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**I: Interviewer**

**P: Participant**

**Interview duration: 01:18:56**

**Language in which the interview was conducted: Nepali**

**Location: Participant's workplace**

**Date of the interview: 7 March 2021**

I: Sir, what types of programmes related to nutrition are going on in Dhanusha recently?

P: As you have asked about Dhanusha, it is the state capital and has many responsibilities as well. Talking about nutrition, it is not that satisfactory in this province including Dhanusha. Children still suffer from malnutrition. We have growth monitoring programme for children under two years... there is a child health card... on that basis every month growth monitoring should be done... but growth monitoring is not happening regularly... Growth monitoring should be done every month from birth up to 24 months... height and weight everything should be measured and noted... average growth monitoring visit is between 2-3 times... in 24 months, 2-3 times only, it is happening ... Nutritional assessment is not that effective... Another ongoing programme is screening children with MAM (Moderate Acute Malnutrition) children who are suffering from malnutrition for SAM prevention... Similarly, there are OTC (Outreach Treatment Centers) where children with SAM are who are screened in the community are taken to these OTC centers for treatment. They provide RUFT to the children... they also provide RUSF, F75 ... There is a nutritional rehabilitation center at Janakpur too whose main work is to admit and treat serious case children. They have pediatricians there... children may be hospitalized as well... treatment is done according to the case requirement... There is one more programme called nutritional survey programme from this time... Since our province is also a disaster-prone district... flood affected province ... another there is high malnutrition. Malnutrition is very much prevalent in this place. About 70-80% of newly born babies are suffering from anemia. About 50 % of women and adolescents' people are suffering from anemia here. Adolescents have similar

32 problems... We are trying to do a survey to understand the situation of malnutrition ... so  
33 for this year budget has been allocated from the province government... we have been  
34 talking about it and the process of it launching is going forward... We will do a nutrition  
35 assessment... nutrition survey... We have invited friends and prepared guidelines too. We  
36 will follow that guideline... and there are ongoing programmes like IYCF (Infant and  
37 young child feeding programme) and IMAM programme ... through this programme.  
38 And then... World Food Programme has been supporting up ...WHH programme has  
39 been supporting too... Aasman Nepal and UNICEF, Save the Children International has  
40 been supporting us and they have been coordinating with us and working in the  
41 municipalities. There are programmes related to nutrition ... There is a growth  
42 monitoring programme based on the community level going on in this district which is  
43 conducted by the health workers and FCHVs. They help in this programme ... there is  
44 mothers' group as well... they also support... Like I already said there we are planning a  
45 nutritional survey programme ... there is IMAM programme where SAM cases are  
46 screened, treat them and manage related logistics. We have programmes like this going  
47 on. There are deworming programmes after every six months for kids under five ....  
48 There is Vitamin A campaign ever six months... There are programmes to distribute iron  
49 tablets and folic acid to the school children and adolescent's which is still not that  
50 effective. We need to revitalize that programme.

51  
52 I: Sir, like you said the programme related to folic acid and iron tablets is not running in an  
53 effective way. Why do you it is happening?

54 P: Because of logistics and supply problems... these are the major reasons... We have  
55 realized that iron tablets and folic acid tablets need to be supplied in regular and adequate  
56 amounts. Because of covid crisis regular programmes were also disturbed... majority of  
57 time and focus was given to covid management and thus it impacted the supply chain  
58 management. Municipalities were involved and working hard for covid management ... it  
59 disturbed the supply chain of other regular programmes... Even the immunization ... iron  
60 programme was disturbed because of covid. The supply chain also got disturbed. But we  
61 are thinking of strengthening these again...

63 I: Because of covid only, or do you think the iron distributing programme had been  
64 unsuccessful before too?

65 P: this distributing iron in the school programme is not that old programme as well... it has  
66 this programme was supported by Save the Children International. After Nepal  
67 government owned and later they allocated budget and regulated the programme under  
68 the government.... It was doing well at that time. But in between the programme did not  
69 go well. It was not focused... there was no advocacy... no effort to keep the programme  
70 intact and keeping it smooth... the demand of iron we have in the community... the  
71 supply did not match that. It was one of the main problems I see. Second problem is  
72 advocacy. It is not adequate... Third problem is school's management, schoolteachers ...  
73 there is no local level ownership ... either we have not been able to give, or they have not  
74 been able to take ... one of the biggest setbacks is that they did not make it their  
75 priority... for all these reasons it is important but we did not find them taking this as an  
76 essential or basic health service... this needs to be revised...  
77

78 I: Sir, the problems you just listed, did you mean in general for those programmes which  
79 were related to nutrition?

80 P: I mean iron and folic acid part only ... What can I say? Even the growth monitoring part  
81 is like that. Even we are not satisfied about iron and folic acid distribution programme in  
82 school. We did many reviews and discussion. First, we are continuously trying to  
83 maintain the supply chain. The restructuring of the government also took place ... into  
84 three level of government ... so we are in the transitioning phase.... Local government  
85 does not know about this technicality. They don't have the capacity as well. We are  
86 trying to push these aspects from the provincial level. Local community's cabinet  
87 including Mayor and all... should be convinced about how important this program is.  
88 They should understand the importance of this program. So according to that we are not  
89 able to facilitate, build their capacity and provide training... this is also our weakness...  
90 They should be able to pull this programme first instead of us trying to push this  
91 programme to them ... so that they can own the programme ...this programme should be  
92 run in this school ... they should understand this. They even have the budget ... They  
93 should realize about the importance of nutrition food; adolescents are becoming

94 weak...they are malnourished. They should understand that they need to invest in this...  
95 they have to buy iron tablets... as they have local budget. Even if they have the budget,  
96 basic essential items like vitamins A and iron tablets are still deficient in the community.  
97 If we look there is deficiency of Budget as well.... we lack adequate programmes... We  
98 lack willingness and determination. There is no confidence and motivation in every  
99 level... everything is connected...Since I am a governmental officer, I should not speak  
100 like this. But it is the reality. We are not meeting the demands of our community as well.  
101

102 I: Sir, you talked about advocacy as well. For instance, municipality and mayor should have  
103 done it, right? Who else do you think should have done this?

104 P: See the thing is “everybody’s duty is nobody’s duties” ... “everybody’s work is nobody’s  
105 work”. No one is supposed to do other’s job. Even management theory does not allow  
106 this at all. Till date many things are centrally focused only. Not everything is devolved or  
107 decentralized properly. There are blame games as well. Looking at this technically, in  
108 health division we are facing huge impact on supply. Your question is “who has the main  
109 responsibility or who should have done it?”. In my view, and from a constitutional point  
110 of view and based on TOR as well... a Ministry's work is policy making... they need to  
111 make documents for an enabling working environment. It includes policies, acts,  
112 regulations, and guidelines. Implementation is carried out by the Directorate  
113 (*Nirdesanalaya*) or Provincial technical offices as well... but even in this there is  
114 duplication. Sometimes the ministry or the center office will be doing the same activity  
115 .... We have handed over many projects of health like this to the local level... local level  
116 make build their own law, rules and regulation... their own road maps as well and  
117 develop strategies too. But as I have said earlier, they don’t know all the pros and cons of  
118 the health. They don’t understand why they need to invest more in health sector. We have  
119 not been able to explain them this...those rules, acts, policies, and guidelines can be  
120 made at all three governments level... local bodies or province can make it... Local  
121 bodies can make policies and they are implementers as well ...they can execute the  
122 programme as well. Province acts 50-50 ... They do all the necessary works for the  
123 Province level and through provincial directorate they manage logistics, form rules and  
124 implementation.... There are eight health offices, and they all are implementing

125 agencies... Social development ministry also does policy-making work. In my view “an  
126 act, regulation or policy should define the work. Process should be clearly outlined.... We  
127 don’t have many documents like this in our province. We are still using documents  
128 prepared by the central government to conduct programmes here. Local bodies do not  
129 have the capacity to make these kinds of documents... they are making ... They have  
130 been practicing though. So, if we look in terms of responsibility... For instance, one  
131 malnutrition-related programme cannot be done through only one department ... every  
132 department have their own importance and roles and responsibilities... so likewise  
133 policies about malnutrition programme should be made by the ministry and its  
134 implementation should be done via Directorate and health posts. Similarly, municipalities  
135 can form their own policies ... they can follow the policies made from the central or  
136 provincial level and they can develop their own policy and at the same time they can  
137 execute them as well... That’s why local government is called policy maker as well as  
138 executor. They have both roles and even people are there ... they are from the village  
139 only. That is why local government is important in this system. That’s why until local  
140 bodies does not understand the importance of this programme, why is this programme  
141 needed when we are doing it from outside...they might think, “are they trying to impose  
142 this... why have they come...what is its purpose... if it is important then why don’t they  
143 each us... we will do it... we will tell...” this I am talking about the chain of command.  
144 this is also not happening as it should... This is ultimately linked with the system and the  
145 constitution. This is not in our hands, and we cannot change this. That’s why we need to  
146 stay in the provided situation and should follow the chain of command and make it  
147 stronger and more porous to reach the local bodies ... for this we have been developing  
148 strategies. I personally went to 14-15 local bodies to watch their system practically...  
149 what I heard was “they won’t let us in, and they avoid us... there is a denial”. I heard all  
150 these things... I think I have gone in more than 16 local bodies, and I have not seen any  
151 denials or refusals. They said “Sir need to visit more...no one comes in here and no one  
152 gives any valuable feedback or training to us. no one supports us... We don’t know  
153 anything is this subject matter. Even our health workers don’t share these kinds of  
154 things...” ... it is true they don’t have the proper capacity to fully know about this. They  
155 don’t even know the linkage between health and disease... where and how... This

internal aspect of public health, this epidemiological linkage and many things are not known by the local health workers. They don't know these linkages. They are underqualified I say but we cannot say that. That's why we should hire public health graduates in municipality's health post now ... We have seen that NCD's (Non communicable disease) are transmitting more in recent days. If you see the recent data of Nepal from NHRC, you can see that most of the deaths are due to non-communicable diseases. About two third death is due to non-communicable diseases like diabetes, high blood pressure and kidney disease. Even road traffic accidents. Government should focus their investment on these aspects which has made humans life vulnerable ... to reduce the risk ... We don't see it happening... the magnitude of this problem is bigger in the community and the amount of attention that it should be getting ... the amount of share that it should receive...it has not received it's enough share ... If you see, we only have 4% of the budget for health here... this year I think they made it 5% ... according to the WHO says budget should be at least 10% according to address the prevailing problem... we can see this... even research shows that the government should spend 10% of the budget on its health sector otherwise the problem won't be solved ...especially in this underdeveloped... underprivileged society... In my view it should be more than 10%. If the problems are bigger then the budget should also be high... WHO said on average only ... It should be allocated according to the problem itself. Here it should be at least 15%. There is a mismatch in our budget. If we don't have budget, then how are we going to launch any programme? either we talk about this iron and folic acid distribution programme or other programme it will affect the outcomes .... So, we have adequate government if you are talking about who should do the programme... everyone has their own budget... they have autonomy to make their own programmes, strategies and implement... According to me, either they have understood the intensity of the health problem, or they have not... that's how they have been taking it.... a health worker job is to deliver services technically. The supply side should be managed from the nation. We only create demand. We should be the voice of the community. Our duty is to verbalize the problem of the community ... For example, we should demand that we need certain doses of iron... this many IUCD...we need this drug in this amount.... We have been raising our voices since a long period of time, but it never gets done. I repeatedly say the

187 same thing in the review if this has been happening from years than somewhere our  
188 policy has some defects. We have defects in our strategies, defect in our implementation  
189 process or even in our vision. We have a visionary problem... We could not have seen  
190 the problems the way we were supposed to see them.

191  
192 I: Why do you think there are no visionaries and budget from the top level?

193 P: See the thing is, we should see this from philosophical perspective.

194  
195 I2: We have talked about nutrition a lot, right? Now talking about stimulation, could you  
196 please talk about any policies related to stimulation activities for children below 3 years  
197 of age?

198 P: Talking about children under 3 years old, under control of Directorate, there are 8 health  
199 offices and 11 hospitals, there are no programmes or budget related to this under 3 years  
200 old children. You have said a very important thing. I often speak a lot and the reason  
201 behind this is we have been missing the important thing... according to different research  
202 and I think I have spoken this many times to “invest in mother and young children”. If we  
203 want sustainable development, then we should surely invest in mother and child. Why  
204 should we spend because the same reason... due to cognitive development of children...  
205 unborn baby develops 30% of his brain in his mother’s womb and then 20% in the first  
206 year and then 20% in next. In this way the brain develops almost 80% under 1000 golden  
207 days ... Development of culture, intelligence and many more aspects develop in this  
208 period... 80% of mind development already takes place within this time.... What we do  
209 it now, talking about children under 3 ... preschool children.... What our parents do is  
210 send their children after 3 years of old to a good school thinking that their kid will  
211 develop their brain after going to a good boarding school. But the main thing is that 80%  
212 of their brain has been already formed in these 3 years of age. No one, not even the  
213 government did anything about it. Government does not develop the nation. It is the  
214 people who develop the nation. To develop the nation through the people, the  
215 government should create an enabling/ conducive environment. Enabling environment  
216 means that parents will manage all the things required to take care of their child, teachers  
217 will teach well, students will learn well from teachers, the school environment will be

218 good, farmer works peacefully in their fields as a farmer and office workers can work  
219 well and many more... meaning that everyone will do their respective work with sincerity  
220 (*Imandar*)... it is government's job to create an enabling environment.. after all people  
221 will work... they will develop the nation...

222  
223 Talking about stimulation, we do not have any such programmes related to stimulation  
224 for children under three, but we advocate that there should be such programme.... One  
225 thing I want to tell you is that "this responsibility regarding stimulation programme for  
226 children under three has been given to education directorate ... *Shikshya Gyan Kendra*".  
227 That's fine it is related to education...that should be there... I have seen many of those  
228 ECCD called (*Prathamik Bal Sikshya*) .... I went to these education centers many times,  
229 maybe 3 or 4 times. It was 10 years ago when I was in Mahottari, and I did not like it at  
230 all. I don't know how much it has changed... Recently, private sector has opened many  
231 Montessori's. there are many ECCD center... In private schools, I see they have a lot of  
232 facilities. They have many sciences corner and math quizzes, music... They make  
233 children more interactive by making them learn with fun (learning by playing). I have  
234 seen this in many private sectors only. I have not seen anything in the public and  
235 government sectors for under 3 years. I might not be experienced... Like you said to  
236 develop the learning abilities the type of simulation environment required below 3 years  
237 of children in those schools is not there... may be that needs improvement... What I see  
238 in the village ... in the city area there may be many private sector ECD centers, but I  
239 don't think there are from the public sector... and those that are there I don't think  
240 children have received the level of stimulation that is required by the children... I am not  
241 saying this practically because for that we need to do the survey and study them ... and  
242 Those teachers who are supposed to provide stimulation to those children... how much  
243 sensitive and responsible they... are they provided with the required training... it depends  
244 on these things... how much dedicated they are? Three years old children won't have  
245 much knowledge...but does the teacher have the level of bonding the child has with their  
246 father, and mother, ... Things like these should be implemented.



I got an opportunity to visit 2-3 ECCD in Israel once where I found one kid, below three years was studying in the garden. He was talking something about leaves. We asked him what it was, and he replied “leaves”. I asked, “why it is green?”. He replied it is due to chlorophyll. I was shocked after hearing the word chlorophyll from his mouth. I then asked what chlorophyll is. He replied that it helps to make food for the plant with the help of the sunlight.... I was shocked after hearing these things about chlorophyll and its job from three years old child.... So, I got curious how did the child know about this... After that I went to their teachers who are mostly males and females. I asked them about their teaching styles. the child will imitate... They learn visually rather than listening only. They have practical way of teaching. They don’t have pens and books in their hand... learning by playing... Then learn things from playing. which would have increased their learning abilities so well... I really liked that... We compare them without Province and ask question to Education officers that why we cannot be like them? Why we have not been able to do it? I asked to the president of Mahottari and found that we have more than 600 schools in this district, but we don’t have the quality of teaching in this community. They cannot provide that level of stimulation... so how will the child have cognitive development to his potential... How can our children get those types of stimulation, develop learning abilities in our children? develop those skills ... that way of thinking in our children... It is just mind programming after all. It is way to programme children mind from early age... They should learn these things by playing. It will bring change in the way they see the world, the way they think ...so that type of schooling... that type of facilitation...training and teaching and learning materials ... We don’t have these things. We should focus on quality rather than quantity. Instead, they could have slowly scaled it up into public and private sector... I think that’s how it should be taken... It’s not because they don’t know... after all there are investments... We don’t know about it. From our side we don’t any such budget for this kind of programme... (00:39:31)

I2: Sir, WHO has released a recommendation in 2021 stating that nutritional programme as well as stimulating programmes helps a lot in development of the child if they are in parallel. It makes a lot of sense too.

P: Yes.

279 I: What do you think about it? Like we did talk about many nutritional programmes before.  
 280 Along with nutritional programme we should launch it to make it more fruitful.

281 P: talking about the approach... that is where we can fit it in our programme... we measure  
 282 the weight of the child after birth, right? That is basic thing...Parents are also involved in  
 283 that. Mothers bring their baby to us. We have OTC in this village. Mothers bring their  
 284 child there... they do not spend much time there... child weight is taken and then they  
 285 leave... I don't know if they get the counselling as well ... I don't know how much  
 286 nutrition education they get there... In province 2 we are trying to advocate for family-  
 287 based health services... that we need to increase active case finding...we need to search  
 288 for active cases...We need to provide services door-to-door...canter based or facility  
 289 based is not enough... particularly the public health programme... we should teach  
 290 parents about good parenting technique as children learns many things from their mother  
 291 and father... they have a bondage with their parents which is a big thing.... Family should  
 292 know this what kind of stimulation parents should provide to the child.... I think... The  
 293 other station is school. Teachers in the school should be trained as well. And currently,  
 294 in province 2 and other provinces as well ... we are recruiting staff nurse as well in  
 295 school level. We are also hiring 80 staff nurses for 80 schools from Education  
 296 directorate.... These nurses are hired for those children who are above 3 years of age...  
 297 but we are talking about children below three years...We should especially target the  
 298 parents ... we need to teach them about the stimulation and, we should also capacitate the  
 299 health workers about the stimulation as well as they can help in providing necessary  
 300 inputs in family-based education systems. Another is nutrition rehab center is another  
 301 field where children under three are admitted when they suffer from malnutrition, we  
 302 could target these parents as well. There are many OTC centers as well ... there are 157  
 303 OTC centers, and we are in the verge of extension... We will have around 200 of those...  
 304 OTC centers, nutrition rehab centers and Montessori these are main entry points... also  
 305 the Montessori we have which is for children below three years... we called it pre-  
 306 primary level... we can also plan health workers visit to that place... If we can use these  
 307 platforms, I think we can do this... but this stimulus programme is rigorous work and  
 308 should run continuously. Children should be provided with repeated stimulus... there

309 should be practice... it requires programming of mind... and only dedicated people  
 310 should do this only.  
 311  
 312 I: Who should be these people then?  
 313 P: Like I said teachers should take a part in it. it should not be a one-shot programme...  
 314  
 315 I: In community level? (00:45:20)  
 316 P: Yes ... Like I said children below 3 years of old who are studying in the school which we  
 317 call pre-primary class or Montessori... they should have dedicated, well skilled and  
 318 trained teachers. Another thing is health worker who visit Montessori... also should have  
 319 studied, understood, and know everything about it ... they have to be skillful .... they must  
 320 be dedicated and motivated. If we capacitate those health workers then they can visit  
 321 homes to teach parents to provide the same stimulus to their kids ... instead of forcing,  
 322 scolding, biting the child... this kind of parenting is also not good... how they should  
 323 behave with their child... everybody does not study child psychology... in our Province  
 324 more than 46% females are illiterate... If a mother does not know about this stimulation,  
 325 then what kind of stimulation can she provide to the child? So, if a child is getting good  
 326 stimulation in ECCD but they are getting negative or bad stimulation at home how will  
 327 that shape child's mind... We should create a good hospitable environment for the kids  
 328 with rat school or in the family ... where through teachers or health workers or parents  
 329 they can receive same type of learning environment... where they will be able to learn  
 330 something... that kind of learning environment should be created for children...  
 331 I: Sir, you talked about schools and kids should be sent to school below 3 years old, right?  
 332 But this culture is still not developed yet. People do not send their kids to school below 3  
 333 years of age, right? You also said that parents should be made aware, right?  
 334 P: Yes.  
 335  
 336 I: So, what could be the medium to make them aware? either health workers should deliver  
 337 it to them or are there any medium available? How can they reach door to door?  
 338 Sometimes parents might not be in home as well. Only grandparents might be available,  
 339 right?

340 P: Yes.

341

342 I: So how can they reach door to door? How can this thing be managed financially as well?

343 P: Yes, government should think about it too. If we want change, then we should launch  
344 budget and programme as well. If we expect big result from the existing situation, then  
345 how is that possible? .... If you want your child to be responsible, accountable to the  
346 community, diligent and intelligent, then we cannot think of this unless his mental  
347 development is good... for mental development of children under three years if you can't  
348 deliver the necessary stimulus or you cannot programme their mind well in that age, then  
349 does not matter how big talks we do we can't get any result. We have been focusing on  
350 this age group so that their mind would be developed fully. We should open schools like  
351 that for children below three and open Montessori for young children in public sectors  
352 too... In 200-400 pre-primary school they have hired teachers for 2000-4000 rupees  
353 salary...and those teachers are busy in doing their household works .... And some are  
354 trying to achieve their personal benefits and expect better results from them. People have  
355 been doing that. I have seen this ... why should we run such Montessori... Now if there  
356 is inadequate teacher in school then they take that Montessori school teachers to run the  
357 class...and take them home ... We cannot get a good teacher for 2000/4000 monthly  
358 salary. In the Montessori we need good mentors who are well trained and skilled. those 3  
359 years old child little children do not know anything. children in our community they  
360 don't know if the color is green or anything else. They cannot think about green color ...  
361 it does not occur in their mind at first place...they don't know if it is leaf... they don't  
362 know how to say a leaf... They don't think about why is this green.... They don't know  
363 anything about food making process, chlorophyll, or photosynthesis. But how did those  
364 children learn (he is referring to the example he gave earlier in a country). They did not  
365 learn these things from their womb. the society taught them. Parents and teachers taught  
366 them... so they learnt... See my point is, when those kids are home parents should also do  
367 the role of teacher... teachers, and health workers should also do.... Our parents are the  
368 main weakness here.

369

370 I: What should we do then? (00:52:02)

371 P: They should be provided education... Our schooling rate must be increased at first....  
 372 Half of our female population are illiterate and ignorant here. How can we develop a  
 373 nation from these people? What could these mothers do? They just scold or slap when  
 374 kids make a small mistake. What kind of stimulation will be that for a child...so what  
 375 will the child learn? They will learn to beat others... Kids learn these things as they are  
 376 reactive. These kids also repeat these things later. They reflect the same thing. Mother  
 377 should think about these things first... so whose fault is it then? The country is also the  
 378 culprit here. Why did the country not educate the mother then? Why was she not sent to  
 379 school? When I was in Indonesia ... an Indonesian politician said, “when I become the  
 380 leader, then I would make sure that everyone enrolls in school for free” Why we have not  
 381 written these things? Why cannot we do it? We lack in vision. Leaders should be able to  
 382 see what general population cannot see... he listens to what others have not... They have  
 383 visions. But we lack vision here. Where we have vision then there is vested interest....  
 384 that will spill things then... the vision will be blurred... so how will it happen.... A child is  
 385 new to the society. They will absorb the stimulation from the environment and then his  
 386 cognitive growth will happen... It could be either from the family, school, society or even  
 387 the community as well. We should create that enabling and conducive environment...  
 388 supportive, favorable, where they can learn to think well and develop a good vision... we  
 389 must be able to create such an environment for children...  
 390  
 391 I2: sir, you talked about the type of nutritional programme needed right now. So, what type  
 392 of nutritional programme is needed now that would go along with the stimulus  
 393 programme? what are the ways we should launch it? Who should run it? What are the  
 394 procedures for it? How can we launch it in the community so that it would be more  
 395 effective?  
 396 P: For preschool children?  
 397 I2: Yes. How should we do it?  
 398 P: Like I already said it, first our health workers and teachers and parents don't know what  
 399 stimulation is. they should know it first. Many don't know what learning is by playing.  
 400 I2: We have heard that many of us don't know what that is.  
 401 P: Yes. Many of us think....

402 I: They think studying is just carrying bag of books that is also after three years age...

403 P: Yes.

404 I: Ha-ha...(Laughing) (00:56:10)

405 P: Yes, they think that studying means going to school with books in the bag and that also

406 after three years .... Parents don't send their kids under 3 to school. Recently they have

407 started understanding and in the urban areas parents have been sending the kids to

408 kindergarten or Montessori.... Otherwise, general population ... one thing you should not

409 forget is that have more than half of our population is female in this country and half of

410 that female population is illiterate. They don't have life...They don't know what they are

411 meant to do with their life. Now they don't know what to do next in their life. They just

412 give birth to their child and that is it. unconsciously (*behoshi*- meaning without much

413 knowledge and awareness in this context) they gave birth to a child... unconsciously they

414 will rear the child and unconsciously they will live ... that is the thing. If they have

415 money, then they take care of their child only by providing good clothes and food. They

416 don't know anything beyond that. How would they provide their child stimulation? They

417 are all ignorant... from where she will provide... she is unconscious herself (lacks

418 knowledge) ... The child is not going to get that stimulation by themselves. Someone

419 must provide this stimulation to the child. Parents, teachers should give it to them. I think

420 those who should provide stimulation they are ignorant... Our health officers might know

421 about the stimulation... what is stimulation... how to teach this ... why is it important...

422 what are the methods and processes? How are the child's mind and behaviors being

423 shaped? What is child psychology...how many health workers know about this ... But

424 the condition right now is that not even 1 % of our health officers know anything about it.

425 Could you tell me how many of our teachers or parents know about it? until we don't

426 know about the source of stimulation then how can we stimulate children? We don't have

427 training and facilitation for family-based stimulation... these programmes have not

428 received prioritisation from government side. This subject must be made a priority...

429 Adequate budget should have been allocated for this. When about 80% of brain

430 development takes place in these 1000 days .... It is not enough to just give the name of

431 Golden 1000 days... but what are the preparations for those 1000 days? What is our

432 investment? How does the society look at the children... how do they behave with them?

433

434 You have lived in Australia. Let's compare kinder garden of Australia to ours. There is a

435 huge difference. Let's compare mothers, health workers and teachers too. We are lacking

436 in every aspect. What is stimulation, how can we provide those to children...what are the

437 methods and processes? How much budget should be invested...how many centers are

438 needed? What kind of centers should be opened? Why do the kinder gardens have special

439 corners? ... they have music station... problem-solving station is there...related activities

440 are done there... there is mathematics corner...they have a kitchen corner... why do they

441 have different corners. So that they can provide different types off stimulation to the

442 child. To programme their brain... Can you tell me how many percent of mothers,

443 teachers and health workers know about mind programming? Where is the government?

444 Why are they not doing anything...? It is too late now. We should not delay anymore. As

445 I am related in health sector I will talk about health-related programme... I suggest

446 family-based nutrition programme and I have proposed this in the Nepal government

447 proposal... We should go like that.

448 I2: Sir, you said that... (gets interrupted)

449 P: Now we only have 10-15 minutes of time as I have to attend one more meeting.

450 I2: Sir, we do have mother's group in this community as well, right?

451 P: Yes, they are inactive like I already said.

452 I2: But when we talked with them, they preferred group discussion rather than door-to-door.

453 P: Let them do it. Mother's group is in Nepal government's provision. But they have not

454 been active. There is issue in that... It has reached to the local government. For example,

455 managers, owners or leaders can very easily run these groups if they want. I have seen

456 many people in this Dhanusha district as well. We had run mothers' group very well

457 here... They run these groups in Sapatari and Mahottari. One mother group has even

458 purchased an ambulance. They were linked with micro-credit programme... there was

459 such a nice health programme done... this district was first... it also progressed well...

460 Mahottari was in number 74 but it is in number 3 now. How did it do it? With same

461 number and level of staff. How did they do so well? It is nothing, it is just willpower and

462 dedication within us and what is our priority...all these things also affect us.... In my

463 view, this is a very important matter. If we don't do any programmes focusing on the

464 1000 golden days, then it would not give any good result in future. We should provide  
465 awareness to health workers, teachers, and parents by providing them packages to teach  
466 then about the importance and methods of stimulation... we have not developed good  
467 package ... what kind of package and protocol is needed for health workers... what is  
468 needed for mothers... and what we should do in mother's group.... There has not been  
469 much talk about this... It is a missing part which lacks advocacy. Now slowly they have  
470 begun.... I have seen in many programmes like 1000 golden days ...a huge amount of  
471 investment was done in that programme but there was no output. Millions of rupees were  
472 invested but in the last no outcome was generated from the programme because they  
473 don't know the importance... they don't know the process...

474  
475 I2: Sir you have talked about barrios a lot, right? For example, financial, advocacy and all.  
476 What is the condition of facilitators as well? What do you think about that? What things  
477 might help us run this programme in future?

478 P: What was that?

479 I: Stimulus and nutrition-related programme?

480 P: Yes?

481 I: What might help these facilitators reach this combined programme in community level?

482 P: If I have understood your question, then the first thing is that we should understand the  
483 importance of stimulation and we should target the local governments... they should be  
484 the first focus because local governments have basic health and education-related  
485 things.... Basic education is in the hands of (looked after) by the local government. Like I  
486 said, if they understand the importance, then they would allocate a proper budget as well.  
487 They would open ECCD centers for this programme and develop packages or take help  
488 from others for package development and implement the programme.... If they don't  
489 understand it, then they could not help it. from where they will do?... they don't know...  
490 what can they do if they are unknown about this subject matter? If they don't understand  
491 the fact that a child learns everything below 3 years of age, then we cannot do anything to  
492 it. If the government says they do not have money, then why should they open those  
493 numerous ineffective ECCD centers like mushrooms... So, money is there but it needs to  
494 be sued appropriately... They might not have studied but they have gone to foreign



495 nations ... they know what kind of ECCD centers should be there...how should we run  
 496 them? They know all this, but it is still not happening here.... Meaning that it is a well  
 497 understood thing... There are many questions which has answers in it as well. We should  
 498 have good intentions first...We should admire any changes that occur in the society. It  
 499 depends on self-stimulus ... how have we socialized... our own perception... many things  
 500 depend on this as well... what kind of stimulation we have received and how is our mind  
 501 programmed? We also need to think about how the planners is mind programmed.  
 502 I: Yes.  
 503 P: Yes, please do ask what you were about to.  
 504 I: Si, so you said that this programme should be enrolled in health and education. So  
 505 according to your local government should be aware of it too.  
 506 P: Yes, exactly.  
 507 I: So, they should be made aware of that?  
 508 P: Yes.  
 509 I: So, one person you said is local government, right?  
 510 P: Yes, sure.  
 511 I: So, who else should help in this programme so that it would be easy to run this  
 512 programme for a longer period and make this programme run in every community?  
 513 P: Political commitment is a must. First, they should be able to say we will do this... this is  
 514 important... in these 1000 golden days children will develop... sustainable development  
 515 of this province depends on this that how will our children grow tomorrow... this thing  
 516 must be programmed in politicians mind.... planner, and decision-makers should know  
 517 about all these things. For advocacy I recommend ministers, head of province, president  
 518 of health officers and social scientists and economists.... first, we should conduct  
 519 discussion about the needs and importance of this programme. We need to plan advocacy  
 520 meetings first... planned mind should be programmed why it is important... they need to  
 521 know first... we do have primary schools in this society. availability of schools is not a  
 522 problem here... quality is lacking here.... We are lacking in providing stimulation to the  
 523 children for the cognitive development they were supposed to receive in the community.  
 524 We should close this now. I don't have much time anymore.  
 525 I: Sir we are in our last phase.

526 P: Okay.

527 I: Sir you said that we have people in education and in health as well, right?

528 P: Yes.

529 I: Imagine you are new in this field. So, you now think that an INGO or NGO should  
530 launch programme like this. Why do you think like that? You have your own health posts  
531 in this society. How can we address problems like this in this community?

532 P: I think that our government lacks confidence. I am also one of the members of the  
533 government. We think that maybe NGOs have expertise about this ... but we do not have  
534 it... that is why we say so... We keep forgetting how to scale up what we have... and  
535 make it qualitative and when need we seek help from expertise from NGO and INGO.  
536 We have more dependency, and we want everything to be ready-made. We want  
537 everything fast. we don't want to work hard... this is how our mind has been programmed  
538 for years... This technique and tool can be easily understood ... these have not fallen from  
539 the sky... Imagine how much budget we spend on surveys and research. We make others  
540 to do it and then we use those data to talk... We never do it on our own. We never do the  
541 survey and research or study... We don't have a budget for research.... From what I have  
542 seen in that country, I can never forget how a scientist was behaving with the kids. He  
543 was using the art of playing ... We don't have that level of thinking here. We don't have  
544 that sort of thinking power like them. We don't have thinking related to new working  
545 techniques, thinking in a new way, or probing, we want everything to be done but never  
546 work for it. We want everything to be ready and made available to us. That is why we are  
547 dependent to others. That is why we seek for help from external agencies to work for  
548 us... we should do it ourselves then we can build our confidence.... We need surveys,  
549 research in province-based or district-based, or country based.... In this subject... We can  
550 seek help for this from NGO and INGO as well. Then in our socio-cultural context, how  
551 do children behave? How do we behave with our children? What kind of stimulation re  
552 we providing? And what kind of behaviours do children develop? What is their thinking  
553 process? How is their perception developing? We can do that study here... Why should  
554 we borrow everything? Context of Israel will be different to ours... Jana has their own  
555 context... we cannot borrow it and use. Here... we need to do research and survey at local  
556 level... this is an important area where we lack interventions ... for Madhesh it should be

557 done in Madhesh context... then we will know... what kind of stimulation should be  
 558 provided ... local resources can be used to develop materials. We can do it here... we  
 559 need to think in that way...

560 I: How do we get it here?

561 P: Through meetings and discussions only.

562 I2: We did have many discussions and meetings on this data collection only. They are  
 563 thanking us for this project.

564 P: Yes. This is also a good thing.

565 I: They think they learned something new.

566 P: Yes, it is a new thing. Who here thinks that children below three years old should be  
 567 enrolled in school? No one, I guess.

568 I: They play by themselves, right?

569 P: Yes

570 I: (Laughing....)

571 P: If I say to my father that my child needs to learn things from school and if I get him  
 572 enrolled in school, then people would say what type of grandfather he is. The child  
 573 should learn things by themselves. Why this old man is sending his grandchild to school  
 574 in 1.5 years of age. They think that he is doing something wrong. These people don't  
 575 understand about the importance at all.

576 I2: Sir, let's do a quick summary of our discussion here, is that okay?

577 P: Yes

578 I: We have talked nearly about an hour regarding nutrition programme in Dhanusha district.  
 579 You also said many programmes like Golden thousand Days (*Sunaulo Hajar Din*) and  
 580 many screening programmes regarding malnutrition were launched here, right?

581 P: Yes

582 I: Health officers would train people regarding that, right.

583 P: Yes.

584 I: Also, growth monitoring and all is happening here, right?

585 P: Yes

586 I: They have been sent to district and zones, right?

587 P: Yes.

588 I: So now regarding this stimulus programme, which is quite new in today's context. This  
589 programme has not been launched yet and it did not get any budget as the local  
590 government also does not know anything about it. They have done special meetings  
591 regarding it.

592 P: Yes.

593 I: Every angle regarding health, education and even in community level too, it needs to be  
594 made aware, right? We need to address this programme to the top level as well, right? We  
595 should go along from the bae level. We have unskilled health workers too. So, we need to  
596 prepare as well for better skill-based health workers. Teachers also should be made aware  
597 of mother's group and parents as well. So, discussion should be done, right?

598 P: Yes, discussion should be done at every level.

599 I: We do have budget, but the programme is still not launched as we don't know the  
600 importance of it, right?

601 P: Yes, exactly. Advocacy and workshop programmes are needed for betterment.

602 I2: Thank you so much sir for this summary. Thank you so much for your time.

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604 **End of the Interview**

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