



**GREEN TARA NEPAL**  
**ग्रिन तारा नेपाल**

**ORGANIZATIONAL STRATEGIC PLAN**  
**2016-2020**

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## **ABBREVIATIONS**

CBO	Community Based Organization
CSO	Civil Society Organization
DDC	District Development Committee
DHO	District Health Office
DPHO	District Public Health Office
FCHV	Female Community Health Volunteer
GoN	Government of Nepal
GTN	Green Tara Nepal
GTT	Green Tara Trust
HFOMC	Health Facility Operations and Management Committee
HP	Health Post
INGO	International Non-Government Organization
M&E	Monitoring and Evaluation
MNCH	Maternal, neonatal and child health
MoHP	Ministry of Health and Population
NGO	Non-Government Organization
SWC	Social Welfare Council
VDC	Village Development Committee

# ORGANISATIONAL STRATEGY OF GREEN TARA NEPAL

2016-2020

## 1.0 BACKGROUND OF ORGANIZATION

Green Tara Nepal, a non-governmental, apolitical and non-profit making non-governmental organization, established in 2007. It is the result of the efforts of Nepalese public health and community development professionals, who are committed to improve health, livelihood and socio-economic status of the Nepalese people and facilitate their integration in the country's national development. It works in research, publications, advocacy, training and social mobilization in a holistic community development approach.

## 2.0 VALUES AND GUIDING PRINCIPLES

- **People centered:** We attempt to complement existing resources by keeping vulnerable and disadvantaged people in the centre of the programme
- **Collaboration and team work:** We believe in team work and collaborate with other agencies and partners, who respect similar values.
- **Integrity:** We respect honest, transparent and ethical people and programmes
- **Empowerment:** We help targeted population in decision-making to live a better life
- **Centre of Excellence:** We aim to develop our organisation as a centre of excellence for tangible benchmarks. We define excellence as a mean to demonstrate that have the skills and commitment to achieve goal
- **Good Stewardship:** We prefer a good steward of the resources that make a good return on the resources available to the organisation.

## 3.0 PLANNING PROCESS

GTN use a variety of data to inform programme planning and development. Field staff collect process data each month documenting outputs.

Each time a project is planned in a new area, GTN carries out a community needs assessment that includes interviews with local experts and community members from the target area and surrounding comparable areas. These include: focus groups with local community members, women's groups and local volunteers (Female Community Health Workers and Traditional healers); key informant interviews with local health facilities staff and management, local Village Development Committee members, CSOs and NGOs working in the area;

interviews with district health officers and women’s development office. These data help to tell the story of how families and women are doing in each community, and how GTN efforts can impact outcomes for families.



The data are used for continuous quality improvement of GTN projects. GTN Trustees review data regularly. Field staff meet twice/year with Trustees and management staff to review data and progress and discuss what is working and not working. GTN also receives regular visits from research partners to review and discuss findings from evaluations of each programme.

#### **4.0 VISION, MISSION AND GOAL**

##### **Vision**

We believe the changes on society primarily target the most vulnerable and isolated to bridge the gap between rural and urban, rich and poor, and men and women to support equitable access to services and improve healthy behaviours through community development and health promotion.

##### **Mission**

Green Tara Nepal (GTN) is a national NGO dedicated to improving the health of children, adolescents and young people and women living in rural communities through changing behaviours using health promotion techniques and strengthening existing services.

##### **Goal**

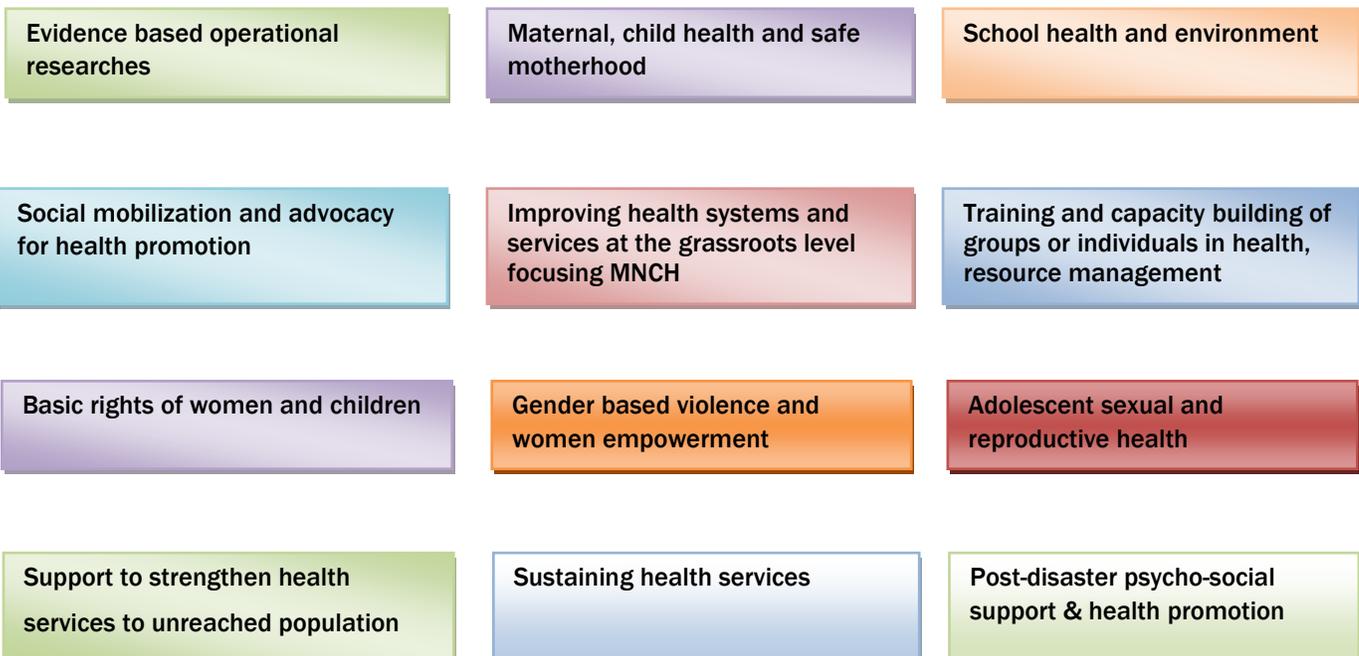
Green Tara Nepal aims to promote evidence-based interventions through a community focused activities and advocacy for national level scale-up for public health impact in order to increase access of services and improving healthy behaviours through community development and health promotion approach.

## 5.0 OBJECTIVES

- Advocate evidence-based health promotion approach for preventing and promoting health of Nepalese people by scaling-up the best practices learned from grassroots to a national level
- Create a healthy society through promoting behaviours of the targeted population by addressing gaps and barriers.
- Increase access and utilization of basic health services targeting unreached population (poor, adolescents, marginalized and socially excluded communities) through strengthening quality of care and increasing demand for services
- Improve reproductive health knowledge and skills for creating healthy behaviours of adolescents, women of fertile age, mother-in-laws, fathers and local health workers.
- Work with Government line agencies, NGOs and private sectors at all levels (local, federal and national) to build management practices that lead multi-sectoral collaboration for improving health service delivery system.

## 6.0 CORE AREAS OF WORK

Green Tara Nepal works closely among the individuals and groups through health promotion using participatory and community development approach on the following areas;



## 7.0 STRATEGIES

**Strategies related to objective 1:** Advocate evidence-based health promotion approach for preventing and promoting health of Nepalese people by scaling up solutions learned from grassroots to a national level

- 1.1 Conduct a systematic needs assessment process to find out community people's needs to bring public health action for changing behaviours
- 1.2 use community-based participatory research to support cross-cultural partnerships in which partners share resources and decision-making power. Adopt a compassionate approach for needy people and deprived of care and support based on the evidence
- 1.3 Present solid evidence through formative research, and other scientific research methods
- 1.4 Establish information dissemination systems at all level including the clients
- 1.5 Dissemination and advocacy for scaling-up the evidence based successful practices for enabling policies at the local, state, and federal level
- 1.6 Advocacy and lobbying with key stakeholders for creating an enabling environment in all aspects of barriers such as policy, social factors, individual's behaviours, and other determinants
- 1.7 Raise awareness and knowledge of the benefits of health promotion practices to improve reproductive health among government and I/NGO sector through sponsoring national health promotion conferences and working groups
- 1.8 Promote use of health promotion to support improved reproductive health outcomes in Nepal through dissemination of lessons learned from the field in international and national health journals and through media updates.

**Strategies related to objective 2:** Create a healthy society through promoting behaviours of the targeted population by addressing gaps and barriers.

- 2.1 process mutual learning and analysis to identify important community health issues and their social determinants
- 2.2 identify resources and expertise among community members, and to develop the community leadership necessary to take action
- 2.3 Strengthen capacity of community workforce (community health workers, Female Community Health Volunteers, teachers, adolescent, women groups, etc. in leadership, local politics, governance structure, advocacy, community organizing, popular education, and health
- 2.4 Implements policies, practices, and other measures that respect an individual's self-esteem, provide multiple opportunities for success, and acknowledge good efforts and intentions as well as personal achievements

- 2.5 strive to improve the health of individual, families, and community members (including children, girls and women) through helping them to understand how the community contributes to health and education
- 2.6 Increase local engagement in maternal and child health by training local volunteers to deliver health messages within their local communities
- 2.7 Develop a framework for community members to acquire the skills and resources to investigate the health of their community, and then plan, implement, and evaluate actions that change the environment to promote and improve health

**Strategies related to objective 3:** Increase access and utilization of basic health services targeting unreached population (poor, adolescents, marginalized and socially excluded groups) through strengthening quality of care and increasing demand for services

- 3.1 Address disparities in health by mobilizing community members and agencies to change environmental factors that promote economic and environmental inequalities through community action model of empowerment and right-based approach
- 3.2 Educate and empower adolescents, fertile women, mother-in-laws and husbands to understand the importance of antenatal and postnatal care and safe deliveries and how to access health care through monthly health promotion groups
- 3.3 Create equitable access and use of available maternal health services among the most vulnerable and marginalized, ethnic and tribal women.

**Strategies related to objective 4:** Improve reproductive health knowledge and skills for creating healthy behaviours of adolescents, women of fertile age, mother-in-laws, fathers and local health workers.

- 4.1 Support adolescents and women to become more empowered and independent in decision-making
- 4.2 Increase knowledge and encourage support amongst the wider community for health issues through mass events.
- 4.3 Improve health outcomes for the most isolated women due to reduced mobility, physical, psychological and/or social restraints through outreach and home visits

**Strategies related to objective 5:** Work with Government line agencies, NGOs and private sectors at all levels (local, federal and national) to build management practices that lead multi-sectoral collaboration for improving health service delivery system.

- 5.1 Partnerships between community members, community and voluntary organizations, local authorities, businesses, private sector, and the Nepalese government.

5.2 Increase community commitment in order to sustain the changed behaviours in long-run

5.3 Establish partnership with academia sector (Universities) and engaging PhD and Masters level projects

## **8.0 REVIEW OF ORGANIZATIONAL STRENGTHS AND KEY ACHIEVEMENTS**

- Evidence based approach for comprehensive health promotion (A successful model in Dakshinkali as evidenced by the comparison of results between the 2007 baseline and 2012 final evaluation).
- Strong partnership with academic institutions: GTN with their partners have published over 100 research papers and 10 books on reproductive/sexual health and research methodologies, and network effectively with local, national and international partners.
- Evidence based-based monitoring and evaluation system- supported by baseline evaluation prior to project implementation and endline evaluation after completion.
- GTN organized First National Health Promotion Conference in Kathmandu, Nepal with the theme "Strategies for Changing Behaviours in 21st Century" between March 31- April 1, 2013.
- One of the leading NGO in Nepal with core competency in health promotion related to maternal and child health, sexual and reproductive health with community-based evidences.
- Strategic partnership with Green Tara Trust, Karuna Trust, Karuna Germany, Population Service International, and universities.
- National level expertise in curriculum review, and evaluation of health promotion interventions.
- National level expertise in health promotion.
- Working with private service networks in strengthening FP and safe abortion services.

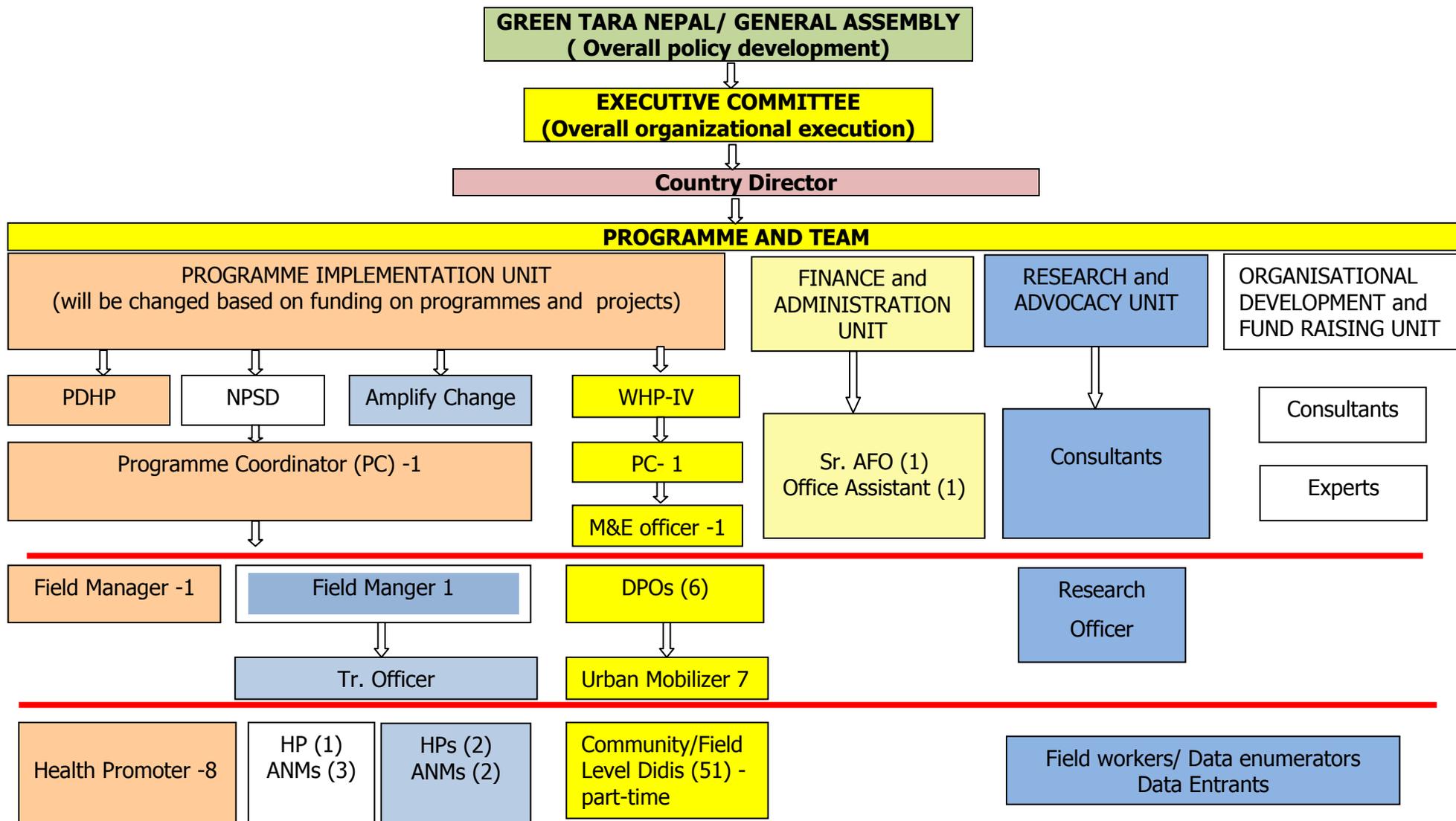
## **9.0 CURRENT PARTNERSHIP**

Green Tara Nepal works in collaboration and cooperation with national and international partners. At the international level, it has collaborated with Green Tara Trust UK, Karuna Trust, Karuna Germany, Global Gibing, Population Service International (PSI), Rotary International, Liverpool Johns Mooore University, Bournemouth University, The University of Tokyo, University of Sheffield, and Aberdeen University; and with several individuals. At the national level, it works with community people, CBOs, NGOs, civil societies and government line agencies such as Ministry of Health, Department of Health Services, DDCs, municipalities and VDCs.

## **10. WAY FORWARD AND OPPORTUNITIES FOR GROWTH**

- Exploration of like-minded funders to support health promotion, service strengthening and research.
- Advocacy at national level for incorporation of health promotion approaches as one of the most efficient and cost effective approach in a resource limited setting.
- Opportunity to grow as a leading Health Promotion agency in the country.
- Enhanced networking through involvement in national and international level forums and networks.
- Scale-up current MIS (Management Information System) and develop it as a standardized M&E framework for health promotion interventions.
- Continue implementing health promotion approach in all programs.
- Ensure organizational sustainability by growing as a training and research agency in the field of health promotion.

## ORGANISATIONAL ORGANOGRAM



NPSD= Nawalparasi Safe Delivery Project  
 CHP= Community Health Promoter  
 PC= Programme Coordinator

PDHP= Post Disaster Health Promotion  
 DPO= District Project Officer  
 HP= Health Promoter

WHP= Women's Health Project  
 AFO= Administrative and Finance Officer  
 ANM= Auxiliary Nurse Midwives  
 FM= Field Manager