









Global Partners for Child Health





Annual Report 2019













Global Partners for Child Health works with local organizations and government institutions to improve the access to and quality of health care in underserved areas. We are finishing our fourth year of operations and are pleased to share what we have been able to accomplish.

All of us deeply appreciate your support. We hope that at some point you are able to go to Nepal and see what your generosity has created in these communities. Even if you are not able to make the journey, please know that your contributions have had a tremendous impact. As exemplified by this woman who carried her grandson to the health facility — all while hiking barefoot for several hours through rugged terrain, up and down hills—this work is valued by the people. It is for them that we strive to improve health care. Your donations make it all possible.

Sincerely,

David Levy
Executive Director

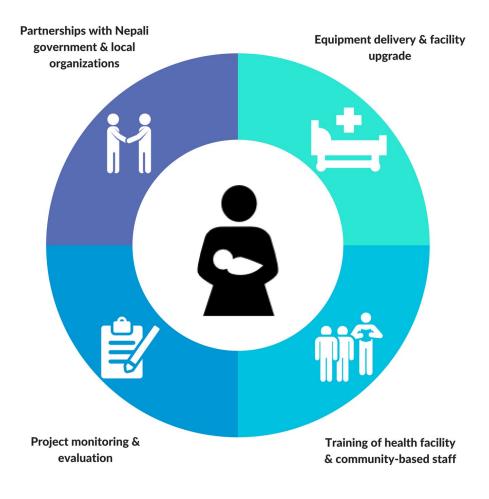
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OVERVIEW

As with many countries in the developing world, Nepal is modernizing in many facets of its society, including health care. However, the advances are not experienced equally by all Nepali people. Those who live in rural and remote areas do not see improvements to the degree of those who live in more urban, central locations.

For the past several years, we have focused on working in these difficult to reach communities. Through partnerships with local organizations, we aim to enhance the reach of the existing health care network and improve the quality of care it provides.





The core of our work continues to be the same: partnering with the Nepali government and local organizations, upgrading the capacity of health systems, training providers, and monitoring project outcomes. We believe this model is both practical and replicable in order to improve health care delivery.

While we are maintaining our primary goal of creating birthing centers to deliver care during pregnancy, through labor and delivery, and in the first weeks after delivery, we are also looking at ways to expand the scope of our health care services in the community. This includes establishing an advanced center for neonatal and obstetric emergencies, piloting a program for cervical cancer screening and treatment, and providing prenatal ultrasounds to more women in these areas.



The two main locations where we are working are in Humla District (upper left) and Solukhumbu District (below right). Both are very remote. Red pins identify locations of birthing centers established









In addition to trainings, providing appropriate care requires staff to have the necessary equipment and supplies at all times. Accomplishing this is not simple as it requires delivering equipment from bigger cities in central areas to remote locations. A combination of planes, Jeeps, mules, and porters are utilized to transport equipment to birthing centers.

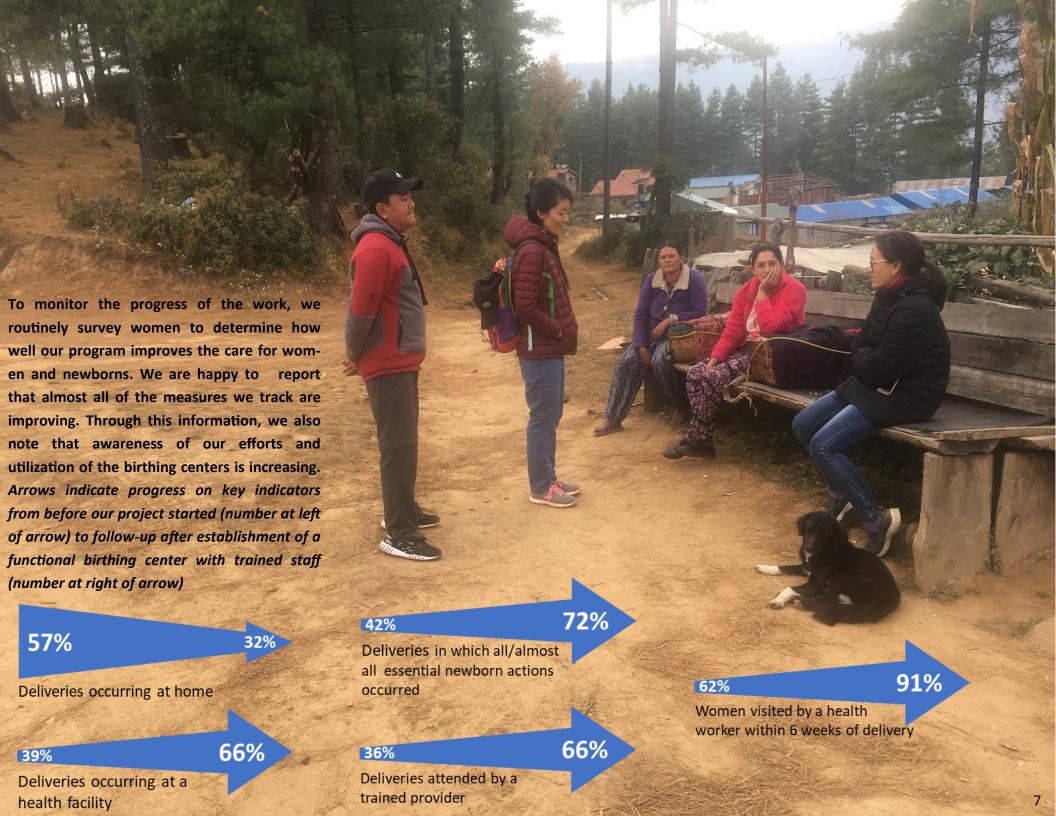
Pictured: birthing center in Deusa

During the critical time when a woman's due date is approaching or if she has recently given birth, finding lodging can be a challenge as families are often delivering far from their homes. Health care facilities do not offer this amenity, and there is limited availability to rent rooms at local guest houses. The added cost of renting a room puts additional strain on families with limited financial resources. To solve this, we have been renovating existing rooms into "maternity waiting rooms" where women and their families can rest, stay warm, and prepare food until delivery and in the immediate postpartum period. To date, we have established six of these maternity waiting rooms.

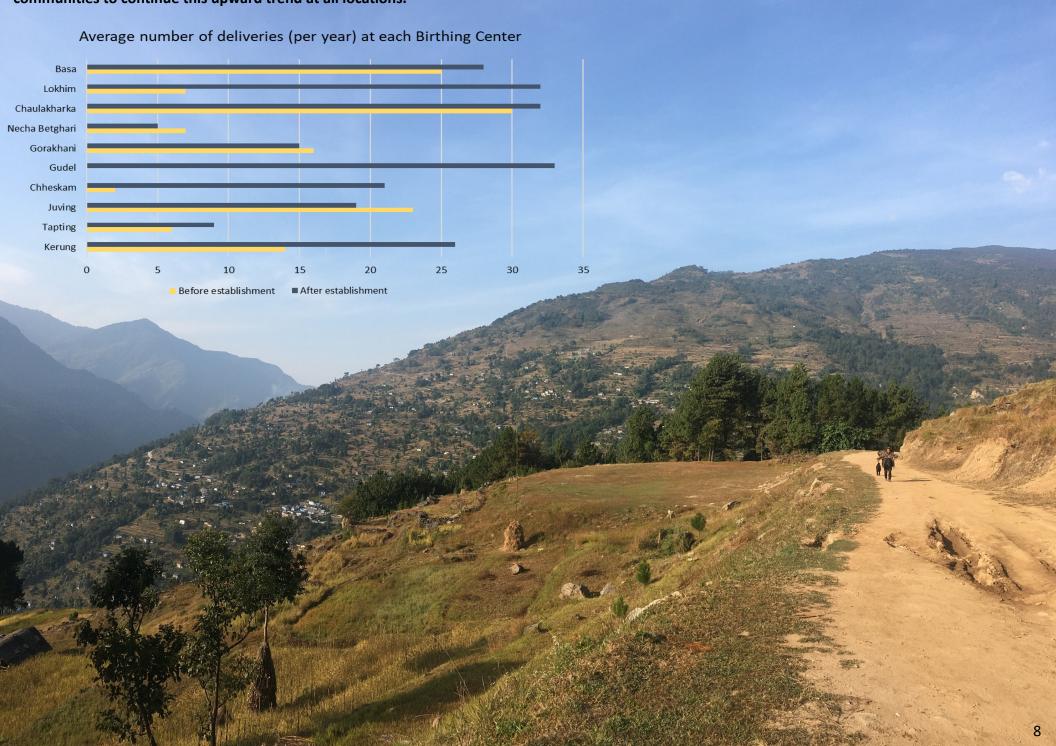
Pictured— below left: supplies for meal preparation at maternity waiting room in Kerung; below right: maternity waiting room in Gudel with bed and heating stove







Annual deliveries occurring at birthing centers have increased in seven of the ten birthing centers that have been established long enough to compare the numbers before and after our project started. Some of these increases are noteworthy, and we plan to maintain our involvement with the communities to continue this upward trend at all locations.







Part of providing expanded care for women and newborns has led to establishing a Comprehensive Emergency and Neonatal Obstetric Care (CEONC) center. This is one of the first of its kind in Nepal, and we are excited to be working with the government and community on this project. Instead of building a new structure, we are renovating and enhancing an existing facility.

(Above: facility before and during renovation; below left: after renovation; below right: staff after first c-section)





FUTURE DIRECTIONS

We are pleased with the substantial impacts our efforts have had on improving the accessibility and quality of health care in Nepal. However, we recognize that opportunities exist to continue to enhance our impact and to add new components to extend these benefits to more people in the community.

Birthing centers

- Follow-up at existing centers to assess utilization and areas for improvement
- Conduct initial and follow-up trainings for health facility staff
- Select ten more women to become Skilled
 Birth Attendants (government training program)
- Start ultrasound project: enroll providers in government training course and distribute ultrasound machines and equipment to facilities

Emergency care and expanded services

- Finish renovation of Comprehensive Emergency and Obstetric Neonatal Care facility
- Construct Women's Health Center to serve as location to provide additional services for women (to be in line with national guidelines)
- Initiate cervical cancer screening and treatment project



FINANCIALS

Revenue	\$103,331.75
Expenses	\$42,345.29
- Program costs	\$41,772.00
- Administration	\$573.29

THANK YOU!!







