



Nepal



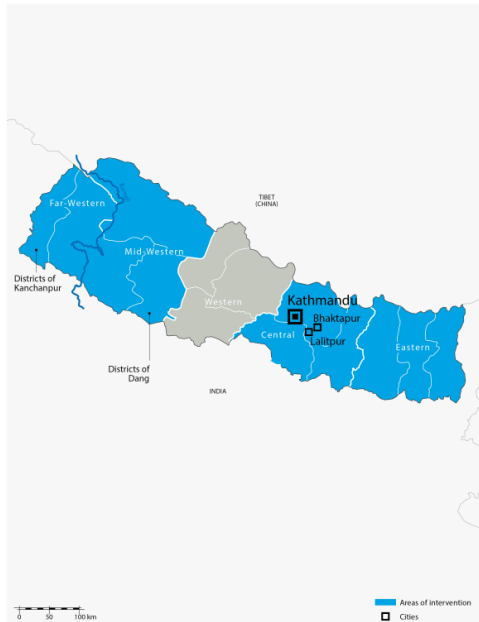
**MANDATE**

Handicap International works in Nepal to improve the living conditions and promote the inclusion of children, women and men with disabilities and other vulnerable groups.

**SITUATION**

The country has made impressive progress in its development despite a long conflict and a complex political landscape; however inequalities are huge. Five million people out of a population of 26 million are estimated to be migrant workers in Asia and the Middle East (three million in India) for lack of better opportunities. Almost 50% are young people under 25. Women, ethnic and “lower” caste groups have not seen the same progress in income as more privileged groups. Although Nepal has ratified the Convention on the Rights of Persons with Disabilities (UNCRPD), people with disabilities are especially discriminated against. Officially 1.94% (Nepal Census, 2011) of the population of Nepal is disabled. This number only captures a very small proportion of the real number of people actually living with disabilities, which is estimated at 15% in any given population by WHO (World Disability Report, 2011). It is estimated that 78% of children with disabilities are out of school (Barriga, 2011). Disability is largely considered a welfare issue and is seldom addressed, either from a public health perspective or from a social inclusion perspective, where disability is mainstreamed in education, health and livelihoods. Only 1% of the disabled population in Nepal has access to employment. Nepal is a particularly challenging environment to work in because of its geography, making it very difficult to access the population.

Nepal is also extremely vulnerable to landslides, floods and earthquakes. Over 200 people died during the 2014 floods. And the 2015 earthquake has killed more than 8,000 people and injured more than 22,000 others. In these natural disasters, people with disabilities are particularly vulnerable – and disasters are likely to increase the risk of disability. Other issues in Nepal include the high prevalence of road accidents and chronic diseases that lead to disabilities.



**Emergency and reconstruction response**

Immediately following the 2015 April earthquake, Handicap International provided support to major hospitals in the valley to stabilise patients and supply physiotherapy care and assistive devices. Within days, HI also distributed winter kits containing essential items to help vulnerable families affected by the earthquake in rural areas and continued this work throughout the winter. The organisation also managed humanitarian aid storage centres in Kathmandu to help and deliver humanitarian aid to villages and communities.

After the immediate relief phase, Handicap International set up rehabilitation services in seven districts to provide long term care to injured people and to support people in need of prostheses, orthoses and reconstructive surgery. Handicap International also supported and trained humanitarian actors in inclusive reconstruction adapted to people with disabilities.

**INITIAL ACTIONS**

Handicap International has been working in Nepal since 2000.

In 2001, the organisation launched activities in 12 districts in support of 40 development organisations for people with disabilities and to raise the awareness of communities on disability and the inclusion of people with disabilities in their community.

In 2005, a project was implemented in four physical rehabilitation centres to build orthopaedic equipment, improve physiotherapy skills, and rehabilitation services.

**KEY FACTS**

Human development index (HDI)*	145/188 classified countries HDI value: 0.548
Gross National Income per capita * (PPA\$)	2 311 US\$ per year
Surface area**	147,180 sq.km
Population**	28.1 million
Life expectancy*	69.6 years

<b>Convention on the Rights of Persons with Disabilities (CRPD)</b>	Ratified: 07/05/2010
<b>Convention on cluster munitions (Oslo)</b>	Not joined
<b>Mine ban treaty (Ottawa)</b>	Not joined

\*UNDP: 2015 human development report

\*\* UNSD 2015



## Strengthening rehabilitation in district environments

### GOAL

Support people with disabilities to be more independent and participate in society by improving the quality of rehabilitation treatment services, improving access to outreach rehabilitation services and enhancing the sustainability of rehabilitation centres.

### METHOD

Handicap International supports five rehabilitation centres in the following way:

- Technical support in orthotic and prosthetic care, physiotherapy and occupational therapy;
- Support to community disability workers to reach out to the most vulnerable people and remote areas of the country to help them access the rehabilitation services they need;
- Help organising regular mobile rehabilitation camps whereby rehabilitation professionals go to the most remote areas of Nepal to provide rehabilitation care in-situ;
- Support to identify and refer people in need of corrective surgery;
- Coach the rehabilitation centres to find their own sources of funding, and gradually decrease HI's contribution to their budget, whilst ensuring that the poorest continue to access quality rehabilitation care.

Handicap International also works with the Government of Nepal to ensure that rehabilitation services can continue to exist without external support. This involves supporting the Ministry of Health to better understand the health aspects of disability and to endorse rehabilitation as part of the health care package.

### BENEFICIARIES

This project provided support to more than 32,729 people with disabilities between February 2010 and January 2016.

### PARTNERS

- Community Based Rehabilitation, Biratnagar (CBRB), Morang district, eastern region
- National Disabled Fund (NDF), Katmandu district, central region
- Prerana, Sarlahi district,
- Nepalgunj Medical College (NGMC), Banke district, mid-western region
- Nepal National Social Welfare Association (NNSWA), Kanchanpur district, far-western region

### LOCATION

Forty one districts in the Far-Western, Mid-Western, Central and Eastern regions of Nepal

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## Inclusive livelihoods

### GOAL

Foster the integration of people with disabilities including disabled ex-combatants in society.

### METHOD

The project focuses on the establishment of sustainable links between people with disabilities and livelihood services. In order to achieve this goal, the project carries out the following activities:

- Facilitate people with disabilities to assess and define their personalised livelihood needs, existing social capital, and potential obstacles and facilitate the setting of livelihood goals using a social counselling tool called personalised social support;
- Propose a sustainable, profitable and viable livelihood response to the identified needs; keeping informed and negotiating;
- Support individuals to gain the necessary skills and resources to achieve their goals: this may be by integrating them into a vocational training program, accessing micro-finance funds, being hired as an apprentice, etc.
- Support employers in order to better understand disability and address the specific needs of people with disabilities they enrol in their organisation;
- Support service providers to elevate disability inclusion in their service provisions/programmes through assessment of obstacles to inclusion, information-sharing, awareness-raising, training, advocacy and coaching
- Support the local planning process to be inclusive of people with disabilities.

### BENEFICIARIES

- 2,585 beneficiaries including 392 ex-combatants with disabilities (Nepalese Civil War 1996-2006) received personalized support.

### PARTNERS

- Community Based Rehabilitation, Biratnagar (CBRB), Morang district, eastern region
- HomeNet, Katmandou district, central region
- Disabled Empowerment and Communication Center Nepal (DEC-N), Banke district, mid-western region;
- Nepal National Social Welfare Association (NNSWA), Kanchanpur district, far western region

## LOCATION

Thirteen districts in the Far-Western, Mid-Western, Central and Eastern regions of Nepal

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## Community-based disaster risk management

### GOAL

The project aims to build resilience and establish a culture of Disaster Risk Reduction (DRR) among vulnerable communities and institutions to natural hazards in the far and mid-western regions of Nepal.

### METHOD

Activities include:

- Consolidating, scaling-up and replicating inclusive community-based disaster management models including strengthening local disaster management plans, capacity-building for relevant DRR stakeholders, development of school disaster management plans and the integration of the DRR approach into the government's development planning and implementation process
- Developing and strengthening communities to district DRR institutions to carry out coordinated response and mainstreaming DRR in sectoral development through training communities on risk assessment and planning tools, search and rescue, first aid and damage need assessment
- Establishing functional and inclusive early warning systems for floods and simulating the use of these systems in communities
- Advocacy activities to convince the government to endorse the comprehensive Disaster Management Act and other relevant policies that enable all DRR actors to plan and implement effective DRR measures from community to national level

### BENEFICIARIES

- 512,271 beneficiaries

### PARTNERS

- Forum for Human Right and Disabled Nepal (FHRD), Dang district, mid-western region
- Nepal National Social Welfare Association (NNSWA), Kanchanpur district, far western region

### LOCATION

- Dang district
  - Kanchanpur district
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## Earthquake preparedness project

### GOAL

Strengthen the health response system to reduce the preventable mortality, morbidity and diseases associated with mass casualty incidents in Kathmandu Valley.

### METHOD

- Support the Ministry of Health and Population to establish an incident command system and to institutionalise a fully functional Health Emergency Operating Centre (HEOC) that will be able to coordinate the response of the health sector when an earthquake hits;
- Institutionalize a roster and an early deployment mechanism for health staff in Kathmandu and build the capacity of the health sector to activate this deployment mechanism when the earthquake hits;
- Support to revise the necessary protocols and training manuals for handling the specific types of injuries that occur in earthquakes and provide necessary refresher training to health professionals;
- Establish the mechanisms that will allow a first response at community level through disability and vulnerable focal points (DVFPs);
- Strengthen existing health sector disaster management policies and guidelines including support to municipalities to incorporate health and water and sanitation plans into existing DRR plans

### BENEFICIARIES

- Approximately 96,000 people

### PARTNERS

National Disabled Fund (NDF), Kathmandu, central region

### LOCATION

- Kathmandu
- Bhaktapur
- Lalitpur



## Enhancing trauma management within the health system

### GOAL

Strengthen rehabilitation services in eight earthquake-affected districts

### METHOD

- Support the Ministry of Health to establish physiotherapy services in regional hospitals, to deliver training and to provide equipment
- Meet the physiotherapy needs of the population directly or indirectly affected by the earthquake
- Support access to reconstructive surgery
- Support earthquake victims to receive assistive devices, orthotics and prosthetics
- Identify people with injuries and support their recovery in seven remote districts

### BENEFICIARIES

- More than 2,650 people received rehabilitation services from September 2015 to April 2016.

### PARTNERS

- Ministry of Health

### LOCATION

- 3 districts in Kathmandu Valley (Kathmandu, Bhaktapur, Lalitpur)
- 5 districts outside Kathmandu Valley: Rasuwa, Dolakha, Dhading, Nuwakot, Sindhupalchok)



## Promoting inclusion and resilience in Nepal after the April 2015 earthquake (livelihoods and disaster risk reduction)

### GOAL

Following the earthquake that hit Nepal on 25 April 2015 and Handicap International's emergency response, the organisation is still providing support to the most vulnerable communities, households and people with disabilities. The project aims to restore livelihoods and to establish risk reduction measures in order to enable local communities to withstand new disasters (landslides, floods, earthquakes and cold winters).

### METHOD

Handicap International identifies and assesses the most vulnerable people through meetings

- Direct service delivery and support activities including 'cash for work'
- Development of 'cash for work' guidelines and activities
- Awareness-raising events to benefit all people in VDCs
- Setting up of Vulnerability Focal Points (VFPs) in Village Development Communities (VDCs)
- Training will be provided on the tasks and responsibilities of VFPs and tools development
- Training all humanitarian and governmental actors in targeting vulnerable families, recovery and accessible homes

### BENEFICIARIES

- 6,862 people affected by the 2015 Nepal earthquake will be involved in disaster risk reduction and livelihood activities
- 7,895 people will be involved in disaster risk reduction activities

### PARTNERS

- Prerana, Lalitpur
- Community Development Forum, Dolakha

### LOCATION

- Kavre district: Simthali Villages Development Communities (VDC), Saping VDC, Bhumlutar VDC
- Dolakha: Lamidada VDC, Laduk VDC



## Human rights of detainees and prisoners in Nepal

### GOAL

Advance the protection and rights of detainees and prisoners in Nepal in accordance with international human rights, and prevent the torture, ill-treatment of detainees and prisoners and long-term impairments due to imprisonment. The project also aims to implement minimum standards of detention and imprisonment, and to increase access to essential services (access to water and food, and medical health) in order to ensure decent living conditions.

### METHOD

The project includes 3 levels of intervention:

- Improve the skills of prison administrators. Handicap International will support the department of prison management to take further steps towards an “open prison” approach and to support prison staff in maintaining the qualitative living conditions of individual prisoners and detainees (duration of stay, behaviour, access to services, legal aid and relationships)
- Prisoners and their ability to access essential services and to participate in that process. Many activities are organised for prisoners including hygiene promotion, emergency health, and educational, socio-cultural and livelihood activities. Personalised support to increase well-being and positive attitudes in prison is developed through individual and group interviews
- The institutional framework, through advocacy against torture and ill-treatment and demonstration of a model of treatment<sup>1</sup> and intervention in prisons

### BENEFICIARIES

- 3,300 prisoners (with 10% women) and detainees, including prisoner victims of torture and prisoners
- 100 officials from prisons and law enforcement bodies (police, judges and policy makers)
- 3 civil society organisations
- 10 health professionals

### PARTNERS

- Center for Victims of Torture (CVICT) (implementing local NGO)
- Department of prison management (DoPM)
- District prison section
- National Human Rights commission
- Ministry of Home Affairs and Social Welfare Council
- Other agencies (High Commissioner on Human Rights, for example)

### LOCATION

- 4 prisons in Nepal: Central jail and Women Prison in Kathmandu, Makawanpur and Dhulikhel prisons



## “Sigmah: Programming Database & Project Management Tool”

A regional project implemented internally by Handicap International (HI) country programmes in Afghanistan, Bangladesh, India, Nepal, Sri Lanka and at head office

Sigmah (*Informatic System for Humanitarian Aid Projects Management*) is an open source software developed and coordinated according to the project management needs of a group of 11 French INGOs. Handicap International joined the project in 2011 to enhance the overall quality of its project management. The programs under the responsibility of the Asia Desk use this tool to assess its benefits, and plan its application beyond the Asia region.

### Partners of the project:



<sup>1</sup> For prisons staff, civil organization, detainees.

## MAIN FUNDING BODIES

<p><b>European Commission ECHO</b></p>  <p>Humanitarian Aid and Civil Protection</p>	<p><b>USAID</b></p> 	<p><b>Department for International Development, UK (DFID)</b></p> 
<p><b>12-12</b></p> 	<p><b>Swiss Solidarity</b></p> 	<p><b>German Telecom</b></p> 