**Field Visit to Strengthening Reproductive Health (SRH) Project at Jajarkot District**

**April 2015**

This field trip to Jajarkot was conducted from 3rd to 10th April 2015. This is my second field trip to SRH project; the first one was conducted in January 2015, which could not be completed due to political instability and unpredictable strikes and *bandas,* in region and across the country. Hence, OC returned to office at Kathmandu from the half way i.e. Nepalgunj.

The primary purpose of this field work in Jajarkot was to gain broader understanding of SRH project at the different levels at least at district and community levels where project offices, sites and beneficiaries are located. More importantly, it was also aimed to build ideas on how project gets operated practically at multiple levels beyond its guidelines and written norms. Apart from this, trip was for observing and analyzing the ‘Inauguration and Handover of Birthing Center’s Building’ where project team was going to hand over the keys of constructed birthing centers to District Health Officer (DHO) via local health facilities at respective communities of the Village Development Committees (VDCs).

To achieve these aims OC set out field plan to leave Kathmandu for Nepalgunj on 3rd of April, with consultation and coordination with central team of SRH project especially, Chandreshwori Tamrakar (CT), Health Team Leader and Suraj Shrestha (SS), Project Coordinator of SRH project. While exchanging emails with staff at central office of ADRA-Nepal, it was clearly mentioned about geographical difficulties, involves a lot of walking to get into project sites, staff are in rush as they have to keep moving in several sites for handovering of birthing centers one after another and staff might not be able to provide time to OC for providing information and also suspected on walking capacity of OC for moving across the all the field sites, especially to those which are located in remote areas of the region.

The following section will provide more information on everyday activities and accomplishments on the daily basis from the day first to the last of this field trip, transcribing of the all interviews conducted in field at different parts of the country will be provided separately.

***3rd April, 2015***

OC flew to Nepalgunj from Kathmandu on 3rd of April on morning flight and SRH project team which consisted of project coordinator, project manager and two Japan based staff and treasurer from Safe Motherhood Network Federation (SMNF); were also supposed to fly on the same flight but as they had to attend the meeting at central office, so they could not make it. Project team came to Nepalgunj on 4th of April.

When OC was in Nepalgunj he coordinated with vehicle vender, with whom OC spoke a couple of times on phone from Kathmandu and requested to arrange vehicle for him OC to move from Nepalgunj to *Thalabazar*, a place where handovering is going to take place, around 8:00 o’clock in the morning, then OC asked vendor to be at hotel before 8:00 o’clock.

***4th April, 2015***

We did onset our journey for Jajarkot, we left Nepalgunj at almost same time; OC and SS were in one vehicle and rest of the others were in the next. OC was pretty much excited and happy as he was going to complete the incomplete work that was due from January, 2015 at the one hand and it is going to be a good opportunity for doing participant observation on the other. To get such opportunity, OC; mentioned to SS, there is room for people to sit in the vehicle, please feel free to be seated with OC as there are rooms for more people.

While travelling, SS got off from the vehicle 2/3 times and had gone to stationary, as he mentioned; it was for buying key bags in which he was thinking to put keys of all the constructed birthing centers and will give to respective in charges of local health facilities during ‘handovering ceremony’ of those birthing centers, unfortunately he did not get those key bags in those stationaries he visited. He then asked on phone to his colleagues who are in Jajarkot to buy key bags at the district headquarter as he did not find them in Nepalgunj.

While traveling further, SS made few consecutive calls to a couple of people, who were OC think his colleagues/known people at district and talked about the arrangement vehicle to pick up and drop from district headquarter to place where event takes places to key district authorities like chief district officer (CDO), district health officer (DHO), acting local development officer (acting, LDO) and some other. While listening to their phone conversation, OC developed the sense that, the amount vendors asked to SS/project team was higher than that of usual rate they pay for the transportation. Then, SS made again few more calls to find the one who charges reasonably. He mentioned, to vender; we usually pay RS. 10,000(ten thousands) for one way travel from Nepalgunj to *Thalabazar,* Jajarkot and he also told further that in addition to one way fair, we will also pay on the basis of days hold in the field, he added.

After the call was over, SS clarified to OC that, he was trying to arrange vehicles for pick up and drop to district staff of government which includes above mentioned people. He further mentioned that, but venders were tending to charge higher than that of the usual rate. You know, once people come to know that donor is going to organize any programmes, they (venders) ask for their own rate without caring the usual rate, which does not work with donor as well because donor is also often aware about the usual rate of the route, I will go with the ones who charge reasonable amount, we should pay for their standard rate but we could not pay for their own rate, which is usually much more higher, SS told.

We had our lunch around 10:30 in the morning. At the lunch place, Mai Ogawa, project manager of SRH project from ADRA-Japan, based on ADRA-Nepal office; introduced her two colleagues with OC. These people are Soko, SRH project director, based at ADRA-Japan and Aatushi, staff of SRH project based at ADRA-Japan both of them are based on Japan; they were actually visiting to Nepal namely SRH project sites to see and observe the ‘Inauguration and handover of Birthing Center’s Building’ to the community. She also explained to them about OC’s purpose of visit to Jajarkot, which he was not able to do in January 2015 she elaborated, with this very short talk we moved for lunch.

After lunch, Rabindra Pradhan (RP), treasurer of SNMF central committee came to sit with us. As he came to sit in our vehicle, he asked who OC was. Is he an ADRA staff based at regional office at Nepalgunj? SS, explained that, actually OC is a researcher doing research on maternal and child health in Nepal, particularly in four projects which obviously are involved in maternal and child health sector in Nepal and SRH is one among those four. He is not our staff but study our project, he came up to Nepalgunj last time on January could not complete his filed. Then, agreed to SS and added OC will be staying with SRH team about a week in Jajarkot as well will visit district and perhaps other line agencies work in Jajarkot district. OC was thinking to listen conversation between SS and RP but they did not talk much.

As we had moved ahead, we reached near to the river bank of *Very River* to cross the river; vehicles have to go through *Feri*, electric run metal boat, which could house one small and a big vehicle at once for overpass them from one bank to another (Please, see picture).Operation team of this boat is the staff of department of road (DoR), government of Nepal. Usually boat runs from 8:00 am in the morning to 5:00 pm in the evening, staff take lunch break about an hour in the afternoon.

Unfortunately we had to wait more than 4 hours in the river bank for getting our turn to cross over the river, as a truck earlier than many of us could not cross river in a smooth way because it’s one back wheel was at the verge of collapse at the river bank (Please, see picture). It took unexpectedly longer time to manage this huge truck and goods it contained safely and regularize the boat.

As we spend huge/unexpected amount of time in waiting for our turn to overpass the river, we did not reach to the place where we expected to be by the evening. We decided to stay in *Markabazar,* on the way to *Thalabazar* at Bijay Hotel, where staff of ADRA often stay while they are travelling or working in the field in this region. Due to time constraint, we stayed in *Marka Bazar* instead.

When all the personal gears/stuff were settled in respective rooms in the hotel, all of us had tea together by sitting near to the hearth of the hotel. In the meantime, SS went to make call to CT, from CDMA, telephone, which could be mostly found and works remote area; for making updates of the day, because cell phones rarely work in the area.

Although, we had tea together OC was not able to understand conversation, especially of those three Japanese people, what they were talking about? They were speaking in Japanese, very few times in Nepali, one of them was fluent in Nepali though, and rarely in English. The conversation was followed by dinner.

After dinner everyone was gone to their rooms, with agreement to leave the place at 7:15 in the morning for *Thalabazar*.

***5th April, 2015***

As per the agreement, everyone gets ready in the morning after having tea we left the Marka Bazar after 7:00 am in the morning. Driver told us it will take two or more hours to reach to *Thalabazar*. On the way to *Thalabazar* from *Markabazar* we had to cross the river called *rittha khola* and to make way a bit easier for vehicles we need put rocks on the river to make surface quite smooth (Please, see pictures). With the effort of the team, expect few of us, we were able to over pass the river.

Expect this river section, other parts of the road leads to *Thalabazar*, not so terrible. As we moved ahead, we reached to the *Thala Bazar* we put our belongings to the hotel rooms, and moved to have snack, *khaja* by crossing suspension bridge, which took us few minutes of walking from the hotel to get into tea shop.

After snack we returned to the hotel again and took rest for a while and at the same time we were awaiting to district team who were supposed to come through same trail and go along with them to the place where Inauguration and handover of birthing center’s building will take place. The name of the village is called Sonawali.

Before moving to the Sowanuauli, all of us were taking rest outside of the hotel at *Thalabazar*, SS, MO, and Bishu Dai, new staff who is recently (on 12th April, 2015) appointed as a district coordinator of SRH project, to complete project on time because training officer of SRH project, Tilak Mahatara; with whom OC met and spoke in his last visit to Nepalgunj, also left his job and moved to Korean International Cooperation Agency (KOICA), on the other hand, ending date of the project is approaching. In this context there is less staff in the project to accomplish tasks in the given timeline, so BD was appointed, who was working with different project of ADRA in the past as well. It sounds to me that, BD was appointed in an emergency situation. These people were talking about how programme will look like in terms of who will be chief guest, special guests (guest of honors), and guests in the function.

OC heard from their conversation that, chief district officer (CDO) will be chief guest, MO, and two other Japanese Soko, programme director and Aatushi, staff of SRH project based at Japan who are in Nepal to see and participate in the handovering of the birthing centers at project sites will be special guests (guest of honors) in the occasion.

In the meantime, it was informed that district team of the government organization whom we were waiting for to go along to the place of event had gone to the destination through another way and already reached there. Once we were informed movement of the district team we also headed up towards the destination.

When we were moving on the way to Sowanauli, OC asked to SS how has his experience of making coordination with different people from various organizations at many levels been. SS, answered, it has been difficult often as many people/stakeholders have to be brought together for the event at the same time everyone else has their own tasks to be completed or own schedule to be followed so finding common time for each of them, we need to work a lot.

As district team of the government was already at the destination, organizer and local people including district team were awaiting for ADRA team. When ADRA team and OC reached to the community where handovering ceremony is going to happen, ADRA team as well as OC were well received by the community people.

Community people, mostly they looked like FCHVs and members of mothers group who put *tika* and *mala* and welcomed with local band to ADRA team including OC (Please, see pictures). While moving ahead after got up from the jeep, a local person informed us namely to SS that outsiders have to give some amount of money to band members, as it is community ritual, each one of us gave some money to the leader of the local band member and headed up towards the health facility.

This welcome event was followed by the lunch which was taking place at house that is located in few minutes of walking distance from the health facility. Team of ADRA, representative of SMNF OC ate lunch together. They provided *daal bhat* rice and lintel along with goat meat and spinach in the lunch.3/4 people did not eat meat. It is said that, goat meat is locally available one but it is not cooked in every occasion to provide to the guests like we did today.

After we had lunch, returned to health facility where ‘Inauguration and Handover of Birthing Center’s Building was about to take place formally. Stage/dice was already set up for chief guest, special guests, and guests. CDO, LDO, DHO were already sitting on the dice. I was told by ANM latter, health post staff, Female Community Health Volunteers (FCHVs), who I saw were presented in their dress, members from mothers group were collectively work to prepare stage/dice which involves bringing benches, desks from health facility, putting banners. They also worked for making *mala* garlands for chief guest, special guests and guests.

As OC along with ADRA team reached to the programme venue by crossing through crowed of the local people. They were there to see/observe the programme. As we reached to the programme venue, programme presenter, local person looks like teacher but I was told, he was associated with saving and credit organization based at own community, was about to begin the programme formally.

In the meantime, he (programme presenter) was highlighting the actual condition of district via VDC in terms of availability of services and practices found in the community regarding maternal and child health. He further mentioned that, adequate services care for the mother and child in the community is yet to be developed, majority of the deliveries take place in the home even today. In the case of complicated deliveries, women lost their lives during deliveries in the home. Until recent past pregnant women from this VDC had to visit to Surkhet and Nepalgunj nearest town of the region and beyond for receiving MCH services. In such context, on the other hand, emphasized the importance and relevance of the construction of the birthing center in own community; which obviously has brought new rays of hope and expected to provide services to the mother and child in the community and will make significant contribution in saving lives of innocent child and mother, he added.

With this information, programme presenter was trying to give formal shape to the programme, he then asked ex-VDC chairperson to take seat as a president of the function. Likewise, he also requested to CDO to take an honorable seat as a chief guest of an occasion. Similarly, presenter kindly asked to Soko, programme director of SRH project, Aatushi, Japan based staff of SRH project and Mai Ogawa, project manager, SRH project based at central office of ADRA-Nepal to their seats respectively as special guests. District Health Officer (DHO), acting local development officer (LDO) were also kindly requested to be seated in their respective seats as the guest of honors in the programme.

Apart from this, people from different walks of the lives which includes teachers, political leaders, local elites, female community health volunteers (FCHVs), representative from SMNF, district and community based staff of SRH project were also kindly requested to be seated in their respective seats. In the meantime OC was also requested to take his seat. Apart from these people, all the community people who were present at the function were either standing or sitting on the ground between health facility building and dice (Please, see pictures).

When seat taking, *aashan grahana* by chief guest, special guests and guests was over. In charge of Sowanauli sub-health post, gave welcome speech in the programme. Where he highlighted, the critical condition of mother and child in the in the community/VDC. He further stressed that, existing practice of home delivery in the community, geographical constraint, dilapidated condition of building, i.e. building of health facility are some major challenges among others. On the other hand, in charge highly appreciated the support received from ADRA-Japan/Nepal in terms of building birthing center and providing skill birth attendance (SBA) training to health facility staff especially to auxiliary nurse midwife (ANM) which is expected to benefit a large number of mothers and children in the community.

This welcome speech of in charge was followed by inauguration of newly built birthing center, jointly unveiling the curtain by chief guest and programme director and Japan based staff of SRH project and so with the cutting of the ribbon. Then chief guest open the door of the birthing center and entered into the inside of the building. In charge then, explained about use and function of all the equipment placed inside different rooms in the center (Please, see, pictures).

After inauguration of the building, all of us returned to the place where programme was taking place then, Soko handed over the key of birthing center along with certificate to DHO who then passed them over to in charge of health facility. When in charge received the certificate from the DHO he then read out loud, what has written in the certificate, the text was in Neapli, he begun to read from

*patra Sankhya* (letter number: 2071/072) *chalani number* (registration number) 820 *bisaya*: *prashuti sewa bhawanko hastantaran sambandhama*

*Shree upa-swasthya chauki, sowanauli*

*Jajarkot*

*uaprokta sambandhama, Japan sarkaarko aarthika sahayoga tatha ADRA-Japan/Nepalko prabidhik sahayga ra yas surakchhita matritwa sanjaal manasangh nepalko saajhedari tatha jillaa swasthya kaaryalaya Jajarkotko sammanoyama sanchaalita prajanan swasthya sudhaarka laagi swasthya sasthaako star unnati tatha sewa pradayako chhamata abhibriddi (SRH) pariyojana antargata yas sowanauli ga. bi. sa. ma nirman gariyako prashuti sewa bhawanko sampurna kaarya sampanna bhai aaja miti 2027/12/22 gateka dina jilla swasthya kaaryalayale yas upa swasthya chauki sowanauli sanchaalan tatha byabasthapan samitilai hastaran gariyako chha.*

*Signature of Acting DHO*

Functional translation

This is kindly inform you that SRH project was run in Jajarkot in sowanauli VDC, in the financial support from government of Japan and technical support from ADRA-Japan/Nepal with partnership with Safe Motherhood Network Federation and coordination with district health office. This has completed the construction of birthing center, and going to handover this birthing center to the health facility management committee (HFoMC) through district health office. That reading was followed by big round of clapping (see picture).

Likewise, SS briefly explained about the SRH project and its major objective, which is mainly to provide services on maternal and child health in the communities which are located in remote parts of the country and do have easy access to services. He also mentioned about the total cost of the building, which is near about 40 lakhs rupees including all the equipment placed in the birthing center. Unlike others, he stated that from today onwards, we are going to handover building and equipment in the hand of community people, it is your responsibility to maintain it timely. Likewise, protection of building is another challenging issue for local people. Constructing building and handover it to the community is one aspect of the project, we encourage you all for its timely maintenance and adequate protection which will ultimately benefit community people to receive services and care for long period from now. We, our staff might not be able to take care of this building for long run.

He was quite suspicious about the sustainability of the project namely of the maintaining and protecting of the building in the absence of the project staff. On the other hand, he encouraged and requested local people for the total protection and maintenance of the building, as is required over the time; from now is at the hand of community people he noted.

In the meantime of the entire programme, a couple of cultural dances by school students were performed, the song of the one dance was concerning in encouraging for institutional delivery and spreading the message for it, song further dealt with the advantage of the institutional delivery for mother and child (Please,see pictures). All the dancers were girls and flute player and *madal,* a type of drum were boys among others.

Many people like, teacher, FCHV, political leaders of different parties presented in programme gave speeches, all of these speeches were focusing on the support community people received from the ADRA-Japan/Nepal community people usually refer as support from Japanese/Japan in term of building birthing center in such remote place and providing training SBA training is really praiseworthy. Such support is expected to benefit mother and child in the community, which will contribute positively in making improvement of the mother and child health in the country as well.

Like mentioned earlier, geographical remoteness, lack of awareness among community people regarding health/maternal child health, feeling of shame among women for making discuss on the issues of reproductive health, pregnancy, delivery openly or practice of stay quite unless women as long as they could oppressed/tolerated are commonly shared challenges in the programme. Similarly, women/men take pregnancy/delivery as normal process rather they do not think seriously about the potential dangers that could likely to happen to mother and newly born child are also other important concerns discussed in reference to the status of maternal child health in the community by all the speakers of the event.

Soko, (she spoke in Japanese and MO translated her speech into Nepali) unlike other speakers mentioned that she will be happier when she will hear about that all the pregnant women of this community visit to health facility for delivery and rate of the institutional delivery will reach to 100% at the one hand and community people will keep birthing center maintained and protected for very long time from now.

At the turn of DHO he underlined, to bring change in the habit/behavior among community people is not easier task neither it can be done in short span of time. To bring improvement in the all aspects of people’s lives education, transportation, social and cultural practices play pivotal role. DHO concluded, to bring improvement in the health/maternal and child health in the community aforementioned dimensions influence to the large extent.

CDO in his turn, mentioned that all the things regarding to maternal child health in terms of improvement, present scenario, and associated challenges were already mentioned by earlier speakers before him. But he put emphasis on if community people really want to bring improvement in their behavior, it is possible which he was relating with habits associated with health/maternal and child health and it was told in rhyme.

In the meantime, before closing the programme formally in charge of sowanauli sub health post, made a written request to CDO which was read out loud by the programme presenter, it was requesting for the required budget for making new building for the sub-health post in the community, the existing building of health facility is dilapidated in condition. In the written request in-charge formed a committee and meeting of this committee was making a final decision to as for required fund to build it as committee felt the urgent need of building by the condition of the current one.

CDO instantly responded over in charge’s written request, he publicly announced that, he will put his best effort to make it happen in the community.

At the end of the function, programme presenter requested to the president/chair of the programme to conclude the event formally. As per the request, chair of the programme concluded by thanking to chief gust, special guests, guests, all the participants of the event, unlike other speakers he did not talk much. He highly appreciated the support that Japanese donor deliver in making birthing center in the community. He further mentioned that, such contribution is truly praiseworthy in the context of remote communities like sonawoli in the country and eventually expected to bring improvement in the MCH services in the community and beyond, with this remarks, he formally announced the end of the programme.

Once programme was formally end, ADRA team took a group picture with banner, next to the dice, *manch*. After this, ADRA team went for short meeting as SS mentioned to OC. Then OC went to speak with ANM who was selected for the SBA training under SRH project from the health facility where she works in. She received SBA training in Dhangadi. Furthermore, she is appointed and paid by VDC. OC spoke with two other colleagues, one was a promoted ANM and another was an auxiliary health worker (AHW) who is recently join the work at this health facility; while discussing with ANM.

OC approached to these health staff including in charge of health facility during programme, as all of them were agreed to speak with OC, he managed to speak with them separately. After talking with the female staff at the office room of the health facility, OC spoke with in charge as well. *Interview Notes* of these discussion will be developed separately (Please see interview notes with SS, Sowanauli (SHP). After these two discussion consecutively made with staff of health facility OC concluded his day, moved to *Thalabazar*, from sonawoli by then ADRA team was already left the place.

*Reflection:*

*Attending this handover function of the birthing center at sowanauli, OC felt that mostly all people key people from district and community people are aware about SRH project. Mostly, people looked at the banner while mentioning name of the project as well as of the function. Apart from this this, most of the people, such as teachers, FCHVs, local health staff and women from mother groups could speak about the major objective of SRH project. Everyone else was expressing/sharing their happiness among each other as birthing center prashuti bhawan is built, at their community and mother and child at the community are going to receive services on MCH at their own community, such expressions explicitly found in their speeches.*

*Most people who gave speeches at the function were not only highly appreciated support from ADRA-Nepal/Japan but also clearly expected further help in constructing of such centers in rest of other VDCs of the district, which made OC to felt that whether local people are not satisfied with the birthing centers built by government of Nepal in the region or there is an urgent need to build such birthing centers in rest of the VDCs as well.*

*Reflecting over the whole function of Inauguration and Hand over of Birthing Center’s Building that was taking place at the remote community of Nepal describes many more things. The function at quite deeper level was a ‘meeting place/occasion’ for the people of multiple levels i.e. community to donor and various sectors people from government to non-government where they are not only limited themselves on giving and receiving the birthing centers but also expressing their concerns respectively.*

*On the other hand, donor/project put a lot of effort I assume (resource, time, and energy) to organize such function I guess not only to inform that their project has completed given tasks to the community people but also at the other level, they like their visible presence and want to legitimize their works/tasks by organizing formal function like the one they did in Sowanauli. Community people as they have received support through project, these people are happy express gratitude to donor and project staff by offering handmade mala, garland, food and showing cultural dance, local band.*

*As meeting place/occasion such function provides opportunity for donor and project staff especially those who rarely visits project sites to get the close sense of community people where project is being implemented whereas for community people get chance to know who the donor is, what actually s/he tells about the project.*

*Finally, I think, such programme is not only a formal ritual to handover of what has been completed under certain project, but it is always beyond that.*

***6th April, 2015***

OC and Samar Naupane, a driver of ADRA-Nepal, based at regional office Nepalgunj went to tea shop for tea and some snacks in the morning before leaving for *Jhaapra*, one of the project sites; of SRH project, where it has constructed birthing center and handovering is going to take place. While having tea and snacks, a shopkeeper asked to SN, do you both work at ADRA-Nepal? Instead of answering straightly to the query of shopkeeper, SN asked to shopkeeper that do you know about the construction of birthing center, *prashuti ghriha* in sonawoli. Shopkeeper answered, are you talking about the one which was inaugurated yesterday? SN, you are right, I work in ADRA-Nepal from long time, from the last five years, and my job is based on Nepalgunj. Sir (referring to OC here) does not work in ADRA itself but he studies/researches on maternal child health sector of Nepal in this reference, he has been working with us from last couple of months, right sir? OC that’s right. OC added, this study is simultaneously conducted in Nepal and Malawi, two countries. Last time OC was not able to visit Jajarkot, this time OC will spend a week or more in Jajarkot which includes visiting/spending time on different project sites of at the community level and speaking with people at district level including partner NGO of SRH project.

In the meantime, we finished with our tea and snacks, we left the teashop and get back to the hotel and prepared for moving ahead to *Jhaapra*. Shopkeeper seemed both curious to know about what others are doing in his community also was quite aware about what has been going on in his locality in the present.

When we returned to the hotel, few local people including Shushilji, son in law of the hotel owner were about to leave for *Jhaapra*, they mentioned that, they will reach earlier and work to make basic arrangement for the programme to begin, they then left. OC consulted with SS about leaving time, he informed to that Japanese team might take little longer time to be prepared and leave, he further told that, district team including CDO, DHO, was about to leave so if you like you and RP could join to them, we will leave little later. After consulting with SS, OC and RP left the and joined with district team, OC greeted to CDO, DHO, acting LDO and rest of others in the team and moved ahead along with the team.

On the way, while walking uphill, DHO asked OC, have you been to Jajarkot earlier? Or is it your first time for Jajarkot? It is my first time in Jajarkot but have already been to few districts of this region like Doti, Achham, Bajura, and Dadheldhura. DHO further explained that see this is how the geographical difficulty in this region lies, it is not easy to walk in such trail right! It takes hours and hours of walking to reach from some communities to district headquarter. In this scenario, talking about ANC checkup and delivery at health facility is going to be challenging. Geographical difficulty is one of the major obstacles among other faced by pregnant and delivery women for receiving care and service in this region.

It took 50 minutes/an hour of walk from *Thalabazar* to reach to *Jhaapra* for OC and RP mostly OC and RP walked throughout the trail together. RP did not talk much while walking. When we reached to the community school, people outside of it mentioned to us that CDO was talking with teachers. His group was walking quite ahead than two of us. We straightly went to the place where birthing center is built.

It was seen that temporary gate was built near to birthing center and banner was put on the gate which reads as ‘we heartily welcome to all the guests who visit in inauguration programme of birthing center’ (Please, see picture). After moving quite ahead OC saw, a banner of welcome at the main gate of the birthing center and two big cupper jars with full of water and flowers were put each side of the gate. All decorations tells us community people and perhaps health staff were working a lot to make it happen.

OC moved further met president of SMNF of the Jajarkot district who was talking with some other locals in front of birthing center, who informed that programme will take place soon as district team of CDO and ADRA team is already arrived at the place of event. In the meantime, Indra B. Chand, overseer and acting district coordinator of SRH project was carrying sound box and amplifier along with his other colleague and heading towards place where programme is taking place on motorbike. On the other hand, some other people, mostly young guys were arranging chairs around programme place for chief guest, special guests, and guests, banners of the project were already placed.

After being at the place for a while, OC heard that programme presenter announced that, the programme that is supposed to begin from 11:00 is slightly preponed will begin from 10:00 am instead, also he requested all the participants present around to be take the seat on the chairs placed in the ground.

People begun to be seated on the chairs as programme presenter asked them to do so. Programme took place as per schedule and like in the other day, modality of the programme is same. Ex chairperson of VDC took the chair the event. Likewise, CDO was the chief guest of the function and DHO, acting LDO, and ADRA team were requested to take seats as special guests formal beginning of the programme and welcome speech of in charge was followed by inauguration of the birthing center by CDO and Soko and Aatushi collectively. Inauguration was followed by quick observational visit of different rooms and equipment of centers by CDO, ADRA staff along with locals where in charge of Jhaapra sub-health and SS explained to CDO, ADRA staff and others about the function of all the equipment were placed in center.

Right after inauguration and observational visit of birthing center, formal hand over was took place, where, as OC mentioned earlier Soko, programme director of SRH project handed over key and certificate to DHO and DHO gave them to in charge of local health facility and he read out the what has been written in the certificate loud and followed by big round of claps. After this, several people represented many aspects of society gave speeches, almost all of them were recorded, detail transcribing of those recording will be made separately (see transcribing).

At the end of the programme, each FCHV from nine different wards of the VDC received stretcher form the hand of chief guest, special guest and representative from SMNF, which is expected to be helpful in bringing pregnant women including other sick person from their houses to birthing center for delivery or health facility for treatment (Please, See pictures). When this was over, chair of the programme formally announced the ending of the programme by highlighting the importance of support that community people received from ADRA-Japan/Nepal in construction of birthing center in such remote community which expected to benefit mothers and children of the community.

People from different walks of life were presented in the programme which included, teachers, locals, and women, pregnant women who were presented less in number in comparison to their men counterpart, which was mentioned by one or two speakers in their speech. Apart from this, number of participants in the function were less in comparison to the similar event that took place one day earlier in different VDC.

While returning from the sowanauli to *Thalabazar* in the evening BD told to OC that number of local people presented in the event was satisfactory, as he has been living in the community and informing and facilitating community people for conducting programme, programme went well but he often mentioned that, is quite worry about tomorrow’s programme at *Jhaapra* as level of homework we did for today’s programme was lot.

OC spoke briefly during programme with Sarada Basnet (SB), ANM of the health facility, who is also given SBA training with the financial support of ADRA-Nepal SRH project, who told that, lives with her aunt at *Thalabazar* to work at this health facility. As we were also living in the same place we decided to talk/discuss on her work experience at the community as SBA.

When programme was concluded, OC and RP returning to hotel where somebody informed OC that lunch is ready in the next hotel. As per information OC and RP went there, it was like small feast many people were taking it. OC and RP also took that, it was told that the contractor of the birthing center was organizing the feast, OC tried to find him and spoke but he was not available. I guess, he was hosting the guests out of hospitality and goodwill.

As per appointment, ANM along with another lady came to the hotel where OC stayed in, in the evening. OC explored place to sit and talk with her in/around hotel he did not find appropriate one as people often come in and going out in the hotel, OC and SB went to her aunt’s house along with aunt. OC thought aunt as SB’s senior colleague and told her so. Indeed, she is a teacher at local school. After a while, perhaps few minutes of walking we reached to her house and OC spoke with ANM at the yard of the house. Detail transcribing of this conversation, will be made separately. Please see transcribing of the interview with SB, ANM Jhaapra SHP.

After speaking with SB, OC returned to the hotel and made call to vendor to speak about strike, *banda* that communist party of Nepal (CPN), moist along with opposition alliance made from 30 small political parties, announces for 7th, 8th and 9th of April, 2015; for settling vehicle. Vendor suggested OC to send back vehicle to Nepalgunj so that OC will not have to pay the charge for those strike days, in case it will take place, otherwise, vendor will charge nominal rate of vehicle and accommodation of driver as per days spend in the community. OC asked driver to return to Nepalgunj as OC spoke with vendor and he thought will send strike days in the community speaking with pregnant and recently delivery women and FCHVs.

*Reflection:*

*There was not much difference between modality of programme, less numbered of participants were presented in Jhaapra compared to Sowanauli. Unlike in Sowanauli, FCHVs were given stretchers at the end of programme at Jhaapra. FCHVs were already given stretchers in Sonawoli. People seemed well aware about SRH project in Jhaapra as well. The function went well and followed by lunch at Thalabazar.*

***7th April, 2015***

Not much has been done as it was the first day of strike. In the morning OC was trying to speak with a pregnant woman who lives next to the hotel as she was busy on household chores in the morning OC could not make it. Then, OC managed to speak with Indra B. Chnad, overseer and acting DC of the SRH project before lunch. Detail information of this conversation will be transcribed separately (please, see transcribing of interview with IBC, acting DC, SRH project; Jajarkot).

OC spend some time in elaborating field note of last a couple of days which was due because of lack of electricity, staying in common room and more or less exhaustion of travel/attending programme.

After this OC and SN went to river for washing clothes and taking bath by then team of ADRA-Japan/Nepal, expect SN had left *Thalabazar* for *Archhani* another VDC where SRH has built birthing center and like in other sites inauguration and handover of building is going to take place.

OC did not go to *Archhani* VDC as SS suggested better not to go there as it involves a lot of walking through relatively difficult trail which is he thought apparently going to be difficult for OC. But, OC was interested to make his visit to this site as well because, he was informed that a person from Japanese embassy will be coming attend programme at this site.

Apart from this, ADRA team was also mentioned that death among people at the VDC due unidentified disease was also increasing but that was taking place at the upper belt of the VDC which is quite far from the birthing center. This condition later took the form of endemic in the region and many people lost their lives and these unidentified diseases were identified as ‘seasonal flue and ‘swine flu’, which killed dozens of people in the region.

OC met SB and her aunt, who were also in evening walk; as he was returning from evening walk along with SN to the hotel. He then quickly asked to SB that ‘are there any pregnant ladies, except the one who lives next to hotel?’ he is interested to speak with them, if they are willing to talk with OC, SB, she is only one pregnant lady in this location, who asked me to bring iron tablets from health facility once, her pregnancy reached to three months. With this very short conversation, we headed towards each of our destination.

***8th April, 2015***

Sushilji, son in law of the hotel owner, informed OC, while he was having tea sitting at the yard of the hotel along with SN; that the announce strike for three days was withdraw by its organizers from today onwards. OC thought, perhaps he could go and speak with health post in charge after lunch.

After having tea OC and SN went to morning walk, on the way they happened to meet Saraswoti Shahi, ANM of the sowanuli sub health post, who OC met and spoke on the other day of inauguration and handover function. As we exchanged greeting, she mentioned, was heading to Khalanga, district headquarter of Jajarkot to attend one day training on Tuberculosis, going to take place tomorrow. She further mentioned that as in charge is on leave, he asked SS to attend it.

As OC listened to SS, he asked her, ‘can OC come together with SS to go along to the district headquarter?’ by thinking that OC does not have to worry for finding trail to reach headquarter nor he has to think a lot about exploring hotels in the district, if OC goes with SS to the headquarter. SS, there would not be any problem, rather we will be company for each other, she added; mostly we have to go through jungle. OC returned to hotel along SS and had lunch tougher, quite earlier than usual time and set out the journey for Khalanga with SS.

While walking, OC asked SS that, has there been any case of delivery arrived in the birthing center after its inauguration. SS, not yet, but a pregnant lady came to health facility yesterday with her nine months pregnancy for first anti-natal care (ANC). When she arrived at the health facility, had complained that she was having pain in her lower abdomen (*tallo pet dukhirakheko chha*). SS further told to OC that women do not visit to the health facility until and unless they are not under gone any problem during their pregnancies. Feeling of shame, *laaja* on openly talking about reproductive health namely pregnancy and delivery among women at the community is one of the underline causes that play an important role in hindering women to visit health facility during such condition, SS feels. Listening to SS, OC felt that pregnancy for women at least from some communities of Jajarkot district is not a sensitive and critical stage/period which requires adequate care but is something women feel shame and hesitate to talk openly among themselves and with community health staff.

We moved on to talk about contraceptive use among community people. SS described, it is more common among women than in men in the community. She further told that, women are higher in numbers than that of their men counterpart among the total users. Depo-Provera commonly known as *teen maheene sui* is very common contraceptive among women and followed by pills. Out of all the users of Depo approximately 9 women in the entire VDC are using it without informing to their husbands because husband want next baby whereas wives do not want more. Over bleeding during menstruation and weight gaining are some of the side effects that Depo users commonly reported.

12 women from the VDC are using IUCD. They placed it once there was a medical camp held in community organized by district health office. SS further mentioned that, many women do not like to use IUCD because they think, it is made out of cupper, and it could be rusted after they placed it for the purpose in their body. OC felt that misconception and myth regarding to contraceptives are widely prevailed among users still today. Among IUCD users one woman has three children and rest of the others have more than five already.

SS returned to earlier point and mentioned that we keep trying counsel to women/pregnant women in the community for regular checkup and encourage for institutional delivery but then they do not listen us seriously, even if they listen us they do not follow what we ask them to follow. SS gave an example, she asked her husband’s cousin to visit health facility for institutional delivery, as SS was asked to make visit to home at the time of cousin’s delivery to assist in the delivery process. Eventually, cousin did not visit to health facility for delivery nor SS did accompany her at that time of delivery, it took place at her home. After birth of the child, placenta did not come out in the usual time and then SS was again requested to make home visit for solving the problem, this time SS went to the home and had helped mother and solved the problem. SS made her opinion that, perhaps, women feel shame to visit health facility for institutional delivery or women mostly think that delivery is something that takes place naturally without causing a lot of problems to mother and child. When they face problems/complications only they inform to health workers for help or service, SS added.

Finally, after day long walk we reached Khalanga, where SS helped OC as expected, in finding hotel. We walked through jungle and did not meet many people passing through the trail. Local people mentioned that it takes 4 to 6 hours of walking from *Thala Bazar* to Khalanga.

***9th April, 2015***

After lunch OC went to the district hospital as per the location given by SS. She left quite earlier than OC as she has to attend training. District hospital is located at the end of the town which is quite far from the town and rest of the other settlement as well.

When OC entered into the hospital area he saw pregnant woman near to the resting place and thought that must be visiting for her regular checkup, picture was taken from the distance. OC thought if she will be available around he will speak with her quickly after meeting with Dhir Jung Shah, DHO Jajarkot district, with whom OC spoke shortly and mentioned about the outline of the research and purpose of visiting the Jajarkot district and its community when he met at inauguration and handover ceremony at sonawoli VDC. He responded quite positively. He told OC when you will be at the district, please meet me then we will discuss further on the subject matter.

OC found DHO office room, DHO has not arrived yet to the office, a person asked me to wait for a while DHO will come in a while. At corner on the bench SS and another lady was chatting. OC greeted introduced himself. She was Sarita Chand (SC), public health nurse and focal person of *Aama Surakchya Programme*. Then OC briefly explained about his purpose of visit to Jajarkot and what he has been researching in different parts of the country.

Then OC expressed his interest to speak further about her working experience as a focal person of *Aama Surakchya Programme* in relation scenario of MCH service in district and communities with SC if she also likes too. SC told to OC that she will not be able to speak with OC during first hours as she and her colleague are working for preparation of monthly report. SC further told that, she will let OC as she gets time to speak with him.

In the meantime DHO arrived at the office, OC greeted to him and handed over documents which included one pager introduction, NHRC ethical clearance and a request letter from University of Edinburgh/Nepal Introduction along with OC business card. Also, referred their first meeting at inauguration of birthing center at sonawoli and short conversation they had on the way to *Jhaapra.* After listening to OC and having quick look on documents, DHO asked OC come a couple of hours later to speak with him. He further mentioned, as he just came to office he has some other tasks to complete first. In the meantime DHO mentioned to OC, he thought of OC differently, he was thinking OC as a staff of ADRA.

OC left DHO’s room and visited around, he saw different posters on *Aama Surakchya Programme* are posted on the walls so are the family planning (FP) (see pictures). Also, he saw different sections like nutrion, safer motherhood and staff clearly provided information services on MCH in general and Aama *Surakchya Programme* in particular is explicitly running in the district and communities. Nevertheless, further exploration is required to know how it is practically moving at every parts of the district.

During visit in different rooms OC saw SC jointly working with her colleague in the computer. OC quickly asked to SC that whether Suaahara has been implemented in the district or not? SC told that it just has arrived and begun to consult with people from different sectors at the district. You actually could meet of the Suaahara staff at next to this room.

OC went to next room where two people were discussing. OC asked for their permission to coming into the room as they permitted OC entered into the room and sat on the chair. OC drew their attention and mentioned as briefly as possible to them about his purpose of visit to Jajarkot. Among two one Lok Raj Joshi, essential nutrition action (ENA) officer Suaahara project, and another was recently appointed nutrion officer of the government of Nepal based at district health office, Jajarkot (see picture).

As OC sat on the chair next to these two person and overheard their conversation, it sounded like ENA officer was collecting basic demographic information on MCH related staff like number of pregnant women, number of 1000 days mother. How many training centers could be made to provide training at both health facility level as well as community level especially for FCHVs. ENA officer mentioned that as he is busy on working with nutrition officer, he will speak with OC after a while.

OC went to DHO’s room to see if he is free to speak with and in the meantime ENA officer also came in and requested to finalize date for regional meeting that is going to be 3 days long so ENA officer told DHO that he does not want to overlap this meeting with any other programme. DHO told to him that lets finalize the dates you have proposed for now, in case there any sudden alteration, I will let you know in advance. ENA officer left from the room. As DHO seemed busy on looking/reading at documents he told that he will not be able to talk with OC now.

OC came and speak with SC and LRJ subsequently. (For detail information of these conversation please see the transcribing of interviews with SC and LRJ at Jajarkot respectively) LRJ also gave the location of Suaahra district office and mentioned that DC was also working at office. Detail information of conversation is transcribed separately please transcribing. After speaking with these two people OC again visit to DHO’s room to find if he could speak with OC, he was quite interested to listen his experience of working with external development partners (EDPs) like ADRA-Nepal/Japan in reference to SRH project in such remote area in the sector of MCH service delivery but this time DHO told OC that it seems, perhaps he will not be able to speak with OC today as he is busy on several other tasks. Like earlier, while he was speaking with OC, he was looking/reading at documents on his table.

OC left the district hospital and moved to SMNF office, partner NGO of SRH project, this office is located a bit further towards north from district police station of Jajarkot at two storied semi concrete, slate roof building with white color (see picture). Where OC met Santosh Pahadi (SP) one of the community officers at SRH project. And spoke with him (for detail information of this conversation please see transcribing of the interview with SP, SMNF, Jajarkot). These COs are district based staff recruited by SMNF but most often they work from the community.

After speaking with SP OC went to meet DC of Suaahara project at Jajarkot district as per the information and location provided by LRJ. When OC reached to Suaahara office many staff were working on the same room.

OC introduced himself with DC and referred his meeting with LRJ at district hospital with brief introduction and outline of the project OC begin to speak with DC. Detail transcribing of this conversation will be made separately. (For detail of this conversation please see transcribing of interview with DC, Suaahara Project Jajarkot.

After speaking with DC, OC found that partner NGO of Suaahara project at Jajarkot district Hilly Region Development Campaign (HRDC) and went to the office of HRDC if he could be able to find and speak staff on how initial phase of working together is moving ahead.

When OC was reached to the HRDC office, he did not find executive director of organization but he was able to talk with admin and finance officer of HRDC who explained about initial preparation, selection procedure, announcement of the field supervisors, which was recently been made public. (For detail information of this conversation please see transcribing of the interview with interview with Admin and Finance Officer at HRDC, Jajarkot. After having conversation at HRDC OC returned to hotel and concluded his day.

Overall day remained quite productive, OC spoke/interviewed several people ranges from government staff to project staff. These people include PHN/focal person of *Aama Surakchya Programme,* ENA officer and DC of Suaahara project, Community Officer of SRH project, based on SMNF office and Admin and Finance officer of HRDC.

Speaking with several people and visiting their offices mostly located at district headquarter. OC felt that numerous people/organizations are explicitly engaged in sector of MCH service delivery.

***10th April, 2015***

OC went to bus park of Jajarkot, around 6:45 in the morning which is very near from the hotel where stay in, only few minutes of walking. The bus was scheduled to leave by 7:00 am in the morning from Jajarkot to Nepalgunj.

Before leaving for bus park OC saw SC at the hotel, who also said, is going to Nepalgunj. OC and SC had travelled together but could not talk during travel time as their seats are quite far from each other and in opposite direction.

Still in the meantime, SC asked OC, where his office is located? And will he doing each doing research in every district across the country? OC, his office is located in Kathmandu, place called Battisputali. In terms of conducting research in every district across the country perhaps, OC will not to do so. Mainly because two reasons; first, we will be able to conduct research in every district in the given time frame. Secondly, we are interested to perform a detail study rather than cover wider area.

At the end of our journey we had to switch the bus as one of the tires of it punctured and driver managed another bus for passengers who have be at Nepalgunj Bus Park so we happened to sit near by each other in the changed one. SC mentioned that she had participated in 21 days study tour took place in Seoul, Korea last year. It was focused on maternal and child health, she further explained that, she felt happy as she was representing Nepal and was explaining about her own working experiences as well as mentioning about the status of service delivery of rural Nepal in general and of Jajarkot district in particular. She noted further that, although working environment for health workers is so challenging in the context of rural Nepal still, if one engages committedly in his/her profession, definitely gets such opportunity. That was great opportunity in terms of many respects, such as visiting to well-equipped hospital which provides advanced services to mother and child, how complicated cases are treated with well advanced services etc.

With this short conversation, OC and SC departed; OC thanked her a lot also mentioned that OC may contact her in case he needs any further information and clarification on the matter, they discussed earlier.

*Reflection:*

*Jajarkot field trip was remained worthy in many respects, mainly it helped in understanding of SRH project in a quite dipper manner. At least this trip contributed in knowing how SRH functions at the community level and how community staff are look like in terms of having academic qualification and professional background. SRH project employs field level staff through partner NGO in case of Jajarkot through SNMF. These staff are called community officers (COs) and community people called them, as either samudayika adhikrita sir or by individual name and sir. These are district based staff but one of the staff I spoke told to me they spend most of their time in field. They attend mother groups meetings, they meet and spoke with staff and health facility get information on prevalence of contraceptives in the community. They also work obviously with project staff who are visiting field sites from central or region.*

*Likewise, it was helpful in developing understanding existing scenario of MCH service delivery at the remote Nepal. Most of the deliveries take place in the home, pregnant women usually do not visit at health facility until and unless they have gone serious problems, geographical constraints are some of commonly reported issues in the speeches/ conversations with people and interviewing them.*