CARE Nepal
annual report
2014
VISION
From the Himalayas to the plains of the Terai, we seek a peaceful and harmonious society in which poor, vulnerable and socially excluded (PVSE) people live in dignity, and their rights are fulfilled. We will be a partner of choice and be recognized for our commitment to social justice.

MISSION
We facilitate the empowerment of poor, vulnerable and socially excluded people to fulfill their basic needs and achieve social justice. This will be attained through:

- Addressing social, cultural and political discrimination
- Facilitating micro/macro linkage for policy influence
- Forging local, regional and global alliances and partnerships
- Supporting sustainable economic development
- Promoting conflict sensitive programming
- Preparing for disaster risk reduction and emergency response

CORE VALUES
At the core of all we do, CARE values:

- Respect: We affirm the dignity, potential and contribution of participants, donors, partners and staff.
- Integrity: We are honest and transparent in what we do and say, and accept responsibility for our collective and individual actions.
- Commitment: We work together effectively to serve the larger community.
- Excellence: We constantly challenge ourselves to the highest levels of learning and performance to achieve greater impact.

GOAL
The work of CARE Nepal and its partners will lead to equitable and sustainable development resulting in greater gender and caste equity and improved livelihoods of the poor, vulnerable, and socially excluded. Our work will contribute towards creating an enabling environment.

IMPACT GROUP
CARE’s primary impact groups are marginalized women and girls with a focus on Dalits, highly marginalized indigenous groups, ultra poor and poor households, conflict survivors and disaster affected people.

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Dear Friends

I am happy to share with you CARE Nepal’s annual report for the year 2014. When we look back, there has been a series of learning opportunities from all of our projects. By reflecting upon those learning, we have been able to understand our community even better.

The 2014 edition of our annual report presents a brief overview of our work and the long lasting impact we have made in the lives of the people. Core to our programming principle is empowerment of women and girls. Identified as key drivers of change in the fight against poverty, our focus on women and girls continued in 2014. The motif of women and girls’ empowerment programmes cross-cut all of our projects with a shared vision of enhancing individual agency of women while maintaining healthy and equitable relations.

Although, women and girls are identified as the key drivers for change, they are often not allowed to make decisions about their household income, or tradition and culture forbid them to leave their homes. Therefore CARE has been successfully empowering marginalized women like Sangita Dhawal to come out of their traditional roles and participate in decision making process so they have more control over their lives.

In this report, you will also gain insight into how CARE responds in an event of an emergency and why we are generally the first ones on the ground. Furthermore, we see how our work on advocacy, transparency and accountability has played a significant role in transforming communities and empowering them.

As always I would like to thank the Government of Nepal, Social Welfare Council, our donors, partners, CARE international members and our CARE Nepal Staff for their great support and tireless work towards the betterment of the lives of those whom we work. Without their support, our work would not have been possible.

Lex Kassenberg
Country Director
CARE International

CARE is a leading humanitarian organization fighting global poverty. CARE places special focus on working alongside poor women because, equipped with the proper resources, women have the power to help whole families and entire communities escape poverty. Women are at the heart of CARE’s community-based efforts to improve basic education, prevent the spread of disease, increase access to clean water and sanitation, expand economic opportunity and protect natural resources. CARE also delivers emergency aid to survivors of war and natural disasters, and help people rebuild their lives.

In 2014, CARE worked in 90 countries, supporting 880 humanitarian aid and development projects to reach more than 72 million people.

CARE Nepal

CARE was one of the first international aid agencies to work in Nepal. Today, CARE Nepal works to address the systemic and structural causes of poverty and social injustice, such as discrimination based on gender, caste, class and ethnicity; poor governance; and vulnerability from conflict and natural disasters. CARE has identified three core themes for its current programs:

Empowering Women and Girls: Women and girls’ empowerment has been one of the most significant focus areas. CARE Nepal looks into the economic, social, political, and cultural aspects of women and girls’ lives, identify the challenges and carry out programs to mitigate them and support women and girls. It has also been tracking achievements resulting from its interventions, for example, regarding the change in women’s access to resources and change in their decision making abilities.

Securing Livelihoods and Effectively Managing Natural Resources: CARE Nepal seeks to enhance the access of poor, vulnerable and socially excluded (PVSE) communities including Dalits, the landless, women and those frequently affected by natural disasters and environmental degradation to natural resources along with improving their access to basic services such as health, education and economic opportunities.

Addressing Issues of Equity and Justice: CARE Nepal engages communities on issues of inequity and justice, challenges harmful traditional beliefs and aids in raising awareness. Policy dialogue and advocacy is also an integral part of this focus area.

CARE works with some of the poorest, most vulnerable communities in Nepal, focusing on Dalits, socially excluded indigenous people, poor families, about

CARE

CARE HAS BEEN WORKING IN NEPAL SINCE 1978

IN 2014

- CARE Nepal implemented 20 community development projects
- in 48 districts
- in partnership with over 40 NGOs
- and hundreds of community groups.
marriageable girls and boys, single women, people with HIV and AIDS, and people affected by conflict and disaster.

CARE Nepal currently works in the following areas:

- Climate Change and Natural Resource Management
- Disaster Risk Reduction and Emergency Response
- Food Security
- HIV and AIDS
- Maternal/Child/Family Health Services
- Popular/Informal Education
- Rural Infrastructure/Quick Impact Programme
- Peace Building
- Psychosocial Wellbeing of Women
- Rural Micro-Financing
- Water and Sanitation
- Economic Opportunities
- Advocacy and policy engagement
- Strengthening the Civil Society

Gender equity and diversity, social inclusion and governance remain as cross cutting strategies through all of CARE Nepal’s work.

Human Resource

CARE Nepal has an inclusive human resource policy. In December 2014, the organization had 162 staff, including 100 men and 62 women. CARE Nepal is committed to gender equity and diversity and is positively progressing in terms of diversifying its staff composition. Of the total employees in 2014, 51 were Brahmins, 34 Chettris, 18 Newars, 23 from indigenous groups, 10 from the Terai, 20 Dalits, 2 Muslims and 4 others. In 2014, there were 12 women in managerial positions and 2 expatriates based in Kathmandu who provide overall strategic leadership and guidance.
major achievements of 2014

12 skilled teachers, who were trained by Udaan Project, conducted the first batch of accelerated learning for 160 girls in 4 VDCs of Kapilvastu district.

Through CARE Nepal’s various livelihoods program, total of 1,113 women were trained in farm-based micro business activities and 279 in non-traditional vocational skills in Nawalparasi district.

Altogether 97 cases i.e. 95% of Haliya rights violations known to Rastriya Haliya Mukti Samaj Federation (RHMSF) were documented and reported to the concerned authorities: District Administration Office (DAO), District Police Office (DPO) and District Court.

Sankalpa Project gave orientation on Gender Responsive Budget to 20 VDC Secretaries in Surkhet and Pyuthan districts.

3882 people received training on global climate change including United Nations Framework Convention on Climate Change (UNFCCC), greenhouse gas inventories, and adaptation analysis through the Hariyo Ban Program.

In Bharosa’s end line survey, it was reported that 89% PLHIV faced no stigma or discrimination. The baseline value was 53.8%.
Because of Subha Yatra’s intervention, 30 CSOs (Returnee Groups/adolescent girls’ group/Mothers’ Group Cooperatives/PSE/Peace Group), four Government Line Agencies (VDC, DDC, DAO, DWCO) and local agents can now identify the ‘Six Steps of Safe Migration’ and adopt it in their regular programming.

5600 community volunteers were trained in Light and Search Rescue taskforce (2331), First Aid taskforce (1998), and Early Warning taskforce (1332) through CARE Nepal’s various Disaster Risk Reduction and Preparedness programs.

In Unnati Project districts, the productivity of vegetables increased from 4.5 Mt/Hectare to 9 Mt/Hectare.

The number of health facilities with birthing centre increased from 41 in 2013 to 108 in 2014 in SAMMAN project districts – Kailali, Doti and Dadeldhura.

Antenatal checkups increased from 67% in fiscal year 2012-2013 to 79% in fiscal year 2013-2014 SMILE project district – Nawalparasi.

After Sambad Project’s intervention, 345 number of conflict affected people reconciled in their community.
CARE Nepal’s intervention for women and girls’ empowerment ranges from intergenerational dialogue and psychosocial support to advocacy for policy reforms. This programmatic approach is one of the core and uncompromising commitments of the organization.

In Nepal, often women and girls are not allowed to make decisions about their household’s income, or tradition and culture forbid them to leave their homes. Therefore, CARE Nepal believes in empowering marginalized women and girls so that they are able to participate in decision-making processes, voice their needs and have greater control over their future. CARE Nepal’s women and girls empowerment programmes not only seek to improve the life condition of these women through income generating activities but also strives to secure their strong social position by boosting their
individual and networking capacity to gain access to various public and private resources and fight against all forms of violence, discrimination and exclusion.

CARE Nepal’s focus on young girls is simple, we believe that educated girls grow into educated women, who have healthier babies and are more likely to educate their children. However CARE Nepal also believes that women and girls’ empowerment can only be achieved only when we engage and work with men and boys. Men are often those who define and keep women within their boundaries. But when we engage with them they realize that their wives’ and daughters’/sisters’ empowerment benefits the whole family.

Keeping this as our focus, through its various projects, in 2014 CARE Nepal selected ‘Men Campaigners’ in consultation with women’s groups and raised awareness amongst men campaigners on the negative consequences of hegemonic masculinity. This was done through workshops, trainings, interactions and formation of men’s support groups. This initiation has been very helpful to create a conducive environment to raise voice against Violence Against Women and Girls (VAW&G) in the communities where we implement our programs.

Empowerment through economic independence

Married into a conservative household, Sangita Dhawal from Badahara Dubauliya VDC of Nawalparasi district was confined within the boundary of her house after marriage. Her life revolved around meeting the demands of her husband and in-laws and she never imagined doing something for herself.

Then one day she came across a change agent from CARE Nepal’s SAMANATA Project. The change agent had come to her village to organize a meeting among the women of the community on saving money. “It was the first time I had heard about such a meeting so I really wanted to join and after much convincing, my in-laws and husband allowed me to participate in the meeting,” shares Sangita.

After the meeting Sangita became a part of the savings group where she started to save Rs. 50 every month. Then on September 2012 their small savings group converted into a cooperative named ‘Saino Saving and Credit Cooperative Organization Ltd.’ where she was appointed as a Secretary. This was a very big source of motivation for her. For someone who did not step outside of her house to becoming a Secretary of a Cooperative was a big achievement for Sangita. However, because she did not have her own source of income, she had to beg her husband for the money to save Rs 50 every month.

Realizing how difficult it was for Sangita to save money every month, the cooperative’s Manager suggested her to join a 7-day residential sewing training organized by CARE Nepal’s partner Legal Aid and Research Center (LARC). The training proved to be fruitful for her as she started to sew clothes for herself and her family members and consequently by taking a loan from the cooperative, she was able to open a small sewing shop in her village.

Then in 2014, another opportunity knocked on her door when CARE Nepal’s SAEENO project asked her to participate in a market exposure visit to Janakpur and Hetauda. Inspired from the visit, she thought of scaling up her small existing business. As a result, her small business flourished and now she can afford to pay her children’s school fees and still save Rs 200 every month. With the increase in income she was also able to open a small retail shop from where she sold clothes she had made herself and from this she earns around Rs. 2000 to 2500 every month.

“My family now respects me and I also get support from everyone in my community. Now my plan is to become a sewing trainer in my village. I hope to accomplish this soon,” Sangita says with a smile.
disaster risk reduction, climate change and food security

CARE Nepal is working on reducing people’s vulnerability by helping communities adapt to climate change by introducing new farming techniques that could help in protecting themselves from recurring disasters.

Globally, CARE works to ensure that the rights of the poorest and most vulnerable people are heard at international climate change negotiations. And we advocate for governments to put poor people’s concerns at the top of the agenda when planning national responses to climate change. In this regard, CARE Nepal is working on reducing people’s vulnerability by helping communities adapt to climate change by introducing new farming techniques that could help in protecting themselves from recurring disasters. This also means securing people’s rights and access to productive resources such as land, water and forests.

CARE Nepal has also been working on building the capacity of those who are most at risk, so that climate change does not escalate into a humanitarian disaster. Climate change has differential impacts and it is particularly impacting poor and marginalized women and girls as they are most at risk during any natural calamities. Therefore, we have been providing training on Disaster Risk Reduction (DRR) so that communities, especially women and girls, know how to respond in the event of an emergency. We have also been providing access to land, forest and education to improve living standards for Dalits, women and girls and poor farmers and providing knowledge on the use and conservation of natural resources. Together with National Farmers Group Federation (NFGF), National Land Rights Forum (NLRF) and Right to Food (RtF) Network, CARE Nepal promotes role of civil societies for their contribution to the realization of ‘right to food’ to the benefit of its impact groups.

CARE Nepal has also been helping national and local institutions tackle the growing climate and food crisis to avert future disasters from affecting the poorest of the communities. Its activities are carried out in close collaboration with national and local disaster management institutions such as National Risk Reduction Consortium (NRRC), District Disaster Relief Committee (DDRC), and the Nepal Red Cross Society (NRCS) and Ministry of Home Affairs (MoHA).

By building alliances with organizations such as WWF, Federation of Community Forestry Users, Nepal (FECOFUN) and National Trust for Nature Conservation (NTNC), CARE Nepal has also worked towards minimizing threats to biodiversity conservation, supporting livelihoods through forest conservation and regeneration, and building capacity of people and the ecosystem to build resilience toward the impacts of climate change.

In 2014, under this programmatic approach, CARE Nepal promoted gender friendly agriculture, natural resource management practices and income generation interventions at the community level. The programme also created leadership positions for women in most of the community based institutions.
Helping dreams turn into reality

A permanent resident of Krishnapur VDC of Kanchanpur district, Basanti Devi Rana resides in the Freed Kamaiya (bonded laborers of Southern Nepal) settlement along the Laljhadi Corridor, an important biological hotspot of the district. With a keen interest in conservation, she had led many movements on natural resources. Time and again she had raised concerns about the vulnerability of the Laljhadi Corridor due to illegal felling, heavy grazing, excessive excavation of sand, gravel, boulders and stones from the forest and nearby streams. However the problems did not stop there. “We could only do so much. There was a need for a wider awareness campaigns and we were struggling to find a way to reach out to more people,” shares Basanti.

But the implementation of the Hariyo Ban Program (HBP) in her community changed things. Under HBP, Jaya Laxmi Community Learning and Action Centre (CLAC) was established in her community of which Basanti became a member. She says, “As part of the CLAC, I got an opportunity to raise important issues such as forest conservation, forest fire control, excessive grazing in the forest, illegal harvesting of forest products, provisions of Community Forest Development Guideline-2065, regularity on Community Forest User Group (CFUG) meetings and general assembly, forest product distribution system, injustice and inequality, caste-gender based discrimination, women empowerment, domestic violence, climate change sensitization about its impacts and adaptation measures etc.”

Unfortunately the CFUG of Krishnapur had been denuded due to excessive grazing, forest fire and illegal collection of forest products in 2000. “Without a functioning CFUG, very little could be accomplished. So I raised the issue in CLAC meetings with other members. We then decided to request the Local Forest Range Post to hand over the authority of forest to the local people,” says Basanti of their campaign to protect the community forest. As a result of their continuous advocacy, the District Forest Office (DFO), Kanchanpur, handed over a 68.62 Hectare of national forest area to 368 households of the community helping dreams turn into reality.

With CARE Nepal’s HBP, Basanti got more support to fight for the cause she believed in. “Through HBP I got opportunities to participate in different leadership development training and reflective learning events of CARE Nepal,” she expresses. With her new found confidence, along with other members of the Jaya Laxmi CLAC as well as users of Jaya Laxmi CFUG, she made Climate Change Adaptation Plan (CAPA) of her community to cope from the climatic vulnerabilities and increase the adaptive capacity of community people.

Under her leadership, Basanti has also initiated the construction of 200 meter long bioengineering structure with plantation of 125 bamboo clumps as well as 350 multipurpose species and grasses nearer Machheli River and bare areas of Jaya Laxmi CFUG to combat with climate change impacts. Moreover, she was able to leverage financial resource for 15 households for income generation activities and those households are now rearing pigs for alternative income options in the community. “Due to the support received from Terai Arc Landscape (TAL) Program and the Jaya Laxmi CFUG, most of households in the community have constructed improved cooking stoves. Therefore, there is less consumption of fuel wood and no smoke in the kitchen, ultimately improving the health of the community people,” she shares.

“There were lots of things that I wanted to accomplish for the safety of our land and also for the benefit of the community. But I knew I could not do it alone. Thanks to CARE Nepal’s HBP, my dreams have turned into a reality.”
sexual, reproductive and maternal health

Through innovative approaches CARE Nepal has been able to bring positive impact on the lives of thousands of mothers and babies from the most disadvantaged population of the country.

Safe pregnancy is a basic human right. However, in Nepal, hundreds of women are dying from complications during pregnancy or childbirth. The majority of these deaths can be prevented if women have access to life-saving treatments, to well-equipped hospitals and to trained birth attendants. In Nepal, CARE has not only been raising awareness about health issues – in particular, proper ante-natal and post-natal care, but has also been instrumental in getting the most marginalized communities involved in making decisions about health services. From innovating approaches such as participatory mapping of pregnant women at the community level to helping establish emergency delivery funds, CARE Nepal has been able to bring a positive impact to the lives of thousands of mothers and babies from the most disadvantaged population of the country.

Committed to supporting maternal health as one of the UN Millennium Development Goals (MDGs) to make pregnancy and delivery safer for millions of women in the world's most
vulnerable communities by 2015, we aim for women to have access to high-quality maternal health services and also work with community leaders, women and health workers to understand and address the reasons for the high maternal death rate. We challenge social and gender norms so women can make decisions for their own health and well-being.

In addition, CARE Nepal’s work on HIV and AIDS has been helping People Living with HIV and AIDS (PLHIV) by raising awareness so that they overcome discrimination in their community.

In 2014, there was an improvement in the quality of life of PLHIV (an increase in total quality of life score of PLHIV from 71.87 baseline value to 83.72%). Our findings also show that Community Support Groups are now led by PLHIV, indicating a significant reduction in stigma and discrimination against PLHIV in our working districts.

Promoting safe pregnancies

Ganga B.K. is from a Dalit family. Generally, women from Dalit community get married at an early age and she wasn’t an exception. With the fear that her parents would force her to marry someone out of her choice, she eloped with the man she loved. Married at an early age, Ganga did not know much about family planning. Nobody cared to teach girls about reproductive health in her village, fearing that they might misuse the learning. Even at school, the teachers would skip the lessons about reproductive health which made them ignorant about the subject matter altogether.

“I lacked the necessary knowledge and was taken aback when I missed my menstruation and learned that I was pregnant. I got very scared as I did not know much about pregnancy. Although I adored babies, the thought of pregnancy always frightened me as I had witnessed the pain my sister-in-law had to go through due to miscarriage,” shares Ganga. Nevertheless, the news of Ganga becoming pregnant brought joy to her family. Soon everyone in the village knew about it.

One day Ganga was approached by a community health volunteer. At first the health volunteer inquired about her health condition and then invited her to attend a mother’s group meeting that was taking place the next day. Initially, Ganga was reluctant as she had never attended such meetings and she was also worried about her family’s reaction. Fortunately, her mother-in-law was positive and allowed her to go to the meeting.

During the mother groups meeting, the participants started to exercise CARE’s Self Applied Technique for Quality Health (SATH). During this process, a social map of all the houses of the village was drawn. Ganga was asked to identify her house and when she did a red dot was put on the map which indicated that her pregnancy was at risk as she was not utilizing the available health services. Other pregnant women also had their own different indications on the map that reflected each woman’s health and the level of medical attention she was receiving during pregnancy. The health facilitator then discussed about the danger signs during pregnancy and the need for proper care. The health volunteers also advised all the women to utilize the health services and the importance of taking iron tablets and TT injections.

“I found the health discussion fruitful as it educated me regarding health services and about the possible complications during pregnancy,” said Ganga. “I then shared about this discussion with my husband to make him understands why it is important for him to take me to the hospital for antenatal check ups,” she further added. Ganga continued going to these meetings and kept herself informed and slowly started to become an active member of the group. Soon after she had a normal delivery and gave birth to a healthy baby.

“I am thankful to CARE for providing me with the information on the importance of going for regular check ups during pregnancy. Because of that first mother’s group meeting I had attended, I was able to make the right choices and decisions for the healthy and safe delivery of my baby.” She has decided to wait for at least for two years before having another child.
CARE Nepal supports communities, who often do not have a voice, to connect with local decision makers and organize grass-root movements to claim their rights.

By implementing a global and coordinated advocacy strategy, CARE aims at influencing the national and international policies that affect the lives of the poorest and most vulnerable communities around the world. With a strong focus on gender equality and women’s and girls’ empowerment, CARE is an advocate for vulnerable communities, globally. In Nepal, CARE helps in policy advocacy by helping communities to connect with local and national decision makers and organize grass-root activities to claim their rights. Our advocacy aims to influence local and national policies by working closely with decision makers and other stakeholders. At the international level, we aim to influence regional and international processes that have an impact on the lives of the poorest.
In 2014, CARE Nepal’s programs helped poor people claim their rights and advocate for policies at local, regional and national levels to improve gender equality, motivate policy changes and address the underlying causes of poverty.

Seeking government’s commitment

On the occasion of International Women’s Day 2014, CARE Nepal in partnership with Sancharika Samuha and National Forum for Women Rights Concern (NFOWRC), organized a Public Hearing Event on Commitment to Reduce Gender Based Violence (GBV) on 6 March, 2014. The program was organized with the objective of drawing attention of the duty bearers to the need for survivors of GBV, particularly those of witch accusation, to get justice and for the perpetrators to be punished. Deputy Prime Minister (DPM) and Home Minister Mr. Bam Dev Gautam had attended the event along with other high level dignitaries such as the British Ambassador to Nepal, H.E. Andrew James Sparks. By the end of the public hearing event, the DPM expressed the government’s commitment to end violence against women and to create an equitable society.

A total of 204 people from various organizations including journalists, political leaders, religious and cultural experts, senior women’s rights activists, lawyers, doctors, professors, representatives from the UN agencies and I/NGOs attended the event.
Globally, CARE is amongst the first to arrive and the last to leave during a humanitarian crisis. We are responding to today’s emergencies and helping people prepare for tomorrow’s. We help people respond, prepare, and recover from disasters and coordinate with other aid agencies, governments and local organizations to meet the many immediate needs of affected people during disasters. While each emergency response is tailored to the needs of each situation, we focus on four humanitarian core sectors: we ensure that people have enough to eat, a roof over their head, clean water and adequate hygiene supplies and receive assistance for their sexual and reproductive health.

In August 2014 excessively heavy rains caused landslides and flooding in 5 districts of Mid-western Nepal affecting 143,000 people. CARE Nepal had presence with operational projects in 3 of these districts: Bardia, Banke and Surkhet and responded to the emergency coordinated by the Nepal Government.

Since the early days of the emergency CARE Nepal has been supporting families with WASH, Emergency Shelter and Non-Food Items (NFIs) and into early recovery with Livelihood support focusing on girls and women.
Surviving through the winter

28-year old Chinki Tharu lives in Simalghari, Udharpur of Banke district with her husband Junga Bahadur Tharu and three daughters (a 9-year old, 5-year old and 8 months old). Recalling the devastating flood of 15th August 2014 Chinki says, “Our house was completely damaged by the flood and after seeking refuge in the village road for eight days, we felt helpless”.

CARE Nepal and Nepal Red Cross Society (NRCS) had realized the severity of the situation in Simalghari and so decided to distribute relief items in the area. “We were provided with two tarpaulins and fixing materials along with clothes, mosquito nets and hygiene kit,” shares Chinki.

But as the cold season was soon approaching, there was a dire need for winter-friendly items. “People from CARE Nepal came and asked us about what we needed the most to prepare for winter. So, we requested for warm clothes and also to help in preventing dew drops from entering inside the tarpaulin,” she further says.

“In response, CARE Nepal and NRCS provided warm clothes and ceiling foam mattresses to prevent the cold winter dew drops from coming inside the temporary shelter and to keep it warm. I also received a sweater for me and baby blanket for my daughter. I was really worried about how we would survive through the winter. But with the support received, it gave us some respite,” she said with a smile.
CARE Nepal has mainstreamed accountability and transparency throughout its projects.

CARE Nepal’s work on good governance has been successful in connecting government officials and other power holders to the marginalized population of the country. Challenging unequal power dynamics, the organization’s focus on participatory decision-making has been able to hold stakeholders accountable and promote transparency in the remotest communities of Nepal.

CARE Nepal’s Community Score Board as a tool to improve local governance, hold provider’s accountable, and generate local resource and ownership, has been a very popular and effective tool. The tool has been replicated in number of projects which is focused on governance improvement.

Similarly, CARE Nepal has mainstreamed accountability and transparency throughout its projects. In 2014, various mechanisms were adopted to ensure accountability and transparency in its Emergency Response Program (ERP). The main objective of this practice was to ensure accountability and transparency while implementing ERP in flood affected districts of mid-west development region.

CARE’s work on Governance focuses on:

- Raising awareness about peoples’ rights and promoting the engagement of vulnerable people in public decision making processes
- Empowering people and communities to express their issues and demands, often through acting collectively. This contributes to overcoming some of the barriers to being heard.
- Strengthening spaces where governments and poor citizens can get together to discuss and negotiate a more inclusive and pro poor development agenda
- Improving government transparency and accountability, and encouraging citizen’s monitoring of public spending
CARE Nepal projects 2014

Total Number of Projects: 20
Total District Coverage: 48

- Aba Mero Pala
- Access
- Building Resilient Communities and Institutions for Natural Disasters in Far and Mid – Western Region of Nepal (VISTAR)
- CARE/Community Support Program II (CSP II)
- Enhanced Capacity of civil society in Nepal to unite and demand state accountability and ensure protection and promotion of Human rights (Mukti)
- Emergency Preparedness Plan (EPP)
- Enhancing Mobile Population Access to HIV/AIDS Services, Information & Support (Bangladesh, Nepal, India) – EMPHASIS
- Helping Ban Nepal’s Ban Programme
- Promotion and Protection of Rights of Nepali Migrant Women (Shubha Yatra)
- Right to Food
- SAEENO
- SAMBAD
- Sankalpa
- Saving Mothers’ and Infants’ Lives (SMILE)
- Strengthening Approaches for Maximizing Maternal, Neonatal and Reproductive Health (SAMMAN)
- Strengthening State and Civil Society Capacity for Comprehensive Response to HIV and AIDS (BHAROSA)
- Sustainable Conservation Approaches in Priority Eco-systems (SCAPES)
- UDAAN
- UNNATI
- Women Empowerment for Transformation in the Churia Area (SAKCHARM-III)
project list and summaries

ABA MERO PALO

Project Goal: Address the underlying causes of child marriage through a dynamic process of innovation, analysis, learning, and advocacy
Working Districts: Rupandehi and Kapilvastu
Impact Population: Adolescent Girls (10-19 Years) from the areas which have high child marriage prevalence rates
Project Period: May 2014 to April 2017
Donor: Kendeda Fund

ABA MERO PALO focuses on facilitating and learning from innovative strategies to influence change makers and root causes (drivers) of child and early forced marriage in Nepal. In 2014, CARE’s and partner staff’s capacity was enhanced on evidence based advocacy through various trainings, meetings and context analysis.

ACCESS

Project Goal: To improve maternal and newborn health and reduce mortality of mothers and infants by increasing access and quality of health services in Bajura district
Working District: Bajura
Impact Population: All women of reproductive age, pregnant women and newly delivered/lactating mothers and their families, newborn children, marginalized/mobile indigenous groups
Project Period: May 2014 to October 2016

Donor: Danish Radio, CARE Denmark
In 2014, ACCESS trained all Female Community Health Volunteers (FCHVs), health facility staff and Health Facility Operation Management Committee (HFOMC) members of Bajura on maternal and neonatal child health issues. Moreover the project provided orientation to 20 mothers group about the importance of antenatal checkup in health facilities. The project also trained 45 Peer Educators in 5 Village Development Committees (VDCs) on sensitizing the community about the consequences of harmful traditional practices during pregnancy, childbirth and the post-natal period.

Donors: Kendeda Fund

A mother’s group meeting in progress in Martadi, Bajura. Access Project has improved the access of quality maternal and neonatal health services to pregnant and postpartum mothers by training health staffs, providing birthing centre equipments, advocating for institutional delivery and available quality health services and by conducting mother’s group meeting.

Sabnam Begam (in black) joined the Aba Mero Palo project as a Group Facilitator in Kapilvastu. She is a matter of pride and source of inspiration for other local Muslim girls who are seen in the picture.
BHALOSA

Project Goal: To reduce the socioeconomic impact of HIV & AIDS by increasing access to prevention, care and support services

Working Districts: Bajhang and Bajura

Impact Population: Migrant population and their families, PLHIV and their family members

Project Period: January 2011 to June 2014

Donor: European Union (EU) and DANIDA

BHalOSA focuses on reducing stigma and discrimination towards PLHIV through increased awareness and by increasing access to HIV testing and counseling services through mobile camps in remote areas.

By the end of the project in 2014, the endline value of prevalence of HIV among migrants was 0.7% and among migrant spouses it was 0.4%. The baseline value was 0.8% for both.

Community Support Programme II (CSP II)

Project Goal: To reduce poverty and promote social inclusion

Working Districts: Taplejung, Panchthar, Dhanauta, Terathum, Udayapur, Okhaldhunga, Gorkha, Achham, Baitadi, Bajhang, Bajura, Dadeldhura, Darchula, Duti, Kailali, Dailekh, Dolpa, Humla, Jajarkot, Jumla, Kalikot, Mugu, Pyuthan, Rukum and Surkhet

Impact Population: PVSE communities, especially communities prone to natural disaster, disaster affected households and communities, women, children and conflict affected people

Project Period: April 2012 to March 2014

Donor: UKaid, Department for International Development (DFID)

The Community Support Programme (CSP) Phase I was initiated in 2003, during the conflict period, to support community-led service delivery at a time when government support was severely restricted. The second phase of CSP was initiated in April 2010 with a more focused approach covering 405 VDCs and 44 District Development Committees (DDCs). It was further extended for two years from March 2012 with a focus on integrating disaster resilience into regular CSP activities and aligning with the local governance programme framework of the Ministry of Federal Affairs and Local Development (MoFALD).

The extension aimed to raise awareness and build the capacity of poor and excluded communities with a particular focus on women and girls as well as build community resilience to climate and natural shocks through institutionalizing and mainstreaming DRR and develop small scale infrastructure.

In 2014, the CSP project reported additional 40,346 boys and 39,750 girls in the 25 districts having access to improved facilities. Additionally, 2224 households reported additional income of Rs 7,000 per household (hh)/year. Moreover, 73% of poor and excluded people and 47% women were represented in Community Based Organizations (CBOs)/User Committees (UCs) as part of increased participation and good governance.

Disaster Risk Resilient Sub-Health Post constructed with the support of CSP in Udayapur.
Emergency Preparedness Plan (EPP)

Project Goal: Enhance CARE’s Global Emergency Preparedness and Response Capacity

Working Districts: Kathmandu Valley and other flood and landslide prone areas

Impact Population: Disaster affected population

Project Period: February 2013 to January 2015

Donor: Marget A. Cargill Foundation and CARE USA

In 2014 the project coordinated with CARE Nepal’s other projects and with external stakeholders to develop the capacity of District Disaster Response Committee (DDRC) by updating/developing District Preparedness and Response Plan (DPRP). Partnership with Nepal Red Cross Society (NRCS) was developed to work together for emergency preparedness in Kathmandu valley and other flood and landslide prone districts. The project also handed over Non Food Relief Items (NFRI) kits sufficient for 800 families to NRCS. Moreover, 5600 community volunteers as Light and Search Rescue taskforce (2331), First Aid taskforce (1998), and Early Warning taskforce (1332) were trained and equipped in the area of DRR.

EMPHASIS

Project Goal: To reduce the vulnerability of key mobile populations to HIV and AIDS along two mobility routes between Bangladesh/India and Nepal/India by delivering focused interventions at source, transit and destination points

Working Districts: Achham and Kanchanpur

Impact Population:
- In the age group of 15-49 years,
- Includes both men and women (men/women staying at the selected destination sites),
- Returnee/circular migrants at selected source sites,
- Spouses of migrants left behind at selected source sites and
- Both short term and long term migrants (short term includes people who cross over for a few days to 3 months while long term includes those who have come to India in the last 20 years)

Project Period: August 2009 to September 2014

Donor: Big Lottery Fund, UK

EMPHASIS focuses on cross border HIV prevention and care, ending harassment and violence at borders along with women’s empowerment. By the end of the project’s intervention in 2014, 4.5% of respondents were able to identify at least two major modes of transmission of HIV, 8.7% of respondents rejected at least two major misconceptions about HIV transmission, and 72% of respondents reported discussing HIV with their spouse and partners.

Durga B.K. (wearing a black jacket on the left) providing training to one of her students in her tailoring institute. CARE’s EMPHASIS project provided her with sewing machines and helped her establish her Tailoring Institution due to which she has been able to fight stigma and discrimination in her community irrespective of her being HIV positive.
Hariyo Ban Program

**Project Goal:** To reduce the adverse impact of climate change and threats to biodiversity of Nepal

**Working Districts:** Kailali, Kanchanpur, Banke, Bardiya, Parsa, Bara, Rautahat, Chitwan, Nawalparasi, Mustang, Manang, Kaski, Syangja, Palpa, Tanahu, Lamjung and Gorkha

**Impact Population:** People who are involved in Natural Resource Management (NRM) groups

**Project Period:** August 2011 to July 2016

**Donor:** United States Agency for International Development (USAID) Nepal

HARIYO BAN PROGRAM (HBP) seeks to strengthen internal governance of NRM Groups, including livelihood improvement and women empowerment, through Community Learning Action Centre (CLAC) awareness, capacity building and advocacy. It also aims to support NRM on forest operational plan renewal and constitution amendments, equitable benefit sharing and in developing a common understanding on climate change issues and adaptation.

In 2014, HBP provided training to 3882 people on global climate change including United Nations Framework Convention on Climate Change (UNFCCC), greenhouse gas inventories, and adaptation analysis. Also, more than 1200 people benefitted from Income Generating Activities (IGAs) and alternative energy in priority sites in Terai Arc Landscape (TAL) and Chitwan Annapurna Landscape (CHAL).

MUKTI

**Project Goal:** Contribute to full rehabilitation of Haliyas (bonded laborers) and enable them to enjoy their rights with respect and protection from the government and their communities

**Working Districts:** Kailali, Kanchanpur, Doti, Accham, Bajura, Bajhang, Darchula, Baitadi, and Dadeldhura, Humla, Jajarkot and Surkhet

**Impact Population:** Freed Haliyas of Nepal

**Project Period:** January 2012 to December 2014

**Donor:** European Union (EU) and CARE Denmark

MUKTI focuses on institutional strengthening and capacity building of freed Haliyas in collaboration with a local NGO – Rastriya Mukta Haliya Samaj Federation (RMHSF). The project undertakes policy advocacy to address the issues of the Haliya community and establish their rights and protection.

In 2014, due to the engagement and advocacy work with district and national level stakeholders, the Government of Nepal (GoN) agreed to support livelihood activities for 13 Haliya family members. But most importantly, due to the project intervention the Ministry of Land Reform and Management (MoLRM) started rehabilitating Haliyas in 6 districts as per the Haliya rehabilitation modality.
**Right to Food**

**Project Goal:** Representative civil society organizations have contributed to the realization of right to food to the benefit of impact groups

**Working Districts:** Okhaldhunga, Siraha and Udaypur

**Impact Population:** Small holders and landless farmers with specific focus on marginalized groups such as women, Dalits and Janajatis

**Project Period:** July 2013 to June 2019

**Donor:** DANIDA, CARE Denmark

In 2014, The Right to Food (RtF) project provided training to 3,871 people on climate change, food and nutrition security. The project also supported 285 households in receiving land ownership certificate.

**SAEENO**

**Project Goal:** To contribute to the improved livelihood of poor Dalit women by creating economic activities

**Working District:** Nawalparasi

**Impact Population:** PVSE Dalit women who are land poor or landless and single women of selected poverty pocket of 15 VDCs of the Nawalparasi district.

**Project Period:** January 2013 to June 2014

**Donor:** DIAGEO UK

The SAEENO project identifies potential on farm and off farm micro business opportunities and provides trainings to women on business skills development. In addition the project provides start up loans from women led savings and credit cooperatives and also facilitates them to create market linkages.

In 2014 the project trained 324 women in farm based micro business activities and 279 women in nontraditional vocational trainings.
SAKCHAM III
*
**Project Goal:** Women empowerment and improving men’s engagement in gender equality

**Working Districts:** Kapilvastu, Chitwan and Makwanpur

**Impact Population:** PVSE women

**Project Period:** January 2013 to December 2015

**Donor:** Austrian Development Cooperation (ADC), CARE Austria

SAKCHAM III seeks to strengthen and build the capacity of women-led cooperatives in collaboration with government offices, initiate ‘Gender Violence Free’ VDCs and women empowerment strategies in collaboration with government line agencies. It also mobilizes men campaigners and supportive men as change agents for gender equality.

In 2014 SAKCHAM III reported meaningful participation of 25% of women at the household and community level. In addition 60% of the women reported enhanced social connectedness and 40% of the men and women reported changes in gender roles and norms.

SAMBAD
*
**Project Goal:** To promote peace through increased mutual trust and social harmony among individuals/families affected during armed conflict in Nawalparasi and Rupandehi districts

**Working Districts:** Nawalparasi and Rupandehi

**Impact Populations:** Individual/families affected during armed conflict (killed, missing, injured, displaced, orphaned, ex-combatants).

**Project Period:** August 2013 to August 2016

**Donor:** USAID Nepal

Sambad - “Dialogue for Peace”, is a three year project which aims at supporting the Ministry of Peace and Reconstruction (MoPR) to strengthen its program on relief and rehabilitation packages to the victims of Nepal’s decade long armed conflict. It also works in the reconciliation between conflicting groups and individuals using safe spaces for dialogue. Another objective of the project is to help raise the incomes of the conflict-affected families through job opportunities and seed funding.

In 2014, 563 conflict affected people of targeted communities experienced social cohesion through increase in trust and tolerance. Similarly, 190 armed conflict related incidences were reduced in targeted communities and 345 conflict affected people were reconciled in their community.
SAMMAN

**Project Goal:** To improve maternal and neonatal health outcomes by strengthening and increasing effectiveness of frontline Health Workers (HWs) to positively impact maternal, neonatal, and child health (MNCH) goals.

**Working Districts:** Doti, Dadeldhura and Kailali districts

**Impact Population:** Women of reproductive age (15-49 years), pregnant women, newborn (0-28 days) and children less than five years

**Project Period:** July 2012 to June 2015

**Donor:** Glaxo Smith Kline (GSK), UK

SAMMAN focuses on increasing effectiveness of frontline HWs through enhanced training and supervision, enhanced community health systems, and enhanced community mobilization efforts.

In 2014 the SAMMAN project was able to increase the number of health facilities with birthing centers from 41 to 108 in its working districts. Similarly the number of skilled birth attendants increased from 60 to 143 in 2014. Additionally, 700 number of front line HWs were trained (467 FCHVs and 233 HWs) on Community Based Newborn Care Program (CBNCP) training. To address the unmet need of family planning, micro plan on family planning was introduced in Doti. Additionally, implant service sites has also been extended to 8 more health facilities in the district.

SANKALPA

**Project Goal:** Contribute to a transparent and participatory public budget allocation and expenditure in Nepal that equally benefits marginalized groups, particularly women.

**Working Districts:** Surkhet and Pyuthan

**Impact Population:** Women and marginalized groups (Dalits, Janajatis, minorities, differently-abled people)

**Project Period:** February 2014 to January 2017

**Donor:** European Union, CARE Österreich

In 2014, through Sankalpa’s intervention members of 76 Citizen Awareness Centers (CAC), especially women, learned about Gender Responsive Budget (GRB). Similarly the project also oriented 20 VDC secretaries on GRB. In addition, nine members (6 women and 3 men) from Civil Society Organizations (CSOs) were trained on GRB and local planning process through a five day Training of Trainers (TOT) to increase their budget literacy and capacity to hold VDCs and DDCs accountable for delivery of the 35% budget provision and marginalized citizen participation.
**SMILE**

**Project Goal:** SMILE project focuses on empowering communities, improving local health governance and strengthening maternal health services in the weakest parts of Rupandehi and Nawalparasi districts.

**Working Districts:** Rupandehi and Nawalparasi

**Impact Population:** Pregnant mothers, lactating mothers and newborn children

**Project Period:** June 2012 to May 2015

**Donor:** COVANCE Inc.

SMILE is providing information on health care needs, government service provisions and promoting behavior change among mothers and communities by strengthening and/or activating community-based groups, such as mothers groups, FCHVs and HFOMCs. By providing various trainings on birth preparedness, the project is playing an instrumental role in improving the quality of pregnancy and delivery care services at local health facilities in the project districts.

In 2014, SMILE project provided antenatal services to 79% of its beneficiaries. Moreover, 335 health workers were trained, and equipment support and renovations were done at 17 birthing centers.

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**SCAPES**

**Project Goal:** To address immediate threats to biodiversity while promoting social equity, good governance and sustainable livelihoods in partnership.

**Working District:** Taplejung

**Impact Population:** Poor and marginalized population of Kanchenjunga Conservation Area (KCA)

**Project Period:** September 2010 to July 2014

**Donor:** USAID through WWF-US

SCAPES seeks to build an understanding of vulnerability of communities to climate variability and climate change and implement integrated community and ecosystem adaptation approaches to benefit people and biodiversity. It also ensures equitable benefit sharing and access to natural resources and conducts pro-poor planning training for local youth to be local resource persons and mobilizes them in the preparation of livelihood improvement plans.

In 2014 with the support from SCAPES project 550 people have increased economic benefits derived from sustainable natural resource management and conservation. Stakeholders have an increased capacity to adapt to the impacts of climate variability and change. The project conducted public hearing and public audit in the 7 Community Forest User Groups (CFUGs) at Lelep and Tapethok VDCs at KCA where 153 CFUGs members participated and were informed about financial expenditure and program progress of CFUGs.

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Nepali handmade paper produced with the support from SCAPES project.

SMILE project provided an opportunity to Thanmaya Thanet, an Auxiliary Nurse Midwife (ANM) to participate in Skilled Birth Attendants (SBA) training at Bhim Hospital, Bhairahawa. Since the SBA training, she has independently conducted more than two dozen deliveries. Here she holds a baby at the Nawalpur Birthing Center.
UDAAN
Project Goal: To empower approximately 460 school dropout girls of PVSE families to complete their primary and/or secondary education
Working District: Kapilvastu
Impact Population: Girls from vulnerable and marginalized communities who have dropped out after early grades or have never been to school
Project Period: November 2013 to October 2016
Donor: The OPEC Fund for International Development, CARE Austria
UDAAN project seeks to support school dropout girls from PVSE families of Kapilvastu district. The project aims at giving them a second chance at education by providing a catch-up course that is appropriate to their needs. It also equips them with necessary skills to lead a self-determined life. Through this project, CARE directly contributes to Nepal’s efforts towards achieving Millennium Development Goal (MDG).

In 2014 Udaan developed five models of catch-up training curriculum for five subjects. The Udaan model is aimed at enhancing the skills of teachers to impart accelerated learning. The project also developed capacity of 12 teachers to impart accelerated learning to young girls who have dropped out of school or have never attended school. These teachers have now conducted first batch of accelerated learning for 160 girls in 4 VDCs.

SUBHA YATRA
Project Goal: To promote safe migration and protect the rights of female migrant workers through mobilization and strengthening the response of civil society
Working Districts: Rupandehi and Makwanpur
Impact Population: Potential migrant women, returnee women, deportee women and migrant women
Project Period: January 2011 to March 2014
Donor: EU, ADC, CARE Austria
SUBHA YATRA was designed to build the capacity of NGOs/Civil Society Organizations (CSOs) to work for safe migration, increase vigilance on unsafe migration and trafficking, rights, linkages with relevant government authorities and legal/counselling services. Subha Yatra sought to provide information to migrant workers on their rights and safe migration options through peer educators (returnee migrants) and information desks at transit and departure points (border points with India and Tribhuvan International Airport in Kathmandu). It also provided psychosocial support to potential women migrants, migrating women and returnee migrants in order to enable them to cope with migration effectively and make reasoned and rational decisions.

In 2014 through project intervention, 30 CSOs – including Returnee Groups, Adolescent Girls’ Group, Mothers’ Group, Cooperatives, Peace Group, four Government Line Agencies (VDC, DDC, DAO, DWCO) and local agents were able to identify the ‘Six Steps of Safe Migration’ and adopt it in their regular programming. Moreover, there was a 20% decrease in the trend of women being deported in the lifetime of the project. Additionally, the project established 30 local level, two district level and one inter district level Community Based Organizations (CBOs) of returnee migrants.
**UNNATI**

**Project Goal:** To support income generation and livelihoods of smallholders

**Project Goal:** To support income generation and livelihoods of smallholders farmers of Sindhuli and Mahottari districts through vegetable production and marketing

**Working Districts:** Mahottari and Sindhuli

**Impact Population:** Smallholder women farmers

**Project Period:** December 2012 to December 2015

**Donor:** EU

UNNATI seeks to support cooperatives to deliver high quality support services and link smallholder farmers along the BP highway corridor to large markets (Kathmandu and Indian border towns).

In 2014, UNNATI project was able to support 312 households to sell vegetables through cooperatives. Similarly, 633 households of the trained farmers have experienced increase in farm production. In addition, 148 households have started using bio-fertilizer/fertilizer among 1216 targeted small holders farmers who received orientation on organic vegetable production techniques.

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**VISTAR**

**Project Goal:** To reduce disaster vulnerability, mitigate the impact of disasters and promote evidence-based advocacy

**Working Districts:** Dang, Kanchanpur, Kailali and Dadeldhura

**Impact Population:** Communities most vulnerable to disaster with special focus on marginalized people

**Project Period:** February 2013 to August 2014

**Donors:** ECHO, ADC, CARE

VISTAR seeks to replicate, scale up and mainstream DRR in development programs, develop community based early warning systems and establish linkages with different institutions/platforms including Nepal Risk Reduction Consortium (NRRC), national and local authorities, communities and media to promote evidence-based advocacy.

In 2014 all of the VDCs targeted by VISTAR replicated previous DIPECHO model and Community Based Early Warning System (CBEWS) by integrating Local Disaster Risk Management Plan (LDRMP). Additionally, 50% of the VDC/Community level plans of CSP II and climate adaptation plan of Hariyo Ban Program and other social inclusion projects of CARE and Handicap International (HI) respectively mainstreamed best practices of previous DIPECHO. Moreover, 75% of the target communities/schools/VDCs/districts have better understanding about the risk of natural hazards and issues related to inclusion.
CARE Nepal donor wise budget expenses of FY 14

CARE Nepal theme wise budget expenses of FY 14

financial figures
Independent Auditor’s Report
To CARE Nepal

Report on the Financial Statements
We have audited the accompanying financial statements of CARE Nepal, which comprise the balance sheet as of 30th June 2014, and the related statements of income for the period then ended, significant accounting policies, and the related notes to the financial statements.

Management’s Responsibility for the Financial Statements
Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in Nepal; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor’s Responsibility
Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with Nepal Standards on Auditing (NSAs). Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement. An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor’s judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity’s preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity’s internal control. An audit also includes evaluating the appropriateness of accounting policies and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements. We believe that the audit evidence that we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion
In our opinion, the financial statements referred to above present fairly, in all material respects the financial position of CARE Nepal as of 30th June 2014, and Income Statement for the period then ended, read together with Significant Accounting Policies and Notes to the Account in accordance with accounting principles generally accepted in Nepal.

Emphasis of Matter
As stated in Notes to Account, CARE Nepal has changed the accounting software. Accounting software is yet to be made fully effective. Our opinion is not modified with respect to this matter.

CA Umesh Prasad Dhakal
Partner
Dev Associates
Chartered Accountants
Date: 8th January 2015
### CARE-Nepal Balance Sheet
**As of 30 June 2014**

<table>
<thead>
<tr>
<th>Particular</th>
<th>Schedule</th>
<th>FY 2013 (USD)</th>
<th>FY 2014 (USD)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Assets</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Cash &amp; Bank</td>
<td>1</td>
<td>1,042,083.78</td>
<td>1,092,139.94</td>
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<tr>
<td>12 Grant / Contract Receivable</td>
<td>2</td>
<td>79,656.73</td>
<td>456,804.45</td>
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<tr>
<td>13 Other Receivable</td>
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<td>1,050,722.11</td>
<td>1,289,824.24</td>
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<tr>
<td>14 Prepayments / Deposits</td>
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<td>(17,084.77)</td>
<td>11,116.07</td>
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<td>15 Fixed Assets</td>
<td>5</td>
<td>27,574.13</td>
<td>10,385.14</td>
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<tr>
<td>16 Intra Company Receivable</td>
<td>6</td>
<td>1,732,873.68</td>
<td>941,302.86</td>
</tr>
<tr>
<td><strong>Total assets</strong></td>
<td></td>
<td>3,416,825.76</td>
<td>3,861,772.74</td>
</tr>
<tr>
<td><strong>Liabilities</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20 Account Payable</td>
<td>7</td>
<td>867,079.02</td>
<td>874,328.14</td>
</tr>
<tr>
<td>21 Program Advance from Donors</td>
<td>8</td>
<td>1,407,342.71</td>
<td>1,388,579.57</td>
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<tr>
<td>22 Taxes and Other Deductions</td>
<td>9</td>
<td>(86,998.07)</td>
<td>66,930.17</td>
</tr>
<tr>
<td>24 Employee Accruals &amp; Provisions</td>
<td>10</td>
<td>(1,156,124.52)</td>
<td>918,130.00</td>
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<td><strong>Total liabilities</strong></td>
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<td>3,243,546.18</td>
<td>3,850,168.31</td>
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<tr>
<td><strong>Net assets</strong></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>30 Net Asset / Private Funds</td>
<td></td>
<td>73,259.58</td>
<td>1,943,084.43</td>
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<tr>
<td>99 Rebalancing Account</td>
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<td></td>
</tr>
<tr>
<td><strong>Total Net Assets/Private Fund</strong></td>
<td>100</td>
<td>73,259.58</td>
<td>1,943,084.43</td>
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<tr>
<td><strong>Total Liabilities/Net Assets</strong></td>
<td></td>
<td>3,416,825.76</td>
<td>3,861,772.74</td>
</tr>
</tbody>
</table>

Significant accounting policies and notes to the accounts form a significant part of the financial statement.

As per our report of even date

Keshav S. Shrestha  
Finance Director  
CARE-Nepal  
Date:  

Lex Kassenberg  
Country Director  
CARE-Nepal  
Date:  

CA Umesh Prasad Chakal  
Partner  
Dev Associates  
Chartered Accountants  
Date:  

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### CARE Nepal Income Statement
**For the period of 1 July 2013 to 30 June 2014**

<table>
<thead>
<tr>
<th>Particular</th>
<th>Schedule</th>
<th>FY 2013 (USD)</th>
<th>FY 2014 (USD)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Income</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Income from Grant and Contract</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Direct revenue</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Indirect revenue</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grants and Support from Lead Member</td>
<td></td>
<td>350,000.00</td>
<td>776,316.41</td>
</tr>
<tr>
<td>Currency Revaluation</td>
<td></td>
<td>(136,481.27)</td>
<td>136,481.27</td>
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<tr>
<td>Miscellaneous Income</td>
<td></td>
<td>1,155.58</td>
<td>21,277.11</td>
</tr>
<tr>
<td><strong>Total Income</strong></td>
<td></td>
<td>10,413,488.36</td>
<td>13,908,524.68</td>
</tr>
<tr>
<td><strong>Less: Expenditure</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sub Grant Expenses</td>
<td></td>
<td>4,935,039.26</td>
<td>5,720,083.70</td>
</tr>
<tr>
<td>Intra Company grants and supports (ICR)</td>
<td></td>
<td>89,468.42</td>
<td>149,147.33</td>
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<tr>
<td>Personnel Expenses</td>
<td></td>
<td>3,018,485.24</td>
<td>2,487,118.48</td>
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<tr>
<td>Professional Services</td>
<td></td>
<td>315,636.70</td>
<td>126,864.29</td>
</tr>
<tr>
<td>Equipment Purchases (Expensed)</td>
<td></td>
<td>119,460.44</td>
<td>184,395.97</td>
</tr>
<tr>
<td>Materials, Services &amp; Consumables</td>
<td></td>
<td>1,054,618.07</td>
<td>1,274,213.23</td>
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<tr>
<td>Travel and Transportation</td>
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<td>718,885.76</td>
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<tr>
<td>Occupancy Related Expenses</td>
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<td>182,573.14</td>
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<tr>
<td>Financing / Miscellaneous</td>
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<tr>
<td><strong>Total Expenditure</strong></td>
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<td>10,733,626.81</td>
<td>12,046,012.88</td>
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<tr>
<td><strong>Excess of Income over Expenditure</strong></td>
<td></td>
<td>(310,139.45)</td>
<td>1,862,471.80</td>
</tr>
</tbody>
</table>

Significant accounting policies and notes to the accounts form a significant part of the financial statement.

As per our report of even date

Keshav S. Shrestha  
Finance Director  
CARE-Nepal  
Date:  

Lex Kassenberg  
Country Director  
CARE-Nepal  
Date:  

CA Umesh Prasad Chakal  
Partner  
Dev Associates  
Chartered Accountants  
Date:  

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financial figures (cont.)
• Agency for Community Development and Change (ACDC-Nepal)
• Bheri Environmental Excellence Group (BEE-Group)
• Center for Environmental and Agricultural Policy Research Extension and Development (CEPREAD)
• Center for Social Development and Research (CSDR)
• Community Self Reliance Center (CSRC)
• Conscious Society for Social Development (CSSD)
• District Land Right Forum (DLRF), Siraha, Okhaldhunga
• Dalit Social Development Center (DSDC)
• Environment, Culture, Agriculture, Research and Development Society Nepal (ECARD-NEPAL)
• Federation of Community Forest Users, Nepal (FECOFUN)
• Forum for Awareness and Youth Activity (FAYA) Nepal
• Handicap International Nepal
• Halkhoriya Collaborative Forest Management Committee Nepal
• Himalayan Research and Social Development Center-Nepal (HiRSDeC-Nepal)
• Indreni Service Society (INSES)
• Jana Utthan Pratishan (JUP)
• Kalika Community Women Development Center (KCWDC)
• Legal Aid and Research Center (LARC)
• Local Initiative for Biodiversity, Research and Development (LI-BIRD)
• National Farmer Group Federation (NFGF)
• National Land Right Forum (NLRF)
• NAMUNA Integrated Development Council (NAMUNA)
• National Forum for Women Right Concern (NFWRC), Nepal
• Nepal National Dalit Society Welfare Organization (NNDSWO)
• Nepal Red Cross Society (NRCS), Dadeldhura

• Participatory Effort at Children Education and Women Initiative Nepal (PEACEWIN)
• Patabhar Buffer Zone Users Committee
• Radha Krishna Tharu Jana Sewa Kendra (RKJS)
• Rastriya Haliya Mukti Samaj Federation (RHMSF) Nepal
• Rural Community Development Centre (RCDC)
• Rural Reconstruction Nepal (RRN) on behalf of National Network on Right to Food Network Nepal (RtFN)
• Rural Women Service Center (RWSC)
• Sahaaj Community Hospital (Sister Organization of SAHAMATI, NGO)
• Society for Environment and Human Resource Development (SOURCE)
• Siddhartha Social Development Center (SSDC)
• Shree Ram Nagar User Buffer Zone Users Committee
• Shree Swanra Integrated Community Development Centre (SSICDC)
• Social Awareness Center (SAC) Nepal
• Women’s Rehabilitation Centre (WOREC)
• Women Skill Creation Center (WOSCC)
• Youth Acting for Change (YAC), Nepal
# list of abbreviations

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>AIN</td>
<td>Association of International NGOs</td>
</tr>
<tr>
<td>CAC</td>
<td>Citizen Awareness Centre</td>
</tr>
<tr>
<td>CAPA</td>
<td>Community Based Adaptation Plan of Actions</td>
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<tr>
<td>CBOP</td>
<td>Community Based Disaster Preparedness</td>
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<tr>
<td>CB-NCP</td>
<td>Community Based Newborn Care Program</td>
</tr>
<tr>
<td>CDO</td>
<td>Chief District Officer</td>
</tr>
<tr>
<td>CFUGs</td>
<td>Community Forest User Groups</td>
</tr>
<tr>
<td>CHSB</td>
<td>Community Health Score Board</td>
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<tr>
<td>CLAC</td>
<td>Community Learning and Action Centre</td>
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<tr>
<td>CSOs</td>
<td>Civil Society Organisations</td>
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<tr>
<td>CSP</td>
<td>Community Support Programme</td>
</tr>
<tr>
<td>DAO</td>
<td>District Administrative Office</td>
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<tr>
<td>DAO</td>
<td>District Agriculture Office</td>
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<tr>
<td>DARP</td>
<td>District AIDS Response Plan</td>
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<tr>
<td>DCD</td>
<td>District Cooperative Division</td>
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<tr>
<td>DDC</td>
<td>District Development Committee</td>
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<tr>
<td>DFID</td>
<td>Department for International Development</td>
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<tr>
<td>DIPECHO</td>
<td>Disaster Preparedness ECHO</td>
</tr>
<tr>
<td>DLO</td>
<td>District Livestock Office</td>
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<tr>
<td>DNF</td>
<td>Dalit NGO Federation</td>
</tr>
<tr>
<td>DPHO</td>
<td>District Public Health Office</td>
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<tr>
<td>DP-Net</td>
<td>Disaster Preparedness Network</td>
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<tr>
<td>DRER</td>
<td>Disaster Risk Reduction and Emergency Response</td>
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<tr>
<td>DVA</td>
<td>Domestic Violence Act</td>
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<tr>
<td>ECHO</td>
<td>Humanitarian Aid department of the European Commission</td>
</tr>
<tr>
<td>ADC</td>
<td>Austrian Development Cooperation</td>
</tr>
<tr>
<td>EU</td>
<td>European Union</td>
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<tr>
<td>FCHVs</td>
<td>Female Community Health Volunteers</td>
</tr>
<tr>
<td>FECOFUN</td>
<td>Federation of Community Forest Users, Nepal</td>
</tr>
<tr>
<td>GM</td>
<td>Genetically Modified</td>
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<tr>
<td>GSK</td>
<td>GlaxoSmithKline</td>
</tr>
<tr>
<td>HBP</td>
<td>Harliyo Ban Program</td>
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<tr>
<td>HID</td>
<td>Human Infrastructure Development</td>
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<tr>
<td>IPC</td>
<td>Integrated Planning Committee</td>
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<tr>
<td>KCA</td>
<td>Kanchanjunga Conservation Area</td>
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<tr>
<td>LDRMPs</td>
<td>Local Disaster Risk Management Plans</td>
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<tr>
<td>LPC</td>
<td>Local Peace Committee</td>
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<tr>
<td>MDG</td>
<td>Millennium Development Goal</td>
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<tr>
<td>MNCH</td>
<td>Maternal Neonatal and Child Health</td>
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<tr>
<td>MNH</td>
<td>Maternal and Neonatal Health</td>
</tr>
<tr>
<td>MoPR</td>
<td>Ministry if Peace and Reconstruction</td>
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<tr>
<td>NACO</td>
<td>Nepal and National AIDS Control Organisation</td>
</tr>
<tr>
<td>NAP+N</td>
<td>National Association of People Living with HIV/AIDS and Networks</td>
</tr>
<tr>
<td>NCASC</td>
<td>National Centre for AIDS and STD Control</td>
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<tr>
<td>NFOWRC</td>
<td>National Forum for Women Rights Concern</td>
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<tr>
<td>NGO</td>
<td>Non-Government Organisation</td>
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<tr>
<td>NRCS</td>
<td>Nepal Red Cross Society</td>
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<tr>
<td>NRM</td>
<td>Natural Resource Management</td>
</tr>
<tr>
<td>NRRC</td>
<td>National Risk Reduction Consortium</td>
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<tr>
<td>NTNC</td>
<td>National Trust for Nature Conservation</td>
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<tr>
<td>PHPA</td>
<td>Public Hearing and Public Auditing</td>
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<tr>
<td>PLHIV</td>
<td>People Living with HIV/AIDS</td>
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<tr>
<td>PVSE</td>
<td>Poor, Vulnerable and Socially Excluded</td>
</tr>
<tr>
<td>RMHSF</td>
<td>Rastriya Mukta Haliya Sangh Federation</td>
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<tr>
<td>SATH</td>
<td>Self Applied Technique for Health</td>
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<tr>
<td>SBAs</td>
<td>Skilled Birth Attendants</td>
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<tr>
<td>SGBV</td>
<td>Sexual and Gender Based Violence</td>
</tr>
<tr>
<td>SMC</td>
<td>School Management Committee</td>
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<tr>
<td>SRMH</td>
<td>Sexual, Reproductive and Maternal Healthcare</td>
</tr>
<tr>
<td>SWC</td>
<td>Social Welfare Council</td>
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<tr>
<td>TIA</td>
<td>Tribhuvan International Airport</td>
</tr>
<tr>
<td>UCPA</td>
<td>Underlying Causes of Poverty Analysis</td>
</tr>
<tr>
<td>UCPVA</td>
<td>Underlying Causes of Poverty and Vulnerability Analysis</td>
</tr>
<tr>
<td>UNSCR</td>
<td>United Nations Security Council Resolution</td>
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<tr>
<td>USAID</td>
<td>United States Agency for International Development</td>
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<tr>
<td>VDC</td>
<td>Village Development Committee</td>
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<tr>
<td>WCO</td>
<td>Women and Children's Office</td>
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<tr>
<td>WDN</td>
<td>Women Development Network</td>
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<tr>
<td>WWF</td>
<td>World Wildlife Federation</td>
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I am powerful