***Interview Note***

Field worker/interview: OC

Interviewee: RM

Note Taker: OC

Note Checked and Edited by: JS

Language of the Interview: Nepali/English

Note Transcribed by: OC

Place: 1st Floor, Program Implementation Department, Save the Children, Airport

Date: 20th June 2014

Time: 1:30-2:15 Pm

**Major Highlights:**

* Mother and New born Child Health (MNCH) program is one of the strong components of among others implemented by Save the Children in Nepal.
* Save the Children has been assisting Government of Nepal in the child health sector with evidence based high impact intervention from the beginning of Save the Children establishment in the country.
* Save the Children works with two implementing partners i. e. government for supply side and NGOs for demand side.

As OC arranged meeting at Save the Children with RM at 1:30 in the afternoon, originally meeting was scheduled for 2:00 pm but as OC called to Raj Kumar Mahato, for reminding of the meeting in the morning from office, RM requested OC to prepond the meeting half an hour earlier and OC agreed with RM. OC reached to the office near to the Tribhuvan International Airport, Koteshwor by 1:10. At the gate of the office, a guard asked OC about the purpose of his visit, OC answered to him that, OC is there to meet RM, Health and Nutrition Manager. Then, guard told OC that RM has just gone for lunch. He further said, probably you (OC) could see him walking outside the gate, and OC went to see him but did not see him. And OC came back and told to guard that, OC did not see him. Guard asked to OC for registering name, address in the register and OC did it accordingly.

After registration OC went to the waiting place in front of the reception sat and read the newspapers, after a while of waiting for RM, OC made request to a receptionist, lady with pink and purple dress (kurta salwar), to make a call to RM so as to know whether RM returned from lunch or not? She called him but phone was not received, she informed OC that RM did not received the phone, OC thought RM is still in lunch break and yet to be 1:30 so he might be returned in the given time and went back to read newspaper again. After couple of minutes of newspapers reading I saw a person with black complexion came from door, at the same time receptionist informed me here came RM, and OC went to him with thanking receptionist and introduced himself to RM. RM and OC shake hands as a courtesy and went to Program Implementation Department together through lift. Before entering into the lift, RM asked OC perhaps RM made OC to wait for long time, OC replied it was not too long, that was fine.

As we entered into Program Implementation Department, we reached to one room which looked like common room for many staff, there was a small round table with four chairs as well. RM requested OC to sit on the chair and OC asked RM whether our talk would bother other staffs at the room, RM replied it would not. Then, OC initiated to talk with RM by giving him a page of short introduction about the project also briefly explained to RM orally about the introduction of project and objective of the meeting i.e. just to get initial sense of projects or programs implemented by Save the Children particularly on Mother and Child Health Sector as well as to inform about the inception workshop which is going to be held on 28th and 29th of July 2014. Regarding to workshop RM told that they are busy on the month of June and July still they are happy to be participated in the program and share their experiences among others. So RM suggested OC to inform him about the workshop two weeks in advance.

After listening to OC and reading the one page introduction, I thought RM did not complete the page. RM asked to OC that, what does broker mean. Does that mean *dalaal* a term generally use to refer who works in recruiting agency for foreign employment and real estate business in Nepal? OC made RM understand that the term broker has different connotation in this project than that of the common one. Term gives the meaning of intermediary, middle man, could be an organization or an individual who works in the foreign aid particularly in entire activities between mother and child health care services at the community level to donors like USAID and DFID.

Then, again RM put his query on intermediary organizations or individuals, he further asked what type of intermediaries are you talking about? OC then, made further explanation about the several intermediaries that are involve in range of activities particularly regarding to mother and child health care service delivery and development in the communities and entire country. In other words, varieties of organizations or individuals, who have worked in the sectors of mother and child health targeting for MDG-5.

RM seemed he got the answer, and further told that there has been significant progress in the area of maternal and child health in Nepal. It is heading towards progressive direction; Nepal will meet the target for MDG-5.

OC asked RM about role of Save the Children in NHSSP III, RM explained that, it is an overall planning of government about health sector, or it is a sector wise approach for operating health plans which is in the developing phase. Save the Children has been providing technical support i.e. providing knowledge and evidence of Save the Children in related field, to assist government to develop NHSSP III. Furthermore, Save the Children has been providing financial support for the same purpose. Save the Children is helping in three components i.e. Family Health, Child Health and Health for Work Force of NHSSP III by providing its (SC’s) knowledge and evidence and as mentioned earlier, financial support to the some extent.

OC asked to RM while assisting Government how have been your experiences? RM answered that it is not easy to work with government; government has its own priorities for overall development of projects or programs. Government does not bring partners in mainstreaming although we assist for their programs at the one hand and norms and values of government are not standardized and difficult to get time with people form government for projects/programs to lunch as well as for appointment. Still, he further told that if we collaboratively work with government, we will work under certain system, projects/ programs will get recognition, will be cost effective and sustainable as well.

In terms of working modality of Save the Children, RM explained that Save the Children works closely with two partners for supply and demand sides of the projects/ programs. Furthermore, Save the Children works closely with government and provides training to health workers, FCHVs and supplies necessary equipment such as bag and mask, weighing machine to the health facilities so as to scale up the government’s supply mechanism. On the other hand, Save the Children puts effort in demand side by collaborating with NGOs where it works on community mobilization, forming different groups in the community including mother groups, raising awareness on institutional delivery, danger signs of pregnant mothers and newborns. By doing such activities, Save the Children sensitizes demands sides which help mother and child to move forward to receive services.

While we were talking, a person with black shirt came to talk with RM and they talked for a while, it sounded to OC that they were talking participating in government plan and complaining about the working style of government staffs.

Once the talked was over and a person left, RM further explained that quality of care of clients is the major concern for the present day. In other words, what sort of facilities, services are available in the health facilities; such as presence of Skill Birth Attendance (SBA) during delivery, hand washing facility at health facility. In the absence of quality care mere quantitative figures such as mother and child health care facilities are available in every district does not make real sense/meaning.

RM’s cell phone rang, he responded, he was talking about some fund over the phone. OC did not pay further attention on conversation.

OC asked RM which donors and INGOs working in mother and child health sector in Nepal are at the top level. RM responded, INGOs and Donors are absolutely incomparable entities, although there was not further discussion held on it. Further said, he could not answer it as he is not well informed with evidence and statistic in this regard. And we formally ended the discussion. But we still were sitting on the chairs.

After discussion end formally, RM suggestested OC that, the research project you are trying to explore sounds nice and interesting as well to RM. But there could be many things it could have incorporated still RM particularly interested to know how resource is allocated and move down to target group at the community level? Whether project reach to the group or not? If it reaches/exospores on how much does it actually reach to them? Also, what sort of impact is seen among target group as a result of lunching particular project?

As OC left the room RM came along up the door and gave OC a recent report of Mapping of AIN Members contributing to the Health Sector in Nepal 2014, OC took it and left.