**Interview and Field Note**

Field worker: OC

Interviewee: SA

Note Taker: OC

Note Checked and Edited by: JS

Language of Interview: Nepali and English

Note Transcribed by: OC

Place: 1st floor at Family Health Division (FHD) Teku

Time: 11:30-12:30

Date: 24 November 2014

**Major Highlights:**

* FHD is the focal division of government Nepal to work on Family Health which includes Reproductive Health, Family Planning, Adolescent Health and Safe Abortion.
* FHD has to work with partners because government of Nepal alone cannot provide services to all people at the community level across the country.
* Despite harmonious relation with partners, they sometimes work more on their own agendas without properly consulting with people at FHD, CHD via MoHP

With prior appointment OC met Dr. Shilu Aryal at her office at Teku. She is focal person for maternal and child health and safe abortion at Family Health Division. OC had met her once briefly at her office, in his earlier visit to FHD, at that moment he quickly mentioned about the New Norms and Forms of Development….. And handed over one pager project introduction document, also had informed her once ethical clearance of project will be granted from Nepal Health Research Council (NHRC) then, informed her that OC will come to talk to you further next time. She told to OC give call and take appointment before coming to visit me (SA).

In this visit, as OC reached to FHD at her office he had not seen Dr. SA at her room and soon he made call to her and in a while she came to her office room and OC greeted her then she asked OC to take a seat on one of the chairs put in front of her table, OC did so with thanking her. As earlier, OC briefly mentioned about the general outline of the project and gave one pager along with OC’s business card again. By looking at OC’s business card she told me, “I thought your name is Govinda” OC corrected, it is Obindra, instead.

After listening to OC and reading few lines of one pager, SA told to OC, so what sort queries are you going to ask, let’s move on to that. OC replied to her, this research project is aiming to explore about chain of foreign aid through maternal and child health projects in Nepal, in doing so, today our conversation will be more focused on knowing your roles, responsibilities, your working experiences with partners, opportunities and challenges associated with maternal and child health projects. After briefing about aim of the research and purpose of meeting, OC initiated discussion by asking question, would you mind explaining your roles and responsibilities at Family Health Davison (FHD)?

SA: my roles and responsibilities involve not only in conducting monitoring and evaluation of the programmmes under FHD but also doing supervision of all the programmes and implementing programmes at the district level. She added, on top of monitoring, evaluation, supervision and implementation, I also involve in preparing budget for all the programmmes execute under FHD.

OC: could you please explain briefly about the monitoring mechanism for different programmes under FHD?

SA: actually we adopt two ways for monitoring our programmes, we make direct visit from central to regional and districts level, although we are not able to make direct monitoring of all the programmes across the country due to limited number of staff at central level. We also get updated information through telephone about particular community or district. In addition to this, we also get information from the statistical record of Health Management Information System (HMIS). She further explained lack of reporting and delay in reporting of the information is one of the challenges, we have been facing from the long ago, which eventually brings difficulties formulation of programmes at different levels in the country. Besides, lack of human resource is another major constraint which directly influences the quality of monitoring. My team comprises of 3 members, I work with two other colleagues one is public health nurse and another is health assistance (HA).

To make monitoring and reporting a bit easier we hire a regional coordinator who closely works with regional director and district health officers (DHOs) of the regions and contributes in reporting of districts to regional director. To apply for the post of regional coordinator, applicant should have BSc. Nursing. Vacancy for the post is made public in newspapers, previously such vacancy is announced from the central level but from the last year regional office is taking responsibility of hiring staff for the post.

Positive result has been a motivating factor for all the stakeholders to move forward by putting collective effort to make the existing situation better. Still, some of the factors such as lack of transportation facility at the remote part of the country, shortage of skill human resources for properly handling mother and child health at the community level, budgetary constraint and wide spread illiteracy are major obstacles among others.

The target of maternal mortality rate (MMR) has set up according to the recent census report 2011 still we are likely to meet the target by 2015.

SA had been served different roles prior to become a focal person for maternal and child health and safe abortion 5 years ago. She had worked as district health officer (DHO) at Tanahun, Janakpur and Lalitpur districts and then also worked in Kanti Child Hopital before moving to family health division (FHD).

SA told that, I had started my career long back. I did I. Sc. from ASCOL (now Amrit Science Campus) then MBBS from Moscow the USSR in 1984. It would be better if one has master in public health (MPH) degree in addition to medical degree to work in the sector of maternal and child health, she added.

FHD is the focal division of the government which design and implement programmes and projects on family health which incorporates reproductive health (RH), family planning (FP), adolescent health (AH) and safe abortion.

We need to work with partners because government of Nepal could not alone work effectively to provide maternal and child health services to the people across the country. We have harmonious relation with the partners. Mostly fund comes to red book of the government and sometimes partners directly give fund without deposit it in the red book. Although, fund for the project is deposited in the red book sometimes complex bureaucratic process makes it difficult to get cash on time for project expenditures.

Despite harmonious relationship, partners work on own agenda without properly consulting with FHD, CHD via MoHP that could be the one reason particular reason i.e. far western is overcrowded with such projects compare to other parts i.e. eastern part of the country. She added, same scenario can be seen in the big hospital and small ones. Big hospitals are overcrowded where as small ones are under loaded.

Once we realized big hospitals are overcrowded and small ones are under loaded, government of Nepal has initiated a programme called *Nyaano Jhola* (warm bag) since the fiscal year 2070/71vs across the country at the level of district hospital.

OC was about to ask further queries regarding to *Nyaano Jhola* but as other people are coming to see SA she asked me to conclude the talk for now and we will continue it next time and OC did so and told her OC will come to see SA next time but OC will take appointment on phone before he visits her, then OC left from the office of SA and moved to Child Health Division thinking that, might chance to speak with some people.

As OC arrived at CHD after speaking with SA, he checked with the Department of Nutrition at the ground floor of CHD whether he could get chance to see head of nutrition department, who did not attend our inception workshop due to his busy schedule, OC did not see him in his office then OC moved to upstairs and headed to technical secretariat of the Save the Children where he met an adult lady who was working on her laptop, he asked her permission to enter into room after her permission OC asked her about the other two staff with whom he is familiar with. She then replied one has gone to field and other has just left to attend meeting elsewhere in Kathmandu.

After listening to her OC asked what she actually does. Would you mind explaining it briefly? She answered ‘I am a senior maternal and neonatal health MNH officer’ work for Save the Children and I had returned from field the day after yesterday. Today is the first day after my field so I am just checking out emails and replying them accordingly. OC then gave her one pager document along with his business card and briefly explained about the research project. As she looked busy OC left from her office mentioning her, he will visit her again.

After talking with MNH officer shortly, OC headed to office of director of CHD he then new name on the board as Dr. Krishna Prasad Paudel, director then OC got into the room and asked to staff, is there director in his room? Can I meet him quickly to get appointment for next meeting? Staff replied, he is busy and he will have to attend meeting at the downstairs and he will go MoHP to attend another meeting at 1 o’clock. OC thanked to staff and sat on the sofa for a while, shortly after a young, pleasant looking with smiling face with spectacles person came out from director room and went down and same staff told me he is a director. OC also came out from the room but was not able to talk with director as he entered into meeting hall quickly.

OC went nutrition department again in case he might see the head he was not able to see him again. OC came out and stayed outside, he saw everyone was rushing for meeting, drivers are making their vehicles ready to move, some staff are talking to go together, then OC asked Hari Dai, PA of Ex- director with whom OC is familiar with; about the meeting, ‘do you know what the meeting is about that everyone is rushing to attend?’ Hari Dai replied I actually do not know what it is about but I have heard, an international level meeting is going to held at the ministry (i.e. MoHP). OC wanted to continuing talk with Hari Dai but at the same time he kept moving his eyes to meeting hall so as to get chance to see director quickly.

Meanwhile, group of people came out meeting hall, OC greeted director and explained very quickly about the purpose of this short meeting also simultaneously gave one pager along with OC’s business card, director told OC please consult with my PA upstairs for next meeting then he left from the place. OC thanked to director for his cooperation and mentioned OC definitely will consult with PA and arrange next meeting accordingly.

After this OC came out again, he saw everyone was rushing for meeting and meanwhile Hari Dai told me he is Giriraj sir, head of nutrition department who was about to get into the vehicle to attend the same meeting, OC quickly approached him explained about the purpose of my visit at CHD and Department of Nutrition and also reminded about the inception workshop. After listening to OC, Giriraj replied we are so busy these days then OC will visit you next week, he seemed agreed to statement without much talking his vehicle ran for meeting at MoHP.

When everyone was leaving for meeting, OC again join to talk with Hari Dai, he mentioned that everything at the CHD is yet to be well settled. PA for the director is just appointed today he further explained that CHD remained director less for about a month. It is just less than a week Dr. Paudel has received appointment as a director more specifically he was appointed on 3rd of the Mangsir and Dr. Uprety, then director was retired on 9th of Kartik.

Hari Dai, explained that Dr. Paudel was working at the 8th level of position government of Nepal before his appoint at CHD. He was selected for the post through free competition by appearing in the examination set by government of Nepal. Hari Dai added, listening about him, he must be talented and energetic. He is the youngest director, he again added. (Later OC came to know that Dr. Paudel was in 9th level instead before joining to CHD as a director and director is 11th level of position at government of Nepal, when he spoke with Dr. Paudel)

Hari Dai also talked about Dr. Uprety quite a bit. He told that, Dr. Uprety is very good person and a competent director. He already been a director of CHD when he was in the 10th level of position this was (before retirement) his second tenure as a director. *Waha jasto kaamgarne director kohi Pani Chhaina* (none of the director is not as workaholic as he is). He adds, many organizations are approaching him for working together, if he likes to involve in work it is not difficult for him to get in some organizations.

OC wanted to know about the corruption charge against Uprety but as it was an initial talk with Hari Dai, OC did not gather courage to ask about recent corruption charged against CHD officials including Dr. Uprety. OC thanked Hari Dai and moved to upstairs to see PA of the director but she was not at the office and left from CHD and drank a cup of tea at the tea shop located main gate of Department of Health Service and then got cab and move to ADRA for another meeting.