Global Partners for Child Health



Annual Report 2022



Global Partners for Child Health has worked for years to improve the quality of and access to healthcare in underserved areas. We partner with local communities and organizations to deliver better care for pregnant women and their babies after delivery. Because of our efforts, women receive the care they deserve.

I always look forward to the times when I am able to travel to the places where we work. It allows me to directly observe the positive changes and to hear how deeply these communities appreciate our efforts. Knowing that women and families can seek care at updated facilities and trust the providers who have the appro-

priate skills, knowledge, and equipment for critical life moments makes all of this worthwhile.

While we are happy with our work and successes, we know that it is not done. We thank you all for your support. You make this possible.

Sincerely,

David Levy

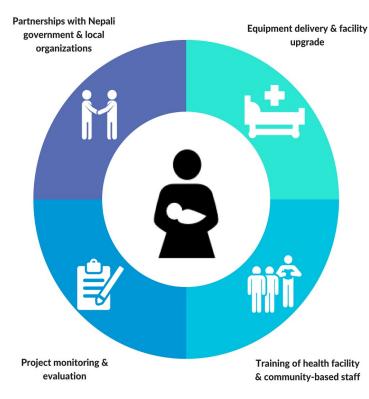
Executive Director

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OVERVIEW

In the past several years, we have partnered with organizations in Nepal as part of the country's overall efforts to improve the quality of life for its citizens. Our efforts center around the healthcare for people in rural and remote areas as they experience hardships that are uniquely challenging: limited infrastructure, rugged terrain, and variable staffing and equipment. Collaborating with Nepali-based organizations, we deliver the necessary equipment and supplies for staff to provide the best care possible. These staff also receive training for proper care in the perinatal period. Yet, the work does not stop there as we stay engaged with these communities to collect and review data to ensure the work is actually making conditions better.





Above left: Women gather with their babies during data collection. Below: Birthing Center staff take a test during a training





Communities throughout Solukhumbu often reach out to our partners to request a birthing center, and part of our process is to determine which ones are suitable candidates for a birthing center. We visit each location for an assessment, which includes reviewing patient volume, evaluating existing facilities, and meeting with the local leadership team. Once we have agreed on a location, we deliver equipment and supplies (which are in line with government standards) and invite the staff to enroll in one of our trainings. The last step is to open each facility and officially register it as a birthing center with the government. We then follow-up at periodic intervals for data collection and assessments.

In recent years, we have started to add accommodations at each Birthing Center where women and families can stay after a delivery or for close monitoring. These are attached to the Birthing Centers and have been very well received by the families (additional information on pages 8 and 9).

Clockwise from upper right: Anji and Lakpa with equipment in the process of being delivered; Birthing Center staff during a training; Setting up equipment at a Birthing Center after it has been delivered

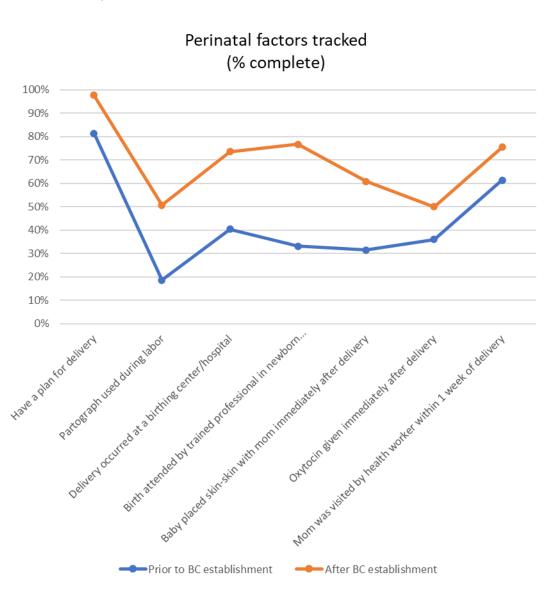






Our work is outcomes driven. Because we maintain close relationships with the communities, we collect and review data effectively and efficiently. Trends that we have seen throughout the years continue: comparing the measures that we track and target for improvement, there is consistent improvement in the data from before a BC is established to after one is established (chart at right of various measures).





Lakpa collects information as part of monitoring and evaluating our work

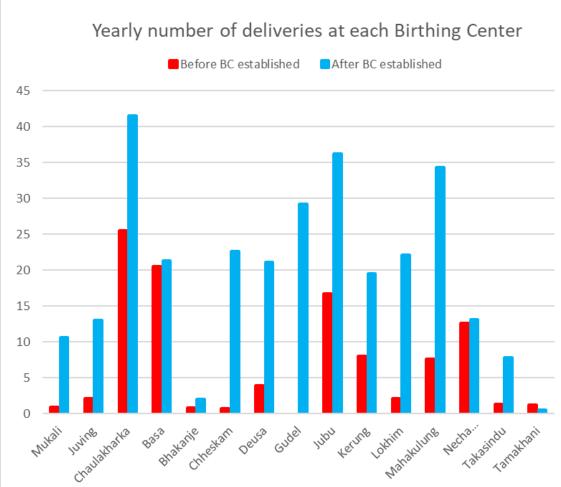
Beyond the individual measures which display continued and sustained improvement, we also observe increased utilization of the facilities after a birthing center is established. This is very encouraging as it demonstrates the communities have confidence in the facilities and choose to seek care there. Additionally, as

in past years, we continued to observe deliveries increasing at birthing centers during the pandemic (data not included in this report).



Above and below: Community leaders and Birthing Center staff in Takasindu celebrate the opening of a new birthing center



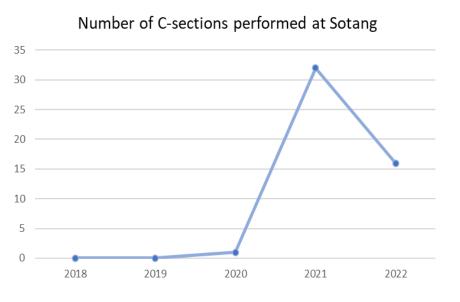


ACTIVITIES - EXPANDED SERVICES

As we have established birthing centers around Solukhumbu, in more recent years we have endeavored to provide additional levels of care and also looked at ways to increase utilization of the existing facilities.

Comprehensive Care (Sotang)

Both the Comprehensive Emergency and Obstetric Neonatal Care Center (CEONC) and the Women's Health Center-Maternity Waiting HOME (WHC-MWH) in Sotang have been finished and are operational. The facilities have exceeded our expectations and have been very well-received by the community.





Duration of stay at MWH

8
19
7
1-2 days 3-5 days 6 days or more

Women and families stay at the MWH for various reasons. As these numbers show, just under half stay for at least 3 days, and about 25% stay for at least 6 days. Having comfortable, well-maintained accommodations are an exceptionally valuable offering for the community.

Above: Completed WHC-MWH. Below: Shree Doj (head of Sotang Health Department) standing by signage about importance of proper nutrition at WHC-MWH

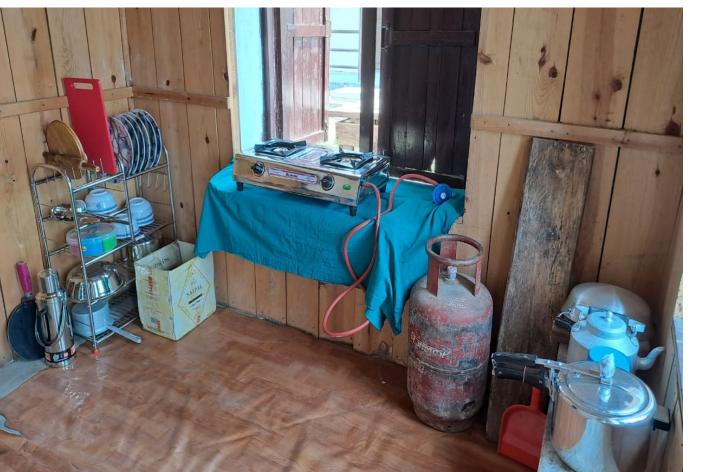


HEADING-?? ADDITIONAL COMPONENTS-LANDSCAPE OR PORTRAIT?

In addition to advanced care in Sotang, other components include setting up rooms at the Birthing Centers where women can stay if needed and trying to show women we appreciate their participation during our data collection.

Family Waiting Rooms

While establishing a Birthing Center is critically important, having these present does not solve all of the challenges in working in the rural and remote areas. For example, occasionally women need a place to stay for close monitoring or if travel back home is not practical. We determined to establish Family Waiting Rooms for women seeking care at the Birthing Centers. Each Family Waiting Room contains a bed, cooking supplies and utensils; all of this free of charge. We have opened seven such locations, and as with the Birthing Centers, the families are very appreciative to have these available.



Data Collection

We realized that it would be nice to leave the women with a sign of our thanks as they help during our data collection. While we take pictures during the process, for the past several years, we also have been giving the mothers a photo with her child to take home. They all extremely grateful for this, especially because some might never have had an actual photo like this in her life.



FUTURE DIRECTIONS

During 2023, we will keep our commitment to the communities in which we are working:

Nepal team

- Finalize agreement for new employee (Pramika Maharjan) to start working. We have already interviewed her, and we are very excited that she is interested in being part of this work. Once the agreement has been made, she will start working with Anji and Lakpa

Additional health care services

- Initiate cervical cancer project through camps for screening and treatment
- Start pediatric vision project to identify children needing glasses and possibly additional care

Maternal-newborn care

- Skilled Birthing Attendants will complete their training and start working around Solukhumbu
- Hold trainings for all birthing center staff (to include initial and refresher trainings) for all new staff and previously trained staff
- Establish two new BCs (Pawai and another location in Sotang)
- Establish one FWR (Takasindu)
- Assess situation and capacity of ultrasounds that have been distributed around Solukhumbu





FINANCIALS AND THANK YOU







FINANCIALS	
Revenue	\$30,001
Expenses	
Program costs	\$8,290
Administrative costs	\$2,155