



One Heart

WORLDWIDE

Quarterly Report

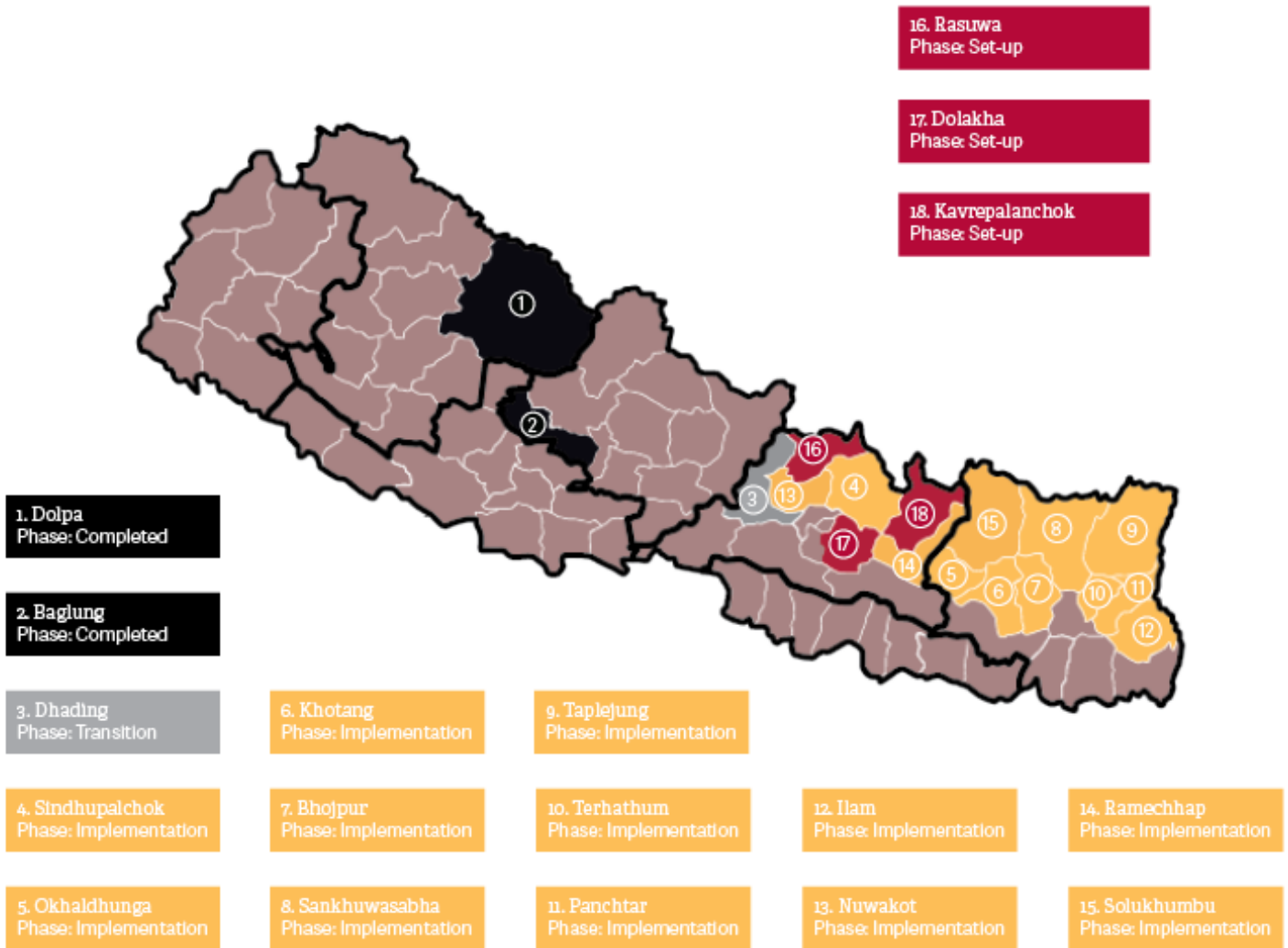
Q1 2019:

January - March



WHERE WE WORK

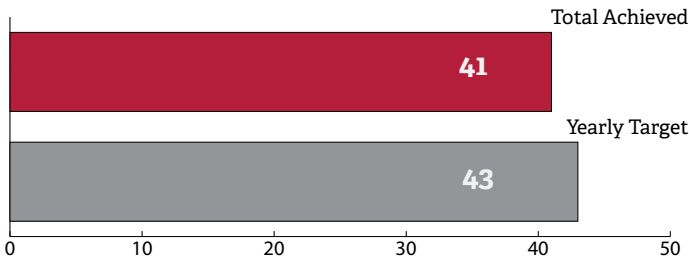
In 2019, One Heart Worldwide's (OHW) programs are deployed in 16 districts across Nepal, representing 145 palikas (municipalities), a total population of 3,285,782 and 88,335 annual pregnancies



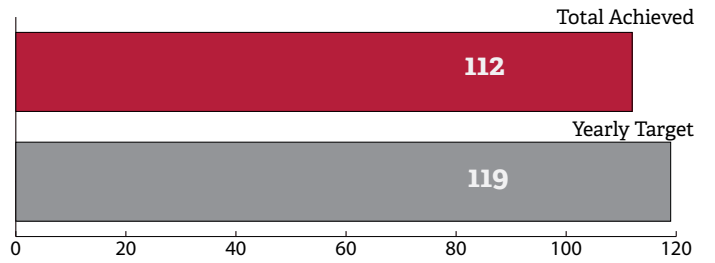
Q1 MILESTONES



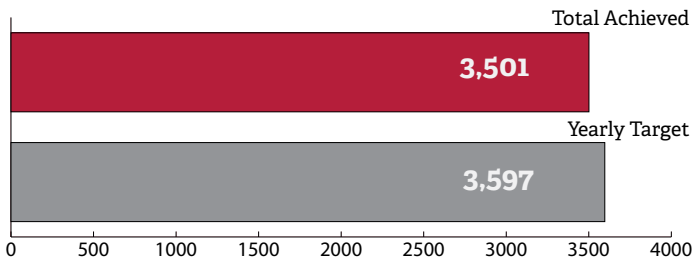
Supplemental Medical Equipment & Supplies



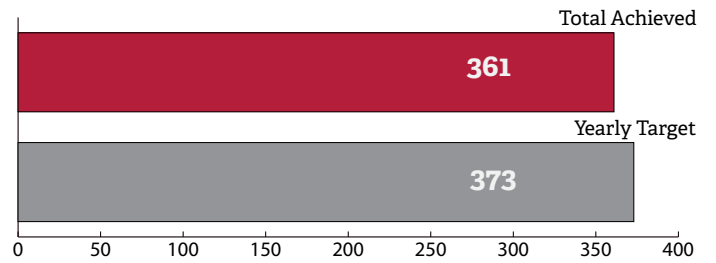
New Birthing Center Upgrades



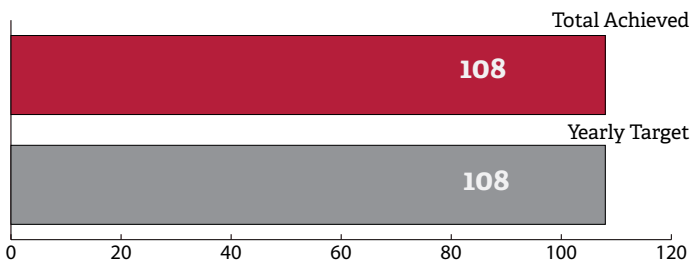
Community Outreach Providers Trained



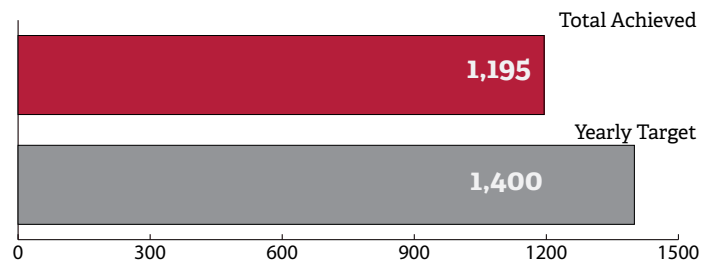
Medical Providers Receiving CME



Skilled Birth Attendants Trained



Community Stakeholders Trained



Q1 HIGHLIGHTS

+ Achievements

- Transition launched in Dhading
- Increased co-investments at the Palika level

- Challenges

- MoHP civil servant adjustment process
- Changing landscape in our new districts

Transition in Dhading: In January 2019, OHW successfully started the transition of the *Network of Safety* program to the local government in Dhading. This is the first time that our programs are transitioned to a set of municipalities versus a District Health Office. All 13 municipalities in Dhading are committed to prioritizing maternal and newborn health (MNH) and have shared their plans to incorporate OHW's programs into their activities and budgets. Over the next two years, OHW will maintain a reduced presence in the district (1 staff versus 4) and will continue to provide technical support to the municipalities in MNH program planning and budgeting as well as monitor key program performance indicators.

Increased co-investment at the Palika level:

Birthing Center (BC) upgrades are some of the biggest cost drivers in our program. Due to the recent decentralization of the government of Nepal, much more planning and budgeting authority has been placed at the Palika (municipality) level. One of our main goals for 2019 was to get all our partners at the Palika level to increase their BC upgrades cost-sharing levels from 20% to 35%. As of the end of Q1 2019, we are happy to report that every Palika we have approached so far has agreed to increase their BC cost-sharing level to 35%. A few have even agreed to as much as 50%.

MoHP civil servant adjustment process: The Ministry of Health and Population (MoHP) is undergoing a civil servant adjustment process. They reviewed the job postings of all current government employees (including health care providers) and had tentatively agreed to allow everyone to relocate to their hometowns if they so desired. However, the MoHP quickly realized that this relocation process was very likely to result in severely disrupted healthcare services throughout the nation as many health facilities could end up unstaffed. The entire process was therefore put on temporary hold until the problem could be resolved. As a direct government partner, OHW chose to put our training programs on a temporary hold as well until a resolution is found and the adjustment is complete.

Changing landscape in new districts: Several of our new districts were heavily impacted by the 2015 earthquake (Nuwakot, Rasuwa, Kavre, and Dolakha) and as a result, had their MNH landscapes tremendously changed by the efforts of various Emergency Response Teams. For example, many health facilities were reconstructed by these emergency responses teams, precluding the need for further BC upgrades. OHW is in the process of re-assessing local needs and meeting with local key players in order to focus on the missing pieces of the *Network of Safety* (mostly training, community outreach, and specialized equipment versus facility upgrades) to avoid duplication.



OHW Program Director **Surya Bhatta** receives Certificate of Appreciation from District Coordination Committee Chief, **Jagannath Nepal** and Chief Health Education Administrator, **Maheshwore Shrestha**.



RESEARCH & DEVELOPMENT



External Impact Assessment: The Dartmouth team is finalizing the study protocol and expecting to submit for IRB approval by end of Q2.

Rural Ultrasound (RUSG) Program: We started an evaluation of our RUSG training program in collaboration with the National health training center (NHTC) and Dartmouth College.

Supply Chain Project: The results of the final external project evaluation showed that our SMS reporting system was perceived as feasible, acceptable, and effective by its SBA users in Terhathum.



Solar Suitcase Project: We are currently conducting a full needs assessment as we are expecting a shipment of solar suitcase from We Care Solar in Q2.



Brilliance Pro Phototherapy Project: We continue to collect impact data from each of the 30 hospitals where the D-Rev devices were deployed. In Q1, over 300 cases of infant jaundice were reported. The program will continue to be monitored until the end of 2019.

STORY FROM THE FIELD

The lone road to the village of Thechambu in the hills of Eastern Nepal curves through town and is crossed only twice daily by jeep, once in the early morning and again in the evening. There are no gas or repair stations along the road that leads to Thechambu village. Most people must make the five-hour uphill hike to reach the village's health post which was recently renovated by One Heart Worldwide. Sarita, 25, was diagnosed with a case of malpresentation. Her unborn child was quickly losing oxygen when she arrived at the Thechambu Health Post. She was met there by



Sarita and her family

Sajina, a Skilled Birth Attendant who was trained on behalf of One Heart Worldwide. By this point, there was not enough time nor safe enough passage for Sarita to reach the nearest hospital. Sajina knew she would have to perform the delivery herself. The baby's elbow breached the womb and and Sajina worked to rotate the child to the proper position for delivery. Sajina then successfully delivered the baby girl but then had to perform mouth-to-mouth resuscitation before she was



Sajina, SBA

able to breathe on her own. "Because of One Heart Worldwide I was fortunate enough to receive the proper Skilled Birth Attendant training," said Sajina. "I was extremely nervous but thought back to the steps I learned during my training. I am happy that we were able to save both Sarita and her daughter." Sarita praised Sajina and all of the work done by One Heart Worldwide. "If it were not for the help of Sajina," states Sarita, "I would not be alive today."



FINANCIAL SUMMARY

New & Increased Commitments:

- doTERRA Healing Hands Foundation - \$12,100
- Tyler L. Rigg Memorial Foundation - \$5,000

■ Q1 ■ Q2 ■ Q3 ■ Q4

