



One Heart
WORLDWIDE

ANNUAL REPORT 2022

LETTER FROM OUR BOARD CHAIR

DEAR FRIENDS,

On behalf of our entire team, I am proud to share with you the progress we have made toward our mission of ensuring that every woman and her newborn can access the safe, equitable, and respectful high-quality healthcare they need to not only survive pregnancy and childbirth, but to thrive long after. In 2022 alone, 203,881 pregnant women and newborn infants were able to access the high-quality maternal and newborn care they needed thanks to our programs.

As we reflect on the many milestones achieved this past year, we recognize that traditional aid models have often perpetuated unequal power dynamics and disempowered the very communities we aim to uplift. This is why, as an organization, we are committed to fostering the agency of the communities we serve and amplifying local capacity to be the driver of change rather than leading it.

A cornerstone to the success of our model are our partnerships with local stakeholders who co-implement, co-invest, and ultimately own our intervention. This unique collaborative approach, which began as a small grassroots effort, has matured to reflect a comprehensive vision that is revolutionizing sustainable partnerships and redefining what is possible in the fight against the global burden of maternal and newborn deaths.

As part of our ongoing commitment to championing local capacity, we are excited to share that in 2022, we formalized a five-year renewal with the Government of Nepal. In addition to outlining our shared vision in Nepal, this agreement also highlighted an exciting expansion of the way we work with local NGO partners. We have joined forces with five local non-governmental organizations to help us carry out the implementation of our programs in our new districts. Each one of these local organizations is well-established in their respective districts and have earned local trust with many years of work with the local communities, which allows for greater community buy-in and more sustainable impact long-term.

Lastly, I want to thank each and everyone of you for your ongoing commitment to our mission. It is through your contributions that we can continue to work toward a world where every woman and newborn doesn't just survive, but thrives.

SINCERELY,
SARA SEIMS
CHAIR, BOARD OF DIRECTORS

*Woman and her child
on the road to a health
facility in rural Nepal.*

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One Heart staff giving finger hearts at an all-staff meeting held in April 2022.



ONE HEART WORLDWIDE'S MISSION IS TO SAVE THE LIVES AND PROMOTE THE WELL-BEING OF PREGNANT MOTHERS AND THEIR NEWBORNS IN UNDERSERVED AREAS OF RURAL NEPAL.

OUR VISION IS TO PARTNER WITH LOCAL AUTHORITIES TO CO-CREATE A LOCALLY-LED HEALTH SYSTEM PROVIDING EQUITABLE ACCESS TO QUALITY CARE FOR ALL PREGNANT MOTHERS AND NEWBORNS.

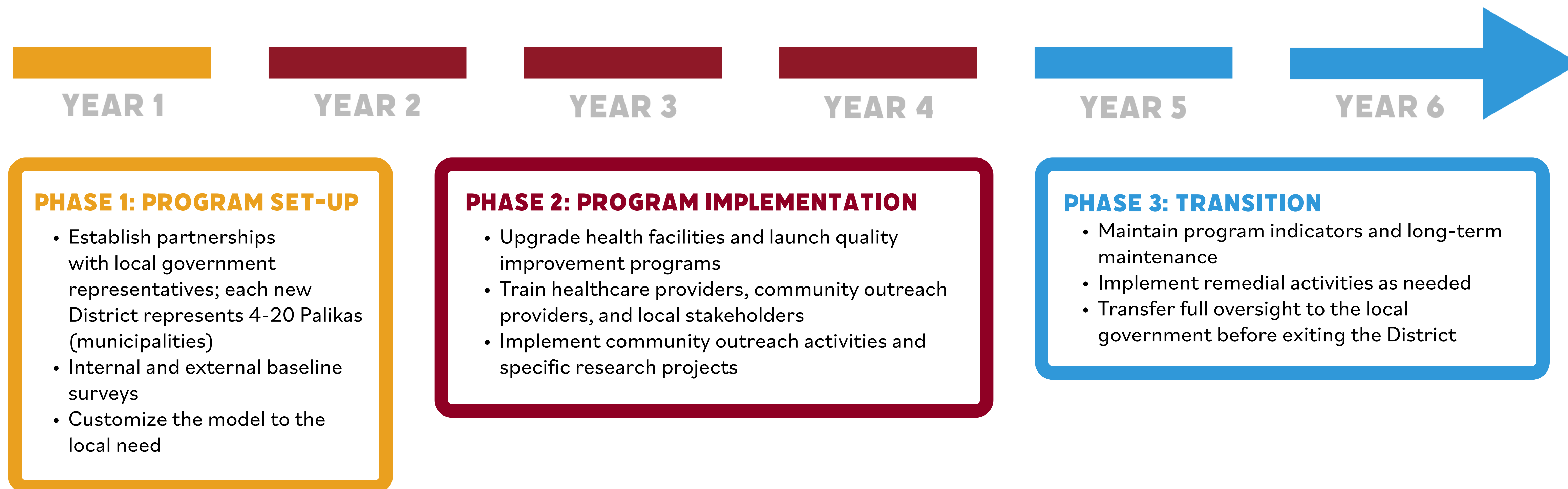
Pregnant woman visiting a Birthing Center for an antenatal check-up appointment.

OUR MODEL

Our success is rooted in a firm understanding of sustainable integration of quality Maternal and Newborn Healthcare (MNH) services into local culture and communities within complex and remote operating environments that are prone to natural disasters.

We co-invest with the local government and leverage existing community channels to strengthen public MNH infrastructure to establish a continuum of care, known as the *Network of Safety*, that increases access to safe delivery and extends both the reach and quality of care offered by the local health system.

Our self-sustaining community-centric model addresses critical gaps in rural MNH service delivery, ensuring that every pregnant woman and newborn can access quality care from a well-trained medical provider no matter where she lives. We spend six years in each district working in partnership with local municipalities, local NGOs and local communities to strengthen the maternal and newborn health infrastructure by upgrading government health facilities, improving the skills and expertise of local health providers, and fostering community empowerment to create meaningful change that is locally driven.



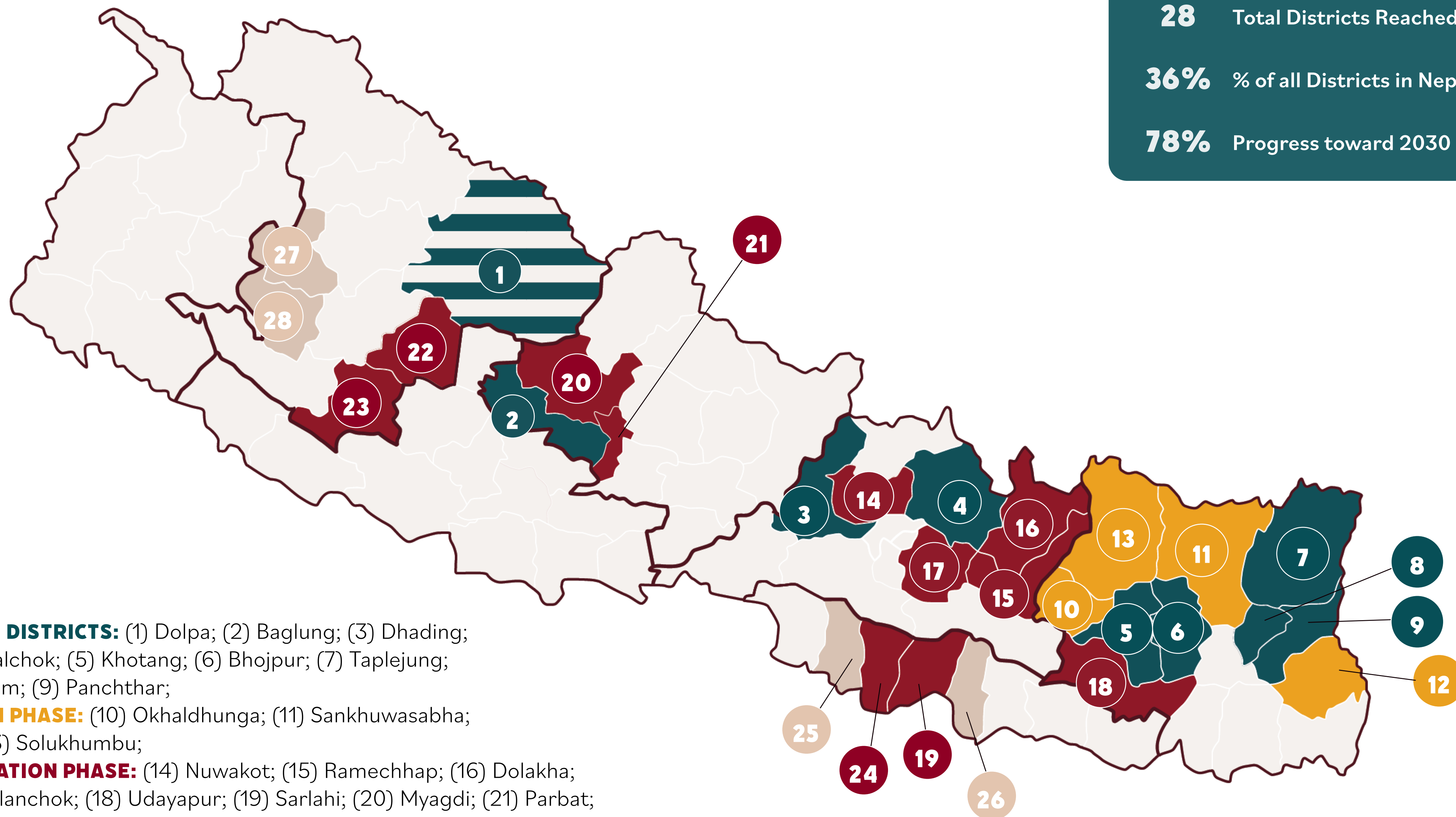
WHERE WE WORK

PROGRAM FOOTPRINT AT A GLANCE:

28 Total Districts Reached

36% % of all Districts in Nepal

78% Progress toward 2030 target



COMPLETED DISTRICTS: (1) Dolpa; (2) Baglung; (3) Dhading; (4) Sindhupalchok; (5) Khotang; (6) Bhojpur; (7) Taplejung; (8) Terhathum; (9) Panchthar;

TRANSITION PHASE: (10) Okhaldhunga; (11) Sankhuwasabha; (12) Ilam; (13) Solukhumbu;

IMPLEMENTATION PHASE: (14) Nuwakot; (15) Ramechhap; (16) Dolakha; (17) Kavrepalanchok; (18) Udayapur; (19) Sarlahi; (20) Myagdi; (21) Parbat; (22) Rukum West; (23) Salyan; (24) Rautahat;

SET-UP PHASE: (25) Bara; (26) Mahottari; (27) Kalikot; (28) Dailekh

THE RENEWAL OF OUR FIVE-YEAR PROJECT AGREEMENT WITH THE SOCIAL WELFARE COUNCIL

An exciting milestone in our deepening and ever-evolving partnership with the Government was the formal signing of our new project agreement with the Social Welfare Council (SWC), renewing our mutual priorities and activities for the next five years. This agreement ensures our continued alignment with our government partners in existing districts and formalizes our path forward as we prepare to onboard the remaining districts of our mandate in Nepal. As a part of the renewal process, we are very proud to share that the in-depth review of our program performance over the past five years showed successful achievement of all our deliverable targets outlined in the previous agreement.



Pregnant woman outside of a Birthing Center in rural Nepal.

OUR NEW NGO IMPLEMENTING PARTNERS:

Towards our goal of long-term sustainability and integration of our programs within existing local systems, in 2022, One Heart Worldwide (OHW) began implementing some of our community-based program activities through local non-governmental organization (NGO) partners. Official partnership agreements have been signed with five NGO partners working in Salyan, Rukum West, Dolpa, and Rautahat including:

1. Women Empowerment Center, Dolpa
2. Dalit Development Society, Salyan
3. Rukumeli Social Development Center, Rukum West
4. Campaign Nepal for Research & Development, Rautahat
5. Mandwi, Rautahat

The team developed a full set of manuals, policies, and program implementation guidelines to clarify expectations on both sides and ensure that all of our programs are effectively implemented by our local NGO partners.



“Working with OHW has been a remarkable experience for me. Being a part of this organization has allowed me to grow personally and professionally. One of the most significant benefits of working with OHW is confidence boost. Through my interactions with the team and the community, I have gained self-assurance in my abilities.”

By engaging with the community and listening to their stories and experiences, I have gained valuable insights into the challenges mothers and newborns face in this region. This has allowed me to approach my work with increased empathy and understanding, making me more effective in my efforts to improve maternal health outcomes.”

- NEHA SAH, CLINICAL FIELD OFFICER, MANDWI, RAUTAHAT DISTRICT



OHW team meeting with community members to provide MNH education and information.

PROGRAM ACHIEVEMENTS

OHW's delivery indicators measure the activities implemented by OHW to achieve our larger objectives. They include capacity building, infrastructure, and community outreach initiatives.

Program Delivery Since 2010

2022 Program Delivery

Pregnancies Reached

Cost-sharing Contributions

Partner Spotlight: Direct Relief

Story from the Field

Pregnant woman getting heli-lifted to a health facility for birth complications.

PROGRAM DELIVERY SINCE 2010



694
Skilled Birth Attendants (SBAs) Trained



640
Birthing Centers Upgraded



20,953
Community Outreach Providers Trained



13,403
Medical Providers who Received Continuing Medical Education



18,180
Community Stakeholders Trained

2022 PROGRAM DELIVERY



1,442

Local Community Groups
Mobilized for MNH



2,661

Community
Stakeholders Trained



2,737

Community Outreach
Providers Trained



89

SBA's Trained

113

BCs receiving Quality of
Care support - first visit

77

New Birthing Center
(BC) upgrades

35

BCs receiving supplemental
medical supplies & equipment

266

Quality of Care support
follow-up visits to BCs

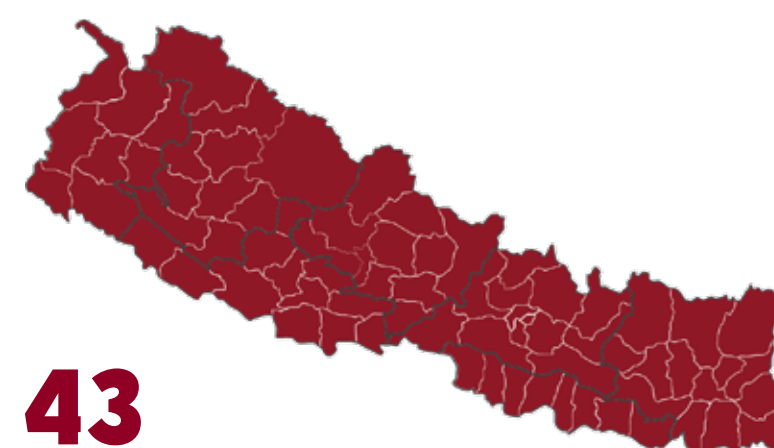
2,827

Continuing Medical Education
for Medical Providers



157

BC governance
strengthening
activities



43

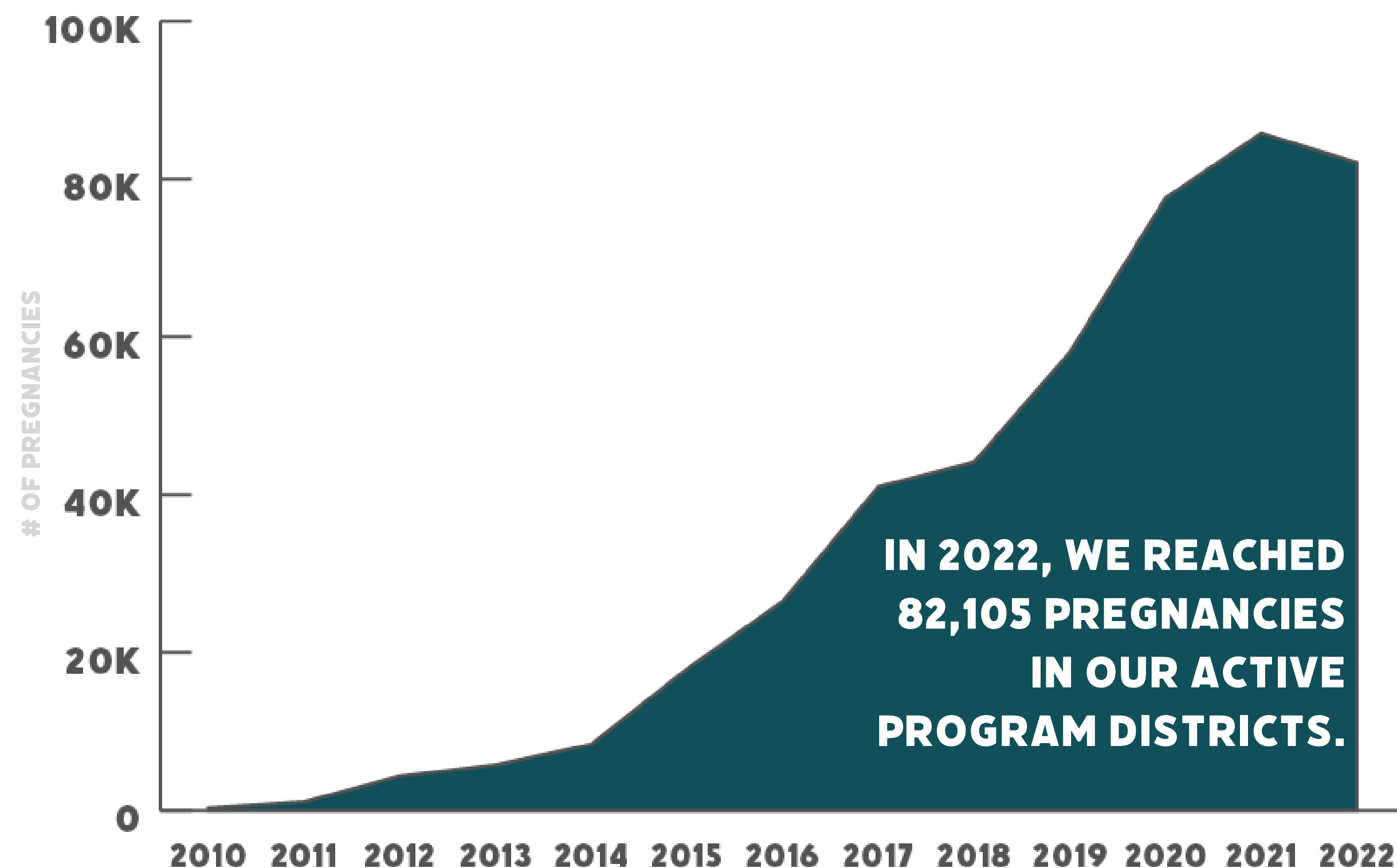
Palikas receiving
technical support

20

Rural Obstetric Ultrasound
Training for SBAs



NUMBER OF PREGNANCIES REACHED



“In 2022, we made significant strides in improving rural maternal and neonatal healthcare services by providing comprehensive two-month long Skilled Birth Attendant (SBA) training to rural health service providers as well as Rural Obstetric Ultrasound training, onsite coaching and mentoring to ensure service providers had access to the latest techniques and knowledge. In addition, we held virtual monthly sessions to provide ongoing support and updates on new knowledge and skills to over 2000 rural nurses. With this comprehensive training and support, we enhanced the capacity of rural healthcare service providers and improved the quality of maternal and neonatal healthcare for rural communities in Nepal.”

- MS. BHAGAWATI SHRESTHA, OHW TRAINING MANAGER



THROUGH OUR PROGRAMS, 15% OF NEPAL'S 750,000 ANNUAL PREGNANCIES NOW HAVE ACCESS TO QUALITY MNH CARE.

Pregnant woman experiencing contractions visiting a Birthing Center for SBA-attended care.

COST-SHARING CONTRIBUTION FROM OUR LOCAL MUNICIPALITY PARTNERS

As an integral part of our program scale-up strategy in Nepal, OHW aims to transition our partners at the local (Palika) level government into an increased payers' role, with OHW transitioning out of an implementation role and into more of a technical advisory role with limited funding expectations. This would signal an official transfer from program co-ownership (between OHW and the Palikas) to exclusive local program ownership.

55%

Average cost-share contribution from municipalities toward facility renovation costs (100% participation)

51%

Percent of municipalities contributing to other aspects of our program (equipment/supplies or training)

In addition to local Palika-level cost-sharing, we are also encouraged to see cost-sharing initiatives and partnerships established with several Provincial Governments, which amplifies the support and resources available for broader health system investment.

A mother and her infant at their home in Solukhumbu, Nepal.

PARTNER SPOTLIGHT: DIRECT RELIEF

Ensuring better access to life-saving vaccines is vitally important to protect pregnant women and their newborn infants' survival. In Nepal, this access is hampered by the lack of appropriate available cold storage facilities. We teamed up with Direct Relief and the Government of Nepal to increase our government partners' capacity to store essential vaccines and reduce the national burden of COVID-19 infections and other illnesses by constructing a cold chain storage facility able to store all types of vaccines, including those typically harder to store due to colder temperature requirements.



"I really want to offer my thanks to One Heart Worldwide for their support. This facility built over 1500 sq. feet of land will enable us to extend our medical storage of both routine and COVID-19 vaccines."

- DR. ROSHAN POKHAREL, SECRETARY OF THE MINISTRY OF HEALTH AND POPULATION

"We are really grateful for the funding support of Direct Relief. OHW is honored to be partnered with the Government of Nepal. We would like to say thank you very much to the Government of Nepal for this great partnership where we are able to come together to help strengthen Nepal's health system."

- MR. DAVID MURPHY, CEO OF OHW



The new cold chain vaccine storage facility in Nepal.



Handover of the vaccine storage facility with OHW's CEO, David Murphy, and members of the Government of Nepal.

“Times have changed, even in the remote hills of rural municipalities. The mothers are literate and they have a better school education than many Female Community Health Volunteers (FCHVs). But formal education is not enough because motherhood is something that you can’t learn in school. I meet a lot of educated women who don’t have enough knowledge of safe motherhood.

FCHVs have a lot of experience and knowledge of the government protocol system and available health facilities with proper birthing centers. FCHVs are especially adept at educating mothers about the process of birth preparedness. The One Heart Worldwide team has helped organize a lot of the trainings on how to prepare pregnant women for birth delivery, usage of Misoprostol, recognizing dangerous signs and taking precautions. We play a key role in communicating with both the communities and the health facilities.”

- AMBIKA S., FCHV, MADI MUNICIPALITY

Ambika S. with the backdrop of the hills she works in as an FCHV.

STORY FROM THE FIELD

FOOTPRINTS FOR SUSTAINING QUALITY MATERNAL AND NEONATAL HEALTHCARE

Local government efforts and investments in Sankhuwasabha are helping to work towards a strengthened health system with the support of One Heart Worldwide.

By Naresh Newar in Sankhuwasabha



*New mother,
Ramuna Sherpa*

In the wee hours of a rainy morning, 27-year-old Ramuna Sherpa began to feel excruciating pain she had never experienced before during her pregnancy. She needed emergency aid and was running out of time. The government-run Siddhakali Health Post was the only health facility closest to her house. But, unfortunately, there was no vehicle available to transport her.

Her family, mostly female relatives, found a makeshift stretcher as their only means of transport. They had to walk for over an hour to reach the health facility. Each minute seemed like a lifetime for Ramuna as her labor pain increased.

“I thought I would not survive this. It was the worst day of my life,” says Ramuna. After finally reaching the health facility, nurses took her to the newly renovated center, built with the support of One Heart Worldwide in partnership with Chainpur Municipality.

Nurses, Siddhakali health staff, and members of the HFOMC waited impatiently. They feared that Ramuna was facing a life-threatening risk after the family informed them about her severe labor pain.

As soon as Ramuna arrived, the nurses took every step to save her. She had a breech case, in which the baby was positioned bottom-down with his feet in the uterus. Luckily, they had experience in dealing with such complications. The skills

and knowledge the nurses learned from a clinical training series, along with mentorship from OHW’s clinical team, provided the needed expertise to save Ramuna.

“Today, when I think of that day, I realize how lucky we all are, and it makes me proud that we have such a high-quality birthing center - it feels like being in a city hospital,” says Ramuna.

IN SANKHUWASABHA DISTRICT, OHW HELPED TO PROVIDE ONSITE COACHING AND MENTORING TO 82 NURSES AND PROVIDED GOVERNMENT-CERTIFIED SBA TRAINING FOR 27 NURSES.



Nurses Sunita G. and Sabina S. have helped to deliver over 150 babies and managed pregnancy complications with the skills they built through OHW’s support.

LEAVING BEHIND THE FOOTPRINTS FOR A SUSTAINABLE HEALTH SYSTEM

After nearly five years, OHW exited from Sankhuwasabha in 2022. OHW programs have helped strengthen the MNH system in all ten municipalities. In the final stage of the OHW program, the exit process involves a two-year transition phase when the OHW team maintains regular contact with the District Health Office, municipalities, and health facilities. This exit strategy allows for a proper handover of all activities to the local municipalities and communities.

“OHW will be missed in our district, but its contribution has left a footprint that will help us to move forward. OHW arrived at a very critical time in 2017 when many representatives had been newly elected, and the federalism process was being implemented,” says Suman Shakya, Chief of Sankhuwasabha District Coordination Committee (DCC).

He added that the new governance system had a positive impact on strengthening local government leadership. “This was when the partnership with OHW turned out to be such a good opportunity with a vision to strengthen our health system.”

The District Coordination Committee plays an integral role in coordinating between rural and urban municipalities and provincial governments and represents the federal government in coordinating development work carried out by both the government and non-government organizations at the District level.

“OHW has shown us the way, and now we have a clear roadmap to continue the process of progress,” says Poshraj Shrestha, Public Health Officer of Madi Municipality. Even during the height of the COVID-19 pandemic, institutional birth deliveries had increased in Madi, which had one of the highest infection rates (based on the population ratio).

“Although OHW left us, their team showed us the direction we should follow, how to make our health systems sustainable and more organized, and how to ensure ongoing efforts to make maternal and neonatal health safer continue to thrive,” says Mr. Shrestha.



The mountains of Sankhuwasabha.

RESEARCH & DEVELOPMENT HIGHLIGHTS

Simulation-Based Mentorship Program
The Rural Obstetric Ultrasound Training Program
Lessons Learned from HMIS 3.6.1
Partner Spotlight: Medical Aid Films



SBA with a child in the rural Birthing Center where she works.

SIMULATION-BASED MENTORSHIP PROGRAM

Since 2020, OHW has been implementing an innovative Simulation-Based Mentorship Program (SBMP), a hands-on workstation-based coaching and mentoring program that provides low doses of regular demonstrations and drills through local/district mentors. In 2022, we continued the program in Udayapur and Dolakha, while expanding the program to Sarlahi and Myagdi. We are encouraged to see the positive response to this program from both service providers and our government partners, as it provides a path designed specifically to support health providers in both burnout and skills retention as they continue to be on the front lines of the pandemic and subsequent recovery. Furthermore, the results of the midline assessment of the program in Udayapur and Dolakha confirm the program's potential as a tool to increase skills retention and support among rural providers. The assessment revealed significant improvements in both skills and knowledge across all seven themes of the mentoring sessions when compared to baseline results.



Clinical mentor demonstrating newborn resuscitation skills

THE RURAL OBSTETRIC ULTRASOUND (ROUSG) TRAINING PROGRAM

To improve access to ultrasound scans in rural areas, OHW has been supporting the Government of Nepal efforts to expand rural obstetric ultrasound training for SBAs so they can properly manage and refer cases of obstetric complications, ultimately reducing newborn and maternal morbidity and mortality. This year, OHW and the National Health Training Center completed an updated learning resource package for SBAs enrolled in the three-week rural obstetric ultrasound training program that was formally approved by the Government of Nepal and incorporated into the ROUSG training program.

In order to meet the growing demand for ROUSG training for rural providers in Nepal, OHW also established an ROUSG training site in the Karnali Provincial Hospital, Surkhet in partnership with the National Health Training Center and Provincial Human Resource Development Center, Karnali. This is a very exciting development as this is the very first ROUSG training center in Karnali province, a very remote rural area where the need for ROUSG-trained SBAs is great.



SBA performing an ultrasound using the training she learned from the ROUSG Training Program.

LESSONS LEARNED FROM THE HMIS

3.6.1 EHEALTH PILOT

After significant COVID-related delays, this year saw the conclusion of our WHO-funded eHealth pilot towards supporting the Government's shift from paper-based record keeping to electronic for patient and facility-level data. While the pilot's evaluation demonstrated strong evidence of the program's support by providers and benefit towards improving service utilization among pregnant women, it also provided insights on logistical factors such as internet reliability and software updates that will need to be addressed in order to scale more broadly. An impressive 120% increase was achieved in the proportion of pregnant women who were in compliance with the WHO-recommended timeline for antenatal, delivery, and post-natal visits, complemented by positive feedback from health providers on the user experience of the software, which improved their ability to record, utilize, and report information between health facilities.



DHO Supervisor teaches FCHVs how to utilize their mobile phones at Tipling Health Post, Dhading, Nepal.

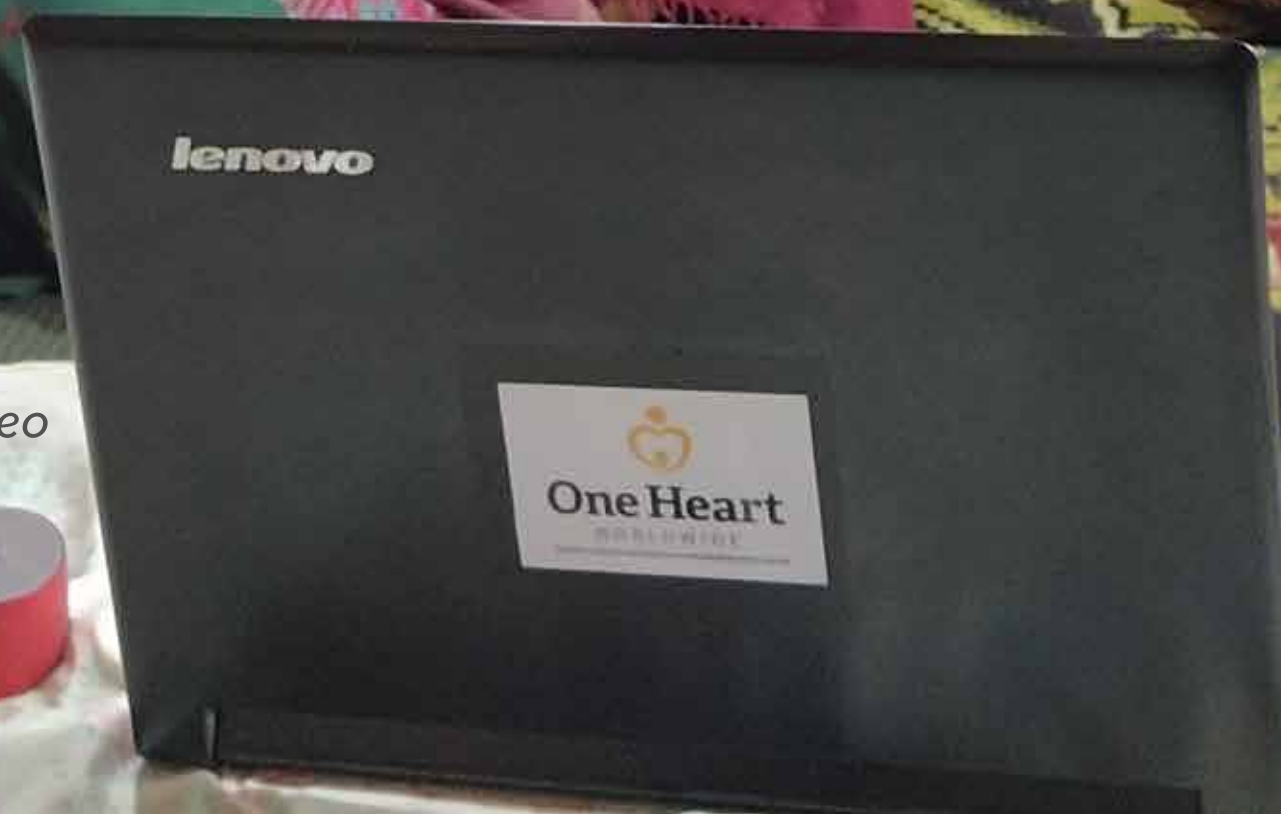
PARTNER SPOTLIGHT: MEDICAL AID FILMS

One Heart and MAF worked in partnership with the National Health Education, Information and Communication Center of the Government of Nepal to develop a series of short educational maternal and newborn health films specifically adapted to the socio-cultural and healthcare delivery context of rural Nepal. We subsequently conducted a study to assess whether viewing these films had a positive impact on the maternal and newborn health knowledge levels among pregnant women, and FCHVs in rural Nepal. Our results clearly demonstrated that using these culturally-adapted educational films was indeed an effective intervention to improve maternal and newborn health knowledge among these rural populations. We are excited to share that the results of our work were recently published in Women's Health Magazine.

MedicalAidFilms

[CLICK HERE TO READ THE
FULL PUBLICATION](#)

*Medical Aid Films video
viewing provided for
pregnant women
in Parbat, Nepal.*



PROGRAM IMPACT

OHW aims to improve the local healthcare system's ability to provide equitable high-quality health services to all women and newborns in their area in order to improve maternal and newborn outcomes in the rural areas of Nepal.

Access to Care, Quality of Care,
Demonstrated Government Buy-In &
Maternal Mortality

Program Impact in Dhading
Long-term Program Impact
External Program Evaluation

Postnatal mothers and newborns attending a health education session at Bhalayadanda BC, Udayapur.



ACCESS TO CARE

Improved access to care as evidenced by an observed increase in the number of births attended by a trained health care provider. Our current target is a 30% increase as compared to baseline. We have achieved this goal in all transition districts.

THE AVERAGE INCREASE IN TRANSITION DISTRICTS IS 55%.

QUALITY OF CARE

Improved quality of care as evidenced by an observed increase in the number of birthing centers scoring 75% or above on the Nepal Government Quality Improvement Program (QIP) tool. Our current target is a 30% increase as compared to baseline. We have achieved this goal in all our transition districts.

THE AVERAGE INCREASE IN TRANSITION DISTRICTS IS 227%.



FCHV at her local Birthing Center.

DEMONSTRATED GOVERNMENT BUY-IN

The percent of OHW's Palika-level partners in each district prioritizing MNH by setting aside budgets explicitly earmarked for this purpose (above and beyond funds provided by the central government). Our current target is 80% or more post-program completion.

97% OF PALIKAS IN TRANSITION DISTRICTS ARE PRIORITIZING MNH.

MATERNAL MORTALITY

To assess the impact of our program on maternal deaths, our team calculates the number of maternal deaths in our program districts. Each death is validated with a verbal autopsy.

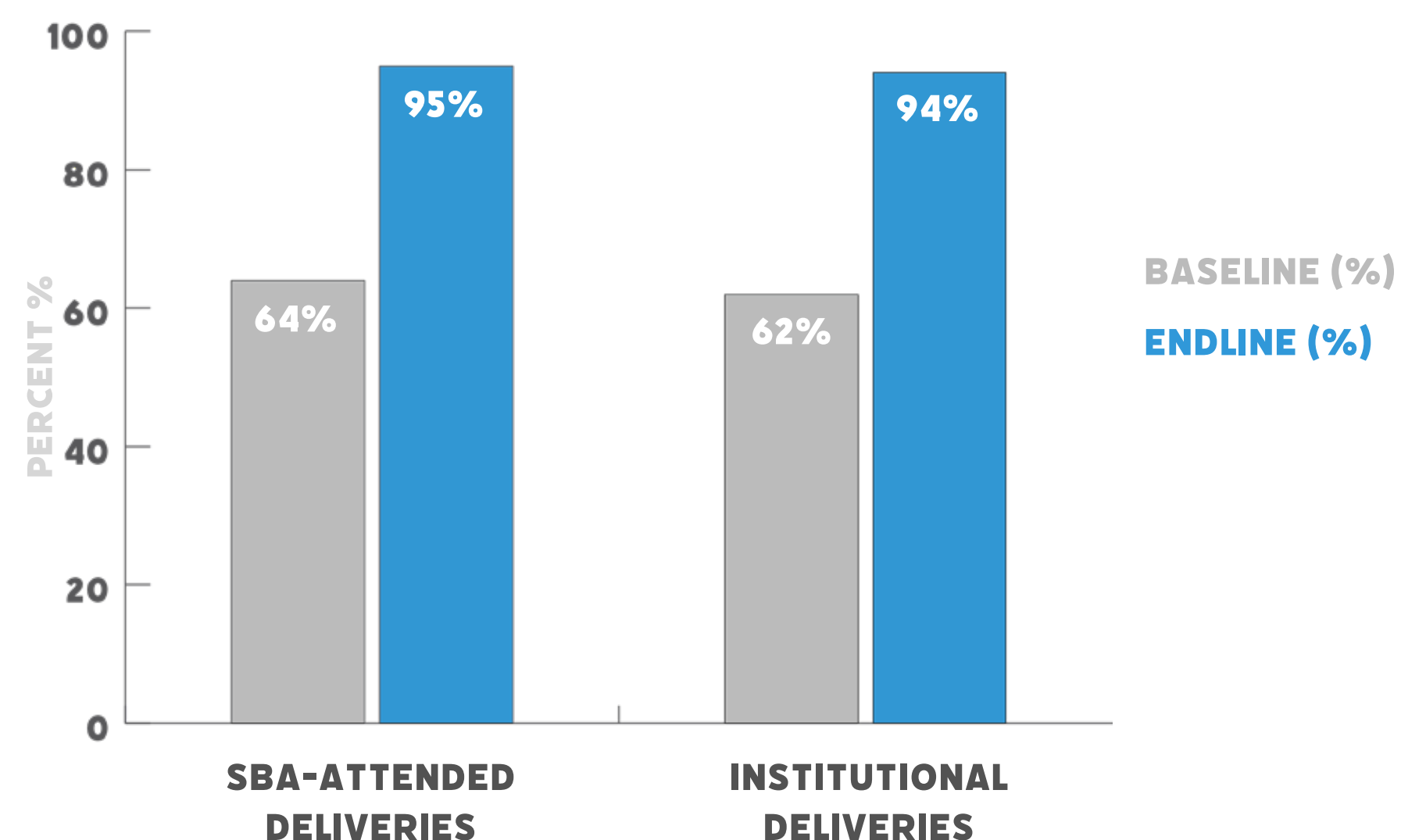
IN OUR TRANSITION DISTRICTS, MATERNAL MORTALITY WAS REDUCED BY AN AVERAGE OF 88% AS COMPARED TO BASELINE.

PROGRAM IMPACT IN DHADING: EXTERNAL ENDLINE SURVEY RESULTS

OHW contracted a third-party research agency in Nepal (MITRA SAMAJ) to conduct an endline survey in Dhading. This survey was conducted among women who gave birth within the last 12 months to assess the changes in our program indicators post-program completion. As part of the analysis, MITRA SAMAJ compared the endline results to the baseline data that they collected for OHW in 2014 before the start of our programs in Dhading.

SERVICE UTILIZATION (EXTERNAL DATA):

The results of our endline survey in Dhading show tremendous improvement in service utilization particularly when considering the impact of the 2015 earthquake, which functionally destroyed the healthcare infrastructure in the district. A tremendous amount of external support from relief agencies, including One Heart Worldwide, supported the reconstruction of the healthcare system and are a strong endorsement of the resilience of the healthcare system in this area.



DHADING RESULTS AT A GLANCE

48%

Increase in SBA-attended deliveries

52%

Increase in Institutional deliveries

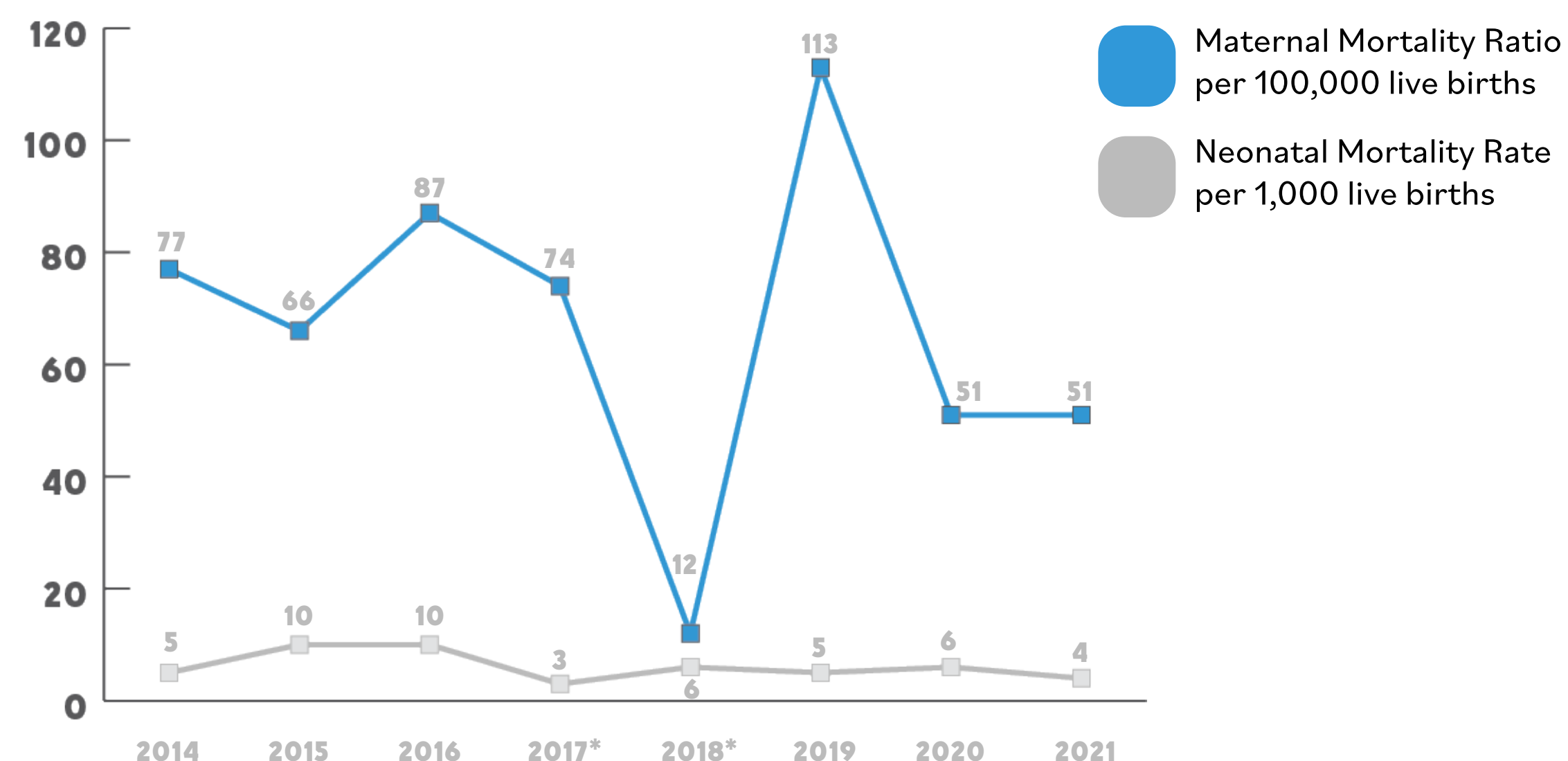


SBA preparing for a new birth.

PROGRAM IMPACT IN DHADING: EXTERNAL ENDLINE SURVEY RESULTS

MATERNAL AND NEWBORN MORTALITY IN DHADING (INTERNAL AND EXTERNAL DATA):

Our original program goal was a 50% decrease in both maternal and newborn deaths as compared to baseline in all our completed districts (10+ years post-program inception) as assessed by an external agency.



*2017 and 2018 data collected by OHW team, all other years collected by external assessment team

While we have not yet reached a 50% decrease in maternal or neonatal mortality, we are seeing a decreasing trend in both indicators, which is impressive considering the impact of the 2015 earthquake and the COVID pandemic on the maternal and newborn health system in Dhading. We expect that the reductions will continue over the coming few years as the system was reconstructed and both access and quality of care have significantly increased.



SBA's at their local Birthing Center in Udayapur, Nepal.

LONG-TERM PROGRAM IMPACT

With more completed districts, One Heart is looking to integrate more measures of long-term program sustainability assessment in our M&E plan. In 2022, the team started by assessing whether our progress was maintained in terms of access to care. This was measured with the percent of births attended by a trained maternal and newborn health provider (HMIS data) as compared to baseline. Our sustainability target for these districts was to maintain the 30% increase in SBA-attended deliveries previously achieved in all of our completed districts. We are pleased to report that our completed program districts have maintained their increases in access to care. In 2022, in our completed districts, the average increase in the number of SBA-attended deliveries as compared to baseline was 69%.

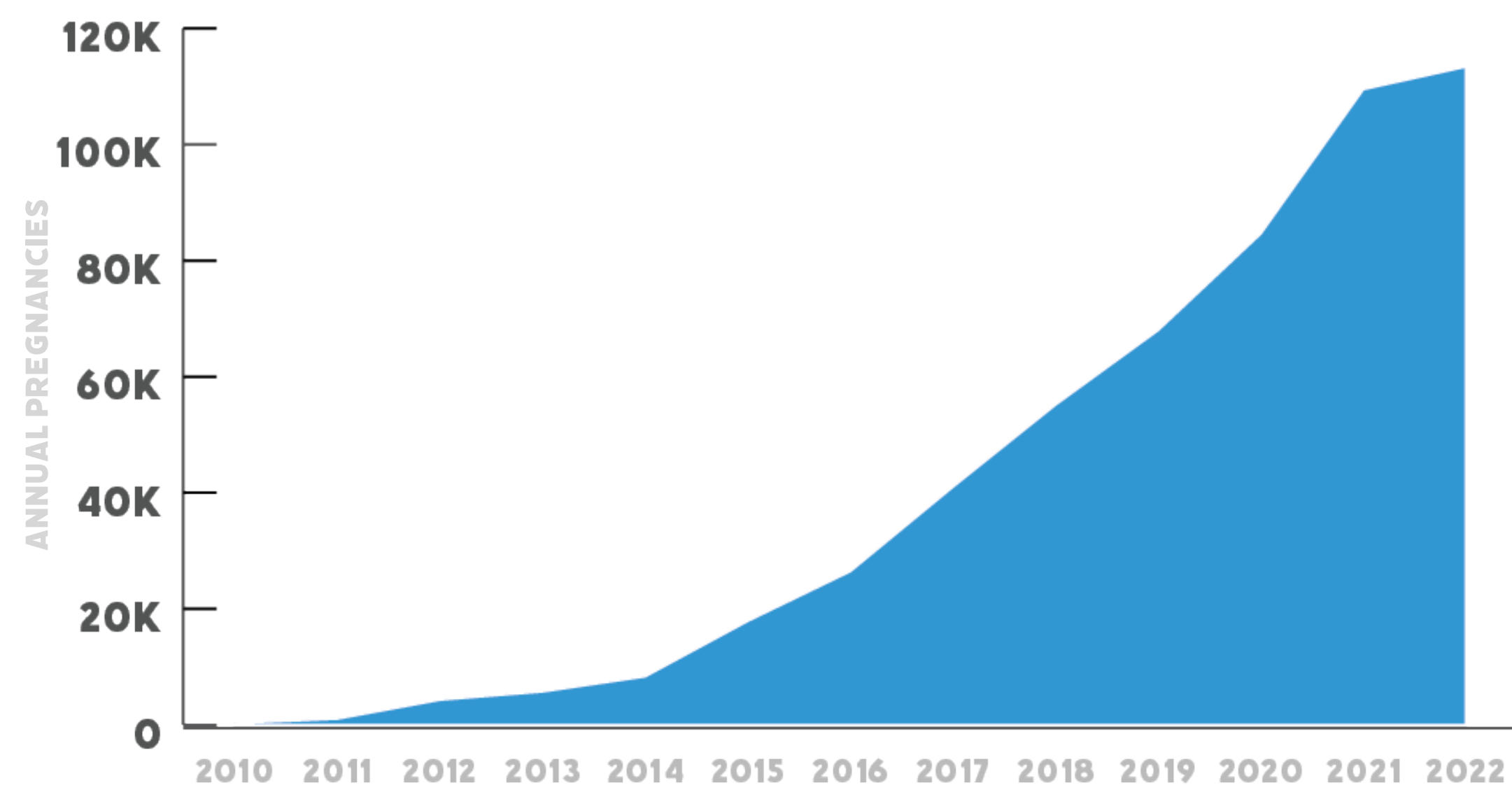
EXTERNAL PROGRAM EVALUATION

Dartmouth College in the United States and Social Sciences Baha in Nepal have completed the second phase of data collection and are in the process of completing the data analysis process and report write-up. Unlike the first phase of data collection, which was performed remotely via telephone due to COVID, data was collected in person during this phase. The two-person research teams traveled to the four districts of Sankhuwasabha, Dhading, Baglung, and Pyuthan (the selected study areas) and interviewed mothers, stakeholders, and health workers. The teams also performed a readiness assessment of the health facilities within these study areas. The data analysis is currently being finalized and we expect a final report early next year.



OHW Board member, Jagdish Upadhyay, meeting with FCHVs in Kavrepalanchok District.

NUMBER OF PREGNANCIES WITH IMPROVED ACCESS TO QUALITY MNH CARE POST-INTERVENTION



BY 2030, WE WILL IMPACT ONE THIRD (250,000) OF NEPAL'S PREGNANCIES ANNUALLY.

IN 2022, WE HAVE ACHIEVED 40% OF OUR 2030 GOAL, REACHING 113,404 PREGNANCIES WITH IMPROVED ACCESS TO SAFE MNH CARE.



SBA caring for a sick newborn at an SNCU ward, Udayapur District Hospital.

“People can already see the difference since OHW started working here. They have helped our Health Facility Operation and Management Committee (HFOMC) members a lot. It has helped us become more organized and efficient and shown us how to move forward with our plans. They have been in contact with us. During the pandemic period, we also organized virtual meetings when we were not able to meet face-to-face.

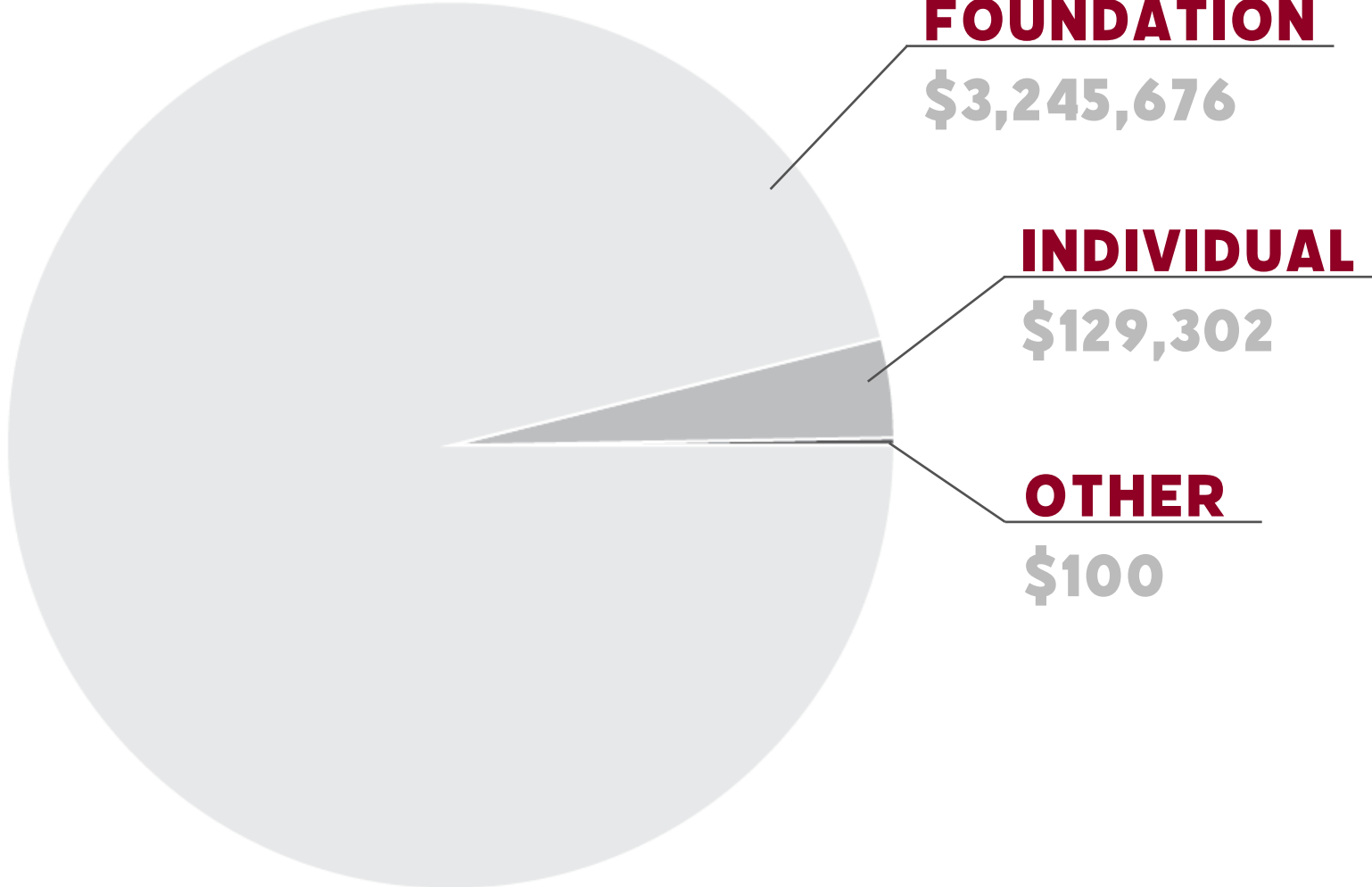
With One Heart’s support, the committee members have become very motivated and enthusiastic. There has been a lot of progress. On behalf of our local community, we want to thank both One Heart and the municipality for their contribution. OHW helped us to move in the right direction and made us more capable. Even though OHW has moved out of the district, their way of working can be replicated by other organizations who are interested in helping us.”

- GIRI RAJ BHANDARI, MADI HOSPITAL MANAGEMENT COMMITTEE MEMBER, MADI MUNICIPALITY

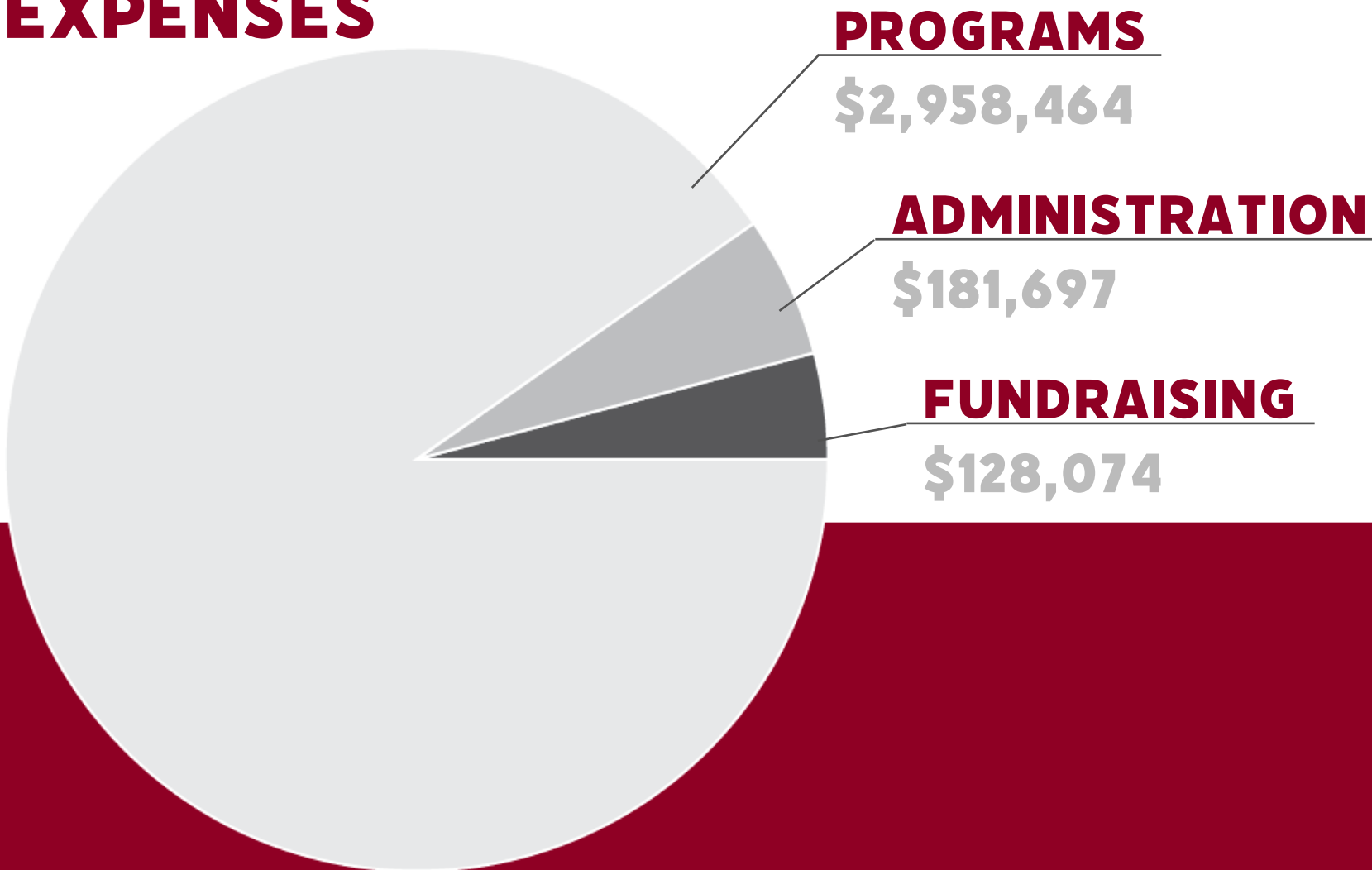
Giri Raj Bhandari outside the health facility where he is an HFOMC member.

FINANCIALS

INCOME



EXPENSES



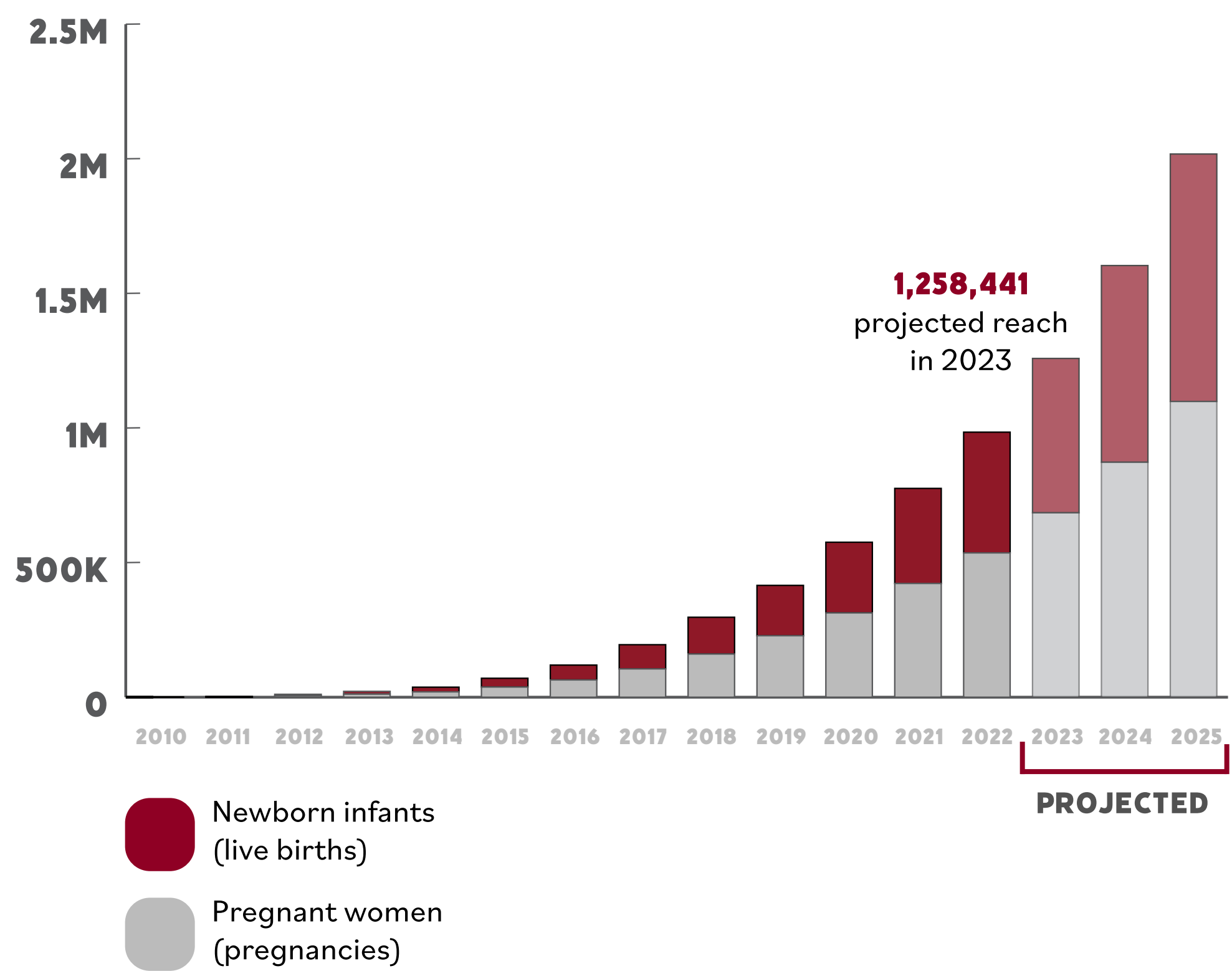
IN 2021, THE COST PER PREGNANCY WAS \$40. OUR GOAL IS TO MAINTAIN A COST PER PREGNANCY UNDER \$50.

New mom with her newborn at her local Birthing Center.

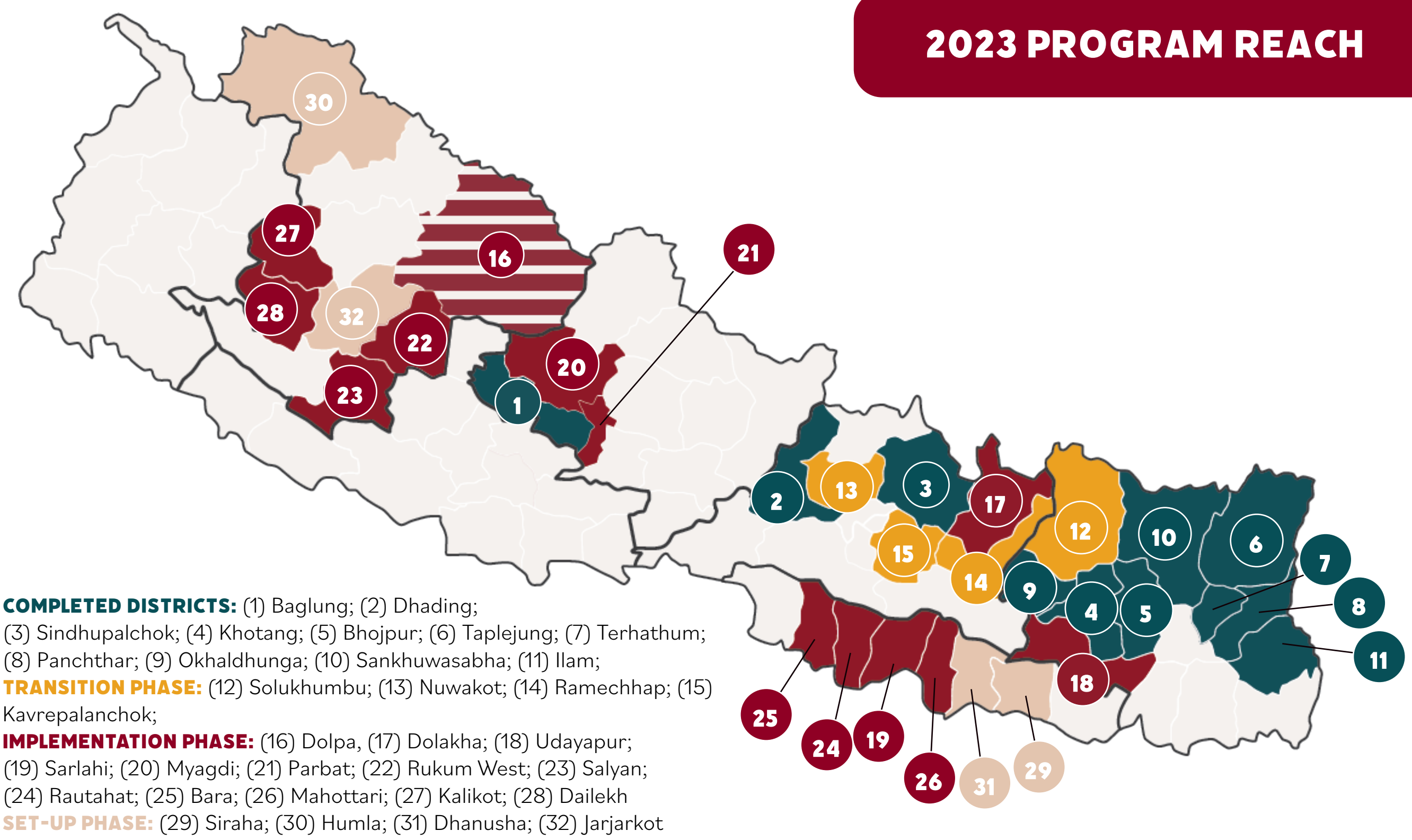
LOOKING AHEAD

Since 2010, OHW programs have improved access to quality MNH services for 984,533 pregnant women and newborn infants in support of Nepal’s national plan to provide quality MNH care to all rural pregnant women and their newborn infants. Over the next three years, we expect to double our impact.

CUMULATIVE NUMBER OF PREGNANT WOMEN AND NEWBORN INFANTS REACHED BY OHW PROGRAMS



2023 PROGRAM REACH



In 2023, we will continue to expand the integration of local NGO partnerships into the implementation plan of our new program districts. To this effect, we will on-board four new local NGO partners for our four new districts of Siraha, Dhanusha, Humla and Jarjarkot.

LOOKING AHEAD

We will also design and integrate a new partner NGO monitoring system. This system will support NGO partner accountability for essential administrative and programmatic functions and help us ensure that our implementation strategy stays uniform and true to our model despite our growth. More importantly, this will also be an essential tool for our team to identify specific capacity-building needs, and help us ensure that we are able to provide the appropriate training and support in response to any identified gaps.

In 2023, we will also expand the strategic international partnerships cultivated over the past two years to amplify our program's impact and create a pathway for eventual expansion beyond Nepal.

- With Laerdal Global Health, we will initiate the nation-wide scale up of our low-dose high frequency simulation-based mentorship program (SBMP)
- With Noora Health, we will explore ways to leverage the Network of Safety model and their family-based care system model to deepen the impact of our mutual interventions in Nepal.

Mother and her infant at their home in rural Nepal.

ONE HEART WORLDWIDE TEAM

U.S. Board of Directors, Nepal Advisory Board, Advisory Board, & Young Professionals Advisory Board (YPAB)

Nepal Team & USA Team

Staff Highlight: Nilesch Kumar Pravara

Dhanyabad - Thank You



OHW Nepal Staff and CEO, David Murphy at an all-staff meeting in April 2022.

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YPAB HIGHLIGHT

OJASBI BHATTARAI, CO-CHAIR



Ojasbi Bhattarai

Interning at OHW, no doubt, was a head start to my professional career. While still a student, getting to see and experience how interventions in the field of maternal and neonatal health are done was both intriguing and fruitful, which is all thanks to OHW. Furthermore, meeting and interacting with pregnant women and recently delivered women residing in hard-to-reach areas built

a sense of responsibility within me as a future public health professional to continue my endeavors in this particular domain of public health.

My internship also became a medium for me to know and apply for the Young Professional Advisory Board of OHW. With an objective to provide learning-based opportunities to young people regardless of their economic status, being selected as a part of YPAB has created a constructive space for me to enhance my networking and speaking skills with a truly global group of young people.

In general, my favorite part about being a member of the board is experiencing the international unity to meet the objectives of the board. YPAB entails members from various countries who come together, despite time-zone constraints, to discuss ways to get more young people involved with OHW and maternal health.



NEPAL TEAM

SURYA BHATTA, Executive Director
LILADHAR DHAKAL, Director of Monitoring, Evaluation, Research & Learning
POONAM SHAKYA, Administration & Finance Director
BABITA BINDU, Program Manager
BELI BALAMI, Sr. Finance & Grants Officer
BHAGAWATI SHRESTHA, Training Manager
DHANA NARAYAN SHRESTHA, MERL Officer
DIPENDRA JUNG THAPA, Admin & Training Officer
JAYESH SHRESTHA, e-Health Specialist
KRISHNA SAPKOTA, Logistics & Procurement Officer
KUSUM WAGLE, Sr. Research & Learning Officer
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MAYA NEPAL, Office Assistant
NAWARAJ CHAULAGAIN, HR and Admin Manager
PRATIKSHA RAI, Training Officer
PREM SINGH KAMI, Finance Officer
SAJANA MAHARJAN, Sr. MEL Officer
SHREEJANA SUNUWAR, Sr. Admin & HR Officer
SUCHITRA SAPKOTA, Admin & HR Associate
SUMIT LAUDARI, Construction Field Engineer
YUBARAJ KARKI, Finance Manager
MAHENDRA KUMAR CHAUDHARY, Admin Assistant
NILESH KUMAR PRAVANA, Sr. Program Coordinator
NITYANAND THAKUR, Construction Field Engineer
RABINDRA KUMAR DANUWAR, Cluster Admin/Finance Officer
RAM KUMAR SAH, Sr. MEL Officer
SANDEEPA LAMA, Program Officer
KRISHNA SHARMA, Training/Field Supervisor
PRABHA GAUTAM, District Coordinator
REBECCA SHRESTHA, Training/Field Supervisor
RICHA NEUPANE, Training/Field Supervisor
SAPHAL TAMANG GOLE, Admin Finance Officer
REENA KHULAL, District Coordinator

NAGENDRA JUNG SHAHI, Field Officer
DEEKSHA SHRESTHA, Field Officer
BHUBAN RAI, Admin Finance Officer
BHUPENDRA SONI, Field Officer
SHRIJANA GAUTAM, Training/Field Supervisor
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SAMJHANA PANDIT, Admin Finance Officer
SANDIP SILWAL, Field Officer
SAJANA PANDIT, Field Officer
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KABINDRA REGMI, District Coordinator
MANOJ KUMAR CHAUDHARY, Admin Finance Officer
SANDHYA BASNET, Training/Field Supervisor
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MOHAMMAD ASLAM SHAIKHE, District Coordinator
LOKMANI GIRI, District Coordinator
KOSHRAJ BHATTA, District Coordinator
AMRENDRA RAY, District Coordinator
JUNIKA SHAH, Training/Field Supervisor
KHEM NATH DAHAL, Admin Finance Officer
NIKITA CHAUDHARY, Training/Field Supervisor
RAJKISHOR PRASHAD CHAUDHARY, Field Officer
USHA KUMARI, Community Mobilizer
USHA KUMARI SAH, Community Mobilizer
OM PRAKASH POUDEL, Sr. MEL Officer
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RABIN JOSHI, Sr. Program Coordinator
SUJAN KUMAR KHATRI, Finance & Grants Officer
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JAMES VANREUSEL, Chief Financial Officer
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HILLARY S. POLLARO, Grants Manager
KATIE DYAS, Communications Manager
LINDA GEORGE, Development Specialist
MICHAELA HAYES, Grants Specialist
PATTY DOUVILLE, Controller



Nepal staff members with CEO, David Murphy.

STAFF HIGHLIGHT

NILESH KUMAR PRAVANA



Niles Kumar Pravara has a wealth of knowledge and experience in public health. He joined One Heart Worldwide in 2017 as the District Coordinator of Panchthar District, a hill area in Koshi Province. He then moved on to the Dolakha District as its Coordinator in 2020. In 2021, he was promoted to Senior Program Coordinator of the Bardibas Cluster Office. He is the team leader supervising the work of District Coordinators and other staff from OHW

from several districts in the Madhesh and Koshi provinces. Niles has both a Master's Degree and Bachelor's Degree in Public Health. As one of our valued team members, Niles is making significant contributions to the vision of One Heart Worldwide.

SERVING THE UNDERSERVED

When I was working in the hill area, I was impressed with One Heart Worldwide's impactful work. I saw how our programs significantly supported the local government's efforts to strengthen the health system and enhance MNH care. So I always hoped that one day OHW would start a similar health program in Madhesh Province, where I am originally from.

In 2021, OHW started our new program in the Madhesh Province, where I am taking the lead as Senior Program Coordinator for the Bardibas Cluster. I am so proud of OHW's contributions toward creating a sustainable MNH care system in Madhesh.

The hilly areas of Nepal have very rough terrain, and most rural municipalities still need access to proper roads. In contrast, there are no geographical barriers within the Madhesh Province for people to travel. Instead, the critical challenges in the Province are the ages-old social norms, traditional practices, and culture that inhibit families from seeking maternal healthcare at a health facility.

We also know that a thorough understanding and respect for indigenous cultures and customs are vital in affecting behavioral change. OHW has ensured that our team on the ground is from the Madheshi community. Our Bardibas cluster team members include different Madheshi ethnicities fluent in the native Maithili, Bajika, and Bhojpuri languages. Since our team is from the communities we support, we are well-versed in the cultural context and traditions. This approach by OHW has made an enormous difference in coordinating and communicating with local stakeholders and families.

KEEPING OUR VISION REAL

The guiding principle of our mission is equity. At every level, we seek to ensure maternal and neonatal healthcare is accessible and dignified for each community we support, regardless of location or cultural practices. Such a full-scale and dedicated MNH program is new for the Madheshi community. We have already begun to see our work in Madhesh Province is making positive headway. Local leaders, governments, health workers, and communities in the Madhesh Province have welcomed OHW's determination to change MNH outcomes in their communities.

Just as I felt when working in the hills, I remain inspired by the work my team and colleagues are doing at OHW. Our partnerships with local stakeholders and communities in different areas of Nepal have already improved access to quality maternal and neonatal healthcare - and it will continue to leave a lasting impact long after we finish our mandate in Nepal.



OHW staff educating a Madheshi community on MNH best practices.



New mom and dad with their newborn at their local Birthing Center.

DHANYABAD - THANK YOU

As we come to the end of another successful year, we want to express our deep appreciation for your unwavering support. Because of you, One Heart Worldwide continues to make a meaningful impact in the lives of mothers and newborns in Nepal.

In 2023, we will hit a significant milestone: 1 million mothers and newborns reached through our programs. This achievement is a testament to the hard work and dedication of our staff, partners, and supporters, and we could not have done it without you.

We are also thrilled to welcome additional implementing Partner Organizations in new districts in 2023. Together, we can continue to make a positive difference in the lives of mothers and newborns, ensuring that every pregnancy and childbirth is safe and healthy.

Once again, thank you for your ongoing support and commitment to our mission. We look forward to updating you on our progress in the coming year.

Dhanyabad,
Babita Bindu, Program Manager



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