeldhura and Doti Districts
- Post Earthquake Reconstruction and Rehabilitation Project, Bhotechaur, Sindhu Panchchowk

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