

A Study on the FCHV Endowment Fund

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Foreword



Majority of the health problems prevailing in the country particularly in the rural community are related to the status of women and children. Recognizing the importance of people's participation especially women's participation in promoting health of the people, the Government of Nepal initiated Female Community Health Volunteer (FCHV) Program in FY 2045/46 (1988/89). At present, there are more than 48,000 FCHVs working actively for the health promotion of the people all over the country.

The role of the FCHVs is focused mainly on educating local mothers' and community members for the promotion of safe motherhood, child health, family planning, and other community-based health services. Right from its inception, FCHVs have been contributing to public health programs at the community level. The FCHV Endowment Fund (EF) has been initiated in 2058 BS with the objective of providing support by motivating them to work effectively as volunteer to contribute in health promotional activities at community level.

The overall objective of this study was to find out contribution of the EF to the FCHV program; its functioning, management and use of the fund in motivating FCHVs. This study was funded by the Nepal Family Health Program. I hope the findings of the study will serve as valuable guidelines in revising the policy as well as in formulating the program to achieve its intended objectives.

I highly appreciate the Nepal Family Health Program for providing financial support and technical inputs for the study. I would also like to thank Valley Research Group for completing the study successfully. Last but not the least, I am also appreciate the inputs of the members of the Technical Advisory Committee for making the study meaningful and conclusive.

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Abbreviations

ARI	Acute Respiratory Infection
BCC	Behavior Change Communication
CARE	CARE Nepal
DACA/W	Decentralized Action for Children and Women
DDC	District Development Committee
DHO	District Health Office
DoHS	Department of Health Services
EF	Endowment Fund
EFEC	Endowment Fund Executive Committee
FCHV	Female Community Health Volunteer
FGD	Focus Group Discussion
FHD	Family Health Division
FY	Fiscal Year
GTZ	German Technical Cooperation
HFOMC	Health Facility Operation and Management Committee
HIV/AIDS	Human Immunodeficiency Virus/ Acquired Immune Deficiency Syndrome
HP	Health Post
INGO	International Non-Governmental Organization
MG	Mothers' Group
MOHP	Ministry of Health and Population
NFHP	Nepal Family Health Program
NGO	Non-Governmental Organization
NTAG	Nepali Technical Assistance Group
PHCC	Primary Health Care Center
PHO	Public Health Office
SHP	Subhealth Post
UNICEF	United Nations Children Fund
USAID	United States Agency for International Development
VaRG	Valley Research Group
VDC	Village Development Committee

Chapter 1

Introduction

1.1 Background

Majority of the health problems prevailing in the country particularly in the rural community are related to the health of women and children. Recognizing the importance of people's participation especially women's participation in promoting health of the people, Government of Nepal initiated Female Community Health Volunteer (FCHV) Program in FY 2045/46 (1988/89). The FCHV program initiated first in 19 districts of the Central and eight districts from the Mid-western Region, by now it is being implemented in all 75 districts of the country. Focus of the FCHV program is to enhance, update and maintain FCHV's skills and knowledge to support other national level programs such as family planning, maternal/neonatal and child health, including the semi-annual Vitamin A supplementation program. At present, there are more than 48,000 FCHVs working actively all over the country. At the beginning, the FCHVs were imparted a 24-day pre-service training adhering the modular basic training approach. At present, the basic training is being conducted in 9+9 days module with at least 2 months gap.

The role of the FCHVs is focused mainly on education of local mothers' and community members for the promotion of safe motherhood, child health, family planning, and other community-based health services. Right from the inception of the program, the FCHVs have been playing a leading role particularly in reducing child and maternal mortality and have also been contributing to other public health programs.

The FCHVs do not receive any remuneration from the government for their efforts, while the government realizing their potential has been providing various training to the FCHVs to mobilize them in as much health related activities as possible. Thus, to ensure continuity of health programs at the community level, it is crucial to maintain the commendable working spirit that the FCHVs have shown in health programs.

Regular training and meeting such as FCHV Refresher Review Meetings, Mothers' Group Meetings, etc. are aspects that ensure continuity of FCHVs contribution in health related programs. However, lack of budget has been an obstacle for its continuity. Similarly, continuity of support from donor organizations is also one of the major constraints.

It is against this backdrop, the concept of establishing *FCHV Endowment Fund* (EF) has been proposed to motivate the FCHVs and ensure continuity of motivation of FCHV in the implementation of community based health related programs. The FCHV EF program is being supported by the Ministry of Local Development by encouraging DDCs, VDCs and municipalities to provide fund from their sources and other supports required in its implementation. In this course, FCHVs are getting supports in terms of cash and kinds from various local governance and agencies.

FCHV Endowment Fund is an authorized capital, established at the VDC, municipality and district levels for the benefit and welfare of FCHVs but the principal amount cannot be used. Additional amount can be added to the authorized capital but its amount cannot be drawn out.

The interest earnings from the fund deposited in the banks are aimed to be used for the activities that help further enhance their performances.

The main objective of this fund is to mobilize local resources for the benefit and welfare of FCHVs. The FCHV program section under DoHS/MOHP has been initiating the EF program in coordination with respective D/PHO. NFHP partner NTAG has been providing technical assistance to D/PHO in the process of establishment of the fund.

Establishment of the FCHV EF up to the VDC level has been initiated and expansion is in progress. The NTAG report indicates up to June 2006, 710 VDC level, 18 municipality and 21 district level endowment funds have been established making 50 districts in total. At present the program has covered 3 mountain, 29 hills and 18 terai districts. Of which, 10 are located in eastern region, 16 in central, 10 in western, 10 in mid-west and 4 in far-western regions. Of the 50 districts with endowment funds, seven districts, namely, Morang, Jhapa, Sunsari, Ramechhap, Makawanpur, Bhaktapur and Parbat have covered all VDCs and municipalities.

In order to understand its proper functioning, management and use of the fund, the Family Health Division (FHD) and Nepal Family Health Program (NFHP) entrusted VaRG to conduct this study.

1.2 Objectives of the study

The overall objective of the study was to find out contribution of the Endowment Fund to the FCHV program.

The specific objectives of the study were to:

- a) understand the status of FCHV Endowment Fund created, how the fund is being managed and expanded;
- b) find out utilization of endowment fund and its contribution to FCHV program;
- c) explore FCHVs' involvement in mobilization of the fund and their control over resources;
- d) obtain information about FCHVs' awareness and perception towards the endowment fund including awareness and perception of concerned stakeholders (e.g. HFOMC members, D/PHO, and FCHV focal person, district level endowment fund committee members and implementing organizations etc.) and their suggestions for making the fund more effective;
- e) find out other types of incentives/supports being received by FCHVs and their perceptions on such supports; and
- f) provide recommendations that contribute to review and revision of FCHV Endowment Fund Guideline.

1.3 Methodology

Several techniques such as focus group discussions, in-depth interviews, and case studies were utilized for information collection and analysis. The study was conducted in 6 districts -- 3 from the hills and another 3 from terai -- covering all five-development regions of the country where FCHV Endowment Fund Program is being implemented. The study was conducted in close coordination with the FHD of the Department of Health Services, NFHP and NTAG.

a) Sampling

Selection of districts

Among districts implementing FCHV EF program, 6 districts, namely, Dhankuta, Bhaktapur and Kaski from hills and Sunsari, Bardiya and Kanchanpur from Terai regions were purposively selected. The following aspects were taken into consideration while selecting the districts:

- Year of establishment
- Amount of fund
- Status of endowment fund in the district based on the coverage at different level
- Development and ecological region

Selection of VDCs

Four VDCs were selected from each of the sampled district based on the above criteria. The purpose of adopting aforementioned criteria for selection of VDCs was aimed to include both the old and newly established EF, the level of performance of EF program and also to find out factors like the location of VDCs in terms of distance from the district headquarters that affect functioning of the fund within the district. Information regarding the program VDCs including their year of establishment, and amount of fund and its' utilization were obtained from the respective district health offices.

All the program VDCs of each sampled district were categorized into two in terms of distance from the district headquarters i.e. one among those VDCs locating within the radius of five hours' walking distance from the district headquarters and the other beyond five hours distance. A list of the VDCs was prepared according to their year of establishment, amount of fund and its' utilization. Then two VDCs from each category were selected in such a way that one would be selected from among those VDCs where the EF was established before the FY 2059/60 and the other one then after. Attempts were also made to select the VDCs according to their performance in terms of availability and utilization of fund.

Selection of respondents and information collection

Information required for the purpose of the study was collected from different stakeholders at the center, district and at the VDC levels. During this exercise, Chief of the FCHV Section, FHD and other relevant stakeholders at the central, DDC, D/PHO, members of the FCHV endowment fund executive committee (EFEC) and FCHV Focal Person at the district, and FCHVs, health facility operation and management committee (HFOMC) members, members of the VDC level FCHV EFEC and mothers' group members at the VDC level were solicited for the information required for the study. In addition, review of the records and ledgers related to EF was conducted at each of the sampled VDCs and municipalities. The number and type of respondents selected by district is presented in Table 1.1.

Altogether 307 in-depth interviews (IDI) – 21 at the district level and 286 at VDC/municipality level-- were conducted to obtain necessary information. Similarly, 24 focus group discussions (FGD) from the sampled VDCs (4 from each district) were organized among the FCHVs of the sampled VDCs. In addition, case studies on the success and failures cases of the Endowment Fund Schemes were collected in order to find out the factors behind the success and failure.

Table 1.1 Number of respondents by type and district

Respondent type	Dhan-kuta	Bhakta-pur	Kas-ki	Sun-sari	Bardi-ya	Kanc-hanpur	Total
In-depth interviews							
Concerned officials from DHO	1	1	1	1	1	1	6
FCHV focal person at DHO	1	-	1	1	1	1	5
District level EFEC members	-	-	-	2	-	-	2
DDC officials	1	1	1	2	2	1	8
VDC level EFEC members	8	12	12	20	3	8	63
VDC level HFOMC members	7	7	8	8	8	8	46
FCHVs	12	15	15	15	12	12	81
Mothers' group members	16	16	16	16	16	16	96
FGDs with FCHVs	4	4	4	4	4	4	24
Review of document of each EFEC	4	4	5	6	4	4	27
Total	54	60	63	75	51	55	358

b) Survey instruments and type of information collected

Focus group discussion, in-depth interview and case study were the main methods or techniques of gathering the information required in achieving the objective of the study. Different sets of questionnaires, guidelines and checklists were developed for data collection. Upon receiving comments and suggestions from the *Technical Advisory Committee* formed by FHD, Department of Health Services for the purpose of the study, survey instruments were finalized in English. The final version of the instruments were translated in Nepali, pre-tested among different categories of the respondents in Chitwan and Makawanpur districts and necessary modifications were made based on the pre-test results.

1.4 Field organization and data collection

Four teams consisting of one facilitator and one note taker in each team were mobilized for information/data collection. Each team covered 1-2 districts. The fieldwork was carried out during April and May 2006. The field staff were provided six-day training in Kathmandu prior to mobilizing them to the field for data collection. The FCHV EF Program, information collection techniques, types of instruments to be used for data collection and field management techniques were the content of the training. Concerned officials from FHD and NFHP also provided inputs during field staff training. The senior team members visited some of the study areas to supervise the fieldwork.

1.5 Information processing and analysis

Information collected through FGDs and IDIs was transcribed, and manually processed and analyzed. Similarly, records related to EF maintained by EFEC were also processed manually. The research assistant and other support staff under the guidance of senior team members transcribed the information collected through the FGDs. The senior team members reviewed and collated information to generate factual qualitative information and meaningful conclusions.

Chapter 2

Characteristics of Study Population

Focus group discussions (FGDs) with FCHVs and in-depth interviews (IDIs) with the concerned district level officials (District Health Officers, FCHV focal persons, District Level EFEC members, staff from DDC and VDC level EFEC and HFOMC members and FCHVs) were conducted to solicit information regarding different aspects of FCHV EF. This chapter presents the selected background characteristics of the population included in the study.

2.1 Characteristics of In-depth Interview Participants

A total of 307 persons from district (n=21) and VDC (n=286) level were interviewed from six study districts.

a) District level respondents

A total of 21 district level officials including 6 DHO/DPHO, five FCHV focal persons, two members of district level FCHV EFEC and 8 officials from DDC from the six study districts were interviewed. Of the 21 respondents, 17 were males and 4 females.

a) Community level respondents

EFEC and HFOMC Members

Sixty-three members of the EFEC and 46 of HFOMC were interviewed from six districts. Over half of the EFEC members were involved in the committee for 1-2 years followed by 29% for 3-4 years and about 18% for 5 or more years. In case of HFOMC members, about 46% reported of their involvement in the committee for 1-2 years. About one-third of the respondents mentioned 3-4 years and another 22% for 5 years or more (Table 2.1).

Table 2.1 Distribution of EFEC and HFOMC members by duration of involvement in their respective committees

Years of involvement	EFEC members	HFOMC members
1-2	54.0	45.7
3-4	28.6	32.6
5+	17.5	21.7
Total	63	46

Female community health volunteers

Altogether 81 FCHVs were selected for IDIs. Of which 15 each were from Bhaktapur, Kaski and Sunsari and another 12 each from Dhankuta, Bardiya and Kanchanpur districts.

Mothers' Group Members

Over two-fifths (41.7%) of the 96 mothers' group members were 25-34 years old and another 42% between 35-54 years of age. About one in every 10 respondents were less than 25 years of

age and another 6% were 55 years or above. The mean age of the respondents was 36.1 years. Almost all the respondents were currently married, and over three-quarters reported that they could read and write.

2.2 Characteristics of the FGD Participants

Twenty-four FGDs - 4 from each district- with the FCHVs of the sampled VDCs was conducted. A total of 168 FCHVs with the average of 7 persons per group participated in the FGD.

Of the total of 168 participants, about half was Brahmin and Chhetri followed by 14% Tharu, 7% Gurung and the rest 32% were Rai, Newar, Limbu and the ethnic groups of Terai origin. About two-fifths were between 35-44 years old and another one-third between 25-34 years. Only a few (3.6%) were below 25 years of age. A considerable number of FCHVs (8.3%) were 55 years or above. About 9 in every 10 reported to be literate. Three in every 10 FCHVs were just literate or had attained non-formal education and another 60% had primary level of schooling (Table 2.2).

Table 2.2 Distribution of FCHVs by ethnicity, age group and literacy status

Description	%	No.
Ethnicity		
Chhetri	26.8	45
Brahmin	20.2	34
Tharu/Chaudhari	14.3	24
Gurung	7.1	12
Rai/Limbu	7.1	12
Magar	4.8	8
Newar	4.8	8
Tamang/Lama	4.2	7
Bishwakarma/Pariyar/Kami/Darji	3.0	5
Other (Gwala, Haluwai, Kayastha, Mehata, Urawa, Giri)	7.7	13
Age group		
<25	3.6	6
25-34	33.9	57
35-44	38.1	64
45-54	16.1	27
55+	8.3	14
Literacy status		
Illiterate	11.3	19
Just literate/non-formal education	29.2	49
Attended school	59.5	100
Total	100.0	168

The tenure of services as FCHV ranged from 2 to 18 years. About 39% reported working as FCHVs for 5-9 years and another 36% for 10-14 years. About one in every 10 FCHVs also reported working as FCHVs for more than 15 years.

Of the total 168 FCHVs included in the FGDs, 20% were the members of the EFEC. The FGD participants were affiliated with the local level organizations related to women and children, agriculture, savings and credit, and other types of groups. Nearly half of them were affiliated with women groups. More than one in every 10 were also associated with savings and credit groups, and health, water and education related groups.

Chapter 3

Functioning, Management and Utilization of Endowment Fund

One of the objectives of the present study was to examine the functioning, management and utilization of FCHV EF at the community level. In order to assess the above aspects of the EF, a series of questions were put forward to different categories of the respondents from district to community level. This chapter presents findings on the above aspects.

3.1 Awareness about objectives of EF

The FGD results show that except a few participants, others particularly from Bhaktapur, Bardiya and Kanchanpur were aware about the objectives of EF, and considered that the EF is for their benefit. The most frequently cited objectives of the EF, as mentioned by them were:

- To meet emergency needs (sickness, pregnancy, other household needs) of FCHVs
- To provide allowance/ snacks in the meeting
- To provide support to poor FCHVs/meet emergency needs of community members
- To support income generating activities/ to meet children's education expenses
- To purchase medicines for the community/ to continue health program service

Most of respondents of all categories except the MG members were found to be aware of EFEC and its year of establishment. In order to assess the knowledge about FCHV EF, all the respondents at the district and community level were asked about the objectives of the FCHV EF and also about their roles and responsibilities in it. Almost all the respondents of different categories were found to be aware of at least one objectives of the EF. Most of the respondents of all categories mentioned that EF was established to meet basic needs such as purchasing medicines, necessary items, etc. for FCHVs and also to encourage them to work effectively. Some of the members of EFEC and HFOMC also stated that interest received from EF could also be used by FCHVs for expenses such as tea and snacks during the meeting. According to some of the respondents, fund like EF could be useful to ensure sustainability of the FCHV program. In this context, one of the FCHV focal person from Kaski felt that *endowment fund will create an environment where in FCHVs are encouraged and motivated in future to work.*

Information obtained from mothers' group members indicate that only about one-third of the mothers' group members reported to have heard about FCHV EF. Among those who had heard about its existence reported that it is for the welfare of the FCHVs and also could be used by FCHVs for medicines in order to support the poor people of their community. The respondents also suggested the need for informing mothers' group members about the endowment fund. However, FCHVs were not in favor of informing mothers' group members about the EF.

I do not think mothers' group members should be informed about endowment fund because they will take it negatively. They will complain that we tell them many things to do because we get money. They might also say we get money but they do not know many things.

- FGD participants, Basantatar VDC, Dhankuta

A program to convince the villagers that we do not get salary for our work is a need. At present, they are under the impression that we are getting salary.

- FGD participants, Pakhribas VDC, Dhankuta

The survey results indicate that all of the respondents except 2 EFEC and 5 HFOMC members were not aware of their responsibilities in FCHV EF. Of those who were aware of their responsibilities, most of them expressed that they are responsible for ensuring proper utilization and maintaining transparency of the use of the fund followed by for making efforts in increasing the size of the fund. Over three-quarters of the EFEC members and over half of the HFOMC members also mentioned that their roles and responsibilities were to organize and participate in the meeting. District level officials such as DHO, FCHV focal persons and the members of district level EFEC mentioned that they are responsible mainly for monitoring of funds and providing supports to the community level endowment fund (Table 3.1):

Table 3.1 Percent distribution of respondents by their roles and responsibilities in EF

Responsibilities	EFEC (n=63)	HFOM C (n=46)	DHO (n=6)	FCHV focal person (n=5)	District level EFEC (n=2)
Organize and participate in the EFEC meeting	85.7	54.3	-	-	-
Ensure proper utilization of fund and maintain transparency of the use of fund	34.9	45.7	16.7	20.0	-
Make efforts to increase the size of the fund mobilizing contribution from various sources	33.3	47.8	33.3	-	-
Monitoring of funds	6.3	8.7	50.0	40.0	50.0
Maintaining account properly	3.2	-	-	-	-
Operate/manage the accounts as stipulated in the EF guidelines	1.6	4.3	16.7	-	-
Provide support to EFEC	-	-	33.3	20.0	50.0
Assist in opening account	-	-	-	60.0	-
Provide training to FCHV	-	-	-	20.0	-

3.2 Process followed in the establishment of EF, Utilization of fund and Identification of FCHVs' needs

a) Process followed in establishment of the EF

i) Size of the Endowment Fund

Twenty-two, out of 24 VDCs selected from six study districts, had established EF while in Kanchanpur two VDCs namely Beldandi and Krishnapur were yet to establish it¹. Among 22 EFECs, 9 were established between 2057-2059 BS and the rest between 2060-2062 BS. The total amount of seed capital at the time of establishment ranged from Rs 3,775 in Ghandruk VDC of Kaski to Rs 60,000 in Mainapokhara and Kalika VDCs of Bardiya. On an average, each EF had an average capital amount of Rs 23,110 at the time of establishment. More than half of the VDCs had amount more than Rs 20,000 at the time of establishment. By the time of the study period the average amount had increased to Rs 35,700 with the highest of Rs 105,000 in Machhapuchhre VDC of Kaski and the lowest of Rs 4,000 in Belwa of Bardiya. Of the three municipalities under

¹ As per the district level information provided by FCHV Coordination Committee money for EF has been allocated for these VDCs, however, it was reported that FCHVs of the respective VDCs did not take interest to form the committee due to small amount.

study, Pokhara and Inaruwa municipalities had Rs 1000 and Rs 25,000 respectively at the time of establishment of EF the corresponding figures by the time of study reached to Rs 161 thousand and Rs 47 thousand. No data was available in case of Bhaktapur Municipality (See Annex 1). Most of the EF were established with the financial support from their respective VDCs and health post/subhealth post. However, in Bardiya, two EFs were established with the support of a local NGO named *Tharu Mahila Utthan Kendra*. There are two typical EFs in Kaski district (Machhapuchhre and Ghandruk), which were established with the initiation and contribution of mothers' groups, local clubs, users' groups and individuals.

ii) Process followed in establishment to EF

In most of the cases, EF was established upon mutual consultations among persons of different walks of life of their communities such as VDC officials, FCHVs and the health post or subhealth post in-charges. In addition, organizations were also found to have taken the lead in establishing EF. It was reported that NTAG had assisted to establish the EF and EFEC in most of the cases. In case of Bardiya, Tharu Mahila Utthan Kendra was actively involved in the establishment of EF. The HFOMC members of Kanchanpur reported that EFEC was formed through the facilitation of CARE Nepal and NGOs. In Ghandruk VDC of Kaski, FCHVs took initiation to establish EF when they knew about it while attending a workshop organized by S/HP. The FGD and IDI results reveal that a few of the FCHVs particularly those from Bhaktapur, Bardiya and Kanchanpur districts were not aware of the process followed in establishing the EFEC in their respective areas.

The FGD results indicate that in most of the areas, similar to EF, EFEC was also formed in consensus in meetings participated by the FCHVs, VDC officials, health facility staff and other community leaders. In some cases, even voting was carried out for membership in the committee.

FCHVs knew about the existence of EF in other VDCs of the district when they were attending workshop in Pokhara. Then they encouraged their fellow FCHVs and other community people to establish endowment fund in our areas also.

- EFEC member, Ghandruk VDC, Kaski

VDC chairperson took initiative in establishing the endowment fund. VDC chairperson, AHW, and we all FCHVs gathered in the health facility complex to form the committee. Most FCHVs showed their willingness to be involved in the committee. Finally, we decided voting to select the committee members.

- FGD participants, Duhabi VDC, Sunsari

As stipulated in the EF Guidelines, there should be seven persons consisting of VDC/Municipality Chairperson, women representative, three FCHVs, one representative from intellectuals and PHC/HP or SHP Incharge in EFEC. The composition of office bearers of EFEC was not according to the EF Guidelines in two VDCs namely Machhapuchhre and Ghandruk of Kaski district where social workers were selected as chairperson and MCHW as member-secretary. On an average, there were five members in each of the EFEC. Only in the 8 committees, required number of executive members (7 members) were found. Similarly, on average there were 2 FCHVs in each committee. In 11 VDCs there were 3 or more FCHVs representative while in the rest of the VDCs it was less (See Annex 1). The above findings clearly indicate the need for fulfilling the required number of members in each of the EFEC.

With respect to the criteria followed in selecting FCHVs in the EFEC, majority of the FCHVs who were aware of the composition of EF reported that only those willing to work, literate or able to give time for services were the main criteria followed in the selection process (Table 3.2). The other criteria adopted were: proximity to health facility, geographical coverage, and honesty, which resemble the consideration of practical aspects by FCHVs in selecting their representatives for the committee although these are not mentioned in the protocol. The practice of consulting all FCHVs in selecting their representatives for the EFEC was found to be prevalent as over two-thirds of the FCHVs included in the IDIs affirmed that they were consulted while selecting their representatives for EFEC. The large majority (>75%) of the FCHVs were satisfied with the present process of representation of FCHVs in the EFEC. About one-fifth of them were not aware about the process.

Table 3.2 Percent distribution of FCHVs mentioning the criteria followed in representing FCHVs in EFEC

Criteria	%
Level of understanding/ interest to serve	80.9
Educational level	55.3
Able to give time	31.9
Contribution made to community	17.0
FCHV in close proximity to health facility	14.9
Based on seniority	12.8
Geographical coverage/based on population size	12.8
Trust worthy	6.4
Honesty and respected by community	2.1
Do not know	6.4
Total (n)	47

b) Utilization of fund

Based on the service data of EFEC, except two VDCs in Kaski i.e. Machhpuchhre and Ghandruk, none of the committees reported to have used EF money for FCHVs. In Machhapuchhre, about 17 thousand rupees was spent to buy dresses for FCHVs and also to give award to the FCHVs with good performance in their areas. Likewise, in Ghandruk, 8 thousand rupees was reported to have been spent to buy sweater for the FCHVs during 2061 B.S. Use of fund for tea and snacks during the FCHV meeting was also found in these two VDCs. This finding is also supported by the responses obtained from other categories of the respondents. In this respect, the EFEC members of Ghandruk said, *“In consultation with FCHVs of the VDC we drew interest amount (Rs 8,000) from bank and bought 20 sweaters to give to each FCHVs. We have also decided to withdraw money from bank to buy shawls for each of the FCHVs of our VDC”*.

All the members of EFEC and HFOMC and the FCHVs were further asked about the reasons for not spending money from their endowment fund including their suggestions for proper and effective utilization of such funds in their community.

With regard to the non-use of money from the EF most of the EFEC and HFOMC and the FCHVs mentioned that being a small amount of seed money, the interest amount they received from the fixed deposit was insufficient even to buy small items for FCHVs. Other reasons were:

lack of interest from both the FCHVs and EFEC, lack of knowledge about EF itself among FCHVs, negligence from VDC secretary, irregular meetings, and no clear cut direction from the health facility and the district health office. The case of Changunarayan VDC in Bhaktapur district further reinforces the need for the active participation of the committee members in making EF effective (Refer to Case Study # 1) Similarly, the FGD participants also mentioned that the amount from interest earning is so small that it does not help to buy things required by the FCHVs. Therefore, no further action has been taken to open the bank account. The participants of Sunsari also reported that the seed money has been deposited in fixed account for five years keeping in view that the interest amount was not enough to meet even minor need of the FCHVs.

The EF is something like a distant (Aakash Ko Phal Aankha Tari Mar). So far we have got nothing out of it.

- FGD participants, Duhabi VDC, Sunsari

Case Study # 1: Changunarayan VDC, Bhaktapur

Formation of EF committee was initiated in a joint meeting of VDC secretary, PHC in-charge and the FCHVs of the VDC in Changunarayan VDC of Bhaktapur District. The EFEC was formed in Mangsir 2060 composed of VDC secretary as chairperson, PHC in-charge as member secretary, 3 representatives of FCHVs and the chairperson of a local youth club. A total amount of Rs. 35,000 including Rs. 20,000 from VDC, Rs. 10,000 from PHCC and Rs. 5,000 from DHO was collected for the EF. Of the total fund, Rs. 30,000 was deposited in fixed account and Rs. 5,000 in saving account in Nepal Bank Ltd. Bhaktapur as per the decision of the EF committee. The fixed account is operated by the chairperson, member secretary and a FCHV representative and the saving account by the chairperson and member secretary.

After opening the account no one took initiative to transfer the interest earned from the fixed account to the saving account and also in renewing the fixed account, which is a reflection of negligence of the committee. Due to not renewing the fixed account in 2061 B.S. as per the bank's rules, no interest amount was added to the saving account during the year 2062. An amount of Rs. 1,200 only was the interest earning accrued from the fixed account in the year 2061 B.S. The interest amount has not been used being it insufficient to meet even the minor requirements of FCHVs. There has been no EFEC meeting held after its establishment so far.

The FCHVs are of strong opinion that the amount in EF should be utilized to revolve among themselves as a loan in order to meet their various needs including the fund for undertaking income generating activities. They are of the view that if this is realized, the interest earning will be much more than from keeping the fund in the bank with low interest rate.

The service record of the EFEC and also the responses of the FGD participants indicate that about one-third (n=8) of the EFEC had not organized any meetings till the study period after establishment of the endowment fund. Lack of information from the S/HP in-charge about the EF and its working modality and procedure was also reported by some participants from Dhankuta, Bhaktapur and Kaski for non-utilization of money from the EF.

Committee meeting has not been organized after its' establishment 3 years ago which should have been held at least 2-3 times a year. We have not even seen how the bank cheque looks like.

- FGD Participants, Mahabharat VDC, Dhankuta

We FCHVs were very happy when EF was established but looks like it has gone for a long sleep and has vanished somewhere

- FGD Participants, Bhirgaun VDC, Dhankuta

The concern shown by government, by establishing EF, is appreciable but it has created only hope but not helped us to meet our needs, so far.

- FGD participants, Changunarayan VDC, Bhaktapur

A sizeable percentage (38.2%-65.1%) of the EFEC and HFOMC members and FCHVs indicated the need to raise the size of EF in order to ensure its effective utilization by approaching I/NGOs for their contribution and also through *Deusi Bhailo*² or organizing cultural programs during festival days (Table 3.3). Quite a sizeable percentage of the respondents suggested for making FCHVs more active by providing training and orientation to them on the ways and methods of raising fund at the local level. Some also suggested making EFEC more active and every decisions related to EF should be made only after discussions and consultation with FCHVs. The respondents also complained of existing condition of the need to operate the EF through bank saying that the bank gives nominal interest rate. Therefore, they suggested that the fund should be given to FCHVs to revolve in the community with higher interest rate than provided by the bank. They said if it is followed, it would not only help to promote income generating activities but also meet their own needs.

Interest rate from the banks is too little. It would be good if the amount of EF in the bank is given to FCHVs to mobilize it. We will mobilize it in higher interest rate than given by the bank. This will make the fund operation effectively as well as the size of the EF would grow bigger every year.

- FGD participants, Mahabharat VDC, Dhankuta

² A group of people make house-to-house visit to bless each household members of their community and they are given cash and kind by the households; such collected fund is used for common purpose.

Table 3.3 Percent distribution of respondents by their suggestions for effective utilization of endowment fund

Suggestions	EFEC (n=63)	HFOM C (n=46)	FCHVs (n=81)
FCHVs should be made more active by giving training and orientation/ EFEC members should be given orientation on it /they should be taught about the ways of maintaining record	38.1	50.0	38.3
Money should be raised/ should increase fund approaching from I/NGOs like CARE Nepal, NNSWA/ fund should be increased/ should coordinate with I/NGOs/ money should be raised through event like Deusi, performing cultural programs, collection donations etc	38.1	65.2	48.1
Existing committee should be made more active	22.2	26.1	22.2
Only the interested and active persons should be included in the committee	14.3	10.9	1.2
Every decisions should be made by consulting and discussing with all FCHVs	12.7	8.7	11.1
FCHVs should be given authority to keep and spend the money themselves rather than keeping money in fixed account/ money should be invested elsewhere rather than keeping in Bank/ fund should be utilized for income generating activities	11.1	4.3	4.9
FCHVs should be given the right to decide their needs	3.2	-	13.6
New committee should be formed by identifying interested and capable members	-	19.6	11.1

c) Process followed in the identification of needs

As discussed earlier except for Machhapuchhare and Ghandruk VDCs in Kaski district, none of the EF was used for fulfilling the FCHV's needs. Therefore, process followed while prioritizing the needs of FCHVs in using the income accrued from EF was solicited with the FGD participants of Machhapuchhre and Ghandruk. They mentioned the two-step process; firstly all the FCHVs should meet together and prioritize their needs and secondly, these needs are taken to EFEC meeting for approval. In the same manner, active participation of FCHV members in making decision in priority ranking of the needs in EFEC meeting was also reported by them. Relating to the basis of ranking the needs according to priority, they said, it should be done keeping in view of the amount of interest accrued in fixed account. The responses of the members of EFEC were also consistent to the findings of FGD participants in case of those two VDCs of Kaski district. In rest of the districts and remaining VDCs of Kaski too where the use of fund is yet to take place, the FCHVs and the members of EFEC mentioned that once they have adequate amount they would identify their needs upon discussion and reach to a consensus by themselves. The view of the FCHV focal persons was also similar to other respondents.

3.3 Management of endowment fund

Information regarding various aspects of management of endowment fund such as decision making process, frequency of meetings, audit status of the fund, operation of bank account and transparency of income and expenditures made for the fund was collected from different categories of the respondents from district to VDC level. The study results are presented in this section.

a) Decision making process

The FCHV focal persons reported that all the EFEC members are involved in decision making. According to them, mostly EFEC members, ex-members of the VDC, sub/health post in-charge, FCHVs and village influentials are involved in making any kind of decision related to endowment fund at VDC level. Most of them also affirmed that FCHVs are heard in making decision about the EF. For instance, FCHVs from Duhabi, Sunsari said, *“Upon discussion with the committee members in the meeting we agreed and drew Rs 1,500 interest amount from bank. The amount was not sufficient to buy things for us (FCHVs). Therefore, we decided to extend the time period of fixed account from 1 year to 5 years and the interest amount was also added to the fixed account. This, we did because with the interest amount after 5 years we could buy things according to our need”*. Five participants of Sunsari opined that the present practice of putting the EF in Bank is of little use since the interest accrued is very low. Therefore, the fund should be handed over to FCHVs to use as revolving fund in which the needy can be provided the amount in loan with the interest rate prevailing in the community. They expressed that this will be of great assistance to FCHVs to meet their fund need as well as in raising the size of the fund over a period of time.

b) Organization of EFEC meetings

According to the FCHV EF Guidelines, EFEC meetings should be organized at least three times in a year. However, it was less common in practice. Based on the EFEC record, in most of the cases, meetings were not held on regular basis. One-third of the EFEC had organized only one meeting since establishment of EF. There were only five EFECs (one each in Dhankuta, Bhaktapur and Sunsari and two in Kaski) which had organized meetings 1-2 times during the last year preceding the survey, and participation of FCHVs in the meetings was reported to be satisfactory. Only about one-fifth (n=14) of the EFEC members, mostly from Kaski, reported to have attended the meetings in the past one year. Frequent transfer and/or absence of VDC secretary and non-existence of VDC body were the main reasons for not holding the meetings. Mode of utilization of fund, ways of increasing the size of the fund, and maintaining coordination among various agencies (CBOs and NGOs) located in the community were the main issues discussed in the meetings.

c) Auditing of account

Most of the respondents from district health offices reported that auditing of EF to be the integral part of the DHO. Auditing of the account of all health facilities and EF of their districts is supposed to be done at the same time. However, most of the EF at VDC/municipal level was not audited except in three VDCs (2 in Bhaktapur and 1 in Kaski). Non-use of the fund was the main reason for not auditing the account as indicated by the EFEC members.

Case Study # 2: Machhapuchhre VDC, Kaski

Information about the need for and rationale of FCHV Endowment Fund from the NTAG officials in a training program on pneumonia held on Falgun 26, 2059 in the subhealth post prompted the FCHVs to establish endowment fund in the Machhapuchhare VDC of Kaski district. They were highly supported by the community leaders, local clubs and others.

The FCHVs and the leading members of the community launched a fund raising campaign and were able to collect an amount of Rs. 40,600 from households, mothers' groups, local youth club, and users committees related to forest and water. Formation of the Endowment Fund Executive Committee by holding a mass meeting in the village with those able to give time and influence in raising fund were the criteria followed in selection of the members for the committee. The committee comprised of ex-chairperson of the VDC, an active MCHW of the subhealth post, as member secretary, chairperson of the local club (Guranse Bhumi Club) and 3 representatives from among the FCHVs. The selection of MCHW as member secretary was done on the ground that the SHP in-charge had little time to give to the committee due to his other regular works.

Opening of EF Bank Accounts was done in less than a month period after they received information about the need for its establishment in the village. Of the total amount of Rs.40,600 collected, Rs. 38,000 was deposited in the 5 year fixed and Rs. 2,600 in saving accounts in Nepal Bank Ltd, Pokhara at an interest rate of 5.5% and 4.75% for fixed and the saving accounts respectively. Chairperson and member secretary of the committee operate the accounts. Raising money for EF on a continued basis formed as one of the activities of the committee and that of the local club too. Likewise, support from the family members to the committee was also one of the notable factors to make the committee more active in raising fund. By the month of Magh 2061, the committee had Rs.67,126 plus interest amount of Rs.842 in its saving account generated from local VDC, VIP visiting the village, tourists and the local people working abroad. The EFEC had its' meeting at an interval of every four-month and fund raising formed as one of the main agenda.

Needs of the FCHVs for their works are discussed among themselves first, and taken to the EF Executive Committee meeting for final approval. The FCHVs listened to all the issues discussed in the committee meetings. Of the total amount in saving account of EF, Rs. 17,128 was spent for the dress/uniform of the FCHVs and for awarding prize to the FCHVs with their outstanding services to the community, and Rs. 2,528 for celebrating national FCHV day in the month of Baishakh 2062 B.S. Access to information about the income and expenditures made from both the fixed and saving accounts is open to every body and EF accounts were audited each year after its establishment.

In the continued efforts in raising fund, the committee chairperson and community members active for the development of the community have a plan to receive Rs. 15-20 thousand from those working abroad during the current year 2063 B.S. The committee members have a grudge about non-visits from concerned officials of district and the center to monitor the EF and it's functioning in their village after its establishment in their village. They expect feedback for further improvement in functioning of the EF and the ways and the methods that they have been managing it.

d) Transparency of fund

Among those with the bank account, about 7 in every 10 EFEC members and over half of the FCHVs included in the IDI reported that there is a practice of sharing information to all FCHVs about the status of the income and expenses made from the *Bachat Khata* (savings account). However, a sizeable percentage of them also reported that such information are not given to all the FCHVs. The HFOMC members mentioned that FCHVs are usually informed about the status of EF during HFOMC meetings and sometimes health facility in-charges provide them information during their visit to the health facility. The Public Health Officer of Kaski district

also reported that details about the income and expenditures of EF is computerized by DHO and is available to whoever needs it.

e) Bank account and signatories

Preference to open the EF account in government owned bank is presented in the guidelines. The survey results indicate that in most of the cases account are opened in the government owned bank namely Nepal Bank Limited and Rastriya Banijya Bank. Of the 27 EFEC (24 in VDCs and 3 in municipalities), 14 had fixed account and 22 had savings account. One of the EFECs in Sunsari had its fixed and savings accounts in Everest Bank with the expectation of obtaining more interest rate. Likewise, one of the EFECs in Bardiya had also deposited money in a cooperative banks where it could receive higher interest than from other banks. Among those with neither of the fixed nor savings account were further asked about the reasons for not opening the accounts in the bank. Little amount of seed money or inadequate amount to open fixed account in bank, difficult to deposit money again and again, have not received any seed money, and low interest rate in the bank than in other areas were the main reasons reported for not opening account in the bank (Refer to Case Study #3).

The EFEC with no accounts in formal banking institutions reported to have deposited the fund in the name of individuals such as health post in-charge, VDC secretary, etc. as indicated by the EFEC members of some VDCs in Dhankuta and Sunsari districts.

Case Study # 3: Suda VDC, Kanchanpur

Initiation in establishing the EF in Suda VDC of Kanchanpur district was made after the release of Rs. 5,000 from the VDC in 2058 B.S. However, the subhealth post in-charge was not able to open the fixed account because of the requirement of minimum amount of Rs. 25,000 in opening a fixed account in the Rastriya Banijya Bank. The cheque of Rs. 5,000 received from the VDC was handed over to FCHVs by the subhealth post in-charge.

Due to the very small amount of seed money, FCHVs as well could not open both the fixed and savings accounts. No initiative to form the EFEC was also taken by any of the concerned authority. Therefore, the FCHVs took the initiative in devising a Saving and Credit Scheme with their own contribution of Rs. 10 per person every month. The money (Rs 5,000/-) received form VDC for EF purpose was also deposited in their account. The total amount in their scheme had reached to Rs. 36,000/-. The amount in scheme is used for loaning to meet various needs of FCHVs at the rate of 2% per month.

With the support of NTAG, the EFEC was formed by the DHO last year (Falgun 2062) only. The committee is chaired by VDC secretary, subhealth post in-charge as member-secretary and 3 FCHVs as members. The EFMC has already requested to VDC to provide fund. According to them they have received positive response for providing Rs. 10,000/-. However, FCHVs were indifferent of endowment fund since interest amount from the fixed account, even if it is opened, will not be enough even to meet the travel costs for going to district headquarters.

In most of the EFs, the VDC secretary, S/HP in-charges and FCHVs were reported to be the signatories in operating the bank account. In two VDCs of Bardiya, **Tharu Mahila Utthan Kendra** with its major contribution to EF was also reported to be one of the signatories in operating bank. Most of the EFECs have followed the guidelines for the operation of both the fixed and savings accounts.

About one-third of the FCHVs were found to be unaware about places of EF money kept. Over two-thirds of them reported that their fellow FCHVs to be one of the signatories of document while opening account with bank.

District level FCHV EF was reported to have been established in Dhankuta, Bhaktapur and Sunsari districts in 2060 B.S. The total fund was Rs 100,000/- in Dhankuta, Rs 125,000/- in Bhaktapur and Rs 265,188/- in Sunsari. Except for buying medicines for FCHVs in Dhankuta district, none of the districts had utilized the money for FCHVs. The signatories to operate the bank account was DHO and chief accountant of District Health Offices in Dhankuta and Sunsari while in Bhaktapur the signatories were Mayor of Bhaktapur Municipality and DHO.

3.4 Source of fund

The main sources of fund for the majority of the EFEC was VDC. On an average each EFEC had received about Rs. 14,000 from their VDCs. One EF from Bhaktapur had also received fund from DHO and two EFECs had received Rs 5000 from DDC. Two EFECs in Bardiya had also received money from *Tharu Mahila Utthan Kendra* (about 45 thousand by each committee) and one had received Rs 5,000 from SPACE – both are local NGOs. The EFEC of Kaski, mainly the Machhapuchhre and Ghandruk, had generated fund from different sources such as mothers' group, forest and water users' group, and local individuals. The main source of fund for the EFEC at municipality level were their respective municipalities. On an average each EFEC at VDC level had Rs. 35,700. Most of the EFEC had earned less than Rs 1,000 in the form of interest. According to the DDC level staff, only a few EFECs are actively involved in collecting fund through international agencies such as UNICEF, PLAN international, CARE Nepal, local NGOs and individuals. The above findings indicate that very little efforts have been made so far to raise fund through different sources by the EFEC indicating the need for encouraging them to raise fund.

3.5 Problems in the management of FCHV endowment fund

Weaknesses/shortcomings in functioning of EFECs at VDC level

Irregularity in organizing meetings, not sharing information about the activities of the committee to all FCHVs, lack of transparency of fund and frequent transfer of VDC secretary were the main weaknesses or shortcomings in functioning of the EFECs as reported by the EFEC and HFOMC members (Table 3.6). Other weaknesses or shortcomings indicated by a few were lack of adequate fund, frequent transfer of health facility in-charge, lack of coordination between health facility in-charge and VDC council, and lack of proper direction and supervision from the district health offices.

Most of the EFEC and HFOMC members suggested the need for organizing the committee meetings on a regular basis for its smooth functioning. Other suggestions include the provision of information about EFEC to all FCHVs, and orientation of the program to the committee members. A considerable number of the respondents also indicated the need for regular supervision to the committee from the district level (Table 3.4).

Table 3.4 Distribution of EFEC and HFOMC members mentioning the weakness/shortcomings in functioning of EFECs

Description	EFEC members (n=63)	HFOMC members (n=46)
Shortcomings/weaknesses		
Meeting is not held frequently/ no meetings held so far	47.6	30.4
Information is not shared with FCHVs	20.6	13.0
FCHVs are not informed about the status of fund/ no transparency	15.9	13.0
FCHVs do not take interest due to small amount of fund	15.9	13.0
Frequent transfer of health facility in-charge/ VDC secretary	9.5	2.2
Inadequate fund	9.5	4.4
No proper direction and supervision from district office	7.9	2.2
Health facility staff do not give adequate time	7.9	2.2
No clarity in EF guidelines	3.2	4.4
Lack of coordination between health facility in-charge and VDC officials	1.6	4.4
FCHVs are incompetent	1.6	-
Suggestions for efficient functioning of EFEC		
Meeting should be held on regular basis	42.9	41.3
Information about the EFEC should be provided to all FCHVs	23.8	39.1
Competent, active and interested FCHVs should be represented in the committee/ FCHVs should be made active	15.9	10.9
Committee should be made more active	19.0	15.2
Proper instruction and supervision from district office is needed	14.3	17.4
Orientation program to committee members on EF should be organized by district office	14.3	28.3
Proper identification of FCHVs needs is needed	6.3	2.1
Status of fund amount should be presented during meeting	6.3	2.1
Fund should be increased/ fund should be given by the VDC	6.3	4.4

Problems in the operation and management of fund

More than half of the EFEC members reported that they have not faced any problem in the operation and management of fund as most of them have not withdrawn money from the bank and/or open the bank account. The types of problems faced by the rest of the EFECs were:

- Bank located in far distance
- Frequent transfer of HP/SHP in-charge/VDC secretary
- Political disturbances
- Poor attendance of EFEC members during meeting
- Unable to open fixed account due to small size of fund
- Cumbersome renewal procedure of bank/ restriction to add additional money in fixed account

About half of the district level respondents also reported to have faced problems in implementation which were as follows:

- No reporting from EFEC to the district offices regarding the status of fund
- No monitoring from the central level/ lack of support from central level
- Difficult in raising fund

- Due to the small amount of fund Rastriya Banijya Bank did not agree to open bank account, the account has been opened in cooperative (Belwa VDC, Bardiya)

The VDC level EFEC members and district level respondents had some suggestions to solve the above problems. Most of them indicated the need for easing the procedures to be followed in opening and renewing the bank account, and they suggested that the Ministry of Health and Population should approach the concerned bank at central level. Some of the respondents also suggested for allocating additional fund for endowment fund and some also mentioned that there should be a mechanism of monitoring the fund both from the central and district level. Identifying the fund raising potentials at central level, orienting all the community as well as district level stakeholders about the endowment fund and enhancing the capability of the EFEC in management of fund were other types of suggestions made by the respondents.

We have to renew our fixed account every year. When we have some fund it is difficult to add to the fixed account. We therefore are bound to deposit the money in the saving account. We feel that bank should allow us to add money to the fixed account whenever we have.

- EFEC members, Dhankuta and Bhaktapur

Bank requires to renew the fixed account every year and the bank is reluctant to open account due to small amount.

- DHO official, Dhankuta

Efforts from the center to convince the authority of Nepal Bank Limited at the central level that EF is a very useful and non-profit oriented program in order for bank to simplify the account opening process and to retrieve from their condition of renewing fixed account every year.

- DHO official, Bhaktapur

Problems to implement guidelines

About one-third of the EFEC and HFOMC members were found to be unaware of EF guidelines. Among those who had seen the guidelines about two-thirds had difficulties in following the guidelines. Lack of clarity and comprehensiveness about the roles and responsibilities of stakeholders, monitoring/supervision, and progress reporting were the main problems reported by them. Frequent transfer of the government staff such as health facility in-charge and VDC secretary, with their position in EFEC, the committee were the other difficulties in complying with the EF guidelines. Except a few FCHVs in Kaski, almost all the FCHVs that participated in the FGDs indicated their lack of awareness about the EF guidelines.

We have seen voluminous book but not the book (endowment fund guideline) that you showed to us.

- FGD Participants, Changunarayan VDC, Bhaktapur

We have no idea about the FCHV endowment fund guidelines. The endowment fund committee was formed as directed by the in-charge of the health facility. After that nothing has happened.

- FGD participants, Suda VDC, Kanchanpur

3.6 Monitoring and supervision

Information obtained from the DHO and DDC officials indicate that District Health Offices hold the primary responsibility of monitoring the EF program at district level. However, due to the disturbed political situation in the country, no proper monitoring of EF has been done so far. Information about EF activities are collected only during review workshop organized at the district office and also DHO staff monitor EF activities in course of their monitoring and supervision visits for the other programs.

The HFOMC members of only five VDCs (2 each in Bhaktapur and Kaski, and 1 in Dhankuta) affirmed of receiving progress reports from the EFEC on a regular basis while the rest had never received such reports. Some of them even stated that HFOMC is even not aware about the status of fund in the EFEC of their areas. Likewise, none of the FCHV focal persons reported receiving progress report from the EFEC. These findings indicate the lack of common practice in the study district with regard to the progress reporting on regular basis.

The FCHV focal persons reported there is no specific guidelines for supervision, and had no supervision plan exclusive to the EF only. However, they said that it is done during their field visit for supervision of other activities. Discussions with the health facility in-charge was the main source of information about the status of fund. The findings indicate the lack of feedback system to the concerned officials after their supervision visits as none of the FCHV focal persons said that they had provided feedback to any one so far. Lack of clear-cut guidelines and no provision of money for this activity were reported to be the major constraints for supervision of EF program in the field.

Monitoring of endowment fund activities is the responsibility of DHO. Information about endowment funds are gathered during review workshop and also our staff collect information about EF as well during their field visit for other programs. There is no separate schedule for this supervision of EF program only.

- DHO official, Bhaktapur

No monitoring of endowment fund has been done so far on account of no activity from it and also due to complex situation in the country.

- DHO official, Bardiya

Chapter 4

Support Received from Different Sectors

One of the objectives of the present study was to find out the types of incentives or supports received by the EFEC and FCHVs, and perception of concerned officials including FCHVs towards such supports. The first section presents the findings on types of supports received followed by their opinion on the ways of generating fund in the second section and existence of other funds for the welfare of FCHVs in the third section. The last section presents the findings on contribution of EF to FCHV program at community level.

4.1 Support from central, district and local levels

a) Support from central level

All the respondents interviewed in district health offices that reported no support has been received from central level to operate FCHV EF in their districts.

b) Support from district and local level

Support from DDC

Information obtained from the EFEC members and the FCHV focal persons indicate that the EFECs have not been getting any support from the DDC. This is confirmed by the DDC officials too. According to the DDC officials, VDC is mainly responsible to provide support to EFEC. The DDC officials from Dhankuta mentioned of the allowance support to FCHVs during their participation in Vitamin A Day. While in Sunsari they mentioned to have organized meetings for better implementation of the program by inviting DCC officials, VDC representatives and NGO representatives. Surprisingly, one of the DDC official in Bardiya was not even familiar to the EF program.

We were not aware about the EF being implemented in this district. We just knew that there is such a program in the district. From now on, we will try our best to support the program from our side.

- DDC official, Bardiya

Support from DHO

Only about a quarter of the EFEC members and FCHV focal persons reported to have received some form of support from the District Health Offices. The types of supports they had received were as follows:

- Assigned staff to their VDCs to give orientation on EF (Gundu, Bhaktapur)
- Initiated to form the EFEC (Daiji, Kanchanpur)
- Assisted to open the bank account by providing recommendation letter to bank (Bhirgaon, Dhankuta; Pokhara municipality, Kaski; Duhabi, Sunsari; Suda, Kanchanpur)
- Encouraged community to form EF during their visit to the VDCs (Machhapuchre, Ghandruk, Kaski)
- Provided EF guidelines and instructions (Bhirgaon, Dhankuta)

One staff from District Health Office was present during the formation of EFEC in our village. District Health Office has also recommended CARE Nepal to support us. However, CARE Nepal asked us to make a minimum balance of Rs 25,000/- in our bank account. But, we could not collect that much amount that is why we have not received money from CARE Nepal yet.

- EFEC Member, Daiji VDC, Kanchanpur

Support from HP/SHP and HFOMC

A higher percentage of EFEC members were unaware about the supports (other than for fund raising) received by EFEC from health post or subhealth post and HFOMC. Those who were aware of it, the support was in the formation of the committee and opening the bank account. Some also mentioned the support in organizing EF orientation program to FCHVs. Creating awareness about the importance of the program among the community people was also acknowledged by some of the EFEC members. One notable example of the support extended by the health facility can be taken in Macchapuchhre VDC of Kaski district where the health facility has assigned a MCHW as the member secretary to the committee to facilitate in running the program. The EFEC members of Tanmuna, Sunsari also appreciated that they got “water filter” from the health facility for their use.

HFMC explains to village people about the usefulness of EFEC; sometimes arrangements are made for snacks during meeting; coordinates with VDC, local clubs (Guranse Bhumi Club,) mothers group, water and forest users committee, religious groups, etc. to raise fund.

- EFEC members, Machhapuchhre VDC, Kaski

Assists to prepare report, maintain account/record keeping, advises for using fund effectively, etc.

- EFMC members, Kaptangunj VDC, Sunsari and Sorhawa VDC, Bardiya

VDC secretary is the chairperson of both the HFMC and EFEC, so we are getting support from HFMC in coordinating with CARE Nepal to provide support to EF; provided register book, we are receiving assurance from HFMC for further support.

- EFEC members, Suda VDC, Kanchanpur

Support from VDCs/municipalities

Majority of the EFEC members mentioned that non-existence of elected members in the VDCs including frequent transfer and/or unavailability of VDC secretary due to security reasons were the major constraints for not getting adequate support from municipalities and VDCs. However, the respondents reported that they have received support from their respective VDC officials in formation of the committee and in opening the bank account. The EFEC members from most of the VDCs reported that FCHVs of their areas received allowance ranging from Rs 25/- (by the respondents of Kanchanpur and Bardiya) to Rs 200/- (by the respondents of Inaruwa municipality of Sunsari) from VDC/municipality during Vitamin and Polio Day for **Khaja** (snacks). Most of them had received Rs 100/- during such national events. Bicycle for ambulance purpose from DACAW program of UNICEF through VDC was also mentioned as support received from VDC by the respondents of Tanmuna VDC in Sunsari.

Support from NGOs

Only a few EFECs reported to have received support from other NGOs. For instance, the EFEC members of Soraha, Mainapokhar and Kalika VDCs in Bardiya reported to have received financial support of Rs 45,000/- each from *Tharu Mahila Utthan Kendra* and Soraha VDC received Rs 5,000 from SPACE. The condition imposed by the *Tharu Mahila Utthan Kendra* to include its representative in the management of the fund was reported to be one of the main constraints in utilizing the fund (Refer to Case Study #4). As reported by the members of EFEC in Daiji and Suda VDCs in Kanchanpur, they had the assurance to receive Rs 15,000/- from CARE Nepal on the condition that they should have a minimum of Rs 25,000/- balance in the bank. However, these EFECs were yet to reach the said amount till the study period. The EFEC in Ghandruk of Kaski reported to have received financial support from local club, individuals, mothers' groups and even the tourists. The FCHV focal person of Sunsari reported receiving some supports from UNICEF and Plan International to EFECs, however, they did not know the exact type of supports from these agencies.

Other types of supports received by FCHVs (other than the support through EFEC)

Information regarding the types of support received by the FCHVs other than the support they received from the EFECs was also sought from HFOMC members, DHO officials, FCHV focal persons and FCHVs themselves. Most of the district health officials and FCHV focal persons reported that FCHVs were given dresses (sari and blouse) by some VDCs once or twice. The respondents of 10 EFECs (2 each from Bhaktapur, Kaski, Sunsari and Kanchanpur and one each from Kaski and Bardiya) also stated that the FCHVs were provided dresses (sari and blouses) by the VDCs. In some districts FCHVs reported to have received opportunities on training in safe motherhood, child health, HIV/AIDS and other health aspects from INGOs, NGOs and government agencies. Training on safe motherhood by ADRA Nepal in Dhankuta, refresher training to FCHVs by NFHP in its program districts and basic training including training on IMCI, HIV/AIDS and malaria in Kanchanpur by CARE Nepal were reported by these respondents of respective districts. Other types of supports received by FCHVs in some study areas were:

- Provision of ID card to each FCHV and financial support to celebrate FCHV day (by ADRA in Dhankuta)
- Distribution of radio, bag and ID card to FCHVs (by NFHP and UNICEF in Sunsari)
- Items such as bags, torchlight, umbrella (by local youth club in Sunsari)
- Tables, furniture, medicines to FCHV coordination committee (by CARE Nepal in Kanchanpur)
- Training to FCHVs and mothers' group members by local clubs in Sunsari
- Dresses to the FCHVs of five VDC namely Dodhara, Chandani, Suda, Daiji and Jhalari and Mahendra Nagar Nagarpalika in Kanchanpur (by NNSWA)

Our VDC (Daiji) has allocated Rs 20,000/- to buy dresses (sari and blouse) for each FCHV of our areas, but have not distributed yet. VDC recognized the work of the best three FCHVs of our areas by providing Dosalla to them. Likewise, cash reward of Rs 100/- was also provided to another 20 FCHVs in 2059 BS. Similarly, NNSWA (local NGO) also provided Sari and Blouse to each FCHVs of our VDC in 2059 BS. These type of incentives and supports have encouraged the FCHVs of our VDCs to work as volunteer.

- EFEC members, Daiji VDC, Kanchanpur

Case Study # 4: Kalika VDC, Bardiya

*Initiation towards the establishment of EF was made in the Kalika VDC of Bardiya district in a mass meeting organized in participation of all the FCHVs, VDC chairperson and other respected persons of the community in the year 2057 B.S. Accordingly, there was contribution of Rs. 15,000 from VDC and Rs. 45,000 from the **Tharu Mahila Utthan Kendra**; a NGO working for the welfare of Tharu Women for the purpose of EF. However, formation of Endowment Fund Executive Committee had not taken place to date. As such, the FCHVs and also SHP in-charge of the VDC did not have adequate knowledge about the EF and its' functional modality. Money was deposited in a saving account in Rastriya Banijya Bank, Gulariya. The Ex-chairperson of the VDC and chairperson of the **Tharu Mahila Utthan Kendra** and one FCHV of the VDC are the signatories of the account.*

*In the following year after opening the bank account, the FCHVs requested VDC secretary and the representative of the **Tharu Mahila Utthan Kendra** to transfer interest amount by opening a separate saving account to be operated by FCHVs themselves. However, the request of FCHVs per se was not agreed by **Tharu Mahila Utthan Kendra** and they put a condition that the representative of the NGO should also be one of the signatories of the proposed account. The condition of the **Tharu Mahila Utthan Kendra** was not agreeable to FCHVs. No further action was taken then after. Therefore, the fund for the welfare of FCHVs was reported to be not useful.*

*As FCHVs failed to obtain the interest amount earned from the fund deposited in the bank, all FCHVs formed a saving group i.e. **Samjhana Bachat Samuha** at the initiative of the SHP in-charge in which each member contributed Rs. 10 per month. As of the study period, the total saving of the **Samjhana Bachat Samuha** had reached to Rs. 61,000. Right after devising this scheme, the saved amount is being used for providing loans to the needy members at the interest rate of 2% per month. Some of the members have used the borrowed fund for various types of income generating activities such as poultry raising, pig raising, goat raising etc.*

By now, FCHVs have lost their interest towards the endowment fund even if it is established because they felt that the interest obtained from it will not be enough even to meet their minor needs. They have also a plan to undertake income-generating activities in bigger scale in the days to come. Therefore, they were of the opinion that the fund created for EF purpose if entrusted to them would be mobilized meaningfully as they have been mobilizing their own savings.

During the FGDs, most of the FCHVs from all study areas, except a few from Dhankuta district, stated that they received dresses from the VDCs. Likewise, allowances for tea and snacks ranging from Rs 25/- to Rs 200/- during special events such as Immunization Day, Vitamin A Day, etc was also reported to have been received by the FCHVs from their respective VDCs. Some of the FGD participants from Kaski (Machhapuchhre VDC) and Dhankuta (Basantatar VDC) also mentioned to have received timer from the health facility during pneumonia training and found it useful for their work. Most of the participants also reported that they received health related BCC materials such as books, posters, pamphlets, flipcharts etc. from various agencies working in their communities. Likewise, provision of reward to the active or performing FCHVs was also reported by the FGD participants of Kanchanpur, Dhankuta, Bhaktapur and Kaski districts. The FGD participants of Kanchanpur appreciated the umbrella and radio set given to FCHVs by the “Radio Health Program” of NFHP. In Kanchanpur, there is a provision of giving 10% overhead over the program costs to the FCHV Coordination Committee by CARE Nepal to implement health related activities on partnership basis. The overhead cost amount is allocated as loan to meet the household needs at the interest rate of 2% per month (such as school fees,

medical expenses, etc.) of the FCHVs. FGD participants of this district expressed their happiness about such loan provision.

FCHVs participants in the FGDs were inquired about the nature of help provided by various agencies in carrying out their activities and the responses of the participants are as follow:

- Training and other types of allowance have enabled them to pay school fee of children, meet the household expenses as well as tea and snacks expense in course of their work in the community
- Radio, books, poster, pamphlets and other materials have been useful in updating their knowledge and have helped them in convincing the community members about the health issues
- Provision of dress/uniform and bags has given social status to FCHVs in the community
- Other supports have been helpful to motivate FCHVs in rendering service to the community and to elevate status of family in the community.

The FCHVs valued highly such supports over the EF.

4.2 Opinion on the ways of generating funds

Efforts made to increase fund for EF

The survey results reveal that little effort has been made by EFEC and HFOMC to add to the endowment fund. Over two-thirds reported that no such effort has been made so far in this direction. Some of them mentioned the request made to VDCs for additional amount, and to the NGOs and clubs to contribute to the EF. While others reported to have organized meetings with INGOs, NGOs, DHO, and VDC to persuade them to provide fund. However, some of the EFEC and HFOMC members of Machhapuchhre and Ghandurk in Kaski were found to be quite active in raising money by taking several fund raising exercise such as collecting donation from individuals and clubs, going for Deusi and Bhaili, organizing cultural programs, and requesting young people working abroad to support the committee. As a result, they were able to collect significant amount of money to add to the EF. With regard to the efforts from DHO in raising fund, some respondents from DHO reported that they had requested to the I/NGOs to provide monetary support for EF program.

Ways of generating additional fund for FCHV at local level

Suggestions from different types of respondents about the ways of generating additional fund for FCHVs at local level was sought. A considerable number of respondents responsible for executing the EF program (members of EFEC at VDC and district level, DHO, FCHV focal persons, DDC officials) indicated the potentials in raising fund at local level such as collecting donations from individual, going for Deusi Bhaili and organizing cultural program during festival days. Members of VDC level EFEC and DHO officials also were of the view that local groups such as forest/water users groups, mothers' groups could be an important source in raising fund. They also emphasized the need to make a request to VDC and DDC to allocate budget for EF every year. All categories of respondents at district level and members of EFEC at VDC level suggested to request I/NGOs, CBOs active in health sector to provide fund. A few

respondents from VDC level EFEC and FCHVs focal persons were of the opinion that training/orientation on the methods and techniques of raising fund to FCHVs could be an added advantage in generating fund. Likewise, a few members of EFEC at the VDC and district level were of the view that if the EF amount is invested for productive purposes rather than depositing in bank, it could generate more interest every year.

First of all, we need to increase the amount in the endowment fund. We should have the information on the interest accumulated. If the fund is deposited in our account we will increase it by organizing “Deusi Bhailo” and advocating other organization who are in support of FCHVs. We can invest the money on drug purchasing at the wholesale rate and sell at retail rate to the community at a lower rate than market price.

- FGD participants, Changunarayan VDC, Bhaktapur

We should try to make this fund more effective by ourselves. For this, we need to form a committee of ours. We can utilize the interest amount for buying umbrella, sandals (shoes) to be used during monsoon time.

- FGD participants, Belawa VDC, Bardiya

Table 4.1 Respondents opinion regarding the ways of generating additional fund for FCHV EF at local level

Description	EFEC (n=63)	DHO (n=6)	FCHV focal person (n=5)	EFEC (n=2)	DDC officials (n=8)
Collecting donations from individuals	50.8	16.7	20.0	100.0	12.5
Through deusi/bhailo	31.7	66.7	40.0	50.0	37.5
Provision of budget by VDC/municipality on regular basis	30.2	50.0	40.0	-	75.0
Through cultural program	14.3	33.3	20.0	-	-
Making request to I/NGOs, clubs	12.7	16.7	60.0	100.0	50.0
Especial allocation of budget by DDC	3.2	16.7	20.0	-	62.5
Support from local groups (forest users committee, mothers’ groups)	11.1	16.7	-	-	-
Investing existing fund in other areas rather than depositing in fixed account	3.2	-	-	50.0	-
Creating awareness among FCHVs themselves	3.2	-	20.0	-	-

Supports needed from the central and district level to strengthen the FCHV EF

The great majority (70%) of the HFOMC members were of the opinion that both the central as well as district level offices should provide additional amount to the EF so as to meet its intended purposes. More than half felt the need for regular monitoring and supervision from the district level offices in order to ensure proper utilization of fund. Considerable number of respondents also suggested that the district offices (DHO and DDC) should take the initiative in identifying possible funding agencies such as NGOs, INGOs, etc. that contribute to the EF program. Other types of supports suggested by some were: providing orientation to all FCHVs and committee members about the importance of the EF by organizing workshop, procedures of opening the bank account be made simple and easy, EF guidelines should be simple but detailed, FCHVs should be given the authority to manage the fund by themselves and this provision should be

clearly stated in the EF guidelines, and providing training to the EFEC members on the ways of handling and maintaining the account properly.

4.3 Existence of other funds for the welfare of FCHVs

Information regarding the existence of other funds for the welfare of FCHVs was collected from EFEC and HFOMC members and the FCHVs that participated in the FGDs. Existence of such funds in selected VDCs of all the study districts except in Bhaktapur and Kaski were reported. Of the 27 VDCs/municipalities included in the study, 9 VDCs were reported having such funds established at the initiation of FCHVs, VDCs, S/HPs, donor agency or I/NGO. According to the respondents, GTZ had advised FCHVs to establish funds for them in Bardiya and CARE Nepal in Kanchanpur while in other districts, VDCs or S/HPs had taken initiative to establish the fund. As of the survey period, the size of such funds in these VDCs ranged from Rs 12,000/- to Rs 60,000/-. Money for most of the funds was arranged by collecting small amount (Rs 5/- to Rs 10/- per month) from each FCHV. In some instances, the respondents reported to have received monetary support from VDCs and other institutions too. Such funds are known as **Kalyan Kosh** (welfare fund) in Dhankuta, **Samjhana Bachat Kosh** (saving scheme) in Bardiya, **Chakriya Kosh** (revolving fund) in Sunsari and FCHV Coordination Committee in Kanchanpur. Each member contributes Rs 20 per month to the **Kosh** in Dhankuta and Rs 10 per month in case of other 3 districts. These funds are borrowed by the FCHVs themselves in most cases or the members of mothers' group to meet their personal or family needs for which they have to pay interest rates usually at 2% per month. The survey results point out that FCHVs and mothers' group members have been using borrowed amount for the following purposes:

- For seeking health services
- To run small business or shops
- For livestock raising (e.g. poultry, goat, pig, etc.)
- To buy seeds
- For vegetable gardening

All FCHVs that participated in the FGDs unanimously said that the funds have been of immense help in meeting emergency needs, paying school fee of the children, delivery, marriage etc.

When further asked to compare the benefits of the EF with other funds established at local level, all the three categories of respondents (EFEC and HFOMC members and FGD participants) reported that these funds are much more beneficial than EF citing the following reasons:

- Can be used whenever there is a need for money
- Takes care of individual needs whereas it has to be common in case of EF
- Independent in making decision about the use since members themselves can make decision without depending upon people from outside
- Even principal amount can be used unlike in case of the EF
- Local funds have been useful even to non-members of the community at crisis time

We have established welfare fund with 26 members in my ward. Every member contributes Rs 20 per month to the fund and total amount has reached to Rs 50,000. We can take loan from our fund at the interest rate of 2% per month. Our fund is more useful than endowment fund because we cannot draw the seed money in case of our need.

- FGD participants, Pakhribas VDC, Dhankuta

The bank interest rate is too low. If we are to utilize this EF by ourselves we could have invested in more interest-earning sector which will support to meet our needs.

- FGD participants, Mahabharat VDC, Dhankuta

4.4 Contribution of EF to FCHV program

Regarding the contribution of EF to the FCHVs to work, a small number of respondents from district level offices were of the opinion that it has contributed to FCHVs' work effectively. Provision of dresses, allowances provided by the VDC during special events such as Vitamin A and Immunization Day, and organization of EFEC meetings were mentioned as the contributing factors in encouraging FCHVs to work as volunteer. They were of the view that EF could definitely motivate FCHVs in their work if the fund is increased and utilized properly. They also mentioned that even a large section of the FCHVs are either unaware or have little knowledge about the usefulness of the endowment fund.

We are facing problems of not having endowment fund committee meetings regularly. Many FCHVs are not aware of the fund and also do not take interest. The EF guidelines provided to us do not cover many aspects of working procedures in detail. Thus, we are confused. The interest amount we receive from fixed account is too small from which we are unable to do anything.

- EFEC member, Daijee VDC, Kanchanpur

Information collected from district level (DDC officials and FCHV focal persons) and members of the EFEC and HFOMC also indicate that until now EF has not been contributing significantly due to non-use of the fund. However, they said that establishment of it has been helpful in raising the level of confidence among the FCHVs that their work has been acknowledged by the government at the Center and by the VDC and health facility of their areas. According to them, FCHVs have developed a sense of ownership of their fund with the impression that it has been established for their benefits (Table 4.2). A sizeable number of respondents believed that once the fund is utilized to meet FCHVs' needs, it would help motivate and encourage FCHVs to work further effectively.

Table 4.2 Respondents opinion regarding the contribution of EF to the FCHV programs

Description	EFEC (n=63)	HFOMC (n=46)	FCHV focal person (n=5)	DDC officials (n=8)
None/ do not know	39.7	30.4	40.0	62.5
Sense of ownership/ impression that there is a fund for them/ can be used latter	36.5	69.6	20.0	12.5
Increase in confidence/ consciousness of their responsibility	28.6	39.1	60.0	12.5
Help to meet minor expenses required for their work/ dresses, prizes or award has encouraged them to work	6.3	4.3	20.0	25.0

Majority of the respondents (EFEC members, mothers' group members and DDC officials) opined that respect, prestigious job and recognition in the community followed by adequate support from the family and also from community were the contributing factors in motivating FCHVs to work effectively and efficiently. Other contributing factors mentioned were: opportunity to receive training/workshop, increase their knowledge and skills, service oriented job, and remuneration and other benefits (Table 4.3).

Table 4.3 Respondents opinion regarding factors contributing FCHVs to work effectively and efficiently

Description	EFEC (n=63)	MG members (n=96)	DHO/ DPHO (n=6)
Gain respect in the community/recognition/ status in the village	66.7	64.6	100.0
Family support	52.4	49.0	66.7
Opportunity to receive training and orientation	50.8	18.8	66.7
Service oriented job/can serve the community	42.9	43.8	16.7
Community support/MG members support	30.2	26.0	33.3
Increase in knowledge and skills	22.2	7.3	-
Remuneration, allowance and other benefits	20.6	15.6	33.3
Due to EF	1.6	-	-

Those FCHVs included in the FGDs were also inquired about factors that motivated them to work as volunteers. Responses given by the FGD participants were similar to that of the EFEC members, MG members and DHO officials. Most of them also recognized the support from their family members, VDC officials, sub/health post staff, mothers' group members and school teachers in encouraging them to work as FCHVs effectively and efficiently. Respect or recognition from the community due to their voluntary work and opportunity to learn new things were other factors stimulating them to perform better.

The idea of EF is like a promise to give food tomorrow to a starving person today.

– FGD participants, Daiji VDC, Kanchanpur

We have received lots of help from our family members (husbands and mothers-in-law). They cooperate us in sharing the household work while we visit the community. The community also respect us for our work. If anything happens in the community, they first come to us for seeking advice and services.

- FGD participants, Suda VDC, Kanchanpur

Our family members are always positive to our work and also are cooperative. Villagers also help us during immunization days, Vitamin A day, and other events. Village sisters respect us while we visit their homes.

Opinions were solicited from all the EFEC and HFOMC members and FCHVs included in the FGDs regarding the types of programs and activities that would motivate FCHVs to serve the community further effectively. Provision of training/refresher training in reproductive health, pregnancy care, and safe motherhood were most frequently cited. In addition, the FCHV participants also emphasized the need for training related to income generating activities in order to enable them to supplement household income. Over one-fifth of the EFEC and HFOMC members and considerably a high number of FGD participants suggested organizing observation

tour, and interaction program that would help them to exchange experiences and to learn new ideas and techniques. Some FGD participants mostly from Bhaktapur, Bardiya and Kanchanpur highlighted the need to make the mothers' group more active in providing health information to the community. Provision of prizes, recognition/appreciation letters to the performing FCHVs were the most frequently cited responses in all three categories of the respondents (Table 4.4).

Table 4.4 Percent distribution of respondents by their suggestions for encouraging the FCHVs in providing services to the community

Description	EFEC (n=63)	HFOMC (n=46)
Provision of training on regular basis/ refresher training	49.2	65.2
Provision of observation tour	23.8	21.7
Organize meeting every month	22.2	10.9
Provision of prizes, recognition/appreciation letter to the performing FCHVs	19.1	23.9
Skill oriented training/ income generating training	17.5	19.6
Provision of salary/allowance during meeting	11.1	37.0
Provision of free medical services	11.1	4.3
Provision of concession in public transport	7.9	2.2
Essential medicines for free distribution	6.3	13.0
Regular monitoring, supervision and timely feedback on their work	4.8	4.3
Distribution of BCC materials (poster, pamphlets)	3.2	-

Chapter 5

Strengths and Weaknesses of the Endowment Fund Program

Information regarding the perceived strengths and weaknesses of the FCHV EF program and suggestions for making the program more effective in the future was collected from different categories of the respondents. The first section discusses on the respondents' views on the strengths of the program followed by weaknesses in the second section. The last section deals with various suggestions for making the EF program sustainable.

5.1 Strengths of the endowment fund program

Majority of the respondents of different categories (members of EFEC at VDC and district level, HFOMC, DHO/DPHO and DDC officials) appreciated the FCHV EF program. Most of them were of the opinion that the program would be an important instrument for the effective mobilization of FCHVs in providing basic health services at the grassroots level- provided that the fund amount is increased and properly utilized. However, quite a large percentage (about two-fifths) of the mothers' group members were unaware about the purpose of the fund. The EFEC members and district level officials (respondents from DHO and DDC) opined that EF can serve as the platform to pool-in the fund resources from both the government and non-government sectors for the effective utilization of FCHV program at the community level.

Strengths of the FCHV EF program observed by different categories of the respondents were as follows:

- Helps to meet the needs of FCHVs in doing their voluntary work
- Entails long-term perspective in giving continuity to health activities in the community
- Encourages FCHVs and enhances their self-esteem to render effective services to the community
- Indicates the concern of the government for the welfare of FCHVs
- Only the interest money will be used but the principal amount will remain intact (EF will continue for long time because seed money can not be used)
- Provide financial support in meeting their other needs

In order to make the program more effective and sustainable, the respondents made the following suggestions:

- Need to raise seed fund i.e. at least minimum of one *lac* rupees so that interest money would be, to some extent, sufficient for buying necessary items
- The fund should be managed in coordination with health facility in-charge
- Budget should be allocated from the center on a regular basis
- Regular monitoring and supervision of the program should be made from district offices
- Endowment fund guidelines should be made more clear but sufficient with details, and orientation on guidelines should be provided to FCHVs and other community level concerned partners
- EFEC should be actively mobilized to generate additional fund from their respective communities

The perceived strengths of the endowment fund programs identified by some of the FCHVs that participated in the FGDs were as follows:

- Restriction to use the seed money avoids the possible misuse of the fund
- Provision of not using capital fund would help to maintain continuity of the fund for longer period of time, and new generation of FCHVs could also benefit from it
- It would help to motivate them to work as FCHVs, if the fund is used properly
- The interest earning from the fund could be used to purchase materials like umbrella, shoes, torchlight etc. required for their day to day work, and to meet their emergency needs as well.

5.2 Weaknesses of the endowment fund program

Most of the respondents of different categories (members of EFEC at VDC and district level, HFOMC, DHO/DPHO and DDC officials) complained that the fund is not being utilized in their community due to various reasons such as very small amount of interest money, restriction for the utilization of seed money, cumbersome process in opening bank account and drawing money from the bank, irregularity of EFEC meetings, etc. Another weakness of the program noticed by the respondents was lack of supervision and monitoring mechanism. The survey results show that most of the EFECs are not active, and no EFEC meetings were reported to have been held in the last year. Lack of coordination between EFEC, VDC and District Health Office was also a concern raised by the respondents during the interview.

The weaknesses or problems with respect to the implementation of the endowment fund program noticed by the participants were:

- Restriction to use the seed money which otherwise could be mobilized in loan among the FCHVs charging interest rate higher than the bank (Participants of Dhankuta)
- The size of the fund is too small. Therefore, interest does not help us to meet our needs (Participants of the six districts under study)
- Involvement of the government officials other than the FCHVs in management of EF entails a lot of problems due to their frequent transfer. Government rules should have allowed to operate the fund exclusively by the FCHV because it is meant for FCHVs (Participants of Kanchanpur).

5.3 Suggestions for making EF sustainable

Majority of the EFEC and HFOMC members and IDI FCHVs viewed that as the EF is meant for the welfare of the FCHVs, they themselves should be given full responsibility of managing and utilizing the fund. The great majority of the FCHVs also suggested involving the S/HP in-charge in its management as they are always in close contact with the DHO, HFOMC and FCHVs. Over a quarter of the HFOMC members and about 10% each of the EFEC members and FCHVs suggested making the existing EFEC more active to carry out its stated activities effectively and efficiently (Table 5.1).

Most of the mothers' group members and district level officials expressed that EF amount should be raised not only through the government sources but also from various sources such as local clubs, NGOs, individuals and also by organizing cultural programs during festivals. Suggestions for other ways of making the fund more effective were as follows:

- Health post or subhealth post in-charge should be assigned to provide information about the importance of EF to both the FCHVs and community people
- Regular monitoring and supervision of the EF should be made by both the district and S/HP level staff
- Responsibility of managing fund should be given to health post/subhealth post

Table 5.1 Respondents opinion on persons/agencies to manage EF

Description	EFEC (n=63)	HFOMC (n=46)	FCHV (n=81)
Entire fund should be entrusted to FCHVs to manage and mobilize because it is their own money	84.1	58.7	77.8
S/HP in-charge should be involved in the management aspects of the fund because they have direct relation and frequent meetings with DHO, HFOMC and FCHVs	17.5	15.2	75.3
Present EFEC is all right but should be mobilized effectively	9.5	28.3	12.3

Like other categories of the respondents, FCHVs during the FGDs also opined that the entire fund including seed money is meant for the welfare of the FCHVs, therefore it should be entrusted to the FCHVs. They added that the interest income from the fund deposited in bank is meager when compared to the prevailing interest rate in their community. They felt that they could generate more interest if it was used as revolving fund wherein they could provide loans to their members. It is, therefore, they said that the money they would revolve among themselves and also to the needy in their community as loan charging interest much higher than in the bank. They were of the strong opinion that provision for entrusting the amount in EF to FCHVs only would meet the fund needs of themselves and also that of the community members on the one hand and size of the fund would grow bigger every year, on the other.

Entire amount of EF should be given to FCHVs to mobilize as revolving fund. We will form a committee with chairperson, treasurer, secretary and members to mobilize it. If this is realized, meeting will be held in time, sharing of the experiences gained from the use of loan will be enhanced and the monitoring about the use of the fund will be done. Our skill in managing the fund will be improved. This will help to increase the size of the fund every year.

- FGD participants, Panchakanya VDC, Sunsari

Need of initiating even small amount of saving (Rs. 5- Rs. 30) every month by FCHVs in order to increase the size of EF was also suggested by a few participants from Sunsari and Dankuta districts. Some participants from Sunsari, Dhankuta and Kanchanpur also suggested to include members of mothers' group in such saving scheme and also in management of the fund. The participants also urged for organizing a study visit to them to the area with effective functioning of EF in order to help replicate the experience in their areas. They also said that the EF guidelines need to be provided to each of FCHVs. Need to initiate the fund raising campaign through lobbying the government agencies, VDC, DDC, NGO and also organizing the events such as Deusi/Bhailo during Dashain/Tihar and other important festivals observed in the community to increase the size of EF was suggested by over half of the participants.

The respondents from District Health Offices and District Development Committees were inquired about the need for making modifications on the endowment fund program or policy, if any. In this regard, the respondents were mainly concerned with the lack of details in the EF

guidelines, banking procedures and inadequate fund to meet the need of the FCHVs. Following were the most frequently cited suggestions given by the respondents:

- Endowment fund program should be formed as a national program
- Entire responsibility should be given to FCHVs to operate EF program under the constant supervision of S/HP in-charge
- Simplify the banking processes
- FCHVs be given more roles to manage the fund
- EF guidelines be made easily understandable and in detail

The respondents were also asked to provide their suggestions for making the endowment fund sustainable as well as in increasing the size of the endowment fund, making EF functional, and meeting the needs of FCHVs which would inspire them in effective service delivery in the community. The responses given by them were as follows:

a) In raising the size of the endowment fund

- Requesting VDC, DHO, and DDC to provide certain amount for endowment fund every year
- Explore I/NGOs and other donor agencies to contribute to the EF
- Maximum mobilization of local resources (organizing cultural programs, collecting money during religious festivals such as Deusi, Bhailio, collecting donation from local CBOs and individuals, etc)
- Investing EF in income generating activities at high interest rate rather than keeping in the bank

b) In functioning of EFEC

- EFEC should be made more active by organizing regular meetings
- Training and orientation on usefulness of EF including its management aspects need to be given to both the FCHVs and EFEC members
- Literate, interested and capable persons should be included in the EFEC
- Maintain effective coordination between EFEC and other stakeholders
- Provide opportunity to FCHVs themselves to identify their own needs

c) Meeting the needs of FCHV that would help to improve the delivery of services for health development in the community

- Provision of ID cards to all FCHVs
- Provision of basic drugs/medicines
- Provision of refresher training, training on new health topics or issues

d) Motivating FCHV in their work

- Recognition of FCHVs' performance by giving award or appreciation letter to dedicated and performing FCHVs
- Arrangement of observation tour or exchange visit to FCHVs
- Provision of meeting allowances
- Frequent supervision and monitoring of FCHVs' work from higher level

Chapter 6

Summary and Recommendations

6.1 Summary of findings

a) Introduction

The FCHV Endowment Fund (EF) has been initiated in 2058 BS. The main objective of this fund is to mobilize local resources for the benefit and motivation of FCHVs.

The overall objective of the study was to find out contribution of the EF to the FCHV program. The study was conducted in 6 districts, namely Dhankuta, Bhaktapur and Kaski from hills and Sunsari, Bardiya and Kanchanpur from Terai region.

Information were collected from different stakeholders at the central level (FHD officials), district level (DHO, and DDC officials) and at the VDC level (HFOMC and EFEC members, FCHVs and MGMs) using FGDs, and in-depth interviews. Twenty-one district level officials, 63 members of the EFEC and 46 from HFOMC, 81 FCHVs and 96 MGMs were included in the study. Likewise, 24 FGDs (4 from each district) with the FCHVs of the sampled VDCs was conducted. In addition, review of the records related to EF at each of the sampled VDCs/municipalities was done. The fieldwork was carried out during the months of April and May 2006.

c) Functioning, management and utilization of endowment fund

Knowledge about the EF and its objectives

Almost all the respondents of each category except a few FCHVs in some districts were aware of the establishment of EF in their areas and its objectives too. However, only one-third of the MGMs had heard about it. Most of the members of EFEC and HFOMC were aware of their roles and responsibilities in the EFEC. In some VDCs of Kanchanpur formation of EFECs were yet to take place. The initial capital fund during the establishment averaged Rs. 23,110 at VDC level. Respective VDCs and municipalities were reported to be the prime sources of fund for the majority of the EFEC. In two each of the study VDCs of Kanchanpur and Kaski districts, local NGOs (*Tharu Mahila Utthan Kendra*) and the community people respectively were the ones who provided money for the EF. In many of the areas, formation of the EFEC was reported to have taken place upon mutual discussion among the members of the community, FCHVs, VDC representative and S/HP. In some of the cases, the composition of EFEC members differed from that stipulated in the EF guidelines as a social worker chaired the committee in a EFEC of Kaski, and NGO representative was also members in EFEC in Bardiya. On an average, each committee composed of 5 members only and the representation of FCHVs fall short of about one in each committee, and three-fourths of FCHVs were satisfied of their representation in the committee.

Utilization of Fund

Findings on the use of the EF do not present an encouraging picture except in two VDCs of Kaski district. Meager interest income due to small size of the capital inadequate to meet even

the minor needs of FCHVs was the main reason behind non use of the EF interest amount so far. Most of the EFEC had earned less than Rs 1,000 in the form of interest from their bank after opening the EF account which is quite insufficient to buy the necessary items for the FCHVs. Absence of VDC secretaries from their respective duty stations on security ground, lack of clear instruction from the district as well as from the center, and lack of details in EF guidelines were some of the other reasons behind the nonuse fund. Urgency to raise the size of capital fund through various measures at the local level and seeking contribution from I/NGOs, and provision of budget as a matching fund on regular basis from the government sources was indicated in order to achieve the objectives of EF program to support the needs of FCHVs.

Identification and priority ranking of FCHVs' needs

In only two VDCs (Machhapuchhre and Ghandruk) in Kaski where the EF was used, the process followed in using the fund was reported to be in line with that stipulated in the EF guidelines. In these VDCs, every decision was reported to have taken place in consultation with the FCHVs in particular and that of the other committee members in general. The survey results indicate that except the token of formal letter to I/NGOs and VDC from the DHO no other efforts in raising fund were reported to have been made. The efforts made by the committees to raise fund was commendable in Kaski as they were able to collect a significant amount of fund through various measures such as organizing cultural programs during festival days, donations from community members, tourist etc.

Organization of EFEC meetings

The practice of organizing EFEC meetings regularly was found to be less common. About one-third of the EFECs reported that they had organized meeting only once since their establishment. In other EFECs too, the number of meetings fell short than stipulated in the EF guidelines.

EF Accounts

Of the 27 EFECs, 14 had fixed account and 22 had saving account in the government bank, one in Sunsari with private bank and one in Bardiya with cooperative bank. The bank accounts were reported to have been operated with the joint signatures of VDC secretary, S/HP in-charge and FCHVs too in some cases. In case of those with neither fixed nor saving account with the bank, inadequate amount of capital fund to open account in the bank, seed capital yet to be received by EFEC and low interest rate in the bank compared to interest rate outside were reported to be the main reasons not to have either of these accounts. About one-third of the FCHVs interviewed were not aware about the places where EF amount was kept, and only 3 out of 27 EF were audited by the time of study period.

EF Guidelines

About one-third of the EFEC and HFOMC members were not aware of the existence of EF guidelines. Some respondents commented that the EF guideline is not clear and also not comprehensive which calls for the need to make the guidelines comprehensive and user-friendly.

Supervision and monitoring of the endowment fund

There is no specific monitoring and supervision mechanism for the EF program. Usually district level health personnel monitor the EF activities when they visit to monitor other health programs. Lack of provision of budget for monitoring exclusively for EF program was reported to be the problem.

d) Support received from different sectors

Support to EFECs

EFECs have not received any kind of support from the DDCs. Likewise, about half of the EFEC members and FCHV focal persons reported that they have received some sort of non-monetary supports such as orientation on EF, and assistance during formation of EFEC and in opening the bank account from DHO. Fund support to EF, assistance in opening bank account and in forming the EFEC, and allowance during immunization days and dresses to the FCHVs were the main supports received from the VDCs. No substantial support from S/HP and HFOMC to EFEC was reported. Fund support from NGOs (*Tharu Mahila Utthan Kendra* and *SPACE*) to the EF was found in some VDCs of Bardiya district. Assurance from CARE Nepal to provide cash contribution to EF was reported in Kanchanpur District.

Support to FCHVs other than from EFECs

FCHVs have been receiving various supports directly from different agencies. FCHVs received training and orientation, ID cards, materials such as radio, bags, torchlight, dresses, etc from international agencies (NFHP, UNICEF, CARE Nepal, ADRA Nepal), NGOs and local clubs involved in health related activities. Such supports were reported to be very helpful in mobilizing and motivating FCHVs to carry out their voluntary work.

Ways of generating funds

Findings on the efforts to raise the fund for EF do not present a rosy scenario in the study areas except in two VDCs in Kaski districts as very little efforts were found to have been made from the EFEC and HFOMC at the community level and DHOs for the purpose. Interestingly, the respondents both from the VDC and district level suggested many ways and methods in raising the fund for EF. Provisions of budget from the center, district and VDC on regular basis were the major suggestions. Similarly, a considerable number of respondents indicated the potentials existing in raising fund at local level such as collecting donations from individuals and groups, going for Deusi Bhaili and organizing cultural program during festival days.

Existence of other funds for FCHVs

Besides EF, 9 VDCs in Dhankuta, Sunsari, Bardiya and Kanchanpur had also other funds initiated by the FCHVs themselves in support of VDC and INGOs. The size of fund ranged from Rs. 12,000 to Rs. 60,000. The sources for the funds were the contribution from FCHVs and also CARE Nepal in case of Kanchanpur district. The funds are used as loan in the community to meet the emergency and other needs of FCHVs and their households. Such funds were reported to be more beneficial to them than the EF.

Contribution of EF to FCHV program

Quite a few respondents only noticed contribution of EF to FCHVs' work. However, majority were optimistic of it in future provided that the size of the EF is increased to the level from which the interest amount would be sufficient to meet their needs.

e) Strengths and weaknesses of the EF program

The study population perceived that EF can serve as great leverage in giving continuity to the health activities in the community by fulfilling FCHVs needs required to render the services. They were of the view that EF can be an effective vehicle to pool-in the financial resources for FCHVs and enhance work spirit among FCHVs due to the concern indicated by the government. Small amount of seed capital, cumbersome banking procedures, implementation without basic preparation, and lack of built-in monitoring system were the main weaknesses pinpointed by them.

6.2 Recommendations

Based on the findings of the study, the following recommendations are made for effective implementation of the endowment fund program further:

- 1) The survey findings indicate that a sizeable number of respondents of different categories were not well aware about the objectives and functional modality of the FCHV EF program. Hence, it is suggested that the program should well inform about it to all the district level as well as community level stakeholders including the FCHVs and mothers' group members in order to receive their continued support for the program. FCHVs can be oriented during their regular review meeting at health facility.
- 2) The size of the capital fund was about Rs 32,000 at VDC level and about Rs 62,000 at the municipality level. The interest amount earned from the seed money on an average was reported to be less than a thousand rupees a year. This was reported to be one of the main reason behind the non-use of the fund as it is not enough to meet even their minor needs. It is therefore suggested to increase the size of the capital fund through various initiatives. Orientation to all the stakeholders in general and EFEC members and FCHVs in particular about the ways and method of raising fund could be the first step. Sharing the experiences of EF program in Machhapuchhre VDC of Kaski among the stakeholders at the VDC level may prove to be a meaningful exercise in this regard. Similarly, the concerned authority at the center is suggested to provide some fund to the EF with small amount of capital fund. In addition, the money accumulated during the basic training of the FCHVs at the district level in the past should be explored and provided to each of the EFECs of the district.
- 3) In view of the highly important FCHV program at the community level, concerted efforts from all the actors active in health sectors as well as people's representative is needed. It helps in making the EF program community owned and thereby helping the FCHVs to work effectively. To manage the funds, formation of a FCHV Endowment Fund Committee at a district level composed of the above representatives is suggested. Raising the fund for EF on a continuous basis and its effective mobilization at district level could be the mandate of the proposed committee. TOR and structure of the committee should be decided in an appropriate forum.

- 4) As per the EF guidelines the transaction of the EF should be made only with the banks. The study findings highlight the difficulties faced by the EFEC in opening the bank account due to the non-existence of such banks nearby as well as the interest rate provided by them to the depositors is relatively low compared to other formal financial institutions. Therefore, there is a need of policy change giving the flexibility to EFECs in opening their accounts in any of the formal financial institutions. Similarly, the condition of renewing the fixed account every year by the EFECs should be exempted by convincing the bank authorities at the central level.
- 5) In view of the small size of the capital fund consequently the low interest amount, policy to entrust the entire fund to FCHVs to revolve among themselves in meeting their needs as well as to invest in productive sectors should be thought of by ensuring the accountability of the fund. This would help to raise the size of the fund in one hand and meet their basic needs on the other.
- 6) In taking initiative for raising fund, the government could persuade VDC and DDC to allocate their budget to EF on regular basis. This would help to further the commitment of VDC and DDC towards the program in order to ensure the program on a sustained basis. In addition, local potentials should also be explored as was done in the case of Machhapuchhre VDC in Kaski.
- 7) The survey findings indicate lack of monitoring and supervision from the upper level. Therefore, it is suggested to make the monitoring and supervision of the EF during routine monitoring of health programs.
- 8) The results also highlight that a sizeable number of the study populations have not even seen the EF guidelines. Those who had seen it also complained about the clarity and comprehensiveness in the guideline. It was reported that the guidelines do not provide details about who, when and hows required in implementing the EF at the grassroots level. Therefore, it is suggested that EF guidelines should include the roles and responsibilities of each of the stakeholders, what and who about monitoring/supervision, progress reporting, etc.
- 9) Findings of the study show that the EF Program can serve as one of the important tools to make FCHVs motivated to work effectively and to ensure their continuity in the program. However, the EF Program at present is in need of policy changes, supportive activities and clear and comprehensive implementation guidelines for it to achieve its intended objectives. Therefore, the FCHV EF program should be included at regular national program.
- 10) The findings demonstrate that the management and utilization of EF is rather poor in most the study areas. Therefore, the program should focus on existing areas in improving management aspects, fund raising and its utilization rather than expanding the EF program in more areas.

Annex

Annex 1: Glimpses of the sampled EFECs

District and VDCs	Year of establishment	Distance from DHQ (1= Near 2= Far)	Total amount (Rs)		Use of fund	EFEC	
			At the time of establishment	At present		Number of members (n=7)	No. of FCHVs
Dhankuta							
Basantatar	2061/2	1	24,000	25,000	No	3	1
Mahabharat	2060	1	25,000	25,000	No	3	1
Bhirgaon	2060/2	2	15,000	16,000	No	5	1
Pakhribas	2059/10	2	25,700	25,700	No	3	1
Bhaktapur							
Changunarayan	2060/5	1	35,000	36,200	No	7	3
Nagarkot	2060/5	1	30,000	30,000	No	10	4
Nangkhel	2061	2	20,000	20,000	No	2	0
Gundu	2060/8	2	25,000	25,000	No	6	4
Bhaktapur Munic			NA	NA	No	NA	NA
Kaski							
Pokhara Munic	2062/8		1,000	161,021	No	5	3
Machhapuchre	2059/11	1	40,600	105,126	Yes	7	4
Ghandruk	2060/2	1	3,775	100,813	Yes	9	3
Majhthana	2060/3	2	10,000	25,413	No	2	0
Dhikurpokhari	2060/7	2	9,360	51,041	No	2	0
Sunsari							
Inaruwa Munic	2058/7		25,000	47,000	No	7	3
Duhabi	2057/2	2	10,000	24,500	No	7	3
Panchakanya	2060/12	1	18,000	18,000	No	6	3
Kaptangunj	2060/9	1	21,000	21,000	No	5	3
Tanmuna	2059/12	2	17,000	17,000	No	7	4
Bardiya							
Sorhawa	2057/4	1	45,000	70,997	No	7	3
Belwa	2059/5	1	4,000	4,000	No	2	1
Mainapokhar	2059	2	60,000	60,000	No	2	1
Kalika	2057/5	2	60,000	60,000	No	3	1
Kanchanpur							
Daiji	2057/8	2	5,000	20,000	No	7	4
Beldandi	NA	1	NA	NA	No	NA	NA
Krishnapur	NA	1	NA	NA	No	NA	NA
Suda	2062/11	2	5,000	5,000	No	5	3

Annex 2
Survey Instruments

**A study on the FCHV Endowment Fund, 2005
MOHP/ NFHP/VaRG
(Questionnaire for DHO/DPHO)**

District:	
Name of respondent:	
Designation:	
Name of interviewer:	
Interview date:	

Section 1: Objective, operation and management of the endowment fund	
1	When was the EF initiated in this district? Year:.....
2	What are the objectives of the FCHV Endowment Fund?
3	What are your main roles and responsibilities in the FCHV endowment fund?
4	How much fund do you have in the program? Rs:..... What are the criteria of determining the size of seed money to each VDC?
5	What are the sources for EF? Please specify.
6	In what areas/for what purposes the FCHV endowment fund is mostly used in your district?
7	Do you have any mechanism/practice that the income and expenses made from the EF Bachat Kosh is made public? If yes, how?

8	Who is supposed to audit the EF?
9	What is your impression about the existing practice of determining and prioritizing the FCHVs needs by EFMC? If not fine, please give your suggestion for its improvements.
10	Was the account audited last year in your district? If no, what are the reasons for not auditing the EF account?
Section 2: Support	
11	What kinds of supports (other than fund raising) are you receiving for EF from Central Level and other district level stakeholders at present? (Probe: maintaining account, utilizing fund, etc) <u>From Central Level:</u> <u>From other Stakeholders (Specify):</u>
12	What kinds of support are you getting from district level <u>NGO</u> to run the endowment fund more effectively and efficiently? Please mention the name of the NGOs who are providing support for the EF.
13	In your opinion, in what ways the program can generate additional fund at local level?
14	What efforts so far you have made to increase the amount of the fund? Please explain.
15	Endowment fund at district level
	Do you have district level FCHV endowment fund? If yes, when and with how much amount was it established and how? Year:..... Rs:.....

	<p>If yes, what is being done with the fund?</p> <p>.....</p> <p>.....</p> <p>.....</p>
	<p>If yes, where is it and who are the account holders?</p> <p>.....</p> <p>.....</p> <p>.....</p>
	<p>If yes, are the VDCs and FCHV aware about the district level FCHV EF?</p> <p>.....</p> <p>.....</p> <p>.....</p>
<p>Other types of supports/incentives received and perception on such supports (besides EF)</p>	
16	<p>Has the FCHV in your district received any other support from agencies other than DDC and DHO? If yes, from whom you have received support?</p> <p>.....</p> <p>.....</p> <p>.....</p>
	<p>What types of supports they have received from them? Please mention the type of supports they received by organization or agency.</p> <p>.....</p> <p>.....</p> <p>.....</p>
17	<p>In your opinion, are these supports or incentives helpful in the functioning of FCHVs in your district? If yes, in what ways they are useful?</p> <p>.....</p> <p>.....</p> <p>.....</p>
18	<p>How do you compare EF with other cash supports received by FCHV?</p> <p>.....</p> <p>.....</p> <p>.....</p>
19	<p>What is your opinion about the FCHV Endowment Fund?</p> <p>.....</p> <p>.....</p> <p>.....</p>
<p>Section 3: Utilization of Fund</p>	
20	<p>In your opinion, is the EF contributing to the FCHVs to work effectively? If yes, how? If not why?</p> <p>.....</p> <p>.....</p> <p>.....</p>

Section 4: Contribution to FCHV Program	
21	To what extent the Endowment Fund has been instrumental in promoting FCHV services in the community? Give your reasons.
22	In your opinion, what factors are contributing the FCHVs to work in the community effectively and efficiently? (Probe: community and family support, prestigious job, provision of endowment fund trainings/visits, other cash and in kind supports, etc)
23	What is your impression on the involvement of FCHVs in utilization of EF?
Section 5: Difficulties, strengths and weakness	
24	Who is responsible to monitor EF program at district level (DHO or DDC)? In what ways the monitoring is being done?
25	Are there any problems in implementing FCHV endowment fund? If yes, what are they?
26	Do you have any suggestions to solve the problems?
27	Is any modifications in the EF program/policy is required? If yes, please suggest.
28	What is your opinion to make the FCHV EF more effective?
29	What are the strengths and weaknesses of the policy of government regarding the FCHV Endowment Fund?

30	<p>What should be done to make the EF sustainable in the manner it helps in:</p> <p><u>Raising the size of the EF Fund</u></p> <p>.....</p> <p>.....</p> <p>.....</p> <p><u>Functioning of EFMC</u></p> <p>.....</p> <p>.....</p> <p>.....</p> <p><u>Meeting the needs of FCHV that helps to improve their delivery of services for health development in the community</u></p> <p>.....</p> <p>.....</p> <p>.....</p>
	<p><u>Motivating FCHV in their work</u></p> <p>.....</p> <p>.....</p> <p>.....</p>

**A study on the FCHV Endowment Fund, 2005
MOHP/ NFHP/VaRG
(Questionnaire for FCHV Focal Person)**

District:	
Name of respondent:	
Designation:	
Name of interviewer:	
Interview date:	

Section 1: Objective, operation and management of the endowment fund	
1	When was the EF initiated in this district? Year:.....
2	What are the objectives of the FCHV Endowment Fund?
3	What are your main roles and responsibilities in the FCHV endowment fund?
4	What are the operational procedures of EF?
5	In what areas/for what purposes the FCHV endowment fund is mostly used in your district?
6	What is your impression about the existing practice of determining and prioritizing the FCHVs needs by EFMC? If not fine, please give your suggestion for its improvements.

Section 2: Support	
7	<p>What kinds of supports (other than fund raising) you are receiving from DDC, DHO, HP/SHP, VDC and other stakeholders to run the EF at present? (Probe: maintaining account, utilizing fund, etc)</p> <p><u>From District Development Committee:</u></p> <p>.....</p> <p>.....</p> <p>.....</p> <p><u>From District Health Office:</u></p> <p>.....</p> <p>.....</p> <p>.....</p> <p><u>From Health post or subhealth post (HFMC):</u></p> <p>.....</p> <p>.....</p> <p>.....</p> <p><u>From VDC:</u></p> <p>.....</p> <p>.....</p> <p>.....</p>
8	<p>What kinds of support are you getting from district level <u>NGO</u> to run the endowment fund more effectively and efficiently? Please mention the name of the NGOs who are providing support for the EF.</p> <p>.....</p> <p>.....</p> <p>.....</p>
9	<p>What would be the possible ways to increase the size of the fund?</p> <p>.....</p> <p>.....</p> <p>.....</p>
10	<p>What kinds of supports are the FCHV endowment funds getting from DDC?</p> <p>.....</p> <p>.....</p> <p>.....</p>
11	<p>Has the FCHV in your district received any other support from agencies other than DDC and DHO? If yes, from whom you have received support?</p> <p>.....</p> <p>.....</p> <p>.....</p>

	<p>What types of supports they have received from them? Please mention the type of supports they received by organization or agency.</p> <p>.....</p> <p>.....</p> <p>.....</p>
12	<p>How do you compare EF with other cash supports received by FCHVs?</p> <p>.....</p> <p>.....</p> <p>.....</p>
13	<p>How are these supports/incentives being coordinated at the ward/VDC level?</p> <p>.....</p> <p>.....</p> <p>.....</p>
<p>Section 3: Utilization of Fund</p>	
14	<p>Do you get reports from the FCHV endowment fund on regular basis? If yes, how frequently do you get reports? If not receiving regularly, what are the reasons?</p> <p>.....</p> <p>.....</p>
	<p>Is the information received adequate about the status on functioning of EF?</p> <p>.....</p> <p>.....</p> <p>.....</p>
	<p>What is the channel of reporting?</p> <p>.....</p> <p>.....</p>
<p>Section 4: Contribution to FCHV Program</p>	
15	<p>In your opinion, is the EF contributing to the FCHVs to work effectively? If yes, how? If not why?</p> <p>.....</p> <p>.....</p> <p>.....</p>
16	<p>In your opinion, how has the endowment fund contributed to the FCHV program? Please give your reasons.</p> <p>.....</p> <p>.....</p> <p>.....</p>
17	<p>How the decision in releasing or arranging the fund takes place at VDC level?</p> <p>.....</p> <p>.....</p> <p>.....</p>

	<p>Who mainly get involve in decision-making process at VDC level? (Probe: community members, leaders, health workers, FCHV, etc)</p> <p>.....</p> <p>.....</p> <p>.....</p>
	<p>Based on your experience, to what extent the FCHVs are listened in making decision about the use of fund at VDC/community level? (e.g. to greater extent, some extent or not at all)</p> <p>.....</p> <p>.....</p> <p>.....</p>
	<p>If to some extent or not at all, what are the reasons for not listening to them in decision-making process? (e.g. not capable, illiterate, ignorant etc.)</p> <p>.....</p> <p>.....</p> <p>.....</p>
Section 5: Supervision	
18	<p>How often do you make supervision visit to the lower level such as health facility, EFMC or VDCs?</p> <p>.....</p> <p>.....</p> <p>.....</p>
19	<p>Do you think that the frequency of supervision and monitoring visits made from you/your office to EF was adequate? If yes, why do you think so?</p> <p>.....</p> <p>.....</p> <p>.....</p>
20	<p>What are the main aspects that you concentrate during your supervision visit?</p> <p>.....</p> <p>.....</p> <p>.....</p>
21	<p>Have you ever provided any form of feedback after such supervision to EF committee or FCHV? If yes, what type of feedback do you generally provide?</p> <p>.....</p> <p>.....</p> <p>.....</p>
22	<p>After completing supervision and monitoring, which activities do you carry out? (e.g. documentation; reporting to DHO; sending feedback to EF committee; discuss with colleague at district health office; etc.)</p> <p>.....</p> <p>.....</p> <p>.....</p>

23	Is there any structured form/format/guideline for supervision and monitoring activity?
24	How do you find the functioning of the EFMC? 1..... 2..... 3.....
25	What problems/constraints have you faced in the supervision/monitoring of EF activities?
26	What support do you need from the district health office for the monitoring and supervision activities of the EF?
Section 6: Difficulties, strengths and weakness	
27	Are there any problems in implementing FCHV endowment fund? If yes, what are they?
28	Do you have any suggestions to solve the problems?
29	Is any modifications in the EF program/policy is required? If yes, please suggest.
30	What should be done to make the EF sustainable in the manner it helps in: <u>Raising the size of the EF Fund</u>
	<u>Functioning of EFMC</u>

	<p><u>Meeting the needs of FCHV that helps to improve their delivery of services for health development in the community</u></p> <p>.....</p> <p>.....</p> <p>.....</p>
	<p><u>Motivating FCHV in their work</u></p> <p>.....</p> <p>.....</p> <p>.....</p>

**A study on the FCHV Endowment Fund, 2005
MOHP/ NFHP/VaRG
(Questionnaire for District Level EFMC Member)**

District:	
Name of respondent:	
Designation:	
Name of office:	
Name of interviewer:	
Interview date:	

	Section 1: Objective, operation and management of the endowment fund
1	When was the EF initiated in this district? Year:.....
2	What are the objectives of the FCHV Endowment Fund?
3	What are your main roles and responsibilities in the FCHV endowment fund?
	How often the committee meets in a year?
4	What are the operational procedures of EF?
5	What are the sources for district level EF? Please specify.
	Section 2: Fund utilization
6	In what areas that the EF is being used in your district? If not used at all, what are the reasons?

7	How are the needs for fund use identified? Please explain.
8	Who is supposed to audit the EF?
Section 3: Support	
9	What kinds of supports (other than fund raising) are you receiving for EF from Central Level and other district level stakeholders at present? (Probe: maintaining account, utilizing fund, etc) <u>From Central Level:</u> <u>From other Stakeholders (Specify):</u>
10	What kinds of support are you getting from district level <u>NGO</u> to run the endowment fund more effectively and efficiently? Please mention the name of the NGOs who are providing support for the EF.
11	In your opinion, in what ways the program can generate additional fund at district level?
12	What efforts so far you have made to increase the amount of the fund? Please explain.
13	What kinds of supports are the FCHV endowment funds getting from DDC?
Section 4: Contribution to FCHV Program	
14	What is your opinion about the FCHV Endowment Fund?

15	<p>In your opinion, is the EF contributing to the FCHVs to work effectively? If yes, how? If not why?</p> <p>.....</p> <p>.....</p> <p>.....</p>
Section 5: Difficulties, strengths and weakness	
16	<p>Are there any problems in implementing FCHV endowment fund? If yes, what are they?</p> <p>.....</p> <p>.....</p> <p>.....</p>
17	<p>Do you have any suggestions to solve the problems?</p> <p>.....</p> <p>.....</p> <p>.....</p>
18	<p>Is any modifications in the EF program/policy is required? If yes, please suggest.</p> <p>.....</p> <p>.....</p> <p>.....</p>
19	<p>What is your opinion to make the FCHV EF more effective?</p> <p>.....</p> <p>.....</p> <p>.....</p>
20	<p>What are the strengths and weaknesses of the policy of government regarding the FCHV Endowment Fund?</p> <p>.....</p> <p>.....</p> <p>.....</p>
21	<p>What should be done to make the EF sustainable in the manner it helps in:</p> <p><u>Raising the size of the EF Fund</u></p> <p>.....</p> <p>.....</p> <p>.....</p> <p><u>Functioning of EFMC</u></p> <p>.....</p> <p>.....</p> <p>.....</p> <p><u>Meeting the needs of FCHV that helps to improve their delivery of services for health development in the community</u></p> <p>.....</p> <p>.....</p> <p>.....</p>
	<p><u>Motivating FCHV in their work</u></p> <p>.....</p> <p>.....</p> <p>.....</p>

**A study on the FCHV Endowment Fund, 2005
MOHP/ NFHP/VaRG
(Questionnaire for District Development Committee Officials)**

District:	
Name of respondent:	
Designation:	
Name of interviewer:	
Interview date:	

	Section 1: Objective, operation and management of the endowment fund
1	When was the EF initiated in this district? Year:.....
2	What are the objectives of the FCHV Endowment Fund?
	Section 2: Support
3	What kinds of supports are you providing for EF?
4	In your opinion, in what ways the program can generate additional fund at local level?
	Have there been any such efforts to generate additional fund? If yes, what are they?
	Section 3: Contribution to FCHV Program
5	What is your opinion about the FCHV Endowment Fund?
6	In your opinion, how has the endowment fund contributed to the FCHV program? Please give your reasons.

Section 4: Difficulties, strengths and weakness	
7	Who is responsible to monitor EF program at district level (DHO or DDC)? In what ways the monitoring is being done?
8	Is any modifications in the EF program/policy is required? If yes, please suggest.
9	What is your opinion to make the FCHV EF more effective?
10	What are the strengths and weaknesses of the policy of government regarding the FCHV Endowment Fund?
11	What are the areas to ensure effective coordination with actors involved in EF?
12	What should be done to make the EF sustainable in the manner it helps in: <u>Raising the size of the EF Fund</u>
	<u>Functioning of EFMC</u>
	<u>Meeting the needs of FCHV that helps to improve their delivery of services for health development in the community</u>
	<u>Motivating FCHV in their work</u>

**A study on the FCHV Endowment Fund, 2005
MOHP/ NFHP/VaRG
(Questionnaire for District Level Endowment Fund Management
Committee Members)**

District:	
Name of VDC:	
Ward No.:	
Name of respondent:	
Designation:	
Name of office:	
Name of interviewer:	
Interview date:	

	Section 1: Objectives of EF
1	How long have you been working as the Endowment Fund Management Committee Member? Year:..... Month:.....
2	What are the objectives of the FCHV Endowment Fund?
3	What are your main roles and responsibilities as an EFMC chairperson/member in the FCHV endowment fund?
	Section 2: Management of fund
4	Did you attend all EFMC meetings organized in the past one year? If no, how many meetings did you miss in the last one-year? What are the reasons for not attending/or missing some of the meetings?
5	What issues were discussed during the last EFMC meeting?
6	What are the present weaknesses/shortcomings in the functioning of EFMCs?

7	<p>In your opinion, what are the areas needing improvements for efficient functioning of EFMC?</p> <p>.....</p> <p>.....</p> <p>.....</p>
Section 3: Fund utilization	
8	<p>In what areas that the EF is being used in your community/VDC? If not used at all, what are the reasons?</p> <p>.....</p> <p>.....</p> <p>.....</p>
9	<p>How are the needs for fund use identified? Please explain.</p> <p>.....</p> <p>.....</p> <p>.....</p>
10	<p>Are the FCHVs consulted in determining and prioritizing their needs? If no, what are the reasons for not consulting them?</p> <p>.....</p> <p>.....</p> <p>.....</p>
11	<p>What are the problems with respect to the operation and management of fund? (e.g. bandha, bank office far away, absence of cheque operating persons, etc)? If yes, how do you solve the problems?</p> <p>.....</p> <p>.....</p> <p>.....</p>
12	<p>Have you faced any problems while opening account for reasons like having too small amount of money? If yes, how did you solve it?</p> <p>.....</p> <p>.....</p> <p>.....</p>
13	<p>Was the account audited last year? If no, what are the reasons for not auditing the EF account?</p> <p>.....</p> <p>.....</p> <p>.....</p>
14	<p>Are the income and expenses made from the Bachat Khata known to all the FCHVs in the area and also made public? If yes how? If no, what are the reasons?</p> <p>.....</p> <p>.....</p> <p>.....</p>

Section 4: Support	
15	<p>What kinds of supports (other than fund raising) you are receiving from DDC, DHO, HP/SHP, VDC and other stakeholders to run the EF at present? (Probe: maintaining account, utilizing fund, etc)</p> <p><u>From District Development Committee:</u></p> <p>.....</p> <p>.....</p> <p>.....</p> <p><u>From District Health Office:</u></p> <p>.....</p> <p>.....</p> <p>.....</p> <p><u>From Health post or subhealth post (HFMC):</u></p> <p>.....</p> <p>.....</p> <p>.....</p> <p><u>From VDC:</u></p> <p>.....</p> <p>.....</p> <p>.....</p> <p><u>From Other stakeholders (specify):</u></p> <p>.....</p> <p>.....</p> <p>.....</p>
16	<p>What kinds of support you are getting from <u>local NGO</u> to run the endowment fund more effectively and efficiently? Please mention the type of supports you have received by name of NGOs.</p> <p>.....</p> <p>.....</p> <p>.....</p>
17	<p>What activities/ support EFMC is getting from the health facility management committee? (Probe: help in utilizing fund, preparing report, arranging supplies, solving problems, etc.)</p> <p>.....</p> <p>.....</p> <p>.....</p>
18	<p>What types of support DDC/VDC is providing to FCHVs? (e.g., Sari, box, cash, etc)</p> <p><u>From DDC:</u></p> <p>.....</p> <p>.....</p> <p>.....</p> <p><u>From VDC:</u></p> <p>.....</p> <p>.....</p> <p>.....</p>

19	<p>In your opinion, in what ways the EF can generate additional fund for FCHV at local level?</p> <p>.....</p> <p>.....</p> <p>.....</p>
20	<p>What efforts so far you have made to increase the amount of the fund? Please explain.</p> <p>.....</p> <p>.....</p> <p>.....</p>
21	<p>Are there any other funds established for the welfare of FCHV at community level? If yes, who initiated or established this fund?</p> <p>.....</p> <p>.....</p> <p>.....</p>
	<p>In what ways they are supporting to FCHVs?</p> <p>.....</p> <p>.....</p> <p>.....</p>
22	<p>How do you compare this fund with FCHV Endowment Fund with respect to its contribution for the welfare of FCHV?</p> <p>.....</p> <p>.....</p> <p>.....</p>
Section 5: Contribution to FCHV Program	
23	<p>In your opinion, how has the endowment fund contributed to the FCHV program? Please give your reasons.</p> <p>.....</p> <p>.....</p> <p>.....</p>
24	<p>In your opinion, what factors are contributing the FCHVs to work in the community effectively and efficiently?</p> <p><u>Probe:</u></p> <p>a) Community and family support</p> <p>b) Prestigious job</p> <p>c) Provision of endowment fund trainings/visits</p> <p>d) Other cash and in kind supports</p> <p>e) Any other</p>
25	<p>What activities besides EF, you see, will stimulate the FCHVs in providing services to the community?</p> <p>.....</p> <p>.....</p> <p>.....</p>

Section 6: Difficulties, strengths and weakness	
26	<p>What are your overall views on FCHV endowment fund? (Probe: strengths and weaknesses; merits and demerits; etc.)</p> <p>.....</p> <p>.....</p> <p>.....</p>
27	<p>Did you find any operational difficulties in following the EF guidelines?</p> <p>.....</p> <p>.....</p> <p>.....</p>
28	<p>What are your major challenges in discharging your responsibilities effectively? (Probe: lack of fund, training, education, community support, etc)</p> <p>.....</p> <p>.....</p> <p>.....</p>
29	<p>What are the strengths and weaknesses of the program/policy of government regarding the FCHV Endowment Fund?</p> <p>.....</p> <p>.....</p> <p>.....</p>
30	<p>What should be done to make the FCHV EF sustainable in the manner it helps in:</p>
	<p><u>Raising the size of the EF Fund</u></p> <p>.....</p> <p>.....</p> <p>.....</p>
	<p><u>Functioning of EFMC</u></p> <p>.....</p> <p>.....</p> <p>.....</p>
	<p><u>Meeting the needs of FCHV that helps to improve their delivery of services for health development in the community</u></p> <p>.....</p> <p>.....</p> <p>.....</p>
	<p><u>Motivating FCHV in their work</u></p> <p>.....</p> <p>.....</p> <p>.....</p>

**A study on the FCHV Endowment Fund, 2005
MOHP/ NFHP/VaRG
(Checklist for Endowment Fund Management Committee
Members)**

(Copy from the Records maintained by the EFMC and/or interview with only one person from (Chairperson or member) each EFMC to get the following information)

District:	
Name of VDC:	
Ward No.:	
Name of respondent:	
Respondent type	
Name of interviewer:	
Interview date:	

1	When and with how much money the EF was established in your area? Year of establishment (Year and month):..... Amount at the time of establishment (in Rs):..... Who contributed the amount? Please specify.																																																				
2	How was the endowment fund established in this VDC? What were its procedures?																																																				
3	When the EFMC was established? Year: Month:.....																																																				
4	Who are the members in the Endowment Fund Management Committee (EFMC)? <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th rowspan="2" style="width: 10%;">S. No.</th> <th rowspan="2" style="width: 30%;">Name</th> <th colspan="2" style="width: 40%;">Position</th> <th rowspan="2" style="width: 20%;">Affiliated institutions</th> </tr> <tr> <th style="width: 15%;">In EF</th> <th style="width: 25%;">In your institution</th> </tr> </thead> <tbody> <tr><td style="text-align: center;">1</td><td></td><td></td><td></td><td></td></tr> <tr><td style="text-align: center;">2</td><td></td><td></td><td></td><td></td></tr> <tr><td style="text-align: center;">3</td><td></td><td></td><td></td><td></td></tr> <tr><td style="text-align: center;">4</td><td></td><td></td><td></td><td></td></tr> <tr><td style="text-align: center;">5</td><td></td><td></td><td></td><td></td></tr> <tr><td style="text-align: center;">6</td><td></td><td></td><td></td><td></td></tr> <tr><td style="text-align: center;">7</td><td></td><td></td><td></td><td></td></tr> <tr><td style="text-align: center;">8</td><td></td><td></td><td></td><td></td></tr> <tr><td style="text-align: center;">9</td><td></td><td></td><td></td><td></td></tr> </tbody> </table>	S. No.	Name	Position		Affiliated institutions	In EF	In your institution	1					2					3					4					5					6					7					8					9				
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5	How often and when the EFC meeting is organized?																																																																				
6	How many times the EFC meeting was organized in the last one year? Number of times:.....																																																																				
7	When was the last meeting held? Year:..... Month:..... Number of persons participated in the last meeting:..... How many FCHVs participated in the last meeting?.....																																																																				
8	What are the sources for EF? Please specify. <table border="1" data-bbox="313 667 1502 930"> <thead> <tr> <th rowspan="2">S. No.</th> <th rowspan="2">Donors/contributors</th> <th colspan="8">Date and amount received</th> </tr> <tr> <th>Date</th> <th>Rs</th> <th>Date</th> <th>Rs</th> <th>Date</th> <th>Rs</th> <th>Date</th> <th>Rs</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>	S. No.	Donors/contributors	Date and amount received								Date	Rs	Date	Rs	Date	Rs	Date	Rs																																																		
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9	What types of account (fixed and savings account) the FCHV EF has in this VDC? <table border="1" data-bbox="313 972 1502 1287"> <thead> <tr> <th></th> <th>Name of bank</th> <th>Amount (in Rs)</th> <th>Interest rate per annum</th> </tr> </thead> <tbody> <tr> <td>1) Bank</td> <td></td> <td></td> <td></td> </tr> <tr> <td> a) Fixed account</td> <td></td> <td></td> <td></td> </tr> <tr> <td> b) Saving account</td> <td></td> <td></td> <td></td> </tr> <tr> <td> c) Current account</td> <td></td> <td></td> <td></td> </tr> <tr> <td>2) Other (specify).....</td> <td></td> <td></td> <td></td> </tr> <tr> <td>3) Other (specify).....</td> <td></td> <td></td> <td></td> </tr> <tr> <td>4) Other (specify).....</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		Name of bank	Amount (in Rs)	Interest rate per annum	1) Bank				a) Fixed account				b) Saving account				c) Current account				2) Other (specify).....				3) Other (specify).....				4) Other (specify).....																																							
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10	If the EF has no fixed account, what are the reasons for not having fixed account? If the EF has no savings account (Bachat Kosh), what are the reasons for not having fixed account?																																																																				

11	<p>When was the Muddati and Bachat Kosh established?</p> <p><u>a) Year of establishment of Muddati Khata</u> Year:..... Month:.....</p> <p><u>b) Year of establishment of Bachat Khata</u> Year:..... Month:.....</p> <p><u>c) Year of establishment of Current Account</u> Year:..... Month:.....</p>																				
12	<p>Where the EF has been kept? (eg. in Bank (specify government or private bank); In health post; In VDC office; In Individual's house, etc) Ask separately for fixed and savings account.</p> <p><u>a) Muddati Khata</u> </p> <p><u>b) Bachat Khata</u> </p> <p><u>c) Other (specify)</u> </p> <p>If not kept in the bank, what are the reasons for not keeping money in the bank? </p>																				
13	<p>Who are involved in operating the EF account or who are the signatories to operate the bank account? (Bachat Khata)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2" style="width: 5%;"></th> <th rowspan="2" style="width: 45%;">Name</th> <th colspan="2" style="width: 45%;">Position</th> </tr> <tr> <th style="width: 20%;">In EF</th> <th style="width: 25%;">In your institution</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">1</td> <td></td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">2</td> <td></td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">3</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Name	Position		In EF	In your institution	1				2				3			
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		In EF	In your institution																		
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14	<p>Was the account audited last year? If no, when it was audited last time? </p>																				
15	<p>How much amount did you get in the last one year in the form of interest? In fixed account (Rs):..... In saving account (Rs):..... Other specify (Rs):.....</p>																				

16	When did you draw the money last time from bank? How much money did you draw? From fixed account (Rs):..... Date From saving account (Rs):..... Date From caving account (Rs):..... Date Other (specify) (Rs):..... Date		
17	How much amount has been spent or utilized for FCHVs to date?		
	Description of activities	Amount spent (Rs)	Date
<i>Note: COPY SOME OF THE INTERESTING DECISIONS MADE DURING LAST MEETING BY REVIEWING THE MINUTES MAINTAINED BY THE EFMC.</i>			

**A study on the FCHV Endowment Fund, 2005
MOHP/NFHP/ VaRG
(Questionnaire for Health Facility Management Committee Members)**

District:	
Name of VDC:	
Ward No.:	
Name of respondent:	
Respondent type:	
Name of interviewer:	
Interview date:	

	Section 1: Objectives of EF
1	How long have you been working as the Health Facility Management Committee Member? Year:..... Month:.....
2	What are the objectives of the FCHV Endowment Fund?
3	What are your main roles and responsibilities as the HFMC chairperson/ member in the FCHV endowment fund?
	Section 2: Management of fund
4	How was the endowment fund established in this VDC? What were its procedures?
5	In what areas that the fund is being used in your community/VDC? If not used at all, what are the reasons?
6	Is there any mechanism/practice that the income and expenses made from the EF Bachat Kosh is made public? If yes, how?

7	<p>What are the present weaknesses/shortcomings in the functioning of Endowment Fund Management Committee?</p> <p>.....</p> <p>.....</p> <p>.....</p>
8	<p>In your opinion, what are the areas needing improvements for efficient functioning of EFMC?</p> <p>.....</p> <p>.....</p> <p>.....</p>
Section 3: Support	
9	<p>What types of other support DDC/VDC is providing to FCHVs? (e.g., Sari, box, cash, etc)</p> <p><u>From DDC:</u></p> <p>.....</p> <p>.....</p> <p>.....</p>
	<p><u>From VDC:</u></p> <p>.....</p> <p>.....</p> <p>.....</p>
10	<p>What efforts so far have been made by (you as a member of) HFMC to increase the amount of the fund? What efforts have been successful? Please explain.</p> <p>.....</p> <p>.....</p> <p>.....</p>
11	<p>In your opinion, what kinds of further supports are needed from the central and district level to strengthen the FCHV Endowment Fund?</p> <p>.....</p> <p>.....</p> <p>.....</p>
12	<p>What types of kinds or cash supports have the FCHVs in your VDC received from other than the EFMC?</p> <p>.....</p> <p>.....</p> <p>.....</p>
	<p>What types of supports they have received from them? Please mention the type of supports they received by organization or agency.</p> <p>.....</p> <p>.....</p> <p>.....</p>
13	<p>Are there any other funds established for the welfare of FCHV at community level/VDC? If yes, who initiated or established this fund?</p> <p>.....</p> <p>.....</p> <p>.....</p>

	In what ways they are supporting to FCHVs?
14	Do you get reports from the FCHV EFMC on regular basis? If yes, how frequently do you get reports? If not receiving regularly, what are the reasons?
Section 4: Contribution to FCHV Program	
15	In your opinion, how has the endowment fund contributed to the FCHV program?
16	What activities besides EF, you see, will stimulate the FCHVs in providing services to the community?
Section 5: Difficulties, strengths and weakness	
17	What are your overall views on FCHV endowment fund? (Probe: strengths and weaknesses; merits and demerits; etc.)
18	Did you find any difficulties in following EF guidelines?
19	What should be done to make the EF sustainable in the manner it helps in: <u>Raising the size of the EF Fund</u>
	<u>Functioning of EFMC</u>
	<u>Meeting the needs of FCHV that helps to improve their delivery of services for health development in the community</u>
	<u>Motivating FCHV in their work</u>

**A study on the FCHV Endowment Fund, 2005
MOHP/ NFHP/VaRG
(Interview Guide for Mothers Group Members)**

District:	
Name of VDC:	
Ward No.:	
Name of respondent:	
Name of interviewer:	
Interview date:	

	Section 1: Socio-demographic Characteristics)
1	How old are you? Age:.....
2	What is your marital status? 1= Unmarried 2= Currently married 3= Divorced/separated/widow
3	Can you read and write? 1= Yes 2= No
4	Are you involved in any community groups/committees? If yes, give the name of the group/committee?
	Section 2: Objective of EF
5	Have you heard of the FCHV endowment fund? If yes, what is it?
6	Do you know what are the usefulness of the FCHV Endowment Fund?

Section 3: Contribution to FCHV Program	
7	In your opinion, is the EF inspiring to the FCHVs to work effectively? If yes, how? If not why?
8	In your opinion, what factors are contributing the FCHVs to work in the community effectively and efficiently? <u>Probe:</u> a) Community and family support b) Prestigious job c) Provision of endowment fund trainings/visits d) Other cash and in kind supports
Section 4: Difficulties, strengths and weakness	
9	What are your overall views on FCHV endowment fund? (Probe: strengths and weaknesses; merits and demerits; etc.)
10	Do you think that FCHVs are facing any problems/difficulties in their activities? If yes, what are those problems? Do you have any solutions to solve these problems?
11	What is your opinion to make the FCHV EF more effective? 1..... 2..... 3.....
12	What should be done to make the EF sustainable in the manner it helps in: <u>Raising the size of the EF Fund</u>

	<u>Functioning of EFMC</u>
	<u>Meeting the needs of FCHV that helps to improve their delivery of services for health development in the community</u>

**A study on the FCHV Endowment Fund, 2005
MOHP/ NFHP/VaRG
(IDI Guidelines for FCHV)**

District:	
Name of VDC:	
Name of respondent:	
Name of interviewer:	
Interview date:	

1	<p>How was the endowment fund established? What were its processes?</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>Were you involved in the process? If yes, in what ways you were involved? (Probe: type of efforts made, etc)</p> <p>.....</p> <p>.....</p> <p>.....</p>
2	<p>Where the EF is kept (e.g. in bank—government or private, in HP or VDC office or individuals, group)?</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>If not being kept in the government bank, what are the reasons for not keeping money in government bank? (Probe: distance, small amount of money, attractive or high interest rate outside, lengthy procedures, etc.)</p> <p>.....</p> <p>.....</p> <p>.....</p>
3	<p>What is the total amount of fund in EF (fixed account or Muddati Khata) and in Bachat Kosh (savings account) at present?</p> <p>Fixed Account (Rs):.....</p> <p>Savings Account (Rs):.....</p> <p>Other specify (Rs):.....</p>

4	<p>Who are the members of the EFMC?</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>How are the FCHVs represented in EFMC? (Probe: specific quota, academic qualification, population coverage, interested ones only, etc.)</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>Were you consulted during the selection of FCHVs in EFMC?</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>How do you think about the representation of FCHVs in EFMC?</p> <p>.....</p> <p>.....</p> <p>.....</p>
5	<p>How do you get involved in mobilizing the fund?</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>Do you think you have enough say over the fund? If yes, in what ways? If no, what are the reasons?</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>What types of efforts you have made to increase EF?</p> <p>.....</p> <p>.....</p> <p>.....</p>
6	<p>How many FCHVs are the signatories of the cheque of the Muddati and Bachat Khata? If they are signatories, whether they are asked to sign the cheque every time? Please explain. (Probe: upon subsequent discussions with all EFMC members, or just when asked to sign, etc.)</p> <p>.....</p> <p>.....</p> <p>.....</p>
7	<p>Are the income and expenses made from the Muddati Khata (fixed account) or Bachat Kosh (savings account) known to all the FCHVs in the area and also made public?</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>If yes, how? If no, what are the reasons?</p> <p>.....</p> <p>.....</p> <p>.....</p>

A study on the FCHV Endowment Fund, 2005
MOHP/ NFHP/VaRG
(Focus Group Guidelines for FCHV)

District:	
Name of VDC:	
Name of moderator:	
Name of note taker:	
Discussion date:	

A Section 1: Socio-demographic Characteristics (A)							
S. No.	Name of the Participants	Caste/ Ethnicity	Age	Literacy/ Education	Duration of work as FCHV	Membership in EFMC	Involvement in groups/ committee (specify)
1							
2							
3							
4							
5							
6							
7							
8							
9							

Section 1: Objectives of EF	
1	What are the motivating/inspiring factors for you being a FCHV? (<u>Probe</u> : economic benefit, prestige, training, recognition, social work or dharma etc.)
2	Tell me about the history of EF. How does the EF work (committee, etc)? How the EF is supporting to FCHV? What are the objectives of the FCHV Endowment Fund?
3	Who prioritize FCHV needs? Do you get involved in prioritizing needs? How do you (FCHV) prioritize your needs?
4	What is your impression about the existing practice of determining and prioritizing the FCHVs needs by EFMC? Give your suggestions for its improvement.
Section 3: Support	
5	What types of kinds or cash supports you are receiving from other than the EFMC? From whom you have received such supports? In what ways these supports are useful for your work as FCHV?
6	Are there any other fund/s established for the welfare of FCHV at community level/VDC? If yes, who initiated or established this fund including amount (Rs) in the fund?

	<p>How the fund is mobilized? Is the fund considered to be useful by the FCHV? If yes or no, why?</p> <p>Is there any committee to manage this fund? If yes, who is there in the committee and how it is being managed?</p>
7	How do you compare this fund with EF with respect to its contribution for the welfare of FCHV?
8	How frequently the MG meeting is organized in your area? Are the MG aware about EF? In your opinion, what could be the role of MG in EF?
Section 4: Contribution to FCHV Program	
9	<p>What is your opinion about the FCHV Endowment Fund? (Probe: useful or not, strengths and weaknesses, etc.)</p> <p>How it has helped in your work?</p>
10	<p>In your opinion, what factors are contributing you to work as FCHV in the community effectively and efficiently?</p> <p><u>Probe:</u></p> <p>a) Community and family support b) Prestigious job c) Provision of endowment fund trainings/visits d) Other cash and in kind supports e) Any other</p>
11	What program besides EF, you see, will stimulate the FCHVs in providing services to the community?
Section 5: Difficulties, strengths and weakness	
12	Do you have any difficulties in following EF guidelines? If yes, what are they?
13	<p>In your opinion what needs to be done to make the FCHV EF more effective?</p> <p>In what ways you want to utilize EF?</p>
14	In many places we found that some of the FCHVs even though they are old and physically weak are pulling FCHV work somehow. Therefore, in your opinion what would be the right ways to replace them by others?