Nepal Earthquake Response Report
Two Years and Beyond
World Vision is a global Christian relief, development and advocacy organisation dedicated to working with children, families and communities to overcome poverty and injustice. World Vision serves all people, regardless of religion, race, ethnicity, or gender.

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Published by World Vision Nepal Earthquake Response on behalf of World Vision International.

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Cover page: Children peeping out of a window of their school building reconstructed by World Vision. Photo by © World Vision/Barun Bajracharya.
The earthquakes of 2015 changed the face of Nepal. The vast majority of the impact was on rural and remote areas, making the response incredibly challenging. Two years later, Nepal is still recovering and World Vision continues to support affected communities.

After meeting the immediate needs of communities, the heart of our response effort is to build back better. For infrastructure we’ve used build back safer as our motto, constructing buildings that are safer and better able to withstand future earthquakes. As this report outlines, we’ve focused on sectors where communities have clear needs, working through local partners to address those needs.

A critical part of our work is a strong accountability programme, which uses a variety of mechanisms to ensure that we are listening to communities and incorporating their concerns and feedback into our programming and implementation. I believe our work is significantly stronger as a result.

As we enter the final phase of the World Vision Nepal Earthquake Response, we want to ensure that the communities we leave behind are better prepared to withstand future shocks and meet new challenges with greater confidence and resilience.

I’d like to take a moment to thank the Government of Nepal, our local NGO partners, the communities with whom we work and of course, our donors, without whom we would not have been able to fund the response.

I’m so proud of the work that World Vision’s Earthquake Response team has done and applaud your efforts over the past two years. Dherai dhanyabad to each of you!

Elizabeth Hanna Satow
National Director
World Vision International Nepal
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</tr>
</tbody>
</table>
Introduction

The 7.8 magnitude earthquake that shook Nepal on 25 April 2015 affected 39 out of Nepal’s 75 districts, with an estimated 8.1 million people living in these 39 districts. The Government of Nepal declared a state of emergency, requesting assistance from the international community. Just 17 days after the initial earthquake, a 7.3 magnitude earthquake followed, exacerbating the humanitarian situation. Close to 9,000 people were killed, more than 22,000 people were injured, in excess of 600,000 houses were destroyed and more than 288,255 houses damaged. The high levels of damage to residential property particularly had an impact on the poor, pushing more households below the poverty line. Senior citizens, female-headed households and people living with disabilities were particularly affected by the earthquake and rendered even more vulnerable.

World Vision declared a Category III Global Response on 26 April 2015, and mobilised global surge capacity to support the response efforts. On 1 October 2016, the response moved under the national office.

Two years after the devastating earthquakes, significant recovery efforts are underway. Although the Government of Nepal sped up the support for the reconstruction of damaged houses, community assets and resumption of services after the earthquake, much more remains to be done to achieve a resilient sustainable recovery.

World Vision’s Nepal Earthquake Response (NER) has made significant achievements in the past 24 months with a goal ‘to meet the emergency needs, strengthen the resilience and self-recovery and restore a sense of safety for earthquake-affected children and their communities’. To date, World Vision has reached more than 526,873 people across 10 of the hardest hit districts through its relief phase (April – September 2015) and recovery phase (October 2015 – December 2016) and in the rehabilitation phase starting in January 2017. The total expenditure for both the relief and recovery phases was US$37.6 million.

In addition, under the currently ongoing rehabilitation phase (January 2017 – April 2018), World Vision plans to reach 27,250 additional people with livelihoods, WASH and shelter interventions that aim to further strengthen communities’ resilience and promote self-recovery with a projected budget of US$13.4 million.

Close to 9,000 people were killed, more than 22,000 people were injured, in excess of 600,000 houses were destroyed and more than 288,255 houses damaged.

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HIGHLIGHTS OF WORLD VISION’S REACH DURING THE RELIEF AND RECOVERY PHASES

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>People reached with Nepal Earthquake Response</td>
<td>526,873</td>
</tr>
<tr>
<td>Shelter and Infrastructure</td>
<td>144,300</td>
</tr>
<tr>
<td>Education</td>
<td>39,821</td>
</tr>
<tr>
<td>Child Protection</td>
<td>35,289</td>
</tr>
<tr>
<td>Health</td>
<td>127,549</td>
</tr>
<tr>
<td>Wash</td>
<td>227,510</td>
</tr>
<tr>
<td>Livelihoods</td>
<td>114,775</td>
</tr>
<tr>
<td>Cash</td>
<td>182,690</td>
</tr>
<tr>
<td>Disaster Risk Reduction</td>
<td>491,896</td>
</tr>
</tbody>
</table>

**Nepal Earthquake Response Report: Two Years and Beyond | April 2017**
Ensuring humanitarian accountability

Humanitarian accountability has been prioritised since the beginning of the response. In the relief phase and again in the recovery phase, a dedicated humanitarian accountability team worked to ensure that the four pillars of World Vision’s Programme Accountability Framework were fully integrated.

World Vision provided key information updates to communities on the activity plans including banners, flyers, community meetings, one-on-one meetings and the installation of noticeboards at all construction sites highlighting key project information including timeline, objectives and budget. Flyers with information about each of the sector programme plans were also distributed within communities to ensure clarity of activity plans.

To hear the voice of the community, a help desk was installed at every distribution site. ‘We provided a form to people where they can mention their complaints, comments or even appreciate our work’, says Jeena, the Humanitarian Accountability Officer for World Vision’s Response team. ‘We maintain confidentiality of what people wrote so that they can submit their feedback without any hesitation. The feedback is then reported to the sector managers and based on that plans for improvement are made.’

Figure 1. Key Dimensions of Programme Accountability Framework, WVI

1. Providing information
2. Consulting with communities
3. Promoting participation
4. Handling feedback and complaints

3 NER relief phase working districts included Bhaktapur, Gorkha, Kathmandu, Lalitpur, Lamjung, Sindhuli and Sindhupalchowk; recovery phase working districts included Dhading, Dolakha, Gorkha, Nuwakot and Sindhupalchowk; and rehabilitation phase working districts include Gorkha, Nuwakot and Sindhupalchowk.
Community participation and contribution was promoted in all activities. This included selection of beneficiaries, implementation of activities, contribution of skills, labour and materials and involvement in project committees such as water management and local disaster management committees. Communities were consulted on a regular basis through formal community assessments, periodic reviews and informal district-level meetings with Village Development Committee (VDC) leaders.

World Vision had formal mechanisms in place to collect and act on community feedback and complaints, including suggestion boxes, hotlines and help desks. World Vision established toll-free hotlines to widen coverage to individuals and allow faster response to communities.

In the rehabilitation phase, World Vision will continue adjusting its accountability mechanism to suit the needs of communities.
Shelter and non-food items

The earthquake and subsequent aftershocks destroyed more than 600,000 houses and damaged an additional 288,255\(^4\), making hundreds of thousands of families homeless and exposing them to greater vulnerability and insecurity.

Much of the shelter support provided in the relief phase were temporary and will require repair or replacement in the future\(^5\). World Vision distributed corrugated galvanised iron (CGI) sheets along with shelter tool kits and provided orientations on the shelter cluster’s Building Back Safer/ Better 10 key messages. This helped families achieve a basic level of protection from the elements, as well as privacy, particularly in the face of the monsoon and winter seasons. The Post-Distribution Monitoring (PDM) report showed that 88 per cent of recipients used the CGI sheets to construct semi-permanent shelters and 12 per cent saved it for new house construction\(^6\).

World Vision trained local masons on Building Back Safer construction techniques that World Vision has been implementing at a shelter and infrastructure pilot project in the Sangachok VDC of Sindhupalchowk district to help them build 307 houses with the potential to be replicated at scale by the government and other humanitarian actors. Out of the total target, World Vision will construct model houses for the 50 most vulnerable families through on-the-job training.

‘We received CGI sheets and solar lights from World Vision. CGI sheets helped us construct our house and solar lights helped my children study when there was no power supply after the earthquake.’

– Hitkumari, 35, Ghyachowk, Gorkha

\(^6\) The PDM was conducted in July 2016 to assess the effectiveness, appropriateness and relevance of shelter kits and CGI distributed to beneficiaries. The sample size was 373 at 95 per cent confidence limit with a five per cent margin of error.
### SHELTER AND NON-FOOD ITEMS

<table>
<thead>
<tr>
<th>Description</th>
<th>Quantity</th>
<th>Families</th>
<th>Individuals</th>
</tr>
</thead>
<tbody>
<tr>
<td>CGI sheets distributed</td>
<td>345,664</td>
<td>21,604</td>
<td>108,020</td>
</tr>
<tr>
<td>Shelter toolkits distributed</td>
<td>19,204</td>
<td>19,204</td>
<td>96,025</td>
</tr>
<tr>
<td>Households received blankets and sleeping mats</td>
<td>13,600</td>
<td>7,239</td>
<td>36,195</td>
</tr>
<tr>
<td>Winter kits distributed for families</td>
<td>7,239</td>
<td>7,239</td>
<td>36,195</td>
</tr>
<tr>
<td>People received orientation on build back better</td>
<td>9,780</td>
<td></td>
<td></td>
</tr>
<tr>
<td>People received mason training</td>
<td>99</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

As the community leader of Bhimtar, Jamdar Manji actively supported the initiations taken to build stronger housing structures. ‘We have regular meetings with technical staff to put our issues forward and discuss about possible solutions. I have myself been learning about the things I need to remember while building my house. With stronger infrastructure, I hope that the community builds back stronger and a future disaster doesn’t create fear in our minds,’ he shares.
Child Protection

After the earthquakes, children in Nepal faced increased stress as their normal routines were disrupted and schools were suspended due to infrastructure damage. As per the Nepal Children Consultation Report, children in 67 Focus Group Discussions (FGDs) referred specifically to feeling sadness and insecurity as a result of the earthquake. The regular aftershocks, loss of homes and damage to their educational institutions led to increasing fear, anxiety and stress levels in children.

In the immediate aftermath of the earthquake, during the relief phase, World Vision established Child Friendly Spaces (CFS) where children had a space to play, learn and be cared for. The nurturing environments at CFS helped children to strengthen their resilience to deal with the risks they faced and the distress they experienced.

The earthquakes further exacerbated existing child protection issues in Nepal, increasing the risks of child exploitation and labour for both boys and girls as families lacked permanent shelter, access to basic services, loss of livelihoods and could not ensure children’s well-being and safety. World Vision reached more than 35,000 children through child protection activities. World Vision equipped local child protection committees and child clubs with the ability to promote child rights and protection in emergencies at the local level. To create better response management systems for children at the local level, World Vision also provided financial support to the government to establish a child help phone line and provided training on child case management. Additionally, sessions about Gender-Based Violence (GBV) were provided for teachers, parents and community leaders.

“I was able to develop new friendships with other children who also attended the Child Friendly Space. I found the space a place of solace and security.”

– Jyoti, 14

“Our club succeeded in sending a child back to school who was sent for labour work in Kathmandu. We have been actively advocating to stop the instances of child marriage and are determined to reduce such malpractices in our society.”

– Ganga, 15, a child club member from Sindhupalchowk

In the rehabilitation phase, World Vision will mainstream child protection through each sectoral intervention in order to address the needs and protection of children. World Vision will continue to carry out community journalism in response districts to increase awareness around child protection issues and empower children at the community level. World Vision will also continue to collaborate with other agencies to jointly advocate the issues of child protection which includes, but is not limited to, conducting related research or assessments that can influence policy and inform humanitarian intervention.

“I was able to learn about self-awareness skills through this training and I understood that these skills help individuals to speak out for themselves. The life skills and psychosocial training has certainly motivated me to become a better person. After this training I know what to do and what not do in order to ensure child protection in my community.’
– Sandhya, 13, Dhading

<table>
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<tr>
<th>CHILD PROTECTION</th>
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</thead>
<tbody>
<tr>
<td><strong>35</strong></td>
</tr>
<tr>
<td>Children: 3,535</td>
</tr>
<tr>
<td><strong>5,158</strong></td>
</tr>
<tr>
<td><strong>64</strong></td>
</tr>
<tr>
<td>Children: 2,210</td>
</tr>
<tr>
<td><strong>34</strong></td>
</tr>
<tr>
<td>Children: 4,272</td>
</tr>
<tr>
<td><strong>100</strong></td>
</tr>
<tr>
<td>Children: 3,535</td>
</tr>
<tr>
<td><strong>37</strong></td>
</tr>
<tr>
<td>Children: 3,535</td>
</tr>
<tr>
<td><strong>73</strong></td>
</tr>
<tr>
<td>Children: 1,431</td>
</tr>
<tr>
<td>Individuals: 88,631</td>
</tr>
</tbody>
</table>

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Education

Educational services were severely disrupted by the earthquake, with an estimated 1.5 million children directly affected8. According to the rapid school damage assessment led by the Department of Education (DoE), 40 per cent of schools and 50 per cent of classrooms were affected. The damaged schools had an impact on enrolment, attendance and efficiency, leading to an increase in the number of out-of-school children.

In the early days after the earthquake, World Vision established Temporary Learning Centres (TLCs) with WASH facilities to provide children and teachers with a safe learning and teaching environment with access to basic teaching and learning supplies. According to the education cluster in September 2015, approximately 166,000 children did not have access to quality permanent learning spaces9, forcing children to learn in crowded and unsafe temporary classrooms. World Vision reconstructed/rehabilitated school buildings to meet safety standards and equipped schools with teaching and learning materials.

World Vision supported vulnerable out-of-school children by providing school supplies and cash to support their continued learning in the formal education system. World Vision supported children by conducting extracurricular activities focused on various themes such as DRR, life skills and child rights. This helped children to build up their confidence and skills to prepare for future disasters.

‘In the training I have learnt how children’s views should be listened to and taken seriously. I have been actively engaged with and [enabled] student, family and community participation in all aspects of school policy, management and support to children.’

– Khimak Bishwakarma, Vice Principal of Garjyangdunga Higher Secondary School, Dolakha

8 UNOCHA, Nepal Earthquake Humanitarian Response Report, September 2015
9 Ibid.
### EDUCATION

| **62** | TLCs constructed with WASH facilities  
Children: 8,582 |
| **9,264** | Student kits distributed  
Students: 9,264 |
| **7,404** | Student hygiene kits distributed  
Students: 7,404 |
| **14** | Damaged schools repaired and rehabilitated  
Students: 4,695 |
| **104** | Schools received teaching and learning materials, including WASH materials  
Students: 15,411 |
| **657** | Extracurricular activities and campaigns with child clubs to raise awareness on disaster relief management conducted  
Children: 32,589 |

> ‘After my daughter received the scholarship we bought note copies, pens and a school uniform and she went back to school. The scholarship money will be spent only on my daughter’s education.’  
> – Tulamaya, mother of Kanchi who was re-enrolled at a school in Dolakha

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In the aftermath of the two earthquakes, significant damage was caused to Water, Sanitation and Hygiene (WASH) facilities and water sources across the affected areas. The lack of clean water combined with poor living conditions and limited awareness of hygiene practices had a negative impact on the well-being and health of communities as a whole.

In response to immediate needs, World Vision distributed WASH kits followed by sanitation and hygiene messaging through the mobilisation of a WASH ambassador and local committees to reduce the incidence of waterborne diseases.

The issue of water scarcity has been consistently raised post-earthquake and is linked to rising tensions within communities which, in a few cases, has even resulted in violence. Of the 34 per cent of people who believed there were tensions in their community related to earthquake support, 28 per cent believed this tension was caused by the drying up of water sources which suggests that competition exists in these communities for limited resources10.

Water, sanitation and hygiene

I really like the mosquito net as I can sleep better and the toothbrush as it is small and cute and green. Green is my favourite colour.’

– Rupika, whose family received non-food items and hygiene kits from World Vision

“I initially, we had to walk for more than an hour across the hills to fetch water taking up a lot of our time everyday. It used to be more difficult when we were sick and did not have any helping hands. I even had to take help from my little granddaughter when no one else was available. These hardships have finally ended. We’ve heard that this tap does not dry up, no matter what the season; it is a huge relief.” – Som, 53, Jalbire, Sindhupalchowk

World Vision renovated and constructed water system schemes, giving more than 50,000 people access to safe drinking water. World Vision equipped water user committees with resources and linked them with local government support systems which will continue to support and maintain the water system schemes. World Vision also supported vulnerable families through the installation of household toilets. World Vision worked with local community groups and earthquake-affected people to promote the community-led total sanitation approach and supported the government’s Open Defecation Free (ODF) campaign.

World Vision will continue to rehabilitate water systems in the rehabilitation phase and promote context-specific alternative water sources (e.g. rainwater harvesting) in the face of the elevated need for access to water and the disruption of water sources. World Vision will also mobilise WASH ambassadors, training them on key messages of health and hygiene practices and orienting them on creative ways to teach beneficiaries about WASH best practices, such as through games, dramas and other demonstrations.

“I feel so happy to have a toilet again. I clean our toilet every day. I also wash my hands with soap and water every time I use the toilet.’”

– Sunita, from Gorkha, whose family has now constructed their own toilets

<table>
<thead>
<tr>
<th>WASH</th>
<th></th>
<th>WASH</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>14,443 hygiene kits distributed</td>
<td>Families: 14,443</td>
<td>Individuals: 72,215</td>
<td></td>
</tr>
<tr>
<td>18,347 mosquito nets distributed</td>
<td>Families: 9,513</td>
<td>Individuals: 47,565</td>
<td></td>
</tr>
<tr>
<td>11,448 toilets constructed/ repaired</td>
<td>Families: 11,448</td>
<td>Individuals: 57,240</td>
<td></td>
</tr>
<tr>
<td>10 ODFVDCs established</td>
<td>Families: 7,745</td>
<td>Individuals: 32,741</td>
<td></td>
</tr>
<tr>
<td>324 WASH volunteers mobilised for hygiene promotion</td>
<td>Families: 24,675</td>
<td>Individuals: 123,377</td>
<td></td>
</tr>
<tr>
<td>153 water supply systems</td>
<td></td>
<td></td>
<td>Individuals: 50,420</td>
</tr>
</tbody>
</table>
Health

According to the post-disaster needs assessment report, more than 1,200 health facilities were damaged or destroyed which affected the ability of health facilities to respond to health care needs in the affected areas and disrupted service delivery. This had a particular impact on vulnerable populations, including those directly affected by the earthquakes, further reducing access to health services in remote areas.

To assist the resumption of health services after the earthquake, World Vision distributed tents and medical supplies to the government’s health institution. Female community health workers were trained to provide health care to families living in some of the most remote communities.

World Vision reached more than 127,549 people through health activities. World Vision repaired and renovated health posts in line with safety standards and equipped them with medical equipment to ensure that the facilities can provide adequate care and services. Health staff were trained on various health issues and topics to improve the health services offered. In partnership with the Nepal Innovation Lab and Field Ready, World Vision trialled the production of basic medical equipment using 3D-printed designs, including items such as Pinard horns, umbilical cord clips, tweezers, formable wrist braces and otoscopes.

"I went to the birthing centre for regular check-ups and it was helpful and reassuring to have the nearby birthing centre ready by the time I gave birth."
– Amrita, a new mother from Gorkha where World Vision renovated a birthing centre

‘I am glad I joined the breastfeeding counselling session where I learnt how to properly breastfeed my baby even during an emergency where there is a huge pressure’, says Srijana who gave birth to her first baby Dipika at a village health centre in Sindhuli two months after the earthquake. ‘I’m thankful she’s healthy. She’s a survivor baby.’

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World Vision constructed women, adolescent and young child spaces (WAYCS), which have become useful community venues to conduct meetings, run immunisation programmes for children and host teaching sessions on basic and essential health issues. The community and local health facility management have shown their commitment by providing a health worker to be at the WAYCS at least once a week, increasing access to health services for families in remote locations.

World Vision provided counselling and resources to pregnant and lactating women, including the distribution of baby hygiene kits, clean delivery kits and clean cooking stoves for better maternal and child health.

‘After the earthquake, the health post was operating from a tent and there was only one room. Many times, it was difficult to maintain the patients’ privacy, especially for females. Earlier, it was extremely difficult for the patients who had to wait outside for hours, under the scorching sun, but those days are long gone. Now, a new and better health post has been constructed and the locals are very happy.’ – Sushila, in-charge of Phulpingkot health post, Sindhupalchowk

**HEALTH**

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>16</td>
<td>VDC health posts received medical supplies</td>
</tr>
<tr>
<td></td>
<td>Families: 21,796</td>
</tr>
<tr>
<td></td>
<td>Individuals: 102,336</td>
</tr>
<tr>
<td>31</td>
<td>WAYCS buildings constructed</td>
</tr>
<tr>
<td></td>
<td>Individuals: 16,531</td>
</tr>
<tr>
<td>1,558</td>
<td>community counselling sessions conducted for pregnant women</td>
</tr>
<tr>
<td></td>
<td>Families: 9,625</td>
</tr>
<tr>
<td></td>
<td>Individuals: 48,125</td>
</tr>
<tr>
<td>1,440</td>
<td>clean delivery kits distributed</td>
</tr>
<tr>
<td>1,064</td>
<td>baby hygiene kits distributed</td>
</tr>
<tr>
<td></td>
<td>Children: 1,064</td>
</tr>
<tr>
<td>12</td>
<td>health facilities repaired</td>
</tr>
<tr>
<td></td>
<td>Families: 9,684</td>
</tr>
<tr>
<td></td>
<td>Individuals: 41,776</td>
</tr>
</tbody>
</table>
Livelihoods

The earthquake destroyed productive assets, infrastructure, storage facilities and agriculture tools and affected people’s daily livelihood. Food security was deteriorated in all earthquake-affected areas, particularly in remote mountain areas where close to 70 per cent of households had poor or borderline food consumption.

In the immediate aftermath, access to food was a priority need. World Vision provided food kits and distributed cash to vulnerable families through a cash-for-work initiative. Individuals received cash for clearing debris from collapsed buildings, cleaning up waterways and helping level damaged agricultural land, enabling them to purchase food and other essential items.

World Vision reached more than 114,775 people through livelihood activities. In order to recover the livelihood of earthquake-affected families, World Vision distributed agriculture inputs along with agriculture tools, livestock and structurally safe shelters to farmers.

World Vision provided post-harvest crop processing and vocational training to increase families’ access to money. Savings groups were established and strengthened to ensure that the increased income was saved and families’ resilience increased. The livelihood PDM report showed that 85 per cent perceived the training as useful and 90 per cent were still using the skills gained from training.

The cash-for-work model was used to rehabilitate roads and community assets, increase community resilience to disaster risks and provide work for affected households.

In the rehabilitation phase, World Vision will continue working with vulnerable families to increase their livelihood opportunities. A comprehensive approach will be implemented to reduce the vulnerability of households to other more frequent hazards, such as landslides, floods and droughts.

I am content with the livestock I have received. I always wanted to raise goats to earn enough money to provide for my six children but I had neither capital to buy goats nor appropriate knowledge of animal husbandry. Working on a small piece of land, I had been struggling to make ends meet for her family of nine. Now, I feel relieved as I intend to earn decent income from goat farming.

– Suntali Mijar, 32, from Nuwakot

64-year-old Ramji Bhandari says, ‘The reconstructed canal has helped me significantly increase my production. I have been successfully farming potato, garlic, pumpkin, maize and beans in my fields and I am earning well by selling it in the local market.’
‘I received three goats from World Vision around seven months ago and now they have already multiplied to seven. It was really thoughtful of World Vision to provide livestock support for vulnerable families like mine at such a crucial time. I intend to save some money from commercial livestock farming and build a new house so that my grandchildren will have a proper roof over their heads.’ – Rita, 40, from Nuwakot

LIVELIHOODS

7,840 families supported with agriculture inputs
Individuals: 39,200

913 families restocked with livestock
Individuals: 4,575

970 youth and vulnerable people received vocational trainings

55 irrigation systems rehabilitated
Families: 1,762
Individuals: 8,810

65 roads rehabilitated to be more resilient to disaster risks
Families: 2,130
Individuals: 10,650

9,110 individuals trained on animal husbandry, vegetable/crop farming and post-harvest handling of crops
Cash-based programming

Cash-based programming was a key model for distributing aid during the relief and recovery phases. World Vision used both conditional and unconditional methods of cash-based programming which supported almost all sectors to implement and achieve activity targets. Overall, 182,690 people (36,538 families) benefited from World Vision’s cash-based interventions, including cash-for-work, cash-for-training and a vulnerable family assistance (VFA) project.

VFA, also known as the social protection project, was designed to support those community members through unconditional cash assistance who were most vulnerable and not able to engage in traditional livelihood activities. The VFA project specifically targeted the elderly, people with disabilities, child-headed households, pregnant and lactating women and other vulnerable groups. The VFA project final evaluation report found that 91 per cent of respondents who received VFA support spent the cash assistance on food purchases, 40 per cent on their livelihoods, 39 per cent on medicine and health services, 30 per cent on education, 26 per cent on the rehabilitation of their houses and 13 per cent on agricultural items.

Cash-based programming will remain a model in the rehabilitation phase; however, World Vision will only continue with conditional cash programmes, such as cash-for-work.

“I used the cash assistance for my house reconstruction and for my children’s education. Cash distribution has given us a freedom of choice and community people have been empowered to purchase the items necessary for their self-recovery.”

– Laxmi Lama, mother of four, Samagaun, Gorkha

Tika is only 17, but shoulders the responsibility of a younger brother and herself after her mother left them alone following the death of her father. World Vision provided cash assistance to support vulnerable people like Tika after the 2015 earthquake. ‘I was able to purchase four goats, pay for my and my brother’s education and pay for other urgent needs with the cash. I also saved some for future emergencies. It has made it easier for me to provide for my brother and more optimistic about my future now,’ says Tika.

14 Some of the conditional cash projects have already been mentioned in the relevant sectors above (e.g. cash-for-work as part of livelihood activities and back to school enrolment support in education activities).
Disaster Risk Reduction and Gender Equity and Social Inclusion

The goal of Disaster Risk Reduction (DRR) is to prevent new, and reduce existing, disaster risks through activities which reduce vulnerabilities and increase response and recovery preparedness in order to strengthen resilience. World Vision prioritised the most vulnerable, fostering Gender Equity and Social inclusion (GESI) in community interactions for long-term change.

World Vision worked with communities and local governments in three districts \textsuperscript{15} to ensure that 28 Local Disaster Risk Management Plans (LDRMP) were developed and linked to livelihoods and community development plans. These plans enabled communities to understand what disaster risks were specific to them and strengthen disaster risk governance for management of risk so that they are able to take action.

World Vision developed and measured GESI indicators across all sectors as a means to facilitate and strengthen accountability to the beneficiaries. World Vision also conducted various awareness-raising activities through street dramas, competitions, radio programmes and pamphlet distributions to promote DRR and GESI within the communities, reaching nearly 492,000 people.

In the rehabilitation phase, World Vision will have a DRR specialist position which will allow better technical oversight of DRR activities. Activities during the rehabilitation phase will include training community members on multi-hazard prevention, supporting and joint monitoring government development and implementation of LDRMP and establishing community teams as early responders.

\textsuperscript{15} Dhading, Dolakha and Nuwakot districts

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Advocating for children’s voice and rights

In partnership with the Association of Community Radio Broadcasters (ACORAB), 53 children were trained in community journalism and later engaged as community journalists. As a result of their interactions with other children, community and district line agencies, a radio programme was developed focusing on local-level issues such as lack of water and electricity shortages, as well as social issues such as alcoholism and domestic violence. This programme was broadcast nationwide to 105 community radio stations through the Community Information Network (CIN).

Likewise, an inter-agency collaboration resulted in an advocacy report titled *Children’s Voice, Children’s Rights: One Year after Nepal Earthquake*. Six hundred and eighty children and 36 adults were consulted for this report. The study gave children a platform to raise their voices and drew attention towards the need for child-friendly reconstruction post-earthquake.

World Vision’s NER programme also supported a child congress in Gorkha, Nuwakot and Sindhupalchowk districts which saw the participation of 379 children and ended with a declaration submitted to the Chief District Officer and chair of the District Child Welfare Board. The aim was to include children’s voices in DRR, generate awareness of children’s rights and reform the district child club network in the best interest of children.

‘I am thankful the child congress was held with the support of World Vision in coordination with the District Child Welfare Board and district child club network. The event was fruitful as it provided a platform for children like me to discuss key issues such as child rights, child protection and the role of children in disaster risk reduction. The congress also provided an official platform for those children who took part to elect new leadership.’

– Madhav, 16, Chairperson of the Sindhupalchowk Child Congress
Leveraging innovation in disaster response

The Nepal Innovation Lab was established in December 2015 as a place for new ideas, products, technologies and processes to be developed and tested towards the goal of achieving breakthroughs in disaster response, both in Nepal’s recovery from earthquakes and across the humanitarian sector more broadly. Drawing on the emerging application of innovation processes to achieve social impact, the lab is one of the first of its kind to be established in the field, particularly one so closely linked to the work of a major humanitarian organisation. In convening the right collaborators, providing the tools and resources for research and development in the field and cultivating the conditions for solutions to be adopted at scale, the innovation lab has been able to collaborate with various organisations on a number of initiatives, including a remote construction monitoring system and the digital manufacturing/3D printing of resources.

Humanitarian context mapping tools have been developed reconciling the divergent worlds of landscape, slow-changing by nature, and disaster response, rapid by necessity, providing a direct interface between responders and local context. The lab has been exploring how best to link the work of academic institutions and researchers with the live context of humanitarian response. The lab has also begun a collaboration with the Harvard Graduate School of Design, hosting several students from its Masters of Risk and Resilience programme to explore how engagement with local partners can build innovation, gender equality and resilience in Nepal.

Dane Carlson, researcher and resident of Nepal Innovation Lab, sharing his new method for mapping communities to inform the work of humanitarian responders. His findings, based on his extensive field work at the intersection of culture and environment in Langtang and Gorkha, resulted in a new mapping toolkit which goes beyond the capabilities of geographic information systems or aerial photography.

Medical equipment and machines often break down in rural clinics and hospitals due to the failure of small minor parts and people have to wait for a long time to get it fixed or replaced which ultimately affects their health. Nepal Innovation Lab has been able to design and instantly print those spare parts and provide it to them.’

– Ramchandra Thapa, Engineering Contractor from Field Ready

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Financial outlook

TOTAL BUDGET: US$52.5 million

EXPENSES SUMMARY

- Education: 4%
- Child Protection: 2%
- Food Security & Livelihoods: 33%
- Health & Nutrition: 9%
- Shelter and NFI: 29%
- WASH: 13%
- Nepal Innovation Lab: 10%

BUDGET SUMMARY

- Relief phase: 20%
- Recovery phase: 49%
- Rehab phase: 31%

Note: Includes only the direct project cost.
In two years, World Vision’s NER programme has provided substantial support to meet emergency needs and support the self-recovery and restoration of the basic livelihoods of families affected by the earthquakes in some of the hardest hit areas. However, there is still much to be done to support children and families to fully recover in a resilient manner.

The rehabilitation phase of the NER programme will continue to support communities to build resilience and restore safety for earthquake-affected children and their communities. As a result of a needs assessment and the impact and presence of other International Non-governmental Organisations (INGOs) and agencies, during this phase World Vision will focus on three priority districts: Gorkha, Nuwakot and Sindhupalchowk. Alongside communities and local governments, World Vision will build back communities and household infrastructures to a safer standard, empower people with skills, provide income-generating opportunities and assist with livelihood diversification to help families sustain themselves and be more resilient to future shocks and disasters in their communities.

The programme framework for the rehabilitation phase was designed after a series of community and local government consultations to identify priority areas of need, reviewing national level impact and needs assessments and reviewing secondary data available from the UN, INGOs and other humanitarian organisations. The resultant programme focuses on building resilience through two primary sectors: livelihoods and infrastructure/shelter (the secondary sector of WASH), while mainstreaming DRR, child protection and GESI. Advocacy and accountability on behalf of and by the communities themselves on issues and decisions affecting their lives are a critical foundation to all interventions.
World Vision is a global Christian relief, development and advocacy organisation dedicated to working with children, families and communities to overcome poverty and injustice. World Vision serves all people, regardless of religion, race, ethnicity, or gender.

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