



The Start Strong Project April 2022 - March 2025



**Improving Maternal Health for 1,000 Mothers and Reducing
Malnutrition in Children in Rugin and Bichhya, Bajura, Far West
Nepal**

PHASE Worldwide and PHASE Nepal:

Working together since 2006 **to change lives in Nepal.**

Empowering remote communities through integrated and sustainable programmes in health, nutrition, education and livelihoods.



The Start Strong Project was made possible thanks to our generous supporters and the UK government through their UK Aid Match fund



The Start Strong Project Goal:

To improve the health, nutrition, and agriculture of 1,000 women and their children in Rugin and Bichhya, Bajura District, Far West Nepal.

Aims:

1

Every mother has a healthy pregnancy and every baby born has a strong start in life.

Increase availability of nutritious foods, improving food security & dietary diversity for mothers and their children through agricultural activities.

2

3

Embed maternal and nutritional knowledge and expertise in key community stakeholders



Reducing Malnutrition

1,039 women and their 1,108 children supported by the Start Strong Project



Acute Malnutrition in children under 5 (measured with mid-upper arm circumference: MUAC) reduced from 17% to 2%

Exclusive breastfeeding for the first 6 months increased from 81% to 98%



Improving Maternal and Child Health



**Births attended by
a health
professional at a
Health Post
increased from
57% to 79%**

**Completion of 4
Antenatal Care Visits
increased from 77% to
85%**



**A nutritious 'super flour' porridge is now being
used by 78% of mothers as a weaning food
(up from 50%)**

Empowering Mothers

Knowledge of Golden 1,000 Days (*Sunaula Hazar Din*) has almost doubled to 100% amongst Start Strong mothers



Golden 1,000 Days - Adequate knowledge of Antenatal Care, Child Nutrition, Newborn Care, Family Planning, Immunization, Breastfeeding, Complementary Feeding, Growth Monitoring and Maternal Nutrition for the first 2 years from conception.

Improving Knowledge to Stay in Communities



**100% of Female
Community Health
Volunteers have
adequate knowledge of
Golden 1,000 Days
(up from 93%)**

**84% of Traditional
Healers have
adequate knowledge
of Golden 1,000 Days
(up from 10%)**



**Traditional Healers and Female Community Health
Volunteers are often the first contact in a remote and rural
community for health-related advice and guidance.**

Increasing Knowledge - Empowering Mothers

Knowledge of '**Safer Motherhood**' (*Surakshit Matritva*) has increased from **15%** amongst Start Strong mothers to **90%**



Safer Motherhood - Adequate knowledge of Family Planning, Antenatal Care, Obstetrics, Newborn Care, Postnatal Care, and STD/HIV/AIDS Control

Increasing Food Security through Agriculture

In 2022, only **47%** of mothers could feed their families for at least 6 months from their food production. Now **61% of mothers** can feed their families for at least 6 months from their own food.



Kitchen gardens, mushroom cultivation, poultry rearing and egg production, use of polytunnels and irrigation resources increased year-round yield and food security for mothers and their children

Increasing Dietary Diversity for Women and Children through Improved Agriculture

In 2022, only **25% of Start Strong mothers** and **84% of children** had adequate dietary diversity. Now **46% of mothers** and **91% of children** have adequate daily dietary diversity





1,039 mothers improved their maternal and child healthcare knowledge and practice through attendance at regular Antenatal Care Orientation, Mothers Groups, and Healthy Baby Competitions.

We encouraged mothers to have at least 4 Antenatal visits, increasing attended births and promoted Postnatal Care.

Growth Promotion and Monitoring of Malnutrition:

Additional nutrition support was provided by distributing food packages to mothers with malnourished children. These children were carefully monitored for growth promotion to ensure they were improving satisfactorily.





School Health Education:

Topics included menstrual and reproductive health, reducing period exclusion, risks and dangers of early marriage and pregnancy. We built on the success of these classes by starting a Girls Empowerment Programme in 3 schools in Rugin in April



Regular sessions on Sarbottham Pitho 'super flour' - made by roasting and grinding a mix of grains, pulses, and other ingredients like wheat, rice, and soybeans, stirring the flour into boiling water. This empowers mothers to make it at home to wean infants. This is used to make an easy, tasty porridge, ensuring extra nutrition after their exclusive 6-month breastfeeding.



**Empowering
mothers to give
their baby a strong
start in life:
Malnutrition
support and
counselling for
mothers and young
babies:**
**Mothers from the
Mothers Groups
shared:**
*“regular sessions
on breastfeeding
and
complementary
feeding were very
helpful”*



Food Supplement Distribution for families with malnourished children. Stunting (short height for age) under the age of 3 is irreversible, and causes developmental problems. Moderate or Severe Acute Malnutrition can be fatal if left untreated.

Dietary Diversity Education: Auxiliary Nurse Midwives shared dietary diversity and nutrition learning with Start Strong mothers demonstrating different nutritious food groups.



Teaches Start Strong mothers best practice from conception to 2 years of age, empowering them with increased confidence and skills in maternal, infant and child healthcare and nutrition.



Super Flour Orientation and training with Mothers Groups

The impact of the project on nutrition was assessed using an indicator of reduced overall malnutrition rates for children under five who have at least one form of malnutrition: underweight, stunting, or GAM (Global Acute Malnutrition)





GAM (Global Acute Malnutrition) by measuring Mid-Upper Arm Circumference (MUAC).

Regular monitoring of malnutrition of children under 5 - infants and children provided with nutritious food supplement when Acute Malnutrition identified.

Healthy Baby Competition Winner receiving a hygiene prize.



1,600 children attended over 3 years. It showed mothers what a healthy baby looks like, offered peer support, positive strategies such as exclusive breastfeeding, regular feeding with Sarbottham Pitho 'super flour', vegetables as well as dal and rice.



Measuring Height for Age: (stunting) check:

National rate of child stunting in Nepal is 25%, our surveys show it is more than **50% in rural areas like Rugin and Bichhya** due to food insecurity.

Regular growth monitoring of infants and children under 5 and distribution of nutritious food supplements if any child is identified as malnourished, supports urgent recovery for healthy growth and development in food-insecure areas.

Additionally to the project, PHASE have provided ultrasound training to Auxiliary Nurse Midwives and supplied ultrasound machines in all our Health Posts to improve the experience of antenatal healthcare, encouraging more antenatal care visits.





Attended Births at Health Posts for safer deliveries:

"After we visited the health facility for antenatal care and delivery, it made a huge difference in both our health and the baby's."

**Promoting Maternal and Child Healthcare at all stages:
Encouraging mothers to have essential Antenatal Care,
Attended Births and Postnatal health checks, reducing the risks
of maternal and neonatal mortality in remote and rural areas
such as Rugin and Bichhya.**





During the Start Strong Project:

there were 272 Attended Births at Rugin and Bichhya Health Posts.

In our final year of the Start Strong Project, 79% of births were at a Health Post with skilled health staff (ANMs)

This exceeds the latest Nepal Department of Health survey data for 2023-2024 of 77.92% (DOHS 2025)

This is a great outcome for such a remote and rural area in Bajura, Far West Nepal



Health Outreach: PHASE ANMS spent 50% of their time in the community, visiting remote villages (many several hours walk away up, down / across mountainous terrain) to ensure regular healthcare and health education reached everyone that needed it, even if they lived far away from a Health Post.

Monthly Antenatal Care Meetings: mothers and caregivers met monthly to learn essential information about the pregnancy and birth journey together.





“Children should be fed four times daily with a variety of foods, including body-building foods, immunity-boosting foods, and energy-providing foods” (Mothers Group)

Child Protection and Disability Rights Orientation -

We delivered training with communities on the rights of children and vulnerable people.





Improved Seed Selection:

tomato,
pumpkin,
brinjal,
cucumber,
onion, radish,
mustard plant,
lettuce,
courgette,
cauliflower,
cabbage,
various herbs,
spices and
many more!



Vegetable Seed Distribution:

“Everything was new to us - cabbage, cauliflower cultivation and especially polytunnel were new for us”



Agricultural Resources: we provided plastic polytunnel sheets and watering cans, both essential for growing food all year round to increase yield - improving food security and diversity.

Seed Sowing Training: Agricultural Technicians taught mothers in Female Farmer Groups how to cultivate seasonal and off-season vegetables from seed.



“Everyone now has a kitchen garden at their house”

“If you know how to grow vegetables, you can achieve 3-4 x yield than crop farming with the same amount of time and effort.”





“PHASE has introduced the concept of kitchen gardens, **allowing us to grow our own vegetables year-round....** eliminating the need to travel long distances to purchase them.”



“In agriculture, PHASE provided seeds, training on agricultural practices and raised awareness about consuming vegetables and fruits.”

Farmers Group Meeting:

“They have taught us about creating kitchen gardens, nursery management, crop production, compost fertilizer, polytunnel farming and making domestic pesticides - covering everything about these practices”





We provided over **750 mothers** with a mix of polytunnels, seeds, watering cans, secateurs, sprinkler pipes and spray cans. We held over **70 group training events** on seed plantation, nursery bed management , vegetable farming, polytunnel management and home-made pesticide. **229 mothers cultivated oyster mushrooms.**



**Poultry
farming and eggs:
for improved
nutrition, dietary
diversity and extra
income.**

**Distributed 4,310
chicks (15 chicks
each) with chicken
coops to 280
mothers.**



**(We also replaced
10 chicks each lost
to 11 female farmers
after a severe
landslide.)**



Improving Dietary Diversity in Women from 25%:

We empowered Start Strong mothers to improve their food production and variety in their daily diet.

(scoring 5 or more out of 9 food groups) -

Starchy staples; Dark green leafy vegetables; Vitamin A rich fruits and vegetables; Other fruits and vegetables; Organ meat; Meat and fish; Eggs; Legumes, nuts and seeds; and Milk and milk products

to 46% by the end of the project, almost double than at the start.



Improving Dietary Diversity in Children: from 84%

**(scoring 4 and more out
of 8 food groups) -**

**Consuming Grains, roots or
tubers; Vitamin A rich fruits
and vegetables; Other fruits
and vegetables; Meat,
poultry, fish and seafood;
Eggs; Legumes, nuts and
seeds; Milk and milk
products; and Oil and fat.**

**To 91% at the end of the
project**



"We go door to door to talk about maternal and child health, nutrition, and hygiene." (Female Community Health Volunteer, Rugin)

FCHVs were trained in Golden 1,000 Days (Antenatal Care, Child Nutrition, Newborn Care, Family Planning, Immunization, Breastfeeding, Complementary Feeding, Growth Monitoring and Maternal Nutrition)



Female Community Health Volunteers: Bichhya

“I had the opportunity to participate in training sessions focused on Maternal, Newborn, and Child Health (MNH) and nutritional food programs.”

“These trainings are very effective. In a remote place like Bichhya, providing training to FCHVs has helped raise awareness within the community.”

Street Dramas ensure public and social health messaging to the wider community. It is accessible to those who can't read or write and always draws an enthusiastic crowd!

Over 500 people attended in Rugin and Bichhya over the 3 years.







Traditional Healer Orientation on nutrition to reduce malnutrition and increase Health Post referrals: "I advise women to go for regular checkups at the health post." Bichhya Traditional Healer

"While I can help with minor issues like stomach pain and headaches, I am not equipped to treat serious illnesses, delivery, and malnourishment." Bichhya Traditional Healer





"I was the active participant of the training regarding agriculture and health of PHASE Nepal."

"If the child is sick and malnourished, they are taken to the health post or hospital for further treatment."

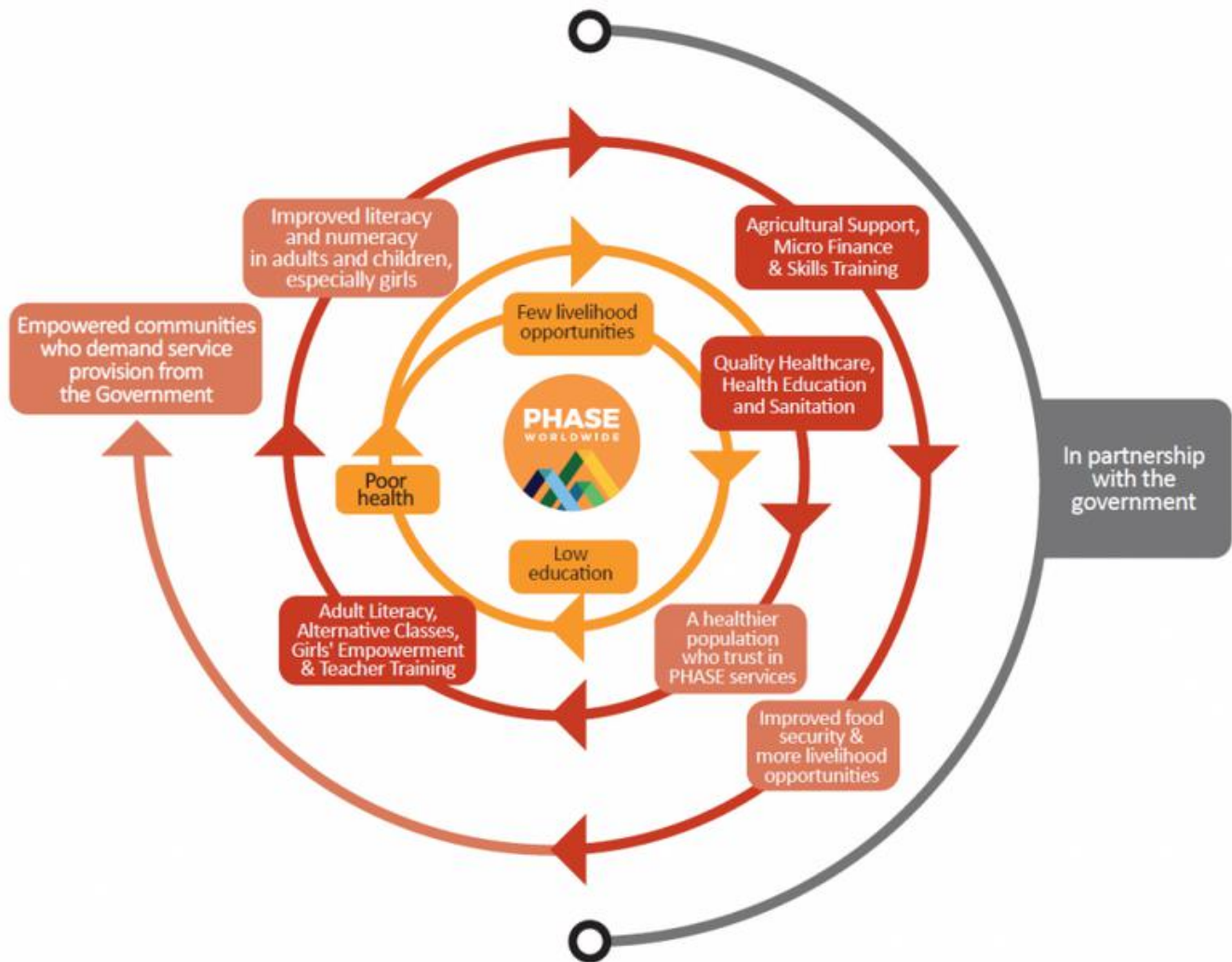
Traditional Healers in Rugin and Bichhya

Collaborating and training with Key Stakeholders:
Female Community Health Volunteers; Traditional Healers;
Health Committees and the local Ward Gaupalika - to embed
maternal and child healthcare, nutrition knowledge and
improved understanding of malnutrition in the community -
empowering local knowledge for long term change.



Challenges and Adaptations

- **Agricultural progress depends on sufficient individual land owned**
- **We increased poultry support after listening to mothers, saved seeds**
- **Challenges of distance for pregnant mothers to travel alone to give birth at Health Post birthing centres due to remote, rural locations**
- **We increased participation of husbands and mothers-in-law by encouraging them to come to Antenatal Care sessions and births**
- **Child stunting still a concern beyond the life of this project**
- **Agreed partnership to work with the local municipality and Ward Office to continue to focus on reducing this long-term indicator over time**
- **Severe earthquakes, several landslides, floods and a fire damaged and destroyed Health Posts, homes, land and livelihoods**
- **Advocated for Health Post and Birth Centre rebuilding in Bichhya and Rugin, replaced lost agricultural livelihoods (chickens), rebuilt homes**



PHASE Worldwide and PHASE Nepal Theory of Change

What Next?

'Stay Strong'

- We will continue to work with PHASE Nepal in Rugin and Bichhya communities to build capacity and strengthen the healthcare system in such rural and remote areas
- We will continue to work alongside our Government partners to 'phase out' within the next 3 years
- We have started Girls Empowerment Programmes in 3 Rugin Schools, with the ambition of starting 3 more in Bichhya



Thank you for changing lives in Nepal

Sincere thanks to all Trust and Foundation Partners

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Find out more and support our work
www.phaseworldwide.org



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