



ANNUAL PROGRESSREPORT

FY 2070-071

Kushudebu Public Health Mission Nepal

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1.1. Background

The people of the rural villages that is dominated by nation's discriminated policy, traditional social rituals and blind religious believes are still not able to take proper and quality health services smoothly. It is very unfortunate to say that because of some reasons like tough daily life due to rural geographical condition, inability to purchase hygienic products due to poverty and situation of health post in faraway distance, these people of Himalayan region are prohibited to have the primary needs of good health services. Although health is stated as the fundamental rights of each individual in Interim Constituency of Nepal 2063, it is not being able to implement practically. Illiteracy, morbidity, poverty and orthodox culture are the main reason that are creating difficulties for the rural villagers to live healthy life.

When we take a closer look at the public health condition of world, developing countries are found to be in very critical stage in comparison to developed countries because implementation of economic development and growth, good governance and human rights more effective in developed countries. But, in Nepal, due to the political instability it is not being possible to implement effectively.

By taking in the account on all above cases Kushudebu Public Health Mission Nepal have established Beni Community Health Service Center at Beni VDC- 5 of Solukhumbu District. The Health Center is providing health services to poor and underprivileged group, children, and elder people. This report is prepared on the basis of different activities conducted by Kushudebu Public Health Mission Nepal with in fiscal year 2070-071 (2013-014 A.D.).

1.2. Objective

The main objective of this report is to update the achievements of the organization with in fiscal year 2070-071 (2013-014 A.D.) to all the stake holders.

1.3. Rationale of the Program

Health is wealth. If one is unhealthy he/she will not be able to do nothing neither for ourselves nor for the society. It is not possible to think of healthy, civilized and

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prosperities society without good health. In community, to maintain personal health one should focus on personal cleanness. As we know prevention is better than care, thus different awareness program should be conducted in other to prevent from different diseases. But in remote villages, people have to work hard to survive their daily life have Arthritis and, Gynecological problems in woman are very common. Due of lack of awareness villagers of remote village area are suffering from different disease. In one hand due to traditional and orthodox culture, the villager are still taking care of their illness from traditional hiller “DhamiJhakri” instead of medical doctors and on other hand there are also case of unavailability of the proper treatment facilities in the rural villages due to poor economic, social and geographical reasons. So we aim to provide proper care to those people, who are away from proper treatment due to these economic, social and geographical condition,with specialist doctors easily in affordable price to contribute the campaign of making civilized and prosperities individuals, society and finally the entire country.

1.4. Beneficiary list

List of beneficiary from this organization in fiscal year 2070/071 are as follows,

S.No.	Name of Program	Number of Beneficiary
1	Proper caring and treatment of different diseases and distributing medicine in concessions price	3500
2	Developing work division and responsibility for staff	
3	Updating administrative rules & regulation for staff	
4	Installation of Culture Machine	1
5	Training of physiotherapy	1 person
6	Free health camp	315 person
7	Household survey program	75 households
8	Health education	205 students
9	Free dental Camp	277 person
10	Incinerator Construction	2
11	Patient referred to Kathmandu from camp due to chronic disease	1 person

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12	Management of drinking water	450 person
13	Capacity upgrading	2 times
14	Selection of local working committee	1 time
15	Earthing& Internet service	

2. ACTIVITIES CARRIED OUT

2.1. Treatment service

Beni community Health center have served total 2158 patients out of which 1185 are male and 973 are female. Followings are the 10 major diseases which are found on the process of treatment.

1. APD
2. Headache
3. URTI
4. LRTI
5. Boils
6. PID
7. HTN
8. Trauma/Injury
9. Dermatitis/Skin Diseases
10. Diarrhea

2.2. Implementation of office hierarchy and organizational administrative directives

To meet the goal of an organization, instead of company legislation, there should be company policies as well as rules and regulation prescribed in the organization. This fiscal year the organization have proposed and approved different regulation for implementation including, structural and organizational hierarchy of the organization, work division and instruction for the staff as well as organizational administrative directives.

2.3. Installation of culture machine

A set of culture machine has been installed to identify the disease scientifically and easily in the remote area.

2. ACTIVITIES CARRIED OUT

2.4. Physiotherapy training

To facilitate the patient with complain of arthritis diseases, a training on physiotherapy is sponsored to a lab technician of medical center at B.P. Memorial Community Cooperative Hospital Ltd., Kathmandu. Now the services of physiotherapy is being started in the medical center.

2.5. Free health camp

As per the request of local villages that are facing problem of transportation services, a free medical camp is organized from 2nd April, 2014 to 4th April, 2014. In the camp, local and foreign doctors have provided services to different patients having complains like arthritisdiseases, pediatric diseases, gynecology and other different complains as well as have also distributed different medicines to them. Total 315 patients are cured in the camp and one patient with chronic disease isbrought to Kathmandu in the sponsorship of medical center for better treatment in more sophisticated and well equipped environment.

2.6. Individual house survey

In other to provide specific health services to the common problem of local community, a household survey is conducted taking 75 household of the village. The details of the survey is listed in the annex.

2.7. Provide health education

With the vision of uplifting the health condition of the local village by providing the health education from the primary level in the school and increasing health literacy and public

2. ACTIVITIES CARRIED OUT

awareness, a health education program is started in Junbeshi Secondary School of Beni 4 and Himalayan Sherpa Buddhist Lower Secondary School of Beni 5, where 205 students are being educated with this course.

2.8. Free dental camp

With approval from all the required governmental offices and in coordination with District Health Office Solukhumbu, a free dental camp is organized at the Beni Community Health Service Center from 6th May, 2014 to 15th May, 2014. The camp is conducted with the help of Australian Doctor Mr. John Graham Niven. 277 patients have took service in the camp.

2.9. Construction of Incinerator

Waste management in rural villages is very difficult task. So to solve the problem of waste management and to start the practice of pollution free, healthy and wealthy lifestyle as well as to save the environment, an incinerator is constructed at Thupteng Chheling Monastery.

2.10. Drinking water supply management

Drinking water supply is started in Junbeshi Secondary School it is providing services to 450 students and teachers of the school.

2.11. Capacity enhancement training

In this modern age to provide prompt and managed services to the patients as well as to manage the medical center itself in advanced way, staffs of the medical center are provided different capacity enhancement training including Computer Operation Training and Organizational Regulations Orientation Training.

2. ACTIVITIES CARRIED OUT

2.12. Formulation local managing committee

To increase the responsiveness and feeling of ownership in the locals towards Beni Community Health Service Center that is being operated by Medical center, a local managing committee of 9 members, Kushudebu Public Health Mission Nepal Solukhumbu Branch, is formed with the chairmanship of local social worker and intellectuals Mr. Chunwa Tshring Lama.

3. ACHIEVEMENTS, SUGGESTIONS AND CONCLUSION

3.1. Achievements

More than 3500 peoples of rural are benefited by different programs organized by Kushudebu Public Health Mission Nepal in fiscal year 2070-071 B.S. (i.e. 2013-014 A.D.). Economically weak people, elder people, Dalit (Socially backward people) are the main target group and are benefited by the programs. Women of rural area who used to hide their health complains are being provided health services by the organization. We cannot think of rich and civilized society without good health, so it is playing vital role in the health services as well as also contributing in development of country. One economically weak patient suffering from chronic disease is referred to Kathmandu for better treatment with sponsorship from the medical center. We believe it is a great contribution for the poor people as well as a mode of achieving the goal of the organization.

3.2. Suggestions

It is natural that for every activities there will be process of optimization and following are the suggestion received during the program,

- The process of approving health camps by Government of Nepal is found to be lengthy and time consuming. Even some process are unnecessary and inconvenient so it will be better to reduce the approval process for making the process easy and time efficient.

3.3. Conclusion

Although Health is stated as the primary right of the people in the Interim Constitution of Nepal 2063, it could not be implemented in practical life. The organization is proud to state its success of giving health services to those who are not in condition of pursuing health services due to various reasons including economically weak people; rural villagers;and socially backward and

3. ACHIEVEMENTS, SUGGESTIONS AND CONCLUSION

underprivileged people like “Dalit”, indigenous, tribal, women and single women, and elder peoples as well as physically and mentally disabled peoples. The organization is conducting its activating by keeping in mind that only with the healthy society it will be possible to make rich and civilized society. The organization and its activities are tribute for the social service and humanities from the foreign Doctors; Doctors and Nurses from Kathmandu who came just for social services; committee member and all the staffs of Kushudebu Public Health Mission Nepal; local committee members; reporters; local media and villagers of Junbeshi. We would like to thank all those holy hands who came here in this rural and remote place just for the purpose of serving poor and helpless people.

ANNEX 1

Kushudebu Public Health Mission Nepal

Preliminary Household Survey Report

Beni-4, Solukhumbu

Description	Unit	Total
Total Population of Beni- 4	Person	143
Population Structure By Sex	Person	143
Male		67
Female		76
Population Structure By Cast	Person	143
Sherpa		101
Chhetri		4
Sunuwar		5
BK (Dalit)lower cast		23
Tamang		7
Singh (Madheshi)		3
Population Structure By Age	Person	143
Up to 2 Years		8
3-15 years		38
16-59 Years		80
Above 60		17
Vaccination	Family	34
Yes		31
No		3
Toilet	Household	34
Yes		31
No		3
Traditional	Household	16
Modern	Household	15
Building	Household	34
1 Room		4
2 Rooms		3

ANNEX 1

2-4 Rooms		16
Above 4 rooms		11
Floor type	Household	34
Wood Planked		33
Cemented		1
Earthen		
Roof Structure	Household	34
Tin		20
Wood		14
Other		
No of Windows	Household	34
1-2 Windows		7
3-4 Windows		9
4-6 Windows		3
Above 6 Windows		15
No of Doors	Household	34
1- 2 Doors		18
2-4 Doors		3
Above 4 Doors		13
Type of Stove	Household	34
Modern		12
Traditional		22
Chimney		17
Non Chimney		17
Distance of Shade	Household	34
Near 5 mtr		27
Near 10 mtr		2
Far from 10 mtr		1
Without Shade		4
Family Death History Last 5 years	Person	6

ANNEX 1

Reason		HTN, TB, Heartattack
Disposal Wastages	Household	34
Dumping Site		25
Stream		3
Other		6
Hand washing	Household	34
with soap		33
Without soap		1
Apply all Condition		33
Brushing teeth	Household	34
Yes		33
No		1
Once a day		27
Twice a day		6
Drinking water source	Household	34
Tap		34
Stream		0
Other		0
Boil Water	Household	34
Yes		27
No		7
Primary Check habit when Sickness	Household	34
Traditional		3
HO		26
Both		5
Habit of taking medicine	Household	34
prescribed		29
non prescribed		1

ANNEX 1

Both		4
habit of alcohol	Household	34
Yes		20
No		14
one cup		4
two cup		4
more than two		12
Habit of smoking	Household	34
Yes		4
No		30
if yes how much per day ?		0
one piece		0
two piece		0
three piece		1
more than three piece		3
How much cup Sherpa tea drink in per day, per person?	Household	34
1 cup		0
2 cup		5
more than two cup		29
How many pregnancies in last 5 five year?	Person	17
last one year		4
last 5 year		13
How many have you been for ANC checkup during pregnant	Person	17
1 time		1
2 times		2
3 times		2
4 times		10
none		2

ANNEX 1

Place of delivery	Person	17
home		8
health center		9
What did you feed your baby up to 6 months	Person	17
Only breast feeding		9
cow milk and breast		4
lacto gene/powder and breast		3
others and breast		1
Condition of baby	Person	17
weak		0
normal		17
other problem		0
Women health problem	Person	12
uterus prolapsed		3
irregular means		9
Use of family planning	Household	34
condom		3
pills		5
dipoprovera		8
IUCD		1
Copper T		0
Not		17
Sources of recreation	Household	34
radio		7
TV		20
community		7
Available of kitchen garden	Household	34
Yes		27
No		7

ANNEX 1

What are the 5 most common health problem complaints over the 5 years?		0
Tonsillitis		3
Diarrhea		4
APD		7
typhoid		7
common cold		16
JUNDICE		1
Hyper tension		5
Dental		1
Joint Pain		3
Backache		2
Headache		9
Aches muscular		1
TB		6
Have this been treated?	Household	34
Yes		28
No		6
Regular health problem		
Diarrhea		1
Diabetes		1
Common cold		1
Measles		1
HTN		1
TB		1
Abdomen pain		2

ANNEX 2

Kushudebu Public Health Mission Nepal

Preliminary Household Survey Report

Beni-5, Solukhumbu

Particular	Unit	Total
Cast wise House hold		
Sherpa	Nos	41
Population Structure By Cast	Person	156
Sherpa		156
Population Structure By sex	Person	156
Male	Person	80
Female	Person	76
Population Structure By Age	Person	156
Up to 2 Years	Person	2
3-15 years	Person	41
16-59 Years	Person	87
Above 60	Person	26
vaccination	Family	156
Yes	Family	18
No	Family	0
Not to take	Family	138
Toilet	Family	41
Yes	Family	38
No	Family	3
Traditional	Household	26
Modern	Household	12
Building	Household	41
1 Room	Household	1
2 Rooms	Household	15
2-4 Rooms	Household	14
Above 4 rooms	Household	11
Floor type	Household	41
Wood Planked	Household	37

ANNEX 2

Cemented	Household	3
Earthen	Household	1
Roof Structure	Household	41
Zink Oxide	Household	20
Wood	Household	21
Other	Household	0
No of Windows	Household	41
1-2 Windows	Household	3
3-4 Windows	Household	10
4-6 Windows	Household	8
Above 6 Windows	Household	20
No of Doors	Household	41
1- 2 Doors	Household	20
2-4 Doors	Household	12
Above 4 Doors	Household	9
Type of Stove	Household	41
Modern	Household	2
Traditional	Household	39
With Chimney	Household	13
Non Chimney	Household	28
Distance of Shade	Household	41
Near 5 meters	Household	23
Near 10 meters	Household	9
Far from 10 meters	Household	9
Family Death History Last 5 years	Household	8
Reason		TB, HTN, Delivery
Disposal Wastages	Household	41
Dumping Site	Household	27
Stream	Household	5
Other	Household	9
Hand washing	Household	0
With soap	Household	41
Without soap	Household	0

ANNEX 2

Apply all Condition	Household	41
Yes	Household	35
No	Household	6
Brushing teeth	Household	41
Yes	Household	39
No	Household	2
Once a day	Household	26
Twice a day	Household	13
Drinking water source	Household	41
Tap	Household	41
Stream	Household	0
Other	Household	0
Boil Water	Household	41
Yes	Household	27
No	Household	14
Primary Check habit when Sickness	Household	41
Traditional	Household	1
HO	Household	33
Both	Household	7
Habit of taking medicine	Household	41
prescribed	Household	38
non prescribed	Household	3
Both	Household	0
Habit of Drinking alcohol	Household	41
Yes	Household	29
No	Household	12
one cup	Household	0
two cup	Household	3
more than two	Household	26
Habit of smoking	Household	41
Yes	Household	0
No	Household	40
Tobacco Chewing		1
If yes how much per day?		0

ANNEX 2

one piece		0
two piece		0
three piece		0
more than three piece		0
How much cup Sherpa tea drink in per day, per person?	Household	41
1 cup		1
2 cup		0
more than two cup		40
How many pregnancies in household?	Household	41
last one year		5
last 5 year		6
None		30
How many have you been for ANC checkup during pregnant	Person	11
1 time		0
2 times		1
3 times		3
4 times		4
none		3
Place of delivery	Person	11
home		9
health center		2
What did you feed your baby up to 6 months	Person	11
Only breast feeding		5
cow milk With Breast		0
lacto gene/powder With Breast		3
others With Breast		3
Condition of baby	Person	11
weak		0
normal		11
other problem		0
Women health problem	Person	2
uterus prolapsed		0
irregular means		1
menopause		1

ANNEX 2

Use of family planning	Household	41
condom		0
pills		1
Dipoprovera		7
IUCD		1
Copper T		0
Not use		31
Permanent		1
Sources of recreation	Household	41
radio		24
TV		11
community		6
Available of kitchen garden	Household	41
Yes		38
No		3
What are the 5 most common health problem complaints over the 5 years?	Person	92
Dental Carries, burning vision		2
Diarrhea		1
Lever operation		1
APD		5
common cold		6
Cataract		1
hyper tension		5
Arthritis		6
Sinusitis		1
Backache		3
Headache		8
Aches muscular		2
Jaundice		1
Diabetes		1
Piles		1
joint pain		1
TB		1

ANNEX 2

Sightless		5
Have this been treated?	Household	41
Yes		25
No		16
Regular health problem		0
Diarrhea		0
Diabetes		0
Common cold		0
Measles		0
HTN		2
TB		0
Abdomen pain		2
Dental Carries		0
Fracture		1
Jaundice		1
Epistaxis		0
ENT		1

ANNEX 3

Photo of different activities organized by Kushudebu Public Health Mission Nepal

