“Nepal suffers chronic poverty entrenched by a complex set of interrelated factors including gender, geography, disability, age, caste, ethnicity, and religion... Many Nepalese remain extremely vulnerable to economic, health, social and climatic shocks.”

(UK Department for International Development, 2013)
I am delighted to introduce the annual review of our work and achievements in Nepal during the year July 2012 to June 2013.

It has been a challenging year financially, due to the continued impact of the weak global economy and, like so many similar organisations, our income reduced compared to the previous year. However, despite this I am pleased to say that we still managed to increase the scope and reach of our work and make some notable achievements.

Overall our work directly supported 36,000 socially and economically excluded children and women in Nepal and our programmes were recognised by local government as reaching “the poorest and hardest to reach”. We are very proud of this because those existing in the most extreme circumstances so often remain excluded.

A highlight of the year was being awarded a 3-year grant by the Big Lottery Fund to provide essential maternal and newborn healthcare to over 10,000 newborn babies per year in Rupandehi, one of the poorest districts in the Western Development Region of Nepal. This in turn has enabled us to increase the scope of our work relating to the empowerment of women and we now support 500 women’s groups, which are focused on supporting women to develop the confidence, knowledge and skills to improve the situations of their families.

During the year, there were some changes to our Board of Trustees and we were particularly sorry to see the departure of Michael Jacobs, our former Chairman, after 8 years on our Board. Over that time, Michael’s commitment and support to the organisation was exemplary; both Kidasha and the children of Nepal will be eternally grateful.

Looking forward, our passion and commitment to further increase the scale and effectiveness of our work in Nepal and reach out to those children and families enduring the most extreme poverty remains unabated. However, in order to do this, we recognise the need to continue to build our own organisational capacity and invest in developing new projects, and as such, need to explore new ways to generate income and attract new supporters. So, in addition to ensuring the success and impact of our ongoing work, this will be a major priority over the coming year.

Finally, I would like to say a heartfelt thank you to everyone that makes our work in Nepal a success – our donors, supporters, the Government of Nepal, our implementing partners and, of course, our staff - and look forward with enthusiasm and optimism about what we hope to achieve in the next year.

Janice Miller, Chief Executive
Nepal and the Millennium Development Goals (MDGs)

Nepal has made progress towards the MDGs, but there remains significant disparity in change across different ethnicities, gender, economic backgrounds and geographies:

- **MDG 1**: 24% of the population continue to live below the national poverty line and, with 41% of children suffering from stunted growth, Nepal is unlikely to reach its sub-targets related to hunger.

- **MDG 2**: It is unlikely to reach its target of universal enrolment in primary education (currently 93%) and the survival rate to Grade 5 remains low at 84%.

- **MDG 3**: Due to a high prevalence of gender-based violence, the target for gender equality is unlikely to be achieved.

- **MDG 4**: Child mortality has reduced significantly, but the poorest 20% are 50% more likely than average to die before they are 5.

- **MDG 5**: Maternal mortality has reduced, but remains high in rural and disadvantaged communities. Use of contraception remains well below target and more than half of women deliver their babies without skilled help.

Did you know?

If such a large number of Nepalis were not working overseas (the majority in low-income employment in India, Middle East and Malaysia) to support their families back home, the rate of poverty in Nepal would be 16% higher.
“Children are at the centre of Kidasha’s development effort in Nepal. Through Best Start, we aim to provide a range of services prior, during and after pregnancy, which are important for the survival and wellbeing of both the child and mother.”

Hridaya Raj Devkota, Best Start Programme Manager

Why We’re Needed

Women from poor and disadvantaged groups generally have little education, poor nutrition and little opportunity to make choices about their lives. This results in poor physical and emotional health and higher rates of maternal and child mortality.

How We Help

Together with our partners, we provide a programme of services, including family planning and antenatal and postnatal care for some of the poorest women, mothers and girls in urban and rural areas of the Kaski and Rupandehi Districts. We also facilitate local women’s groups to help increase knowledge, so that women recognise when they or their babies need to access skilled healthcare support. These groups also empower women to recognise their rights and seek ways to enhance their influence and status within society.

Key Achievements

• Established and supported over 380 Women’s Groups and 240 Pregnant Women’s Groups
• Educated 7,200 women to recognise danger signs in pregnancy and delivery
• Provided training to over 600 government Female Community Health Volunteers

Case Study – Khima’s Story

My name is Khima and I’m 18 years old. I am from a poor family and was married at the age of 16. I am now seven months pregnant. I lost my first child in my fifth month of pregnancy as I was not aware about antenatal care. I am now a member of Pregnant Women’s Group. Before joining this group, I did not know the cause of miscarriage. I now know about the benefits of antenatal check-ups, iron and de-worming tablets, tetanus toxoid injections and postnatal care for me and my child. After learning about the service provided, I convinced my husband to take me for a check-up. We went to the hospital and learnt about my condition and that of my baby. I am so happy that I was able to find out my child’s health before the birth. I want to thank the social mobilisers, NAMUNA and Kidasha.
We are proud to have reached 3,300 of the most vulnerable children in 2012/13. Together with our partners we’ve worked hard to develop improved approaches for case management and family reintegration resulting in stronger and sustained change for these children.”

Jeremy Southon, New Start Programme Manager

**Key Achievements**

- Our clinical services were used by over 27,000 sick children
- Growth screening services for children were utilised over 10,000 times
- Over 1,300 babies were vaccinated against polio, diphtheria, whooping cough, tetanus and measles

**Case Study – Raju’s Story**

Raju’s parents separated when he was 5 years old. His new stepmother neglected him and his siblings, so at 8, he decided to move to Pokhara to be with his mother and stepfather. There was no loving welcome. Instead, he was sent out to work immediately. Shortly after, his mother disappeared and he was sent back to his father and stepmother.

Raju’s father then left to work in the Gulf and his stepmother treated him so badly, he returned to Pokhara. Raju enrolled in school, but when his mother returned she refused to support the family herself, forcing him out of school and into work. To earn more money, Raju began to supply marijuana to drug dealers in Pokhara.

Luckily, Kidasha partners Sathi Nepal and Pokhara Chamber of Commerce and Industry intervened to get Raju back into education and to promote a more stable and nurturing environment in his home. Despite the frequent gaps in his school attendance, Raju is now in the right grade for his age.

Although we always try to keep children with their parents, Raju’s mother blames her children for their situation, believing that she has done her job by giving birth to them and giving them the hands and feet they need to work for themselves. Given this situation, the team is currently seeking alternative care arrangements, so the children can continue their education uninterrupted.

**Why We’re Needed**

Poor children suffer recurring illnesses such as diarrhoea and pneumonia and are often under nourished and stunted. They have limited access to healthcare and their parents receive little guidance or information to help them.

**How We Help**

Together with our partners, we provide high quality primary care services and community-based public health and education initiatives for the poorest and most disadvantaged children in both rural and urban areas of the Western Region. These services provide treatment for children when they are ill and also provide essential support, education and information to help them stay well, reduce avoidable illness and nurture their development.
**Key Achievements**

- We worked with 486 families of street, working and at-risk children
- We provided parenting guidance and advice to an additional 340 parents through 35 parent's/women's groups
- We provided income generation training and support to 65 families to strengthen their economic situation
- In response to our campaigns on birth registration, more than 50 families are obtaining birth certificates

**Why We’re Needed**

Four decades of rapid urbanisation has changed the nature of poverty in Nepal. The majority of street-connected children we work with are from urban families suffering from poor mental health, alcoholism, domestic violence and separation. In Pokhara, there are over 20,000 people living in slums and a significant number develop chronic problems which directly affect the protection, development and survival of their children.

**How We Help**

We work with families in crisis to improve family functioning and relationships, and enable them to access mainstream services and support. This is achieved through counselling and parenting education, as well as participation in women’s groups, empowering mothers to improve their family situations. We also provide business training, as well as loans and business coaching, to strengthen the economic situations of families.

We have pioneered ‘exposure visits’ to local government bodies and service providers to increase both confidence and practical knowledge in how to access these services. These visits also help to increase the sensitivity of local officials to these families and the issues they face.
Key Achievements

- We provided over 3,000 children with basic services and support
- We helped over 700 children to develop their literacy and numeracy through non-formal education
- We supported 929 children in school and worked with schools to ensure retention
- We delivered life skills or awareness classes to 422 children and young people
- 139 children and young people benefitted from training and ongoing participation in children’s clubs

Looking Forward

Specifically, we hope to expand our current work in Rupandehi into neighbouring Kapilvastu, the poorest district in the region. We will also begin to transition our existing urban primary healthcare services from a clinical focus towards preventative community healthcare.

Best Start

We want to build on our existing community-based programmes to raise the status and influence of women as agents of change, and improve maternal and newborn health. We also want to reach an increased number of children and mothers in the poorest and most marginalized communities.

New Start

We are developing new approaches to reach urban families living in chronic poverty. Support will be provided through individual, family and group work to improve family function, parenting and women’s empowerment; resulting in improved child development, nutrition, and educational outcomes.

Supporting Development And Resilience

Why We’re Needed

Street and working children are not only victims of abuse and exploitation, but also have little access to opportunities for their personal development. While primary school enrolment has reached 95% in Nepal almost 25% of the poorest are not attending school. These children are likely to remain in precarious circumstances as adults and their children are more likely to inherit their circumstances.

How We Help

Through drop-in centres, outreach and community work, we support children to access basic services for their development. This includes access to education (both formal and non-formal), livelihood skills development, as well as other personal development opportunities.

Through coaching classes and awareness-raising with families and employers we help children to transition from non-formal education back into government schooling. We also support young people into apprenticeships, on-the-job training and business so that they can move into positive and sustainable livelihoods.

Key Achievements

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A Fundraiser’s Story

In June 2013, Asha, Roma and Bhoj helped raise almost £2,000 for Kidasha by running in the British 10k London.

As a keen runner, Asha wanted to take the challenge for the experience of running past some of London’s main attractions. She felt drawn to Kidasha because of the dedicated work that we do in providing opportunities to underprivileged children and through her passion, managed to persuade two friends to join her and encourage their friends and family to donate.

“With the money raised, I know that it will help someone in need; Kidasha can channel the money into improving their lives. This is a very fulfilling and satisfying feeling. It was an incredible experience to have run for the charity.

Nepal, as one of the poorest countries in the world, has many areas in need of improvement: for instance, healthcare and education. Circumstances mean some children are deprived of life’s basic needs. Here comes Kidasha, with the aim of easing their hardships and make their life better. I wish Kidasha the very best for the future.”

Members of the team at Kidasha also did their own fundraising.

Our CEO, Janice Miller, raised over £5,000 by walking more than 500 miles in 100 days as part of the 8848 challenge.

Jeremy Southon, New Start Programme Manager, organised a half-marathon in Nepal to take place at the same time that his brother, James, ran in the ‘Run to the Beat’ event in London. Together, they raised over £3,000 from supporters in seven countries and are hoping to organise a similar, but larger event next year.

We need your help to continue changing the lives of children in Nepal.

For more information, ideas or a supporter’s pack, contact Melody on 020 7017 8989 or melody@kidasha.org. Or simply visit Kidasha.org to sign up and receive our newsletter and share Facebook and Twitter with your friends.

Radhika’s Story

Radhika’s father left before she was born and her mother soon remarried. Her stepfather drank heavily and was violent towards her mother. Aged ten, Radhika left school to care for her younger brother – her stepfather used all his earnings on alcohol and so her mother had to work as a labourer. Radhika was referred to a Kidasha-supported project. Her social worker engaged with the local community to challenge the stepfather’s alcoholism and violence and provided support to her mother to start her own small business so she could work from home. Now fifteen, Radhika attends school regularly, is vice-chairperson of a children’s club and a committee member of the children’s bank. Her dream is to become a teacher and help children like herself.

We need your help

With your support, we can ensure that Radhika, and many others like her, get the protection and support they need to build a better future. Whether it’s £5 or £50, each donation goes a long way. Please visit Kidasha.org/donate or contact us on 020 7017 8989 to set up a regular donation.

Where Your Money Could Go

<table>
<thead>
<tr>
<th>Amount</th>
<th>Best Start</th>
<th>New Start</th>
</tr>
</thead>
<tbody>
<tr>
<td>£10</td>
<td>provides oral re-hydration solution for 40 children with diarrhoea</td>
<td>provides a safe place to sleep and a nutritious meal for 7 street children</td>
</tr>
<tr>
<td>£50</td>
<td>provides 25 children with an Early Years Education teacher for a month</td>
<td>provides business training for 2 street or working children</td>
</tr>
<tr>
<td>£100</td>
<td>provides primary healthcare for 10 children for a year</td>
<td>pays the salary of a social worker to support 80 children for a month</td>
</tr>
<tr>
<td>£300</td>
<td>pays the salary of a doctor for a month, treating over 700 children</td>
<td>provides emergency shelter and protection for a girl victim of abuse for 2 months</td>
</tr>
<tr>
<td>£500</td>
<td>buys 2 lifesaving rickshaw ambulances</td>
<td>supports 6 street children to reintegrate with their families</td>
</tr>
<tr>
<td>£1,000</td>
<td>pays the yearly salary of a midwife working in slum districts</td>
<td>provides complete educational support for 10 children for a year</td>
</tr>
</tbody>
</table>
Financial Overview

Income

- Donations and grants: 0.25%
- Misc. income: 99.7%

£709,293

Expenditure

- Governance: 12%
- Fundraising: 5%
- Charitable expenditure: 83%

£557,670

Thank you

This year’s achievements simply wouldn’t have been possible without the generosity and commitment of all our supporters and partners. Whether you participated in an event, raised sponsorship money, make a regular donation or support us through a grant, you can be sure that your donations have had a real, positive impact on the lives of children and women in Western Nepal. We sincerely thank you for your continued support.

In particular we recognise the support of the following:

St Anthony’s RC Primary School
The Beatrice Laing Trust
Big Lottery Fund
British & Foreign School Society
The Bryan Guinness Trust
Comic Relief
The Countess Moira Foundation
Devonshire House Preparatory School
The Dorfred Charitable Trust
Etihad Airways
Jacqueline Webb & Co.
Leeds University RAG
The Maitri Trust
The Taurus Foundation
Wallace Curzon Charitable Trust

Special Thanks to our Implementing Partners

- Child Welfare Scheme Nepal
- NAMUNA Integrated Development Council
- Pokhara Chamber of Commerce & Industry
- Sathi Nepal
- Shakti Samuha
Kidasha has offices in the UK and Nepal. The small London team provides overall governance, management and fundraising support. Our Pokhara office houses our programme staff.

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