

Child Protection Centers and Services





TABLE OF CONTENTS

INTRODUCTION	3
Our mission	4
Our objectives	4
Our Achievements	5
25 Programs & Actions planned in 2016	6
PREVENTION SERVICES	7
Introduction	7
Awareness and Prevention activities:	7
CPCS Local Action and Support Services (CLASS)	9
National Office (Kathmandu)	9
Regional Office (Dolakha)	10
Regional Office (Morang)	11
Regional Office (Sindhuli)	12
RISK REDUCTION	13
Introduction	13
The Rehabilitation Shelter - Dillibazar	14
The Street Work	17
Day Field Visits	17
Night Field Visits	17
The Recovery CENTER (Medical support)	18
Medical Support Program (MSP)	19
The Emergency Line (441100)	20
Legal Protection Program	20
Counseling Services	21
SOCIAL REHABILITATION	23
Introduction	23
Reunification, de-institutionalization and Residential School Support (RSS)	23
The Rehabilitation center for Boys (Dillibazar)	24
The Rehabilitation Center for Girls	24
The Regional Center of Morang	25
The Regional Center of Sindhuli	25
Dolakha Rehabilitation Program (CPCS Center in District of Dolakha)	26
The Schooling Program	29
The Youth Program	32



ADMINISTRATION	33
CPCS International	33
The CPCS team	33
Our Administration System	34
The CPCS Board of Directors	34
The Executive Committee (CDC – Central Direction Committee)	34
The Staff Meetings	35
Implementation of Child Protection Policy	35
The Children Participation	
Networking with Authorities State Bodies and other organizations	37
Networking with NGOs and other Child Protection Organizations	38
OUTLOOKS FOR 2017	39
ANNEXES	40
Awareness and other Activities in our CLASS Centers during first semester	40
Awareness and other Activities in CPCS CLASS Centers	40
Awareness and other Activities in ORCHID CLASS Centers	42
Awareness and other Activities in CRPC CLASS Centers	46
Awareness and other Activities in 41 CLASS Centers during second semester	48
CPCS ALLIANCE – CONTACT AND OFFICES	55
CPCS Int (Nepal office)	55
CPCS France	55
CPCS Belgium	
CDCS International	55



INTRODUCTION

CPCS works on the protection of street based children and children at risk in Nepal since 2002. Numerous reasons lead children to the street: peer pressure, media influence, natural disaster, family break-up, poverty, family violence, dream of a well paying job or access to free education, dream of easier life in a city.... Children migrate from their hometown or village to Nepal's big cities. Once there, they generally end up in the street where they have to face its multiple dangers: drugs, abuses, crimes, hatred, exploitation, discrimination, intimidation, illegal detention and STDs.

We run programs at 3 levels

- **Prevention** (prior to and during the street life): a set of interventions focused on
 - ✓ Preventing and avoiding the arrival of the child in the street.
 - ✓ Raising awareness among the public, families, authorities, children themselves about the realities of street life (its causes, dangers, aspects and consequences).
- ➤ **Risk Reduction** (during life in the street): a short-term perspective focusing on immediate reduction of the dangers of street life.
- Social Rehabilitation (after life in the street): a mid-term perspective focusing on progressive and eventual reintegration of the child into society.

89 (part time and regular) Staffs work in our centers and programs: 1 Risk Reduction Center, 1 Rehabilitation Centers and 17 CLASS Centers (CPCS Local Action Support and Services) in Kathmandu valley. 24 other CLASS centers in 3 other districts: Dolakha in the north of central region, Morang and Sindhuli in South of Eastern region, nearby India.



Around **2000** children receive daily support through our activities. **100** to **200** children are supported by our Socialization and Rehabilitation Centers. **1524** children receive full scholarship through our Prevention programs. **4948** medical consultations were provided. **79** youths or children received Legal support and up to **8200** children, youth and their family members were followed and helped by CPCS International in 2016.

Yearly, in average, this means 9840 daily CLASS sessions for 1524 kids, 1120 Health sessions for 35 children, 1190 parent meetings for 21 parents, 12250 family visits, and 6240 Medical cases to treat: 1110 cases to refer to a local Hospital, 215 cases to refer to general hospitals (or our clinic) in Kathmandu.



Our mission

CPCS aims to works for a society where all children are respected, valued and protected. Our mission is to deliver basic services (medical, legal, psychological, educational, etc.), in order to bring immediate improvement to street based children and children at risks.

Our objectives

To develop services directly on the street to offer protection to street based children and to reduce the risks they are exposed to.

To develop services allowing street based children to take a step forward toward their reintegration into society and into their family.

To develop prevention programs to prevent more children from coming to the street.

To take on the children's problems with understanding and respect, considering them not as victims or delinquents but like people with diverse skills.

To be a bridge between the street and society.

To reduce risks that the children face when they are in the street.

To give the street based children basic education, attention and support.

To protect the children's fundamental rights.

To raise awareness on street-based children's situation in Nepal and abroad.

To give the children access to healthcare and hygiene services.

To reintegrate the children in their community, and reunite them with their families.

To reduce and progressively abolish all forms of child exploitation.

To fight against some of the worst forms of child labor.

To mobilize communities, organizations, institutions, and families to better meet the children's needs.

To contribute to enforcing the Child Act (1992), to provide legal support for children in the streets.

Special thanks to all our donors, private, schools, institutions and organizations for their support. With their contribution, lot of Projects and programs have been achieved and initiated this year.

1. The American Himalayan Foundation (AHF) – USA, 2. L'Association des Amis de Soeur Emmanuelle - Belgium, 3. Dynamo International – Belgium, 4. The Nick Simons Foundation – USA, 5. SOS Enfants Abandonnés – Belgium, 6. La Foundation Vieujant – Belgium, 7. Kinderleven-Vie d'Enfant ASBL – Belgium, 8. La chaine de l'espoir – France, 9. CPCS-France and 10. CPCS-Belgium, 11-15. The Rotary Clubs of Ocquier (Belgium), Brussels (Belgium), Paris (France), London (England) and the R-6, 16. La communauté de la resurrection – Belgium, 17-18. Caritas Nepal and Caritas Belgium, 19. L'INDSE de Bastogne – Belgium, 20. Kids in need – Nepal

CPCS

Our Achievements

CLASS & PREVENTION PROGRAMS

15 New CLASS Centers were opened for **689** children:

- 5 in Morang District for 200 children
- 7 in Dolakha District for 389 children
- 3 in Sindhuli District for 100 children

But **4** CLASS Centers Closed (140 children) due to lack of funds

In total, 1524 children receive full scholarship through our *41* Prevention programs.

67 Awareness and others Activities in Kathmandu valley CLASS Centers, 189 in ORCHID Centers in Morang district and 32 in CRPC Centers in Sindhuli district. 288 awareness Activities in total during first semester.

CLASS Activities

Awareness on Child Rights, Health & Hygiene, Earthquake, street risks, sexual abuse, scholarship. Distribution of bags and stationeries, dresses ...

Health & medical checkups, Home work check up, Information on culture & religion, dancing, drawing, singing, English writing, storytelling, cleaning, art & craft, sports, games, visits, picnics, celebrations (new year, religious: Holi...), competitions (singing, dancing, carumboard, sports, ...)

Parents and teachers meeting on safety matters, children admission, studies, progress, regularity, complains about teachers,

EMERGENCY LINE

248 calls treated by the emergency line: **56** for medical assistance, **11** for custody releases, **1** for abuse or trafficking **1** for child labor.

"National Centre for Children at Risk" referred 55 children to our DIC through the line.

32 Child Lost and **Family Missing** publications in national English and Nepali newspapers

MEDICAL SUPPORT PROGRAM

1845 cases of assistance during the First Aid (day & night) patrols of our medical teams.

2263 medical consultations, **3031** cases were admitted in our recovery centers clinics. In average, **16** children are treated daily in our recovery centers. **211** cases were referred to

various hospitals for further checkup. 17 children were admitted in hospitals for 391 stay days.

1181 cases were treated in SIFAL Recovery Center, 62 were hospitalized.

1504 cases were treated in the Girl's Recovery Center, 33 cases needed hospitalization.

SCHOOLING PROGRAM

84 children enrolled in schools through our residential schooling programs.

COUNSELING SERVICES

CPCS psychosocial counselors gave individual counseling for *1368 cases* and group counseling for *244* cases. *44* cases were linked to physical and moral abuses.

LEGAL SUPPORT PROGRAM (LSP)

79 youths or children benefited from legal assistance after they were taken into custody. **14** were released after our intervention.

23 Jails and 46 Custodies visits

1 Court Action

10 Meetings with Police

792 children attending CLASS Programs on legal matters and **18** Awareness Programs conducted with Public

REHABILITATION AND DIC PROGRAMS

76 new children enrolled in CPCS Rehabilitation program. 55 children were referred by Central Child Welfare Board (CCWB) and Center for Children at Risk (104), 21 joined us directly.

18 children referred from CPCS Dillibazar Center to our partner organization CPCR in Dolakha.

60 children were reunified with their family from different centers and programs, but 16 boys and girls ran away from the centers.

In *Girls center*, daily, *15 children and youths* attended the CLASS activities,

YOUTHS PROGRAM

4 children were referred to other organizations for training and further support.

3 youths received support to rent a room

6 boys completed SLC (Secondary Level Certification).

3 children were referred to "Conflict Victim Disable Society" organization for Rehabilitation.



25 Programs & Actions planned in 2016

- 1. Socialization Centers facilities for 30 to 50 children daily.
- 2. Informal Education Service: working and meeting on the street with 20 to 50 children and youths daily.
- 3. Other Field Activities covering more than 20 areas in 8 districts. (Mainly around Morang, Sindhuli, Dolakha, Kathmandu and Lalitpur districts) (4000 to 5000 beneficiaries each month)
- 4. Emergency line 24 hours in Katmandu and focusing on street based children and youth.
- 5. Recovery Center & medical care for 50 to 70 children, youths and street adults monthly.
- 6. Counseling & Psychological support for 200 to 300 children monthly. (mainly in Dolakha and Kathmandu offices)
- 7. Research on various issues (abuse, drugs, livelihood and other risk issues.)
- 8. Daily Game and activities for 1500 to 1800 children.
- 9. Cultural Activities for 1500 to 1800 children daily.(including CLASS programs)
- 10. Youth Empowerment Programs for 20-40 street youths.
- 11. Family visits and reunification for 10-15 children monthly.
- 12. Schooling Support for 1524 children. (Through "CLASS" program or other programs)
- 13. Public awareness campaigns.
- 14. Socialization-alphabetization classes for 1600-1800 children daily.
- 15. Creating international awareness about children's rights and the street-based children's situation.
- 16. Local networking and international partnerships.
- 17. Rehabilitation process for 30-50 children and youths yearly.
- 18. Hygiene clothes distribution for 1200 to 1600 children.
- 19. 10 to 20 safety lockers for working street-based children. (Street bank).
- 20. Leisure activities as picnics, camps or games in the open.
- 21. Kitchen club feeding 100 to 200 children daily. (+ snacks for 1500)
- 22. Raising children's self-esteem and awareness about children's rights, fundamental rights and national law.
- 23. Children library and literacy classes for 1500-1800 children daily.
- 24. Child social Rehabilitation process. Individual interventions for children and youths.
- 25. Child rights protection programs security, legal help and court actions.



PREVENTION SERVICES

Introduction

In 2007, CPCS set up **Prevention programs** and **Awareness activities** for children and families outside and inside of the Kathmandu valley in order to prevent the arrival of children to the streets. We developed different programs focused on families, community and children "at risk".

Launched in 2003, **CLASS** (CPCS Local Action and Support Services) is a prevention program focused on different realities of the street and working directly on their foundations: village problems, domestic violence, social exclusion, consumption of alcohol or drugs, absence of family planning, etc. The precise aim of CLASS is to address the multiple problems and risks met by children in certain cities in Nepal where the phenomenon is triggered. Children are at a risk of being victims of domestic violence, social exclusion, drug abuse or lack of family planning. Combinations of those causes push children to escape from their village to seek refuge elsewhere. That is why CPCS want to stop the flow of children at the source and reduce their number by encouraging and sustaining their education.

Through the **CLASS** Program, we support children, in their home place, for schooling and scholarship; we enhance their parent's awareness on their right to education, on the importance to attend school, on the risks associated with school dropout and on the dangers of the streets.

Awareness and Prevention activities:

WITH THE FAMILIES...

CPCS has been able to collect data and conduct several studies on the topic of street children in Nepal. This has enabled the organization to identify the underlying characteristics of poor households that are likely to lead to the migration of a child to the street. Sometimes, parents themselves are responsible for sending their children to work in the streets and use their child as a source of income. This generally happens when the father loses his job. Other times, alcohol consumption, family break-up or domestic violence can result in children running away from their homes and placing all their dreams in the myth of the city. The relationship with the family is therefore a key element in addressing the issue of street children. Hence, CPCS has developed prevention programs targeted not only at the street children themselves but also at families and children identified as "at risk" by our social workers and their partners (local schools, local organizations, and the authorities).

Prevention programs targets poor families in order to reduce children migration include awareness sessions, family counseling, family mediation services, and the provision for children's educational costs when necessary (i.e., paying for the tuition fees). Through these activities, we try to make the parents understand that the relationship they have with their children is the best guarantee against the risks of breakdown. Our Educator on-site tries to engage regularly with parents and to address highly sensitive topics such as the rights of the child, duties of the parents, the consequences of domestic violence and alcoholism, hygiene, health, etc.

WITH THE CHILDREN "AT RISK" ...

CPCS educators also involve with children "at risk" in the villages by organizing activities in the local schools. These awareness-raising sessions cover the dangers of the street (drugs, diseases and abuses of all kinds), the rights and duties of parents and children, domestic violence, hygiene, health, the use of illicit substances. Without knowledge of their rights and these risks, the child is an easy prey for a predator.



WITH THE STREET CHILDREN...

In Nepal, about 65% of the children who arrive on the street usually stay there. This is why our educators organize regular information sessions in the street to inform the children about the various forms of abuse that street children might be exposed to, i.e. AIDS, drugs, and sexual exploitation. By doing this, we try to make them better prepared to face the dangers. Children in the street and the ones attending our shelters participate in awareness-raising sessions. Without knowledge of these risks, the child is a designated victim. For example, CPCS has launched a campaign on HIV/AIDS, the risks of clandestine sexual intercourse, and the consumption of drugs. We deal with these topics by using posters and other materials, which facilitates communication with the children.

WITH THE PUBLIC...

Many different stakeholders interact with street children in Nepal, including the general-public, security forces, shopkeepers, tourist professionals, tourists and schools. CPCS considers that the issue of street children should not only be tackled at the children and their families' level, but also at the level of these other stakeholders. The image of street-based children amongst the public is generally quite negative. Because they wear dirty clothes, use bad language and deny most social norms, they are considered social parasites, young criminals and drug addicts. Children often feel that they have no other choice but to live outside society and reject most of its rules. They form a parallel society with its own codes, its own language and its own rituals, which often include consumption of illicit substances. This leads to a vicious circle: society rejects street children because they are non-social and children are non-social because society rejects them. By working on the public's perception of street children, CPCS tries to break this vicious circle. CPCS believes that "the greater the public's participation, the greater the chances that children reintegrate society smoothly" In addition to information sessions, held in order to raise the public's awareness, our team organizes street dramas and produces short movies. These tools inform the locals on how children are surviving in the street. Street drama enables them to express their experiences freely and reduces the distance with the public. CPCS has also produced two movies, "Beli 1" (2008) and "Beli 2" (2009) featuring Nepali street children in their everyday life situation. The actors are both CPCS children and professional actors. This awareness tool's purpose is to awake the Nepalese population to the reality of the street and give it keys to understanding. Lastly, we have adopted a specific policy with regard to the right to one's image. We do not allow people from the outside to use the pictures taken at CPCS as they wish. CPCS prohibits the use of denigrating pictures of street children and the publication of pictures of children's faces without their consent. By doing this, we intend to respect the rights of the child and set an example for others to follow.

WITH THE AUTHORITIES...

The police can also be a partner in the fight that CPCS is leading. Firstly, police officers who are badly informed about children's rights and street children's living conditions might behave unlawfully towards children and notably use violence against them. By informing the police, we can expect a better understanding and a more humane attitude. Secondly, working in collaboration with the police on the problems of the street is a key to our work. Our objective is to calm tenseness between the police and the children. Today, thanks to a good relationship with CPCS, the police prefer to contact our hotline rather than incarcerate children in the case of offences. On our side, we try to explain to the child that certain behaviors are harmful to their image and make it necessary for the police to intervene.

WITH THE SCHOOLS

CPCS organizes street dramas on children's rights, sexual abuse of children, family violence, education and other abuses. These street dramas are performed in various schools in Kathmandu and in other parts of the country too. Parents, teachers, community people, civil service employees and students are the target audience.



CPCS Local Action and Support Services (CLASS)

CPCS believes that prevention programs should also be conducted outside of the valley to address the issue of street children at its source. Our CLASS program aims to raise awareness among ordinary people and stakeholders outside and inside the Kathmandu valley area.

Through the CLASS program, CPCS conducts prevention programs in 41 centers and schools, in Kathmandu valley and in other districts. These places were selected after a study showing that they were the ones from which the majority of street children come from, notably because major roads pass by these towns.

With the support of a CPCS social worker (locally recruited, LSA), CPCS identifies families at risk. This process is conducted through networking with other child protection NGOs based in the area, local schools and government bodies. A proposal is made to the selected families. The LSA plays the role of a mediator between the school, the family and the child itself.

CPCS provides financial support to the family for school related expenses (monthly fees, exam fees, uniforms, books, stationary etc...), support to the child (which he/she usually do not get at home due to illiteracy and lack of education in his/her family).

The LSA also works as a social counselor trying to install or re-install, through dialogue, a better communication between the family members.

Altogether **4278** parents, teachers and children benefit from our CLASS Programs. 4 offices, National and Regional deliver CPCS support to the children through 41 local centers and 87 staffs.

During first semester, in the 26 centers, about 3800 daily CLASS activities and 288 Awareness activities were held.

During second semester, in the 41 centers, 6033 Awareness and daily CLASS activities were realized for about 1510 children each time (of which 575 Health sessions, 614 Parents meetings and 3880 medical cases treated ...) and 6280 Families visits performed (*details are in the annexes*).

The "Prevention" project is mainly supported by "la Chaine de l'Espoir". In 2016, "les Amis de Soeur Emmanuelle" and Caritas supported the action and certainly in the district of Dolakha.

National Office (Kathmandu)

28 regular staffs and 20 part time staffs work for the office in various programs: *CLASS, "Drop In Center"* (DIC), rehabilitation center, legal and medical support, counseling, field services, youth empowerment, school support, residential school support and education support for families. 27 boys and girls attend school through the residential program, 36 benefit of schooling. 455 children are in a CLASS programs. Daily we work with 10-20 children for medical checkup, hospitalization, general medication and first aid. 25 children live in the Drop In Center.





Regional Office (Dolakha)



Dolakha is one of the most affected districts of the 2015 earthquakes.

19 staffs (full time and part time) work daily in the 15 CLASS and 5 ECD (Early Child Development) programs. 541 children, living with their families, attend schools, ECDs and CLASS programs.

Since August 2016, CPCR has an ambulance (funded by several Rotaries Clubs) to provide extended services through its Medical support program (with authorization of Nepal Government's Ministry of Health and Population).



7 New CLASS and 5 ECD Centers, for 389 children, opened in 2016

All centers (*Mati, Lapilang, Kshamawati, Deurali, Bhedikhor, Lamanagi, Kutidanda*) are located in Bhimeshwor Municipality.

5 schools have now their own ECD (<u>Early Child Development</u>) Centers, for 63 children, supported by our programs (*shree kalinchowk higher Secondary school, Shree Mahendrodaya Secondary, Lapilang Higher secondary Raj Kuleshwor lower Secondary and shree Buddha Primary*). Those ECD Centers were opened in April 2016 with some of the new CLASS programs. The Programs of Charikot and Dolakha established in 2007 have started their ECD Support in 2016.



School	Address	CENTER	Children	ECD Children
Shree Mahendrodaya Sec. School	Mati, Dolakha	Mati	50	16
Sri Lapilang H Secondary School	Lapilang, Dolakha	Lapilang	50	13
Shree Kutidanda H Sec School	Bhimeswar, Dolakha	Kutidanda	50	
Shree Kshamawati H Sec School	Kshamawati, Dolakha	Kshamawati	50	
Shree Buddha Primary School	Kshamawati, Dolakha	Deurali	19	7
Shree Lamanagi L S School	Kshamawati, Dolakha	Lamanagi	100	
Shree Bhumeswari Primary School	Kshamawati, Dolakha	Bhedikhor	34	



Regional Office (Morang)



Morang is high dense district connected to Indian boarder.





ORCHID (**Organization for Child Development**) was registered in Morang's District Administration office in 2015 as a local NGO working for and with children at risk in the District.

All the children (from underprivileged families) are supported for their education in 8 government schools (school and extra-class CLASS activities: Bhagwati Secondary, Mahendra Secondary, Kabir Secondary, Dhanpal Secondary, Janata Secondary, Devi Secondary, Swasthani Primary, Janasewa from Belbari Municipality, Koshi Haraicha Municipality, Bayarban VDC). Children from "Kabir Higher Secondary School" attend daily CLASS activities in the regional office.



5 New CLASS Centers for 200 children opened in 2016

School	Address	CENTER	Children
Shree Mahendra Secondary School	Koshi Haraincha - 6,	KOSHI	50
Siliee Mailendia Secondary School	Morang	HARAINCHA	30
Shree Janasewa Higher Secondary School	Bayarban - 8, Morang	BAYARBAN	25
Shree Bhagawati Higher Secondary School	Belbari - 3, Morang	BELBARI	50
Shree Dhanpal Higher Secondary School	Belbari - 8, Morang	DHANPAL	25
Shree Kawir Higher Secondary School	Belbari- 4, Morang	LALBHITTI	50



Regional Office (Sindhuli)

Sindhuli is a mid-hill district at the junction of the main highway to Indian boarder and East way highway.

10 staffs work daily in 7 CLASS programs with 225 children from underprivileged families. All live with their families and attend schools in 8 government schools (Panchakanya Secondary, Shree Siddhi primary, Bhabishya Nirman Secondary school, Shree kamala Secondary Shree Janajyoti from Kamalamai).



CRPC (Child Right Protection Center) was registered in Sindhuli

District Administration office in 2007 as a local NGO to work for and with children at risk in Sindhuli District.

3 New CLASS Centers for 100 children opened in 2016

The new CLASS Centers have been opened in different wards of the Municipality. They are located within a radius of 3 km from CRPC office. All supported children attend government schools. Those of Bhabishya Nirman Higher Secondary School and Shree Sidhhi Primary school attend daily CLASS activities in CRPC office.



School	Address	CLASS CENTER	Children
Shree Siddhi Primary School	Kamalamai, Sindhuli	Andheri Sindhuli	50
Shree Kamalamai Sec School	Kamalamai, Sindhuli	Kamalamai Sindhuli	25
Shree Janajyoti H Sec School	Kamalamai, Sindhuli	Phosretar Sindhuli	25

4 CLASS Centers (140 children) Closed in 2016

Due to lack of financial resources and changes in government policies, we had to close 4 Centers in different districts, mainly in the far western part (*Udayapur, Rupandehi Surkhet and Kailali*).

CLASS Center	District	Children
Butwal	Rupandehi	50
Katari	Udaypur	30
Surkhet	Surkhet	30
Dhangarhi	Kailali	30



RISK REDUCTION

Introduction

CPCS respects the child's wishes and believes. It is the child's own decision to come to CPCS and then to go back to its family or to choose another option. We have developed programs and activities that encourage children to come to our centers where we can help them on their path back to their family, and enroll them in school. Street field workers inform street-based children and encourage them to walk toward their own social Rehabilitation path gradually.

CPCS short-term risk reduction programs conducted both in the streets and in our socialization centers, constituted the first steps to the building of a relationship between the child and CPCS. CPCS then offered any street child who desire it, an individual counseling based on his personal history, educational background, personal abilities, age, and most important of all, on his personal wishes and interests.

Through daily fieldwork and contacts with street-based children within our centers, we gain experience about the daily life and problems of street-based children. In addition, CPCS values very much its network with other NGOs working with street-based children around the world. Being part of the "Street Field Workers International Network" gives us the opportunity to share our experiences and learn from others.

CPCS' outreach work was essentially based on frequent day-and-night field visits and on activities within our centers. On the street, the children who met our social/field workers received information on our activities, programs, counseling services, informal education classes, and first aid service. Our social workers were also responsible for identifying and approaching new street-based children.

Nepal's Government has changed its policy concerning street-based children in coordination with existing NGOs. First Aid services directly in the street are now forbidden in favor of placement in Rehabilitation centers. MOWCSW and CCWB have published a <u>Guidelines and operational manual</u> for organizations working with street children concerning the **Drop In Centers** (DIC) and Rehabilitation/Socialization centers. They started that program on 10 May 2016 in partnership with 10 NGOs.



The Rehabilitation Shelter - Dillibazar

Due to some policy changes decided by the Central Child Welfare Board, our "shelters" are not fully open anymore. Children have to stay inside and follow a full socialization process.



The socialization center is a place where former street-based children can be safe and receive assistance when needed. They have access to various entertainments (football, board games, carumboard, marbles, cricket, badminton ,table tennis, watching a movie) while the educators take this opportunities to raise up their awareness on AIDS/HIV, drugs, child rights and give information about the services that CPCS can offer if they decide to leave the street. Dances, music classes and other activities

are also initiated by their peer educator or friends studying in secondary level.

Our Aims

- ✓ To offer the children a safe place to sleep, take care of their personal hygiene and socialize with other children.
- ✓ To give the children nutritious and hygienic meals.
- ✓ To offer the children free access to medical care and counseling in our recovery center .
- ✓ To offer the children non-formal education, sports, culture and child rights classes.
- ✓ To manage family reunifications and family visits.
- ✓ To provide children legal assistance and plead on behalf of them in case of court action.
- ✓ To reintegrate children after tracing family through family visit and counseling
- ✓ To reduce risk among street-based children and children at risk

Coordination with CCWB, Center for Children at Risk, APC and YCSC

- 56 Children were referred for Rehabilitation in CPCS DIC by different organizations; 21 joined us directly.
- 18 children were referred from our DIC center of Dillibazar to our partner organization CPCR in Dolakha.

SELF-MANAGEMENT AND DAILY ACTIVITIES

The socialization shelter is partly managed by the children themselves to rise up children's sense of responsibility giving them possibility to play an active role in the organization of the center (maintenance, household cleaning, food shopping, cooking, and for defining the rules of good behavior).



A **Library** provides books on various subjects and is used by several children each day. They can borrow books as they wish.

Individual Locker deposit boxes are available for their belongings *(clothes, shoes and valuables)* while they are staying at the center.

A "street banking system" also encourages children to save money and protects them from having their money stolen by street gangs, junkyard owners... They can deposit their money and retrieve it when needed.





CHILDREN PARTICIPATION

A children's central government (CCG), of which members are elected democratically by all the children, meet 4 times a month to discuss and make suggestions about the program they are enrolled in, and they prepare a written report submitted to CPCS management committee. Our objective is to make the children aware of the management of the centers and of their daily lives and to teach them how society works.

Children can also put their comment, critics and suggestions in a **suggestion box**. Most of the improvements brought to the programs came from the children's suggestions and CCG reports. Staffs have also regular meetings with children representatives to gather their observations.

THE PICNIC PROGRAM



CPCS has opened a picnic spot in Godawari, outside of the city. Children are regularly taken to picnics in groups of about 20-25 children. This offers them the opportunity to socialize with one another and tightens the bonds both with the other children and with our social workers.

CPCS also organizes a gathering of all street-based children for a picnic once a year. This Program aims to socialize children, to take them out of the city

and offer them some fun.

CENTERS MONTHLY ATTENDANCE STATISTICS

Dillibazar Rehabilitation Center	Tot.	J	F	M	A	M	J
Nbr of children (beginning)	11	11	12	9	9	4	1
+ New children	12	6	1	3			2
- F.R from office	8	1	3	3	1		
- F.R through partners	4				4		
- Internal Referral	5					3	2
- Drop out	5	4	1				
= Nbr of children (end)	1	12	9	9	4	1	1

Sifal Socialization Center (averages)	Tot.	J	F	M	A	M
Morning Class	51	13	8	9	11	10
Morning Exercise	65	16	11	13	15	10
Afternoon Class(Activities)	50	13	6	9	11	11
Evening Class	36	7	5	6	8	10
Morning Meal	53	13	8	10	12	10
Snacks	54	13	6	9	15	11
Evening Meal	41	8	6	7	9	11
Night Shelter	62	16	10	12	13	11
Total Registration	8	2				6
Total Referral	27	9	9	1	1	7

The rehabilitation Shelter program is supported by "Les amis de Soeur Emmanuelle" –

Belgium and the Vieujant Foundation



Short Stories

Subash (13 years old) originates from Sarlahi. He has father and mother. His younger brother was in CPCS. His parents live in Sarlahi but his maternal uncle took him back home. He ran away from his uncle home and never goes back to Sarlahi. We tried to send him home three, four times. He used all substances. We give responsibilities to him for his improvement. He visited all centers; even he jumped from third floor. He plans to go Dolakha and study. His family condition is bad. His younger brother had also visited CPCS and was reunified with his family. He also tried to reunify many times. He worked in Pashupati area as beggar. He is like a gang leader. Now CPCS made him captain and gave him some leadership. He feels happy to be a captain and lead all children in DIC.

Krishna (12 years old) ran away from family and stay in Pashupati shop where he helps to carry wood, to burn dead bodies and collect money from temple, at that time he started to consume Cigarettes, and sniff dendrite. He was found by police in Pashupati temple and referred to CPCS for Rehabilitation. He has mother father elder brother younger brother and elder sister at home. He came to CPCS in 3 July 2014. On May 2016 his uncle came to CPCS and brings him back to home although he returned from home same day pretending his elder brother was beating him. He frequently goes home and come back to CPCS. Although since 2016 October, he lives in CPCS continuingly. This time, he improves his participation in activities, coordination, communication with teacher and friends. He did not likes to outside to play, and participate in morning and evening class. According to him, he will stay in CPCS for long time, improve his behaviors, and study. It is very difficult to say that, some child within three months will improve or not, so we have a plan of action of that type of children, we must give more attention and take care. His father is farmer and he already visited APC.

Urgen from Ramechhap is 14yrs old. He has his father and his mother, a brother and sister. His father is abroad. His family owns land and property, although he does not like to work at home. If he stays at home, he has to work in farmland and he does not like to work. He ran away and came to Kathmandu. He used to carry load as porter in street, earning around Rs 300 daily. He left the job because of bad treatment and crush from the master where he worked as domestic. 104 found him and referred to CPCS. He smokes cigarettes; he has tried all substances, alcohol... He does not like to go back to home and wants to be an independent his own through training. He came to CAPS in January 2016. He attended school in village. He likes to play football and he wants to become the driver in future.



The Street Work

Supported by "Les amis de Soeur Emmanuel"

Day Field Visits



These frequent outreach visits enable CPCS educators to get a better understanding of the street life, to identify new street-based children, keep, and build a relationship with them. A senior staff member and a

social worker, provide the children counseling about the street problems, awareness sessions, informal classes and games.



We have reduced this program on demand of **CCWB** that forbid directly providing first aid in street in favor of rehabilitation through the DIC programs.

DAY FIELDS VISITS MONTHLY STATISTICS

Day Field Visits (KTM)	Tot.	J	F	M	A	M	J	J	A	S	О	N	D
Area 1 - Avg # of children	450	45	43	42	40	20	20	14	44	45	50	40	47
Area 2 - Avg # of children	265	38	32	30	21	12	11	14	20	18	16	20	33
Area 3 - Avg # of children	126	12	10	9	8	5	3	14	11	10	12	15	17
Area 4 - Avg # of children	90	7	5	6	4	1	1	13	9	10	9	12	13
Area 5 - Avg # of children	105	8	6	5	6	6	4	14	12	10	12	11	11
Children met by Simple Field	1042	103	106	108	102	65	54	14	96	102	95	97	100
Children brought to center by Simple Field	170	16	40	32	20	5	8	14	5	7	9	4	10

Night Field Visits

Night Field visits started 5 years ago, 6 days/week, at night. A Health Assistant, a senior social worker and an ambulance driver patrol the different areas of Kathmandu where street-based children hang out at night. Every night, we meet an average of 17 children.





The main objective is to reduce the children risks exposure at night, (physical and sexual abuse, alcohol, marijuana or glue, injuries during gang fights ...). Our team can decide to take a child to a Hospital or to transfer him to one of our centers.

Since the CCWB has launched the program, "no-one child should stay in street" children are less appearing in the street. We assume they hide to avoid that police sent them to a nearby DIC. Our night field program has

thus been reduced to 2 days/week, instead of 6 previously.



NIGHT FIELDS VISITS MONTHLY STATISTICS

Night Field Visits (KTM)	Tot.	J	F	M	A	M	J	J	A	S	О	N	D
Area 1 - Average Nbr of Children	248	25	20	22	25	15	10	23	30	25	20	23	10
Area 2 - Average Nbr of Children	165	15	10	15	20	15	10	15	15	15	10	15	10
Area 3 - Average Nbr of Children	102	10	9	10	10	10	7	10	10	8	8	10	0
Area 4 - Average Nbr of Children	92	10	7	10	8	5	5	12	10	5	5	12	3
Nbr of Children treated on Field	1845	106	221	222	230	93	47	204	259	190	44	204	25
Children brought to center by Simple field	34	2	1	4	1	3	2	2	3	2	6	3	5
Average Nbr children in daily Night field	232	20	22	24	20	15	10	25	21	20	15	25	15

The Recovery CENTER (Medical support)



The *Recovery Center of Dillibazar* is open 24 hours a day. Professional Health Assistants and qualified nurses work in shifts. In average, 16 children receive care daily.

In the clinic, equipped with 10 beds, sick children can recover. Special meals can be prepared according to doctors' recommendations. The clinic also treats many viral diseases and epidemics.

A secondary center is operated in the Girls center.

Children can receive daily consultations and needed treatments including hospitalizations. We face several cases: fracture, hernia, accident, RTI, spinal and hand necrosis. Other cases were: HIV, fractures, head injuries Road traffic accident, tuberculosis, infected wounds, varicella, dental problem ,fall injury, gang fight injury, stab injury, spinal injury, dog bite, flues, chest infection ,nephritic syndrome, gastritis, physical assault, seizure disorder, scabies syphilis down syndrome autism and eye/ear problem etc.



The Sifal socialization center has moved to Dillibazar on 13 may 2016 when CPCS has started its partnership program with the CCWB

MEDICAL SUPPORT MONTHLY STATISTICS

MEDICAL SUPPORT Sifal	Tot.	J	F	M	A
# of children (Out patients) treated	1181	331	241	303	306
Daily average	10	11	8	10	11
Number of hospital cases	62	15	16	15	16

MEDICAL SUPPORT Dillibazar	Tot.	J	F	M	A	M	J	J	A	S	О	N	D
# of children (Out patients) treated	2263	217	237	217	223	223	169	205	158	173	148	150	143
Daily average		7	8	7	7	7	6	7	5	6	5	5	5
Number of "clinic in" children treated	2768	215	279	279	192	180	246	214	254	262	249	183	215
Daily average		7	9	9	6	6	8	7	8	9	8	6	7



Nbr of In-Patients Nights	2934	186	323	273	276	182	241	233	272	255	265	187	241
Average age of in-patients		15	15	14	14	12	14	12	12	12	18	10	14
Number of hospital cases	211	17	24	20	15	18	13	12	25	19	11	20	17
Number of patients admitted in hospital	15	1	2	2	1	2	1	1	1	1	1	1	1
Hospitalization Days	25	1	3	3	2	1	0	1	1	2	3	4	4

MEDICAL SUPPORT Girls' Recovery Center	Tot.	J	F	M	A	M	J	J	A	s	O	Z	D
# of children (Out patients) treated	1504	125	167	29	101	67	101	205	158	173	148	120	110
Daily average		5	6	1	4	3	3	6	6	6	6	4	4
Number of hospitalization cases	33	6	6	3	0	0	2	2	2	2	2	4	4
Total	1537	131	173	32	101	67	103	207	160	175	150	124	114

Medical Support Program (MSP)

It aims to support street-based children's medical rights and consists of

- ✓ Conducting day-and-night field visits and provide first-aid treatment to street-based children directly on the streets.
- ✓ Providing first aid or medical support for minor injuries & illness to children of all CPCS programs and centers.
- ✓ Referring more serious cases such as surgery, diagnosis, lab tests or further medical intervention to public hospitals.
- ✓ Increasing the street-based children and youths' awareness about the risk of HIV, AIDS, drugs, Hepatitis, Jaundice, STI's, STD's and other communicable diseases.

CPCS medical staffs are present in different zones in Kathmandu through Day & Night Field visits.

Medical support is provided to all children without any discrimination, regardless of their pathology, toxic addiction, or HIV status.

MSP also organizes health camps to perform medical check-ups and inform the youths.

We work in partnership with several public hospitals and coordinate with other health organizations. CPCS ensures its staffs remain healthy and safe through preventive measures, trainings and immunization.

The medical team meets with other health organizations in Nepal on a regular basis. We frequently participate in an Ambulances Management meeting in the District Health Office, Kathmandu to ensure that we follow the rules and regulations applicable to ambulances in general. CPCS also participates in coordination meetings with the Nepal Red Cross Society, the Chief District Officer, and the Nepal Police about mechanisms and strategies to be adopted by social NGOs to rescue street children when demonstrations and general strikes hit the country. Our medical staff faces some serious infection risks (AIDS, hepatitis or other diseases) due to their work; CPCS ensures the staffs remain healthy and safe through preventive measures, trainings and immunization.

Supported by the Nick Simons Foundation through the American Himalayan Foundation



The Emergency Line (441100)



CPCS operates a 24 hours emergency line, available for citizens, parents, police, shopkeepers, tourists, teachers, GOs, other NGOs, and street-based children themselves. They mostly call us to inform us about a fight, an injured child needing medical assistance or a friend taken into custody. Other groups of people call us to report a case, or to query for information.

The "National Centre for Children at Risk (#104)" referred us 55 children for rehab.

EMERGENCY LINE MONTHLY STATISTICS

Emergency Line Cases	Tot.	J	F	M	A	M	J	J	A	S	0	N	D
Medical Problems	58	2	2	4	1	3	7	9	2	4	7	11	6
Arrestations	11	2	1	1	3	2		2					
Abuses - trafficking	1								1				
Others	7	1		1		3		1				1	
Child Labour	1							1					
Information	154	15	16	14	17	16	15	3	7	14	15	14	8
Line Calls	234	21	19	20	21	25	22	16	10	18	22	26	14

Child Focus Notices about child lost and family missing were also submitted for weekly publications in newspapers. We are replacing it by online publications in our Blog and through other social Medias (Facebook, Twitter...)

Supported by the Nick Simons Foundation through the American Himalayan Foundation

Legal Protection Program

CPCS provides legal assistance to street-based children and youth. Professional lawyers are ready to intervene when a child is involved in illegal detention, for recovering wage from an employee, in cases of sexual abuses, or when a street child wants to initiate the legal procedures to obtain his birth registration, his citizenship certificates or to recover parental inheritance. A CPCS lawyer and a staff member conduct also regular visits to police custodies. Many cases are also reported by the police or the public through our Emergency Line service.

LEGAL SUPPORT MONTHLY STATISTICS

Legal Support	Tot.	J	F	M	A	M	J	J	A	S	0	N	D
23 Jail visits	23	3	4	4	4	2	1	1	2	1		1	0
30 children/youths in jail	30	5	5	5	5	6	4						
46 Custodies visits	46	7	8	8	8		3	2	1	2	3	2	2
14 children/youths met in custody	14	5	3	3	3								
15 Children/youths released from custody	15	5	3	3	3			1					
1 Court Action	1	1											
10 Meetings with Police	10	1						1		1	4	2	1
792 children in Class programs	792	130	140	140	140	60	50	30	20	15	24	23	20
18 Awareness Programs with Public	18	3	4	4	4	2	1						



Short Stories

Hari is a 19 year old boy who was a frequently visitor of CPCS since many years. He was in the Rehabilitation program and followed a training course as kitchen helper when he was 16. He found a job in a small local restaurant and was very satisfied with his job, Because of the shortage he had to manage whatever he could. A bad quality gas cylinder blasted and he had serious burning wounds on the face and hands, His boss blamed him for the accident and kicked him out. Therefore, he came again to CPCS for help. After a check up in the hospital, he came to the Recovery Center for further treatment.

Ram is from Suspa, he is 10yrs old. He came in CPCR Office at Deurali for medical treatment. He is suffering from fever, headache and dry cough with chest pain. We took him in observation for 6 hours and gave some medicine but he did not feel better. We discussed about his condition with his guardian (father) then we referred him to the Primary Health Center (PHC) at Charikot with our office vehicle and a medical staff. The hospital emergency ward doctors took his vital signs, performed a chest X-ray test and finally diagnosed pneumonia.

Biini is 18yrs old now. She comes from Surunga, Jhapa. Her parents are alive. She lived 16yrs in Pashupati. She was living in CPCS girls' center in 2009 but she ran away. Raj comes from Khotang and lives in street. He works in Ram Mandir as dishwasher. Both met in street, married in street and had a baby. They live in Pashupati now. They do not keep their baby with them they have told baby is in home. They came at CPCS on 12 Feb 2016 for a medical support during her pregnancy and a safe delivery. They were referred to a maternity hospital. 12 days after delivery, Biini was sent to Godavari Girls Center for rest and caring baby. She stayed there for 45 days but tried twice time to escape telling to be missing her husband. She was not really taking care of the baby. Her son got sick, and they were referred to a Child Hospital. The baby had an hernia problem. After he was healed, they went back to Pashupati. Both kept their habit to sniff glue and to smoke.

Supported by the Nick Simons Foundation through the American Himalayan Foundation

Counseling Services



Most of the children met by CPCS or living in our centers have experienced street life and some forms of violence, trauma or torture. A majority of them has been victims of physical, psychological or sexual abuses and has experienced drug addiction, criminal activities, or detention. These experiences often result in psychological disorders such as low self-esteem, loneliness, insecurity, inferiority complex, substance addiction or violent behavior. Therefore, CPCS provides children with a psychosocial

support through individual and group sessions.

We have 3 psychosocial counselors for all our programs and centers. Social Workers can refer children in need to the psychosocial support cell, but children can also request to meet a counselor. The cell in collaboration with the involved staff ensures an effective follow-up of each case. Counselors make also recommendations concerning the possible and suitable rehabilitations for each child (family re-unification, schooling ...).





COUNSELING SERVICES MONTHLY STATISTICS

COUNSELING SERVICES Kathmandu	Tot.	J	F	M	A	M	J	J	A	S	О	N	D
Individual Counseling	946	110	100	104	100	98	99	83	73	61	27	45	46
Group Counseling	243	19	18	14	13	12	21	25	28	26	22	24	21
General Awareness Classes	228	15	15	16	15	15	19	19	27	21	16	25	25
Sexual Abuses Victims Support	2								1	1			
Physical and moral abuse victims supported	44	4	4	2	3	6	4	0	5	5	3	4	4
Awareness Sessions with the team	23	2	2	2	2	2	2	2	2	2	1	2	2

Supported by the Nick Simons Foundation through the American Himalayan Foundation

Short Stories

Kiran is 15 yrs old from Sindhupalchowk. He lost his father in childhood. One day, his mother let him in hotel for job and went working. His grandmother did not care him so he left his house and came to CPCS. He joined school and study hard although he was not good in study. Because of teacher and friends, he left school where they teased him badly. Same time he left CPCS and reached Pashupati where he started to consume cigarettes and sniff dendrite but he used to come in CPCS Sifal Socialization Center. Once he got sick and reached CPCS recovery centre and stayed for months for treatment. When he was in clinic, all miss and sir said him 'he was good boy and how he turned bad may be because of bad friend circle' then he felt that could be good and attended counselling sessions. He changed his habits and behaviour; he joined school in class six and aims to attend vocational training in future.

Bishal is from Gaighat he is 11 yrs old. He has father mother but now his mother eloped. His father was regularly beating him and was often drunk. He remarried, but her stepmother was also heating him. He left house and came to Kathmandu. He started to live in street with friends and got drugs consumption habits. He begged in street. He met CPCS staff and came to us. He told he had stayed in APC for a month, they had sent him home but he could not stay home. Now he is in our center and wants to continue studies and change his behaviour. He dreams to become a pilot in future.



SOCIAL REHABILITATION

Introduction

CPCS has developed services to encourage street-based children's' social Rehabilitation as well as to protect them from risks. One of the objectives is the child's reintegration into its community and with its family if the conditions allow it. Through these programs, we try to provide the best solutions for the child, according to his age, personal wishes, and family situation. We encourage them to leave the streets and help them, when they want, to find their path toward a better future either through family reunification or by any other most suiting mean: non-formal education, formal education or vocational training.

THE IDENTIFICATION PROCESS

We try to collect as much information as possible about children we met. We have developed different strategies to identify the child and his family (questioning the child, interviewing his friends, conducting field visits in the area mentioned by the child to inquire with the local people and local authorities ...).

THE FAMILY REUNIFICATION PROCESS

CPCS strongly believes that the best place for a child to develop itself is within its family, as long as and if the situation allows it. In addition, street-based children often express their will to go back to their houses during counseling sessions and interaction with the social worker. Family reunification success relies on the child's willingness to return home and on the family's readiness to receive him again. CPCS never pressures a child to go back to its family or on a family to take back a child. We have thus developed a set of mid-term and long-term interventions with the families concerned, for each stage of the family reunification process. Our family reunification social workers cell support these "before", "during" and "after" stages. CPCS interacts with the child, the social worker and the family to analyze the reasons for why the child ended up on the street in the first place: poverty, family problems or other reasons. We organize child counseling and family visits. After family visits, CPCS evaluates the possibility of reunifying the child with its family. CPCS plays a mediator role, which motivates children to go back home to their family and reintegrate with society independently. Reunified children remain in contact with CPCS, making it possible to monitor the evolution of the situation. This way we can see if the child stays with the family or ends up back on the street. During festivals or other cultural events, CPCS lets children visit their family, which is another tool to reunite children with their families voluntarily.

Reunification, de-institutionalization and Residential School Support (RSS)

CPCS believes in family care, love and support for children, our ultimate goal being to make family responsible and aware about child right and their responsibility towards their own children. NGOs can be the short-term solution to this family awareness and behavior. We launched family visits and family reunification programs this year.

Godavari. 16 boys and girls ran away from the centers. The RSS program was launched in 2009 for children who had reintegrated their family but were in need of educational support for schooling. Underprivileged and poor families benefit from the education support. Some governmental authorities, CBOs and partners, NGOs use our RSS support. It is coordinated within our CLASS programs and by prevention teams regularly visiting schools and students.

Last May 2015, 25 children were in the program and now 36 children receive RSS support for schooling. 5 children were dropped from RSS and 16 new children joined RSS program.



The Rehabilitation center for Boys (Dillibazar)



The CPCS Rehabilitation program is for former street and working children who want to leave the street life in order to develop themselves within a more positive and promising environment. Children are offered three educational sessions per day (Nepali, English, mathematics, physical education, or personal hygiene). This program mixes education and socialization through arts and sports and helps bring back children's self-esteem. It enables children to get over bad street habits such as drug addiction, violence, and pick

pocketing, and preparing them for a more rigorous study program or family reunification.

Children involved in these programs have spent time on the street enjoying total freedom and living in a world without any form of obligations and commitments, their stability often remains fragile and temptations to go back to the streets are frequent. Therefore, CPCS particularly focuses on personal counseling with help from our social workers and regular interventions with the psychological counselors. After having spent two months in Rehabilitation, children who have not been reunified with their families join the second Rehabilitation program where more long-term solutions are considered such as referral to other NGOs for vocational training, or schooling programs. The program will be moved to Dolakha very soon.

REHABILITATION MONTHLY STATISTICS

Dillibazar Rehabilitation Center	Tot.	J	F	M	A	M	J
Nbr of children (beg)	11	11	12	9	9	4	1
New children	12	6	1	3			2
F.R from office	8	1	3	3	1		
F.R through partners	4				4		
Internal Referral	5					3	2
Drop out	5	4	1				
Nbr of children (end)	1	12	9	9	4	1	1

Supported by the La Chaine de l'espoir – Vieujant Foundation – Les amis de Soeur Emmanuelle

The Rehabilitation Center for Girls

There are few girls in the street. However, once they are on the streets, they are unfortunately much more vulnerable to any kind of abuse including sexual abuse. It is essential to provide a safe place where they can benefit from socialization and Rehabilitation services.

The center is entirely dedicated to former street girls. They are directly referred to the Center, from the street, by other NGOs or GOs. Most of the cases referred to us by police are prostitute or domestic worker. In many cases, girls ran away as they cannot handle staying in a closed environment due to drug addictions and bad habits. The Program will be moved to Dolakha very soon.



REHABILITATION MONTHLY STATISTICS

GIRLS' Rehabilitation Center	Tot.	J	F	M	A	M	J	J	A	S	0	N	D
No of children Beg	4	4	3	4	5	3	2	3	3	3	4	3	1
New children	12	0	3	2	0	0	3	0	2	1	1	0	0
F.R from office	0	0	0	0	0	0	0	0	0	0	0	0	0
F.R through Partner	6	0	0	1	2	0	1	0	0	0	1	1	0
F.R after H.V	2	1	1	0	0	0	0	0	0	0	0	0	0
Internal Referral	3	0	0	0	0	1	0	0	2	0	0	0	0
Other Ngo Ref	1	0	0	0	0	0	0	0	0	0	0	1	0
Drop out	3	0	1	0	0	0	1	0	0	0	1	0	0
Nbr of children (end)	1	3	4	5	3	2	3	3	3	4	3	1	1

Supported by the the American Himalayan Foundation and Kids in need - Nepal (for the Dolakha part)

The Regional Center of Morang

is located in Morang district adjoining the district Sunsari (2 highly populated districts), at 20 kilometers from Indian boarder. It is used mainly during reunification processes and links with the families living in the district (100 to 125 children supported). A small medical corner (part of our CLASS programs) provides check up and care as well as it provides services to the schooling children and their parents. The center runs also daily CLASS programs. Parents also attend a monthly awareness meeting in the center.

The Regional Center of Sindhuli

is located in heart of Sindhuli city. *It* is used for the reunification process and links with the families living in the district. A small medical corner provides check up and can cure children as well as it provides services to the children at risks.



Short Stories

Anita is 10 years old. She is from Ramechhap. She was living with her parents are living in Lalitpur. She told her father, mother were labors, drinking at night and beating children so that she and her brother run away from home, and came to live in Thamel area. After some time police found them and referred them to 104 that bring her in CPCS and her brother in APC. She also has an elder brother, younger brother and elder sister. Now her brother lives in APC and she lives in CPCS Rehabilitation center. She did not want to go back home but agree to visit her family. Finally her father came and took her back on last June 2016.



Dolakha Rehabilitation Program (CPCS Center in District of Dolakha)





The building Project is supported by many individuals and NGO's,

Amis de Soeur Emmanuelle, monsieur Duez, SALAAI, EUcanAID, Vie d'enfant, la fondation

Vieujant, l'école INDSE, CPCS-France, Rotaries clubs (Durbuy, Bruxelles, Paris, ...), la

communauté de la Résurrection, Caritas, La Chaine de l'espoir, La Table Ronde, etc.



The place is very scenery and offers beautiful views on Gaurishankar and surrounding forests. Children have fresh air and homely environment

The construction started on February 2015 and was planned for a two stories building. The 2015 earthquakes (25/04 & 12/05) revised the plans, destroying the building under finalization, forcing us to rebuild two one-stored buildings and one recovery center (we also had to pay compensation to the

contractor). The new plan was also to re-build the center as a Rehabilitation centre and a regional office to support all 600 families in the district.

The new building contract started on July 2015 was seriously affected by Indian economic blockade in its beginning: rising prices of building materials due to market's shortages... Nerveless, it continued (stone collection, gardening, compound walling, land leveling, etc).



... We also planted trees and fruits trees...





The center was finally ready in April 2016.
We expect to finish the new girls' center building in March 2017!





Four buildings of one floor are already completed. One is used for children bedrooms and kitchen, the second is used for library and boys rehabilitation, and the third one is used for the clinic *(recovery center)* and the office. The last one, a 3 rooms building is used for staffs' quarter.

The recovery center is equipped with 4

beds with two big cupboards for medical supplies. It is attached with Office. It has two toilets and a bathroom for sick children. Two nurses work there for children and for community people as well. As said we have one ambulance for medical emergencies and to reach city hospital.



The rehabilitation building has four toilets and bathrooms, is equipped with a washing machine and has two chimneys for heating system. A Big water tank is installed for water supply.





A solar system ensures regular electricity supply and a Solar hot water system is also installed for children bathing.





Presently 18 children live in the Rehabilitation Center and attend Buddha Primary Schools nearby and Lamanagi Lower Secondary School 45 minutes walk). The new girls' center building will normally be finished in March 2017.





Center has good contact with local community like forest users' groups, water consumer groups etc... We contributed to some donation to local communities and contributed for local road construction.





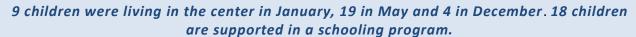
19 staffs (full time and part time) work over there, for children in CLASS centers as well as in the Rehabilitation and recovery Center. The Rehabilitation Center can rehab 18 children in addition of the staff rooms.

The LSAs (Local Social Actors), working in the CLASS programs, closely coordinate with school families and children. All together more than

3000 children benefit directly *(scholarship)* and indirectly from the CLASS programs!

The Rehabilitation program was established duly after earthquakes considering the risks among children. Most of the children flee from home

for several reasons: earthquakes, poverty, family violence, family conflict, eloped mother... Other partners NGOs or government bodies also refer children to us.





760 cases were checked in the recovery center, and 85 during field visits. 6 cases were admitted in PHC (Public Health Center) hospital, 18 cases were also referred to hospital for OPD checkup. 394 cases were treated in the last 6 months.

All treated Patients are children or people from the community, their age range from 1 to 80.

149 Children were treated in Out Patient consultations for 591 people from the community.

20 Patient were admitted for 31 nights. 9 Children and 49 people were referred to various hospitals. 7 awareness CLASS programs were held from July to December for 311 children on cleanliness, common cold, health hygiene, personal hygiene, seasonable diseases, viral fever, and wound.

DOLAKHA PROGRAMS MONTHLY STATISTICS

MEDICAL SUPPORT Dolakha	Tot.	J	F	M	A	M	J	J	A	S	О	Ν	D
# of children (Out patients) treated	149	15	19	18			18	16	19	28	5	8	3
Patients admitted in clinic	20	4		1			4	2	4	1		3	1



In Patients bed Nights	31	4		5			4	3	6	3		3	3
community patients treated	591		19	18		130	108	60	83	74	38	31	30
# of referred community patients	49		5	4			7	4	6	6	9	5	3
Total # of referred cpcr child patient	9						3	3	3				
Children treated on the field	85		36		13		36						
Total	934	23	79	46	13	130	180	88	121	112	52	50	40

Dolakha Rehabilitation Center	Tot.	J	F	M	A	M	J	J	A	S	0	N	D
Nbr of children (beg)	9	9	8	7	7	19	0	0	0	0	0	0	4
New children	25	1	0	1	15	1	3	0	0	0	0	4	0
F.R from office	12	2	1	0	4	2	3	0	0	0	0	0	0
Internal Referral	18					18							
Nbr of children (end)	4	8	7	8	19	0	0	0	0	0	0	4	4

Dolakha Schooling	Tot.	J	F	M	A	M	J	J	A	S	О	N	D
Scholarised children (beg)	18					18	18	18	18	17	17	17	18
New children	1											1	
Internally Referred Kids	2					0	0	1	1	0	0	0	0
Scholarised children (end)	18					18	18	17	17	17	17	18	18

An emergency support for 5 children surviving alone in a house destroyed by the earthquake!

Due to the civil war and past political troubles, this family moved from the Nepal-China border to the district headquarters 10 years ago. Since then, CPCS has been supporting the schooling cost and other help. Nowadays the situation gone worse, the first mother left 2 years ago. Then the father remarried and left to Saudi Arabia (dreaming to find money). Later the second mother also left and the 5 children, since then, had to care themselves without any adult support! CPCS is doing its best to help, to support and to ensure those 5 lives receive what they need and have the right to have education, food, clothes, support, etc.

The Schooling Program

Due to family problems or lack of information on families' whereabouts, family reunification is sometimes not suitable for some of the street-based children. Therefore, CPCS has developed a schooling program in order to offer them services adapted to their situation. Through schooling, the children socialize, meet other children and get out of the street environment. It allows them to enter and be part of another community than the one of the street-based children. Children attend government schools and pass exams like any other student. They attend classes in Nepali, English, mathematics, social studies, sciences, and sports.

Most street-based children used to attend school in their hometown. However, because of illiteracy and other social problems, education is often not a priority for the parents. This causes school absence and frequent dropouts. The general level of education is also very low in rural areas of Nepal. Additionally, the time children have spent in the street results in a great gap in their education. Hence, CPCS has developed good and close relationships with each of the schools that children attend. The teachers help CPCS social workers assess the level of the child and the class he should be admitted in.



CPCS is slowly decreasing its residential schooling support programs to focus on family reintegration and community-based care. It decreased from 110 to 84 students in different CPCS centers this year. Several students went back home and some others joined the Rehabilitation program.

The *Schooling Center for Boys (Dillibazar)* was established in 2004. The schooling program is one of the pioneer programs and there are currently **10** (10-17 years) children enrolled in school. They were 22 in January 2016. 7 new children enrolled in the program, 9 were reunified with their families, 1 was referred to another center, 16 were sent to our Dolakha center to attend the same schooling program and finally 6 drop out. They all study regularly in a nearby government school. **6** students live in their own room.

SCHOOLING MONTHLY STATISTICS

Dillibazar BOYS' Schooling (SMALL SCHOOL)	Tot.	J	F	M	A	M	J	J	A	S	0	N	D
Scholarised children (beginning)	22	22	21	20	18	19	16	17	16	15	14	10	10
=+ New children	6					4	2					1 (coming back)	
- Family reunified children	9			2	2	3			1	0	1		
- Internally referred children	1								0	1			
- Other Ngo ref children	16				10	4		1				1	
- Drop out children	6	1	1				1				3		
= Scholarised children (end)	10	21	20	18	8	16	17	16	15	14	10	10	10

The **Schooling Center for Girls** is for now in a village surrounded by a natural environment at 100 meters north from the road to Godawari. It is located in a residential area and very safe for the girls. This center will move to Dolakha in 2017.

SCHOOLING MONTHLY STATISTICS

Godavari GIRLS' Schooling	Tot.	J	F	M	A	M	J	J	A	S	О	N	D
Children attending school (beg)	18	18	18	18	17	10	10	10	11	11	11	11	11
Family Reunified children	9			1	7			1					
Internally Referred children	2			0	0			2					
Children attending school (end)	11	18	18	17	10	10	10	11	11	11	11	11	11

All Residential Schooling Program will move to Dolakha, from April 2017.

Short Stories

Bhawana is 15 yrs old. She was from Morang. She live with her mother and stepfather .Her mother became sick and died then his step father got next marriage and beat her to blame stealing money . Then, they took her Mangalbare. After some time living in Mangalbare with family they told her to live here they were search of job but they did not came back she work there. Where she worked, same master came to Kathmandu for job but they also bring her and live with them. There she did not do work and she came out of street and police meet her and referred to CPCS. Now she lives in CPCS girls' center since 6 years. She is happy there and after 6 years, she went to search her family with CPCS staff. However, she did not found them and was very sad. Now she attends class 7 at shree Sidheswori School. She is happy with us and all of CPCS staff helps her in her studies, and other moments.



Sita was from Morang Biratnagar. She has two elder brother, two elder sisters, father and mother. Her father is cart puller in jogbini border. She is from newar family although she wrote her name here as chaudhary. She is 14 yrs old. She studied in class 4 in Biratnagar. She ran from home with her aunty when she was in class 4. She reached Kathmandu and stayed few days with aunty then she ran away from her and came to street. A boy found her and sent her to 104 for help, which sent her to CPCS. She studied in class 5 hoping to go back home after school year, but her family condition was poor. She was sent for reunification although but the process failed and she had to come back with one of our social worker.



The Youth Program

Many former street-based children are above sixteen and have been referred to the youth program. They are going through adolescence and deserve a specific kind of attention. They need to be given responsibilities and to be fully involved in their Rehabilitation process for it to be a success. Youths of this age who have spent time on the streets are likely to engage in delinquency or criminal activities.

The Youth program was developed with the idea of delivering services and means of intervention tailored to those youths' particular needs. CPCS does so by giving responsibilities and guidance towards the



youth's professional life and future according to their literacy, educational background and wishes. CPCS encourages youth's responsibility (participation in daily work life, involvement in CPCS programs, tuition, office support, help in the kitchen, discussion groups) and possibility of working as a volunteer. Youths can also choose between different options offering progressive responsibilities:

- A 5 levels training leading them to become a social worker: Starting as a Junior Social Worker, then an Assistant Social Worker before becoming a Social Worker.
- Vocational trainings in various fields (Electricity or mechanics for example) provided by partner organizations

CPCS also organize a 3 days closed camp for youths to motivate and talk about their family, personal life, skill training, vocation center, personal hygiene, personality, citizenship and personal identification. It is held on different dates. It covers about 50 youths from the street and from Rehabilitation centers.

Youths Program	Tot.	J	F	M	A	M	J	J	A	S	О	N	D
Total Youth Level 1	68	2	1	1	1	8	9	10	8	7	7	7	7
Total Youth Level 3	12	2	2	2	2	2	2	0	0	0	0	0	0
Total Youth Level ASW	39	5	5	5	5	4	3	2	2	2	2	2	2
Total Youth Others	12	2	2	2	2	1	1	1	1	0	0	0	0

10

10

15

15

13

10

YOUTH PROGRAM MONTHLY STATISTICS

Short Stories

Total Youth Others

Total

132

11

Bidur was from Chitwan; he is 15 yrs old now and stays in Dillibazar center. He has father and younger sister. His father was drinking, he sent him in CPCS Narayangat for care and support. 5 years before his mother married with another man. His sister works in another's house as a domestic worker. We never found trace of his father or sister.

He participated in different song and art competition in school and other places. He came in Bishalnagar Center in September 2011 in elite Program and study in Shivapuri School class 4, last year he passed in first division 74.63 % 23th rank in class, his class teachers are very happy because his performance is very good in all subjects, last week ,he got first prize in art competition in class. His voice is also good, every day he practice singing, and known about the rhythm of songs, he feels like a street singer. He likes to play football, badminton, tablet tennis ...



ADMINISTRATION

CPCS International

Child Protection Centers and Services International was established in December 2005 and registered in SWC (Social Welfare Council) as an INGO. It has been collaborating with "Chabahil Pashupati Child Shelter" CPCS since establishment. It works for children at risk and street-based children for their health, education and Rehabilitation.

After 11 years of partnership with CPCS, an agreement with 3 other partner NGOs: CPCR (Dolakha), CRPC (Sindhuli) and ORCHID (Morang) has been signed on September 15 2015. The Project Agreement with SWC was signed in April 8 2016.

CPCS International has created the **CPCS Alliance** with those 4 partner NGOs to coordinate practically for the sake of children, for Rehabilitation, reunification, family tracing and family visits. It was needed due to the different locations and working areas covered by the partners NGOs. 10 staffs work in the INGO leaded by a Country Director and one Expatriate with 8 local staffs. **CPCS International** is located in Dillibazar, Kathmandu.

The CPCS team

Our team is composed of 89 professionals (members of the 4 NGOs grouped under CPCS-Alliance, regular and part time). Some of them are former street youths.

MANAGEMENT STAFF FOR ALL TEAMS AND DEPARTMENTS OF PARTNER NGO'S.

Position	Name					
International General Director (CPCS- INT)	Mr. Jean-Christophe Ryckmans					
Country Director (CPCS- INT)	Ms. Inge Bracke					
Expatriate (CPCS-INT)	Ms. Anna Vermeulen					
General Director (CPCS NGO)- Administration and Finance	Mr. Himmat Maskey					
General Director (CPCS- INT)- Program	Mr. Bijesh Shrestha					
Deputy Country Director (CPCS- INT)	Mr. Arjun Mohan Bhattarai					
Program Director (Regional)	Mr. Hem Bahadur Budhathoki					
Center Director (Sifal)	Mr. Aitaraj Limbu					
Financial Manager	MrTek Bahadur Paudyal					
National Director (Prevention and CLASS)	MrNawaraj Pokharel					
National Director (Monitoring Evaluation Partnership) (CPCS-INT)	Mr. Ekta Narayan Pradhan					
Center Director (Regional)	Mr. Badri Prasad Sharma					
Program Coordinator (Medical)	Mr. Padam Adhikari					
Center Director (Emergency /Girls Home)	Mr. Surya Prakash Shrestha					
Center Director (Dillibazar schooling Rehabilitation)	Mr.Puran Sakya					
Deputy National director Prevention	Ms.Ranju Shrestha					
Senior Program officer (Regional)	Ms. Srijana Sapkota					
LSA and Expert (Public Relation)	Mr. Dabal Pandey					
Deputy Center Director (DIC Socialization)	Mr. Kailash Rawal					
Driving Officer (Senior)	Mr. Krishna Prasad Dhital					
Driving Officer	Mr. Rhabi Bhandari					
Deputy Center Director (Dillibazar Rehabilitation)	Mr. Badri Narayan Shrestha					
Program Officer – Socialization	Mr. Nabaraj Baniya					



Our Administration System

CPCS Administration is composed of a **Board of Directors** and an **Executive Management Committee**. The organization gathers a variety of expertise in different areas: legal, social, fieldwork, administration, management, and medical. The employees work in different shifts (morning, mid-day and evening) in different centers and programs ensuring services from dawn to dusk.

The CPCS Board of Directors

The CPCS's Board Members meet regularly and discuss the smooth running and events of the organization. Consideration is given with great care and plans are made to ensure a good future for the organization. CPCS yearly organizes a General Annual Assembly. The current committee is presided by Bijesh shrestha, assisted by Gita Limbu and other members: Rajendra Rokka, Nawaraj Pokharel, Gunja Bahadur Bal, Kalpana Dahal, Sanu Maiya Shretha, Sujita Shrestha and Malika Shrestha.





Women participation has increased. About 15 meeting are held in a year. Last GAA decided to fix the president term to 2 years.

The Executive Committee (CDC – Central Direction Committee)



This committee is the government of CPCS, mandated by the **Board of Directors** to ensure the overall coordination and daily management between the different centers and divisional directors. The Committee takes decisions discussing different subjects: the implementation of the Board of Directors, the coordination and efficiency of CPCS projects, centers and programs, the suitable way of communicating

information to the entire team, and the Human Resources Management. They have a meeting once a week. Proposals of meetings are submitted to the executive board for approval. Since 2015, CDC organizes its meeting in formal way and participation also increased. The members provided suggestion and feedback on management proposals. In 2016, we have announced the golden handshake plan for long-term working staffs since they plan to leave CPCS and we offered six months equals basic salaries for them. 11 employees resigned and 5 new people joined our team: 1 Health Assistant, 2 Social Workers, 1 Nurse, 1 Counselor, 1 PT teacher.

During this year 2 staffs got a maternity leave of 60 days and a one month unpaid leave. Likewise, 3 LSAs resigned and 4 Part Time LSAs appointed. CPCS advertised for HA vacancies and 5 candidates applied.

3 staffs benefited from treatment expenses from "Shikhar Insurance" under our "cash less plan". Similarly, all staffs and their first level family members have a domiciliary and health insurance.



The Staff Meetings

Once a week, the staff from all the centers has a meeting with the children "ministers". It is essential for the information to flow properly from top to bottom and reverse. All the children elected by their peers to represent a program at the meeting are present. CPCS frequently organized internal training for staffs about Child Protection Policy leaded by our lawyers.



On 5 October, CPCS organized training for CLASS LSA from Kathmandu valley. 12 LSAs participated. The training covered the child rights, objectives and issues of CLASS programs. CPCS also provides Mobile NCELL cards to 99 staffs for inter-staff communications.

Implementation of Child Protection Policy

CPCS organized 3 different sessions for staffs to implement and inform about child protection during work. 36 staffs attended the program.







They came from different centers from Kathmandu and from different centers out of valley.

The Children Participation





CPCS has created a children's central government. Government members are elected democratically by all the children and meet every week in Dillibazar. These meetings give the children the possibility to bring any topic they want on the table and to make suggestions about the program they are enrolled in. Those meetings take place in two different phases. First off, every child has a chance to give its opinion about its own center. Secondly, there is an in-depth discussion about different ideas or comments that were brought up by the children during the first round of the meeting. For every meeting the government members write a report about what was said and about possible actions that need to be taken in the future. To ensure that the rules and the system are respected, the children have formed a court of Justice to ensure that the system works and that the rules are followed properly and correctly. By making the children participate in the life and management of the centers,



we try to make them feel responsible and offer them a role to play in our structure. The objective of this government is to make the children aware of the management of the centers and their daily lives and to teach them how society works. The CPCS staff facilitates the meeting: ATR and Gunja Bal.

Examples of children participation:

The **Kitchen Club** that exclusively takes place in the girl's center illustrates the participation of the children in the centers. In 2006, CPCS opened a canteen system for the meals and snacks managed by a subcontractor. It was not a great success and many children complained about the food quality. Consequently, the Kitchen Club replaced the canteen at the beginning of 2007. Every day, two children from the Kitchen Club have to prepare rice, lentils, and vegetables for the other children and the members of the organization. Each group is responsible for purchasing food at the market, for keeping accounts, and for the cleaning. Particular attention is paid to the safety and quantity of food in stock, what is distributed, and thrown away. It is the role of the children to be creative and care about the kitchen area, including hygiene and the look of the kitchen. The kitchen club system is currently being revised considering less number of children.

CHILDREN COUNCIL MEETINGS STATISTICS

Representatives by Center	J	F	M	A	M	J	J	A	S	0	N	D
Dillibazar	6	12	6	6	6	10	71	66	57	74	13	8
Girls	6	4	6	6	2	0	13	13	14	15	14	14
Sifal	2	3		3	1	4						
# of meetings	3	2	3	3	3	5	4	5	3	5	1	1
No of participants total	14	19	12	15	9	14	84	79	71	89	27	22

Central Child council meeting stopped in July 2016 to be held separately in each center.

Suggestion box in centers

CPCS has a suggestion box in every center where children can put their comment, critics and/or suggestions for CPCS. The box is opened every month with representatives of the children, a lawyer and the President. The proposals are submitted during CDC meetings for implementation. Most of the improvements brought to the programs come from the children's own suggestions.





Networking with Authorities State Bodies and other organizations

CPCS International organized its Central Project Advisory Committee meeting on 16 March, 2016. Mr.Ram Sharma (Acting Director of Social welfare Council) chaired it. Representatives from different ministries and other organizations were Krishna Gyawali (Under Secretary Home Ministry), Laxman Bashyal (Section Officer Ministry of Education), Pradarshani Kumari (Under Secretary





National Planning Commission), Laxmi Narayn Uprety (Under Secretary Ministry of Woman Children and Social Welfare), Tarak Dhital (Executive Director Central Child Welfare Board), Deepak Kc (Senior Social Development Officer -District Development Committee Kathmandu), Hari Tiwari (Acting Director Social Welfare Council), Arjun Mohan Bhattarai (INGO representative), Ekta Pradhan and Nawaraj Pokharel (NGO representatives) Bijesh Shrestha and Himmat Maskey

(NGO representative). The meeting took 3 hours and was followed by a dinner.

During the meeting, CPCS the *International Deputy Country Director* presented the 2015 budget and activities with achievements. After his presentation, the participants raised the quarries and commented about programs budgets and activities. The meeting was concluded and vote of thanks delivered by meeting chair Mr. Sharma from SWC.

Similarly, "Chabahil Pashupati Child Shelter" Organized its DPAC meeting in Kathmandu. It was presided by LDO Gopal Adhikari and graced by Kathmandu CDO.



CPCS organized its District Project Advisory Committee (DPAC) meeting in Sindhuli and Morang on 23rd and 24th June 2016 respectively. Program was chaired by Local Development Officer Mr Ishwor Kumar Giri and Mr Narayan Prasad Mainali from respective districts; Sindhuli and Morang . Project Agreement (PA) provisions DPAC meeting for analyzing, evaluating, monitoring and qualifying project

activities in district for the sake of stakeholder

children and parents as well as coordination and network with local government bodies. CPCS International organized program. Child Protection Officer, Child Right Officer, Woman Children Development Officer, District Education Officer and District Public Health Officer and District Superintendent of Police attended the meeting and opined about CPCS programs and activities. They



highlighted the child selection process for education support, child parents' support, Rehabilitation of children at risk, project sustainability and budget. **CPCS -INT** representative replied the question raised by authorities during the meeting. As per government rules, DPAC should be organized by INGO in every six month.



CCWB provides training to CPCS staffs from DIC on june 21 2016 at Dillibazar. During program street children desk officer mr Rabi Gautam orietned about CCWB guideline for street children Rehabilitation and DIC operation.. Similarly representative from VOC Govinda Koirala and Raju ghimire also visited and interact in meeting.



Networking with NGOs and other Child Protection Organizations





- ✓ CPCS has developed a partnership with the Central Child Welfare Board (CCWB) and attended dozens of meetings about the **"no one child should stay in street onward"** program campaign.
- ✓ Coordination and collaboration with "Kids Shangrila", "Jyoti Vocational" and CWSN, mainly through youth's referral for skills and vocational trainings.
- ✓ Regular coordination with the Center for Children Search and Found or 104 (CCSF, Balbalika Khojtalash Kendra), whose mission is to search/find lost children's families, to inform about lost children (they do not know their home address) and to reduce the risks of violence, abuse, or exploitation of children. During first semester 2016, CPCS has provided a grant to the CCSF, for media publication support and logistic expenses.
- Collaboration with Shivapuri Higher Secondary school, Gyan Bikash school, Bijaya Memorial high school, and Nandi secondary school, which have been managing the enrollment of CPCS children in schooling programs, and offered support for their academic growth and development.
- ✓ The Central Child Welfare Board (CCWB) organized a meeting on Rehabilitation of Kathmandu street children and aim for Kathmandu to become street children free.
- ✓ Series of meetings were held in ministry of women, children and social welfare (MOWCSW) and CCWB with other active NGOs for consultation and partnership.
 Ministry and CCWB already made the guidelines to regulate and monitor the street children work in Kathmandu Valley. NGOs assisting the meeting were: CWIN, SAATHI, SATHATH, PRAYAS, KHUSHI VOICE OF CHILDREN CONCERN HEARTBEAT. CCWB has also visited CPCS Sifal shelter and proposed to increase its capacity for children rehabilitation.
 CCWB "Street Children Desk Chief" Mr Rabi Gautam has visited CPCS and participated in our night field's activities for few days. He has also collected the number of children met in the street.
- ✓ Different colleges government and privates; padma kanya College, Saint Xavier College, Saint Lawrence College, KMC College, Nobel College, Stupa College, Trichandra College has sent their interns and volunteers for their field works.
- ✓ CMDN- Nepal has come for street children HIV test and diagnosis among children with professional counseling services. Saint Xavier's College distributed 25 pairs warm clothes to children.



OUTLOOKS FOR 2017

- ✓ Reinforce the rehabilitation program with specific mid-term care in the Dolakha Regional Centre. (for girls and boys)
- ✓ Deinstitutionalize more street based children or children at risks and develop/enhance the reinsertion process to ensure either reunification of children with their families or others ways empowering them for a better future.
- ✓ Improve support and services to street-based children out of Kathmandu valley and better focus on their legal support.
- ✓ Improve the socialization centre (Short-term care) in Kathmandu valley and plan a 5 years development plan including the building of own facilities in Godawari.
- ✓ Improve the CPCS structure (board, CDC, management) with multiple local partners and develop the International Alliance (The CPCS Alliance)
- ✓ Reinforce our link and partnership with local authorities (DDC, SWC, CCWB, MOWCSW)
- ✓ Implement better the new HR policy / Financial Policy.
- ✓ Improve the implementation of <u>Child Protection Policy</u> among staffs, children etc.
- ✓ Open a Youth Support Program in Dolakha including farming, rehabilitation and trainings (for girls and boys).
- ✓ Reinforce the Sindhuli and Morang Regional Centers to ensure "long term, costs-effective and efficient support)
- ✓ Adopt new strategies/methodologies to continue working with street-based kids (including street work, field, local partnerships)
- ✓ Improve our monitoring and reporting system.



ANNEXES

Awareness and other Activities in our CLASS Centers during first semester

	<u>Awaren</u>	ess a	nd oth	er Activities in CPCS CLASS Centers
Date	Place (CLASS)	Chil d	Parents + Teache r + LSA	Program/ Activities/Meeting
28-Jan-16	Bhaktapur	29	29	Warm Jacket Distribution / Discuss about regular class and snacks.
28-Jan-16	Sanothimi	32	32	Warm Jacket Distribution / Discuss about regular class and snacks.
2-Feb-16	Kritipur	43	35	Warm Jacket Distribution / Discuss about regular class and snacks.
2-Feb-16	Halchok	37	30	Warm Jacket Distribution / Discuss about regular class and snacks.
2-Feb-16	Balaju	29	27	Warm Jacket Distribution / Discuss about regular class and snacks.
17-Feb-16	Pharping	25	3	Awareness about Earthquake and distributed Awareness book.
17-Feb-16	Chalnakhel	25	5	Awareness about Earthquake and distributed Awareness book.
17-Feb-16	Kritipur	29	5	Awareness about Earthquake and distributed Awareness book.
16-Mar-16	Pharping	25	7	Awareness class for children and meeting with school management.
16-Mar-16	Chalnakhel	25	6	Awareness class for children and meeting with school management.
17-Mar-16	Banepa	24	6	Awareness about Earthquake and distributed Awareness book.
21-Mar-16	Kalanki	25	7	Awareness class for children and meeting with school management.
23-Mar-16	Kritipur	25	3	Drawing CLASS and activities.
30-Mar-16	Mulpani	25	2	Drawing CLASS and activities.
14-Apr-16	Budanilkan ta	25	5	Drawing CLASS, activities and meeting with school management.
21-Apr-16	Mulpani	25	24	Dress Distribution for children.
11-May-16	Kritipur	29	2	Donor Meet with children and meeting with School management.
11-May-16	Kalanki	37	19	Health Check up Donor Meet with children meeting with School mgmt
11-May-16	Halchok	25	3	Donor Meet with children and meeting with School management.
19-May-16	Mulpani	25	23	School Kit distribution for children and meeting with parents.
23-May-16	Banepa	30	25	School Kit distribution for children and meeting with parents.
29-May-16	Kalanki	31	25	School Kit distribution for children and meeting with parents.
29-May-16	Halchok	27	26	School Kit distribution for children and meeting with parents.
30-May-16	Chalnakhel	25	25	School Kit distribution for children and meeting with parents.
30-May-16	Kritipur	32	30	School Kit distribution for children and meeting with parents.



9-Jun-16	Banepa	30	0+0+1	Awareness CLASS About Child Rights.
16-Jun-16	Banepa	30	0+0+1	Awareness CLASS About Drugs.
23-Jun-16	Banepa	29	0+0+1	Drawing CLASS.
30-Jun-16	Banepa	30	27+0+ 1	Parents Meeting and Discuss About Child violence/ Child Labor.
10-Jun-16	Chalnakhel	23	0	English Writing Class
25-Jun-16	Chalnakhel	25	24+0+ 1	Parents Meeting and Discuss About children education.
30-Jun-16	Chalnakhel	25	0+0+1	Singing Competition.
5-Jun-16	Dhalko	24	0+0+1	Playing Game.
12-Jun-16	Dhalko	19	0+0+1	Studying.
19-Jun-16	Dhalko	22	18+3+ 1	Parents Meeting about children admission.
26-Jun-16	Dhalko	19	0+0+1	Studying.
1-Jun-16	Halchok	25	0+0+1	Drawing CLASS.
10-Jun-16	Halchok	25	0+0+1	Dancing Class.
17-Jun-16	Halchok	22	0+0+1	Coloring Class.
30-Jun-16	Halchok	25	23+2+ 1	Awareness class about HIV.
3-Jun-16	Budanilkan ta	25	0+0+1	Writing Competition.
10-Jun-16	Budanilkan ta	25	19+2+ 1	Parents Meeting About children progress.
17-Jun-16	Budanilkan ta	25	0+0+1	Drawing CLASS.
24-Jun-16	Budanilkan ta	25	0+0+1	Singing Competition.
3-Jun-16	Kritipur	25	0+0+1	Cleaning Activities.
5-Jun-16	Kritipur	25	25+2+ 1	Bag Distribution for children.
30-Jun-16	Kritipur	25	0+0+1	Art and Craft Classes.
7-Jun-16	Khwop	25	25+4+ 1	Parents Meeting about children study/ Stationary Distribution.
15-Jun-16	Khwop	25	0+0+1	Awareness class about hygiene.
21-Jun-16	Khwop	25	0+0+1	Games and extra activities.
8-Jun-16	Mulpani	25	0+0+1	Awareness Class.
12-Jun-16	Mulpani	25	0+0+1	Drawing CLASS.
20-Jun-16	Mulpani	25	25+3+ 1	Parents meeting.
8-Jun-16	Bhaktapur	25	0+0+1	Drawing CLASS.
19-Jun-16	Bhaktapur	25	0+0+1	Funny Class for Children.
25-Jun-16	Bhaktapur	25	25+4+ 1	Parents Meeting about children study/ Stationary Distribution.
3-Jun-16	Sanothimi	23	0+0+1	Games and extra activities.
8-Jun-16	Sanothimi	25	0+0+1	Drawing CLASS.
17-Jun-16	Sanothimi	25	23+3+	Parents Meeting about children study.
24-Jun-16	Sanothimi	25	0+0+1	Awareness class about personal Health.
17-Jun-16	Narayanga dh	35	32+1+ 1	Parents meeting about children regularity.



5-Jun-16	Balaju	25	0+0+1	Games and extra activities.	
12-Jun-16	Balaju	24	0+0+1	Book Reading/ Writing.	
18-Jun-16	Balaju	25	20+0+ 1	Parents Meeting about uniform and School Admission.	
26-Jun-16	Kalanki	25	18+3+ 1	Parents meeting about their studies.	
23-Jun-16	Gorkha	25	23+0+ 1	Parents Meeting and Kit pack Distribution.	

	<u>Awarene</u>	ss and ot	her Activit	ies in ORCHID CLASS Centers
Date	Place	Child	Parents + Teacher	Program/ Activities/Meeting
8-Jan-16	Koshi Haraincha	47	1+1	Class about good Habit
15-Jan-16	Koshi Haraincha	49	1+1	Class about personal Hygiene
22-Jan-16	Koshi Haraincha	49	1+1	Games
29-Jan-16	Koshi Haraincha	48	1+1	Games
31-Jan-16	Koshi Haraincha	50	50+6	Awareness class about personal hygiene/ Sweater Worm Cloth Distribution
5-Jan-16	Itahari	48	41+3	Meeting about kids studies/Parents Meeting/Awareness on children health
8-Jan-16	Itahari	48	2+1	Class about good Habit
15-Jan-16	Itahari	48	2+1	Class about personal Hygiene
22-Jan-16	Itahari	48	2+1	Games
29-Jan-16	Itahari	48	2+1	Games
8-Jan-16	Belbari	23	1+1	Games and extra Activities
14-Jan-16	Belbari	25	23+4	Support and selection of children and parents Meeting
15-Jan-16	Belbari	25	1+1	Singing Competition
22-Jan-16	Belbari	25	1+1	Sports
29-Jan-16	Belbari	25	1+1	Awareness class about Personal Hygiene
31-Jan-16	Belbari	25	25+2	Awareness class about personal hygiene/ Meeting kids study/Parents Meeting
3-Jan-16	Jhapa	48	1	Class about personal hygiene
15-Jan-16	Jhapa	43	1	Caramboard competition
22-Jan-16	Jhapa	45	1	Drawing class for children.
29-Jan-16	Jhapa	47	1	Meeting about regular school sending to kids
30-Jan-16	Jhapa	46	46+3	Parents Meeting
31-Jan-16	Jhapa	49	1	Sports
8-Jan-16	Birtamod	50	1	Games
15-Jan-16	Birtamod	50	1	Class about hygiene.
18-Jan-16	Birtamod	49	43+3	parents Meeting
22-Jan-16	Birtamod	47	1	Games
29-Jan-16	Birtamod	48	1	Games



8-Jan-16	Bayarban	24	1+1	Awareness About Personal Hygiene
15-Jan	Bayarban	25	1+1	Quiz Contest Program
22-Jan	Bayarban	25	1+1	ECA CLASS - Sports
28-Jan-16	Bayarban	25	24+3	Parents Meeting
29-Jan	Bayarban	25	1	ECA CLASS - Dance
5-Feb-16	Koshiharaicha	50	1+1	Health class about common cold and fever.
11-Feb-16	Koshiharaicha	50	1+1	Sports (Race program)
13-Feb-16	Koshiharaicha	47	1+1	Saraswati Puja
19-Feb-16	Koshiharaicha	48	1+1	Information class about Prajatantra Diwas.
31-Jan-16	Koshiharaicha	48	49+4	Parents Meeting
5-Feb-16	Itahari	46	1+1	Games and Awareness Class
12-Feb	Itahari	48	1+1	Information about our culture and class.
20-Feb	Itahari	49	1+1	Picnic and visit Gokulam Park of Itahari.
28-Feb	Itahari	47	38+3	Awareness class about street risk. Meeting with parents and school/ Parents Meeting
5-Feb-16	Belbari	24	1	Awareness class about Personal Hygiene
11-Feb-16	Belbari	25	1	Games and sports
13-Feb-16	Belbari	25	1	Saraswati Puja
13-160-10	Delball	23	Т	Games and information class about Prajatantra
19-Feb-16	Belbari	24	1	Diwas
23-Feb-16	Belbari	24	23+3	Parents Meeting
5-Feb-16	Jhapa	43	1	Class about personal hygiene.
11-Feb-16	Jhapa	41	1	Games.
19-Feb-16	Jhapa	47	1	Information class about Prajatantra Diwas.
26-Feb-16	Jhapa	49	1	Games and extra activities.
29-Feb-16	Jhapa	46	43+3	Parents Meeting about kids studies.
5-Feb-16	Birtamod	46	1	Awareness Class.
12-Feb	Birtamod	47	1	Games and class.
19-Feb	Birtamod	49	1	Games and class.
26-Feb	Birtamod	49	38+3	Parents Meeting, Games and Meeting about children studies and progress.
5-Feb-16	Bayarban	25	1	Awareness class for children.
11-Feb-16	Bayarban	24	1	Personal hygiene check up and information class.
13-Feb-16	Bayarban	25	1	Saraswati Puja and cultural Program in School.
19-Feb-16	Bayarban	25	1	Games Information class about Prajatantra Diwas.
29-Feb-16	Bayarban	25	23+3	Parents Meeting
3-Mar-16	Belbari	25	1	Games and sports
8-Mar-16	Belbari	24	1	Information class about NARI DIWAS.
18-Mar-16	Belbari	25	1	Information about health.
23-Mar-16	Belbari	25	1	Celebrate holi.
29-Mar-16	Belbari	25	22+3	Parents Meeting
4/3/2016	Koshiharaicha	48	1	Caramboard and race competition.
7/3/2016	Koshiharaicha	50	1	Information class about MAHA SHIBRATRI.
18-3-2016	Koshiharaicha	49	1	Quiz contest program.
23-3-2016	Koshiharaicha	50	1	Holi Celebration.
26-3-2016	Koshiharaicha	48	45	Parents Meeting
				-



				T
4/3/2016	Jhapa	48	1	Caramboard and race competition.
7/3/2016	Jhapa	50	1	Information class about MAHA SHIBRATRI.
18-3-2016	Jhapa	49	3	Quiz contest program.
23-3-2016	Jhapa	49	3	Holi Celebration.
26-Mar-16	Jhapa	48	45+3	Parents Meeting
4/3/2016	Birtamod	49	1	Awareness Class about street risk.
8/3/2016	Birtamod	50	1	Information class about NARI DIWAS.
18-3-2016	Birtamod	49	1	Games and sports.
25-3-2016	Birtamod	50	38+3	Parents Meeting and Dancing Competition.
4/3/2016	Itahari	50	1	Games and Awareness Class
8/3/2016	Itahari	49	1	Game and sports.
23-3-2016	Itahari	48	1	Class about personal hygiene and Holi celebration.
27-3-2016	Itahari	49	39+3	Parents Meeting and ECA Class -dance
4/3/2016	Bayarban	25	1+1	Chocolate race and games
11/3/2016	Bayarban	25	1+1	Awareness class for children.
20/3/2016	Bayarban	24	1+1	Personal hygiene check up and information class.
28/3/2016	Bayarban	25	24+3	Parents Meeting and Health check up of kids and awareness class.
1/4/2016	Belbari	25	1	Sports and Games.
8/4/2016	Belbari	24	1	Information about personal hygiene.
15-4-2016	Belbari	24	1	Information about RAM NAWAMI.
22-4-2016	Belbari	25	1	Singing class competition.
28-Apr-16	Belbari	25	24+3	Parent Meeting
7/4/2016	Koshiharaicha	49	1	Information about GODE JATRA.
13-4-2016	Koshiharaicha	50	1	Celebrating new year and Quiz contest
18-4-2016	Koshiharaicha	48	1	Race competition and Topi lukai.
25-4-2016	Koshiharaicha	49	45 + 3	Parents Meeting and Class about personal hygiene.
7/4/2016	Jhapa	48	1	Information about GODE JATRA.
13-4-2016	Jhapa	50	1	Celebrating new year and Games
22-4-2016	Jhapa	49	1	Information about LOKTANTRA DIWAS.
28-4-2016	Jhapa	50	1	Games and extra activities.
25-4-2016	Jhapa	48	38	Parents Meeting
8/4/2016	Birtamod	50	1	Games and sports.
15-4-2016	Birtamod	49	1	Information class about RAM NAWAMI.
22-4-2016	Birtamod	48	1	.Personal Hygiene Class.
29-4-2016	Birtamod	50	1	Quiz contest program.
29-4-2016	Birtamod	47	39	Parents Meeting
7/4/2016	Itahari	50	1	Information about GODE JATRA.
13-4-2016	Itahari	48	1	Celebrating new year and singing competition.
19-4-2016	Itahari	49	1	Games and sports
27-4-2016	Itahari	49	1	Chocolate race competition.
26-4-2016	Itahari	48	37	Parents Meeting
4/4/2016	Bayarban	24	1	Awareness class for children.
11/4/2016	Bayarban	25	1	Chocolate race for children.
17-4-2016	Bayarban	24	1	Personal hygiene checks up.
24-4-2016	Bayarban	25	1	Games and sports program.
27-4-2016	Bayarban	25	24	
27-4-2016	Bayarban	25	24	Parents Meeting



			l	T
6/5/2016	Belbari	44	1	Games comparison.
13/5/2016	Belbari	48	1	Information about Buddha Jayanti.
17/5/2016	Belbari	47	48	Stationary Distribution
20/5/2016	Belbari	49	1	Dancing comparison for children.
27/5/2016	Belbari	44	1	Information class about chandi purnima.
29/5/2016	Belbari	50	44	Parents Meeting
5/5/2016	Koshiharaicha	48	1	Class about personal hygiene.
13/5/2016	Koshiharaicha	50	1	Games and extra Activities
15/5/2016	Koshiharaicha	49	1	Meeting about Studies.
24/5/2016	Koshiharaicha	48	1	Sports
15/5/2016	Koshiharaicha	50	42	Meeting about stationery Distribution
26/5/2016	Koshiharaicha	46	41	Meeting with parents about children regularity.
6/5/2016	Jhapa	25	1	Games and extra activities.
12/5/2106	Jhapa	24	1	Awareness About Personal Hygiene
21/5/2016	Jhapa	24	1	Information about BUDDHA GAYANTI.
27/5/2016	•	25	1	ECA CLASS - Dance
	Jhapa	23	1	Meeting about stationery Distribution and parents
30/5/2016	Jhapa	24	18	meeting
5/5/2016	Birtamod	50	1	Games and sports.
13/5/2016	Birtamod	48	1	.Personal Hygiene Class.
21/5/2016	Birtamod	49	1	Information about BUDDHA JAYANTI.
27/5/2016	Birtamod	50	1	Dancing class comparison.
30/5/2016	Birtamod	47	37	Meeting about stationery Distribution /Parents
6/5/2016	Itahari	25	1	Meeting. Information about GODE JATRA.
14/5/2016	Itahari	24	1	Celebrating new year and singing competition.
21/5/2016	Itahari	23		Information about BUDDHA JAYANTI.
24/5/2016		25	1	
	Itahari			Information about GANATANTRA DIWAS.
28/5/2016	Itahari	24	24	Parents Meeting
6/5/2016	Bayarban	24	1	Personal hygiene checks up.
13/5/2016	Bayarban	25	1	Games / information class.
20/5/2016	Bayarban	24	1	Awareness class for children.
24/5/2016	Bayarban	25	1	Personal hygiene checks up.
26/5/2016	Bayarban	25	25	Distribution bag and stationers informed parents about health and Parents Meeting.
17/5/2016	LaLbhitti	47	1	Sports and Games.
24/5/2016	LaLbhitti	50	1	Information about personal hygiene.
31/5/2016	LaLbhitti	48	1	Singing class comparison.
17/5/2016	LaLbhitti	48	42	Meeting about stationery Distribution
25/5/2016	LaLbhitti	46	43	Parents meeting
20/5/2016	Dhanpal	25	1	Sports and Games.
26/5/2016	Dhanpal	24	1	Information about personal hygiene.
31/5/2016	Dhanpal	24	1	Information about Our School.
18/5/2016	Dhanpal	25	18	Meeting with Parents and School head master
29/5/2016	Dhanpal	25	25	Meeting about stationery Distribution
3-Jun-16	Belbari	49	1	Hygiene Awareness
10-Jun-16	Belbari	50	1	Games and story telling



			1	
17-Jun-16	Belbari	48	1	Awareness
24-Jun-16	Belbari	50	1	Games and sport
30-Jun-16	Belbari	50	31+3	Parents meeting
3-Jun-16	Koshiharaicha	50	1	Hygiene awareness
24-Jun-16	Koshiharaicha	49	7	Teacher provides special awareness about extra class.
28-Jun-16	Koshiharaicha	50	41+3	Parents meeting
2-Jun-16	Jhapa	18	22+3	Parents meeting
3-Jun-16	Jhapa	25	1	Games and sport
10-Jun-16	Jhapa	25	1	Home work verify verify by peers
24-Jun-16	Jhapa	25	1	personal hygiene check up
2-Jun-16	Birtamod	50	47+3	Parents Meeting
3-Jun-16	Birtamod	49	1	Football and volleyball
10-Jun-16	Birtamod	50	1	Hygiene awareness
24-Jun-16	Birtamod	50	1	Home work check up
3-Jun-16	Itahari	25	1	Home work check up
10-Jun-16	Itahari	25	1	Football and volleyball
24-Jun-16	Itahari	16	1	Betanapark Visit
27-Jun-16	Itahari	25	19+3	Parents Meeting
3-Jun-16	Bayarban	24	1	Awareness
10-Jun-16	Bayarban	25	1	Personal Hygiene
17-Jun-16	Bayarban	25	1	Games and story telling
29-Jun-16	Bayarban	25	22+3	Parents meeting
2-Jun-16	LaLbhitti	50	1	Hygiene Awareness Class
8-Jun-16	LaLbhitti	50	1	Games in office
26-Jun-16	LaLbhitti	50	43+3	Parents Meeting
3-Jun-16	Dhanpal	25	1	Hygiene Class
10-Jun-16	Dhanpal	16	1	Football
24-Jun-16	Dhanpal	25	18+4	Parents Teacher meeting

	Awareness and other Activities in CRPC CLASS Centers							
Date	Place (CLASS)	Child	Parents + Teacher	Program/ Activities/Meeting				
1-Jan-16	Sindhuli CRPC	25	Parents + Teacher 30	CRPC Nepal opening, meeting with parents and teachers.				
2-Jan-16	Panchakanya school	50	Parents +Teacher 50	We have Organized parents and Teacher meeting in panchkanya school in kudule.				
3-Jan-16	Head office	25	Childrens 25	Regular class and snakes Provide.				
15-Jan-16	Head office	25	Teacher 5	Children complain to teacher are not regular present at school so we coordinate with principle.				
20-Jan-16	Head office	25	children parents 30	We have done medical check-up parents and children.				
5-Feb-16	Head office	25	Parents	We have Organized parents meeting in office				



			meeting 25	about regular class
10-Feb-16	Panchakanya school	50	Parents meeting 40	We have Organized parents and Teacher meeting in panchkanya school in kudule.
15-Feb-16	Panchakanya school	50	Medical Camp 60	We have done medical check-up parents and children and 60 people participate in camp.
20-Feb-16	Head office	25	Medical Camp 30	We have done medical check-up parents and children and 30 people participate in camp.
25-Feb-16	Head office	25	Awarenes s Class 25	Nurse taken Health and hygiene class.
26-Feb-16	Panchakanya school	50	Parents+ Teacher 55	We have awareness to the family about children Birth certificate.
2-Mar-16	Head office	25	children parents 30	We have discussed about birth certificate and make a personal file.
5-Mar-16	Head office	25	Children 20	We have done drawing Competition and prize distribute to first, second and third.
10-Mar-16	Shiddha Primary	25	Teacher+ children 30	We have discussed about child abuse with children and teacher.
20-Mar-16	Panchakanya school	50	Teacher+ children 50	We have discussed about child abuse with children and teacher.
25-Mar-16	Head office	25	Children 24	We Organized medical camp in head office and 24 children participate.
1-Apr-16	Head office	25	parents+ Teacher 30	We have meeting with parents and teacher about selection new 25 kids in panitanki school.
5-Apr-16	Panchakanya school	50	Children 50	Regular class visit and General health check-up. Participate 50 children.
13-Apr-16	Head office	50	parents children	We have Organized Nepal new year program in office. and we started new 25 kids panitanki school
22-Apr-16	Head office	50	Parents 50	Parents meeting and discussed about how to save children on the road crossing.
5-May-16	Head office	50	Children 50	Nurse taken Health and hygiene class.
10-May-16	Kamala School	25	Parents +Teacher 30	Kamala higher secondary school is new CLASS center and we have meeting with Teacher Parents.
15-May-16	Janajoti School Phosretar	25	Parents +Teacher 30	Janajoti highier secondary school is new CLASS center and we have meeting with Teacher Parents.
20-May-16	Head office	50	Children 50	We have distributed 50 education materials and hygiene stuff to children.
25-May-16	Panchakanya school	50	children 50	We have distributed 50 education materials and hygiene stuff to children.
26-May-16	Kamala School	25	Children 25	We have distributed 25 education materials and hygiene stuff to children.



27-May-16	Janajoti School Phosretar	25	Children 25	We have distributed 25 education materials and hygiene stuff to children.
1-Jun-16	Head office	50	children 50	I taken child sexual abuse class and participate 40 kids.
11-Jun-16	Kamala School	25	Children 25	I taken child sexual abuse class and participate 20 kids.
19-Jun-16	Ramechap	25	Children+ parents+T eacher 50	We have taken parents teacher meeting and school bag, hygine stuff distribute.
23-Jun-16	Head office		DPAC Meeting 10	We have arrange DPAC meeting in LDO office in sindhuli.Participate LDO,CRO,Police officer,etc.
27-Jun-16	Panchakanya school	50	Children 50	Our nurse taken health and hygiene class in kudule school.

Awareness and other Activities in 41 CLASS Centers during second semester

	# of childre n monthl	Days / mont h	Childre n Daily Avg	Health Sessions	Childre n Health Session	Local Medic al Cases	Hospit al or Ktm Referra 1 Cases	Local Hospit al referal	Parents Meeting s	Parent s	Hom e visits
Andheri	828	18	46	8	348	29	0	6	2	83	37
Andheri	1050	21	50	10	507	17	0	6	2	99	17
Andheri	1056	22	48	*	519	21	2	4	4	99	37
Andheri	1078	22	49	12	557	43	0	2	3	76	10
Andheri	1078	22	49	9	441	21	0	7	2	96	33
Andheri	1127	23	49	*	556	23	1	7	5	89	51
Balaju	411	17	24	2	47	4	0	0	1	23	14
Balaju	429	20	21	2	44	5	0	0	2	46	5
Balaju	498	21	24	2	48	7	0	0	2	42	14
Balaju	499	21	24	4	82	11	0	0	2	42	8
Balaju	532	23	23	2	50	4	0	0	2	37	18
Balaju	537	22	24	3	75	13	0	2	3	68	19
Banepa	589	20	29	2	57	20	0	0	1	27	12
Banepa	639	22	29	3	82	15	0	0	1	28	17
Banepa	669	23	29	3	84	20	0	0	2	52	15
Banepa	681	26	26	1	29	4	0	2	2	58	29
Banepa	689	24	29	2	59	9	0	0	2	47	12
Banepa	779	27	29	3	81	23	0	2	3	42	24
Bayarban	421	17	25	2	49	14	0	1	2	48	19
Bayarban	504	21	24	2	50	15	0	5	2	49	15
Bayarban	512	24	21	2	50	11	0	2	1	23	19
Bayarban	525	23	23	2	50	22	0	4	2	49	13
Bayarban	552	24	23	2	50	1	0	2	1	23	18
Bayarban	600	26	23	2	44	1	0	1	2	49	16
Belbari	748	17	44	3	133	9	0	9	1	22	37
Belbari	814	17	48	2	92	21	0	4	3	78	27



Belbari	980	20	49	3	133	27	0	9	2	67	37
Belbari	986	22	45	2	90	16	0	6	2	84	39
Belbari	1071	22	49	2	96	10	0	3	2	98	29
Belbari	1200	26	46	2	93	8	0	1	2	88	26
Bhaktapur	400	16	25	3	74	4	0	1	3	54	5
Bhaktapur	475	19	25	3	67	9	2	0	4	68	32
Bhaktapur	550	22	25	2	50	7	0	3	1	24	9
Bhaktapur	560	23	24	3	74	5	3	1	4	93	25
Bhaktapur	580	24	24	3	73	4	0	1	2	43	17
Bhedikhor	350	18	25	1	24	24	0	5	2	25	23
Bhedikhor	493	17	26	1	25	10	0	5	1	20	26
Bhedikhor	551	19	29	1	23	24	0	0	2	24	23
Bhedikhor	551	19	25	1	24	24	0	0	2	25	23
Bhedikhor	600	24	25	1	23	12	0	0	2	25	23
Bhedikhor	609	21	28	1	23	7	1	2	1	34	29
Birtamod	509	12	43	2	63	18	0	2	2	43	12
Birtamod	924	22	42	2	92	4	2	4	2	88	36
Birtamod	1047	23	46	2	92	34	0	3	2	88	27
Birtamod	1127	26	43	3	132	9	0	2	2	100	40
Birtamod	1174	24	49	2	85	19	0	9	2	65	29
Birtamod	1235	26	48	3	123	10	0	5	2	91	24
Budhanilkant ha	384	16	24	2	50	11	0	0	1	23	13
Budhanilkant ha	543	23	24	3	75	11	0	0	1	25	11
Budhanilkant ha	593	24	25	2	50	11	0	2	2	37	13
Budhanilkant ha	595	24	25	2	47	11	0	0	2	24	11
Budhanilkant ha	625	25	25	2	47	12	0	0	2	47	17
Budhanilkant ha	626	25	25	1	31	2	0	0	1	25	21
Chalnakhel	280	12	23	2	46	4	0	0	3	56	13
Chalnakhel	524	22	24	2	50	11	0	2	2	43	16
Chalnakhel	552	22	24	2	50	14	0	0	2	30	8
Chalnakhel	566	24	24	2	50	14	0	3	2	37	13
Chalnakhel	585	26	23	1	24	3	1	0	1	24	17
Chalnakhel	662	27	24	1	36	10	0	2	3	44	13
Charikot	850	21	35	2	35	7	0	4	4	43	49
Charikot	910	26	35	1	30	6	0	4	2	59	25
Charikot	950	19	50	1	45	7	0	2	2	45	40
Charikot	1200	24	35	1	35	0	0	4	2	59	35
Charikot	1200	24	50	0	0	2	0	3	1	45	30
Charikot	1300	26	50	1	55	8	3	1	2	50	35
Chautara	578	20	29	2	59	17	0	2	2	59	19
Chautara	597	20	30	1	29	9	0	0	1	27	8



Chautara	600	20	30	1	30	11	0	3	1	22	24
Chautara	616	22	28	3	84	12	0	0	2	42	10
Chautara	633	22	29	2	59	19	0	1	2	53	13
Chautara	690	25	28	3	86	4	0	3	2	57	13
Class Itahari	447	18	25	2	41	11	0	6	3	46	13
Class Mati	900	18	48	1	45	1	0	3	1	45	49
Clbhaktapur	611	25	24	2	50	8	1	0	3	47	10
Deurali	250	17	22	3	45	30	0	9	7	19	25
Deurali	352	16	22	3	45	25	0	2	2	18	35
Deurali	352	16	22	3	35	27	0	3	2	23	30
Deurali	374	17	22	3	58	30	0	7	7	19	20
Deurali	528	24	20	2	35	34	7	5	5	25	23
Deurali	528	24	22	4	24	24	0	2	4	18	35
Dhalko	243	11	22	2	38	7	0	0	1	23	4
Dhalko	491	20	25	2	49	3	0	0	2	34	5
Dhalko	499	20	25	2	47	13	0	0	2	35	5
Dhalko	512	21	24	2	47	9	0	0	1	23	12
Dhalko	574	25	23	3	62	7	0	0	1	19	11
Dhalko	578	25	23	1	23	1	2	0	2	37	19
Dhanpal	312	13	24	1	48	1	0	2	1	18	17
Dhanpal	423	18	23	1	24	12	0	5	2	39	12
Dhanpal	475	23	21	2	46	18	0	4	2	44	15
Dhanpal	498	21	24	2	50	10	0	3	2	48	25
Dhanpal	499	21	24	1	48	11	0	4	2	36	15
Dhanpal	575	23	25	2	50	4	0	2	2	50	12
Dolakha	889	19	40	3	125	2	0	2	5	49	47
Dolakha	900	18	47	3	130	2	0	0	3	44	47
Dolakha	1024	25	50	2	99	6	4	1	2	50	51
Dolakha	1170	26	45	1	45	6	1	1	1	55	47
Dolakha	1200	24	45	1	65	2	1	1	1	55	40
Dolakha	1200	24	50	1	59	7	1	1	1	45	35
Ecd	192	16	12	3	25	23	0	1	2	10	12
Ecd	192	16	12	3	30	20	0	1	2	10	12
Ecd	204	17	12	2	20	1	0	0	3	12	12
Ecd	204	17	12	2	20	1	0	0	3	12	12
Ecd	225	21	12	3	25	30	0	1	7	10	12
Ecd	240	20	12	2	20	1	0	0	3	12	12
Ecd	240	20	12	1	20	1	0	0	1	11	12
Ecd	250	21	13	0	0	1	0	0	1	10	13
Ecd	260	20	13	0	0	0	0	0	1	10	14
Ecd	273	21	13	0	0	1	0	0	1	12	13
Ecd	273	21	12	3	31	30	0	0	7	10	12
Ecd	288	24	12	2	20	25	3	2	5	10	15
Ecd	288	24	12	4	20	20	0	1	4	10	12
Ecd	294	21	14	3	38	2	0	0	3	14	14



Ecd	294	21	14	3	38	2	0	2	5	14	14
Ecd	299	23	13	0	0	1	0	0	1	10	13
Ecd	299	23	13	0	0	1	0	0	1	10	13
Ecd	300	25	12	1	18	4	1	1	2	12	12
Ecd	304	19	15	1	13	1	0	0	3	16	16
Ecd	310	26	12	1	20	4	0	0	2	12	12
Ecd	330	21	15	1	13	1	0	0	3	16	16
Ecd	336	21	15	1	15	1	0	0	1	16	16
Ecd	336	24	14	1	14	2	0	2	1	14	14
Ecd	336	24	14	1	13	2	0	2	1	14	13
Ecd	338	26	13	1	12	5	2	1	1	12	11
Ecd	350	25	14	2	35	5	1	2	2	14	14
Ecd	360	24	15	1	10	3	0	0	1	16	17
Ecd	364	26	14	1	14	1	0	2	1	14	14
Ecd	368	23	16	1	15	6	2	0	1	16	15
Ecd Mati	304	19	16	1	13	1	0	0	1	13	16
Gorkha	365	15	24	1	23	9	0	0	2	42	11
Gorkha	513	23	22	2	48	13	0	2	1	24	14
Gorkha	515	22	23	3	70	14	0	0	2	45	13
Gorkha	600	24	25	3	75	14	0	2	2	43	13
Gorkha	613	26	24	3	71	19	0	3	3	56	19
Gorkha	625	25	25	1	25	9	0	0	1	24	25
Halchok	260	11	24	1	25	17	0	2	2	38	15
Halchok	517	21	25	2	50	24	0	0	3	63	29
Halchok	560	22	25	2	50	27	0	0	2	39	8
Halchok	564	23	25	3	76	27	0	2	2	38	13
Halchok	587	24	24	2	52	2	0	0	3	59	27
Halchok	637	26	25	1	31	3	0	0	2	43	25
Hetauda	442	17	26	2	45	7	0	3	2	39	11
Hetauda	549	21	26	3	63	7	1	2	2	47	10
Hetauda	613	24	26	2	74	12	0	2	3	57	15
Hetauda	642	24	27	3	68	11	0	0	2	43	11
Hetauda	672	24	28	2	53	18	2	0	1	28	22
Hetauda	698	27	26	4	107	37	1	6	2	51	13
Itahari	525	22	24	2	46	18	0	8	2	47	16
Itahari	548	23	24	2	48	10	0	4	2	49	18
Itahari	565	23	25	4	92	17	0	3	2	43	11
Itahari	575	26	22	3	73	4	0	1	1	21	12
Itahari	600	25	24	3	70	3	3	3	2	35	19
Jhapa	298	12	25	1	25	10	0	6	2	29	7
Jhapa	437	19	23	2	46	2	1	2	2	44	21
Jhapa	532	25	21	2	50	17	0	7	2	36	13
Jhapa	538	23	23	2	46	12	0	2	2	44	17
Jhapa	552	26	21	3	75	4	0	2	2	68	16
Jhapa	580	25	24	3	70	6	0	4	2	48	22



Kalanki	369	15	25	2	51	19	0	3	2	48	19
Kalanki	472	19	25	3	80	18	0	3	3	49	16
Kalanki	493	20	24	2	57	8	1	2	1	25	16
Kalanki	542	22	25	3	75	21	0	2	2	49	24
Kalanki	599	24	25	2	47	16	1	4	3	50	17
Kalanki	610	25	24	2	67	18	2	0	2	42	18
Kamala	384	16	24	2	47	11	0	4	1	23	16
Kamala	440	20	22	1	33	5	0	5	2	46	13
Kamala	456	19	24	2	88	8	0	3	1	24	11
Kamala	480	20	24	2	45	7	0	6	1	23	11
Kamala	480	20	24	3	80	9	0	5	1	25	21
Kamala	500	20	25	2	49	14	0	3	2	47	15
Khwop	298	12	25	1	24	2	0	0	2	35	6
Khwop	594	24	25	3	64	10	0	0	2	36	9
Khwop	619	25	25	1	25	9	0	0	2	43	7
Khwop	620	25	25	2	49	19	1	0	4	72	23
Khwop	621	25	25	2	47	7	0	2	4	59	25
Khwop	625	25	25	4	100	4	0	0	4	43	7
Koshi	841	17	49	2	98	27	0	6	2	68	10
Haraincha	041	1 /	72	۷	70	21	0	0		00	10
Koshi Haraincha	984	20	49	2	95	15	0	5	2	96	28
Koshi											
Haraincha	1063	22	48	2	99	21	0	6	2	73	31
Koshi	1100	23	48	2	98	8	0	3	2	97	32
Haraincha	1100	23	40	۷	96	0	0	3		91	32
Koshi	1104	24	46	2	99	6	2	6	2	47	47
Haraincha Koshi											
Haraincha	1176	26	45	4	191	17	0	1	2	104	23
Kritipur	300	12	25	2	66	5	1	0	2	52	17
Kritipur	500	20	25	2	50	3	0	0	2	50	7
Kritipur	508	23	22	2	56	7	0	0	3	88	18
Kritipur	524	21	25	2	47	12	2	0	4	76	12
Kritipur	575	23	25	2	64	7	1	0	2	53	11
Kritipur	618	25	25	2	34	9	1	1	1	25	18
Kshamawaoti	950	21	44	2	89	15	0	7	5	45	53
Kshamawaoti	1144	26	44	2	90	10	0	1	1	54	35
Kshamawaoti	1320	24	44	2	89	15	0	1	1	54	45
Kshamawaoti	1320	24	55	1	40	20	0	2	1	50	35
Kshamawaoti	1375	25	53	1	65	20	1	3	3	50	50
Kshamawati	1045	19	54	2	89	15	0	5	3	55	53
Kutidanda	950	19	55	2	78	6	0	4	4	55	56
Kutidanda	1045	19	51	2	123	6	0	4	2	50	55
Kutidanda	1100	20	55	1	65	4	0	4	3	56	45
Kutidanda	1100	20	55	1	70	8	0	2	2	55	40
Kutidanda	1320	24	55	1	80	6	0	4	1	56	51



Kutidanda	1430	26	53	1	125	9	3	3	2	57	49
Lahan	330	15	22	0	0	0	0	0	1	25	9
Lahan	418	19	22	1	31	3	0	1	2	23	13
Lahan	460	20	23	0	0	0	0	0	1	25	19
Lahan	462	21	22	1	35	5	0	0	1	25	12
Lahan	525	21	25	1	24	1	0	0	1	23	10
Lahan	525	19	475	1	24	1	0	0	1	25	5
Lalbhitti	843	18	47	9	431	86	0	3	3	123	43
Lalbhitti	1034	22	47	Daily	462	21	9	13	7	68	43
Lalbhitti	1048	22	48	4	192	17	0	7	3	136	43
Lalbhitti	1072	22	49	11	462	69	1	13	4	132	39
Lalbhitti	1127	26	43	13	611	21	0	14	2	103	34
Lalbhitti	1223	26	48	4	196	18	0	4	3	148	46
Lamanagi	1850	21	75	2	99	30	3	9	7	99	95
Lamanagi	1900	19	98	1	120	23	0	10	6	100	99
Lamanagi	2080	26	80	1	130	30	1	2	2	137	85
Lamanagi	2200	22	75	1	105	25	3	2	2	137	80
Lamanagi	2200	22	100	1	125	20	2	1	2	120	70
Lamanagi	2300	23	100	3	235	35	6	8	3	150	85
Lapilang	750	17	44	0	0	1	0	0	1	47	44
Lapilang	850	17	46	0	0	1	0	0	1	48	44
Lapilang	880	20	44	0	0	0	0	0	1	38	40
Lapilang	1150	23	44	0	0	1	0	0	1	38	35
Lapilang	1150	23	50	0	0	1	0	0	1	40	40
Lapilang	1300	26	47	1	45	9	4	2	1	56	35
Mati	850	18	46	1	48	1	0	3	3	40	55
Mati	950	19	46	1	48	1	0	1	3	49	35
Mati	950	19	50	1	50	1	0	1	1	51	35
Mati	1104	24	46	1	35	3	0	1	1	49	45
Mati	1150	23	50	1	35	8	1	1	1	51	55
Mulpani	487	20	24	3	47	32	0	1	3	47	14
Mulpani	496	20	25	2	48	8	1	1	1	25	8
Mulpani	514	21	24	3	74	2	0	0	2	48	18
Mulpani	548	22	25	2	50	7	1	1	1	25	12
Mulpani	549	23	24	2	53	8	1	1	3	72	23
Mulpani	557	23	24	2	49	20	1	0	2	34	19
Narayangadh	692	20	35	2	57	13	0	0	2	53	5
Narayangadh	807	24	26	2	67	11	0	0	2	43	14
Narayangadh	809	23	35	1	37	4	0	0	1	29	26
Narayangadh	827	24	34	3	105	27	0	1	3	98	28
Narayangadh	848	26	33	2	78	7	0	0	0	52	5
Narayangadh	850	26	32	2	77	13	0	0	2	51	21
Pharping	320	13	25	2	47	3	1	1	2	42	23
Pharping	483	20	24	3	75	19	0	0	2	38	19
Pharping	527	22	24	3	73	3	0	0	2	31	16



Pharping	555	23	23	2	49	13	0	3	3	53	15
Pharping	594	24	25	2	49	22	1	2	4	75	5
Pharping	621	26	24	1	25	9	0	2	1	25	13
Phosretar	345	15	23	2	43	7	0	3	1	25	7
Phosretar	440	20	22	1	23	17	0	1	2	39	17
Phosretar	460	20	23	3	71	5	0	2	1	25	9
Phosretar	460	20	23	2	75	6	0	3	1	21	7
Phosretar	462	22	21	1	28	7	0	2	23	38	17
Phosretar	483	21	23	2	37	3	0	3	1	19	13
Ramechap	375	15	25	0	0	0	0	0	1	24	7
Ramechap	399	19	21	0	0	0	0	0	1	24	13
Ramechap	437	19	23	1	43	3	0	0	1	25	9
Ramechap	475	19	25	1	30	5	0	2	1	21	9
Ramechap	475	19	25	1	31	4	0	1	1	22	6
Ramechhap	420	20	21	1	41	2	0	1	2	45	11
Sanothimi	282	12	24	3	70	11	0	0	2	51	14
Sanothimi	535	22	24	2	49	26	0	2	3	41	23
Sanothimi	564	24	23	2	50	22	1	0	2	50	19
Sanothimi	575	25	23	3	72	17	1	0	3	72	12
Sanothimi	625	25	25	2	49	6	1	0	2	38	17
Sanothimi	637	26	24	2	47	10	3	0	2	50	16
Sarlahi	336	16	21	0	0	0	0	0	1	23	11
Sarlahi	440	20	22	0	0	0	0	0	1	23	11
Sarlahi	460	20	23	1	237	4	0	1	1	19	9
Sarlahi	480	20	24	1	31	3	0	0	1	24	7
Sarlahi	480	20	24	1	32	2	0	0	1	25	7
Sarlahi	500	20	25	1	33	7	0	0	1	24	7
Sindhuli	720	16	45	2	86	19	0	1	1	47	15
Sindhuli	900	20	45	2	389	21	1	1	2	77	25
Sindhuli	966	21	46	2	53	23	0	1	3	69	26
Sindhuli	1008	21	48	3	90	22	0	2	1	45	12
Sindhuli	1008	21	48	4	86	23	0	1	1	48	19
Sindhuli	1056	22	48	3	347	17	0	2	2	68	23
Tikhatal	350	17	23	2	39	1	0	2	3	22	25
Tikhatal	425	17	23	2	43	1	0	1	3	24	23
Tikhatal	500	20	23	2	39	1	0	2	3	25	26
Tikhatal	500	20	25	1	39	1	0	2	1	26	24
Tikhatal	598	26	23	1	35	4	0	2	2	25	24
Tikhatal	625	25	25	1	31	7	3	2	2	27	25
TOTAL	187413	6033	9052	575	20358	3200	111	570	614	12620	6282



CPCS ALLIANCE – CONTACT AND OFFICES

CPCS Int (Nepal office)

Phone: (+977)14414394, (+977)16224660

Fax: (+977)14429897

Email: international@CPCS-nepal.org, contact@CPCS-nepal.org, CPCS int@yahoo.com

Address: G.P.O.Box 8975 – EPC 5173, Dillibazar, Kathmandu, Nepal

Emergency Line: (+977)14411000, (+977)12413082

CPCS France

Phone: (+33) 685049571

Email: CPCSfrance@gmail.com

Address: 43b rue Chateaubriand, 57990 Hundling, France

Site: http://www.CPCS.fr/

CPCS Belgium

Phone: (+32) 472304363 E-mail: info@cpcs.be

Address: 11 rue des Saussales, 1301 Bierges, Belgium

Site: http://www.CPCS.be

CPCS International

Phone: (+32)86 36 66 74 / (+32)477 71 90 27

E-mail: international@CPCS-nepal.org

Address: 7A rue de Larmont, 5377 Noiseux - Belgium

Site: http://www.CPCS.international
Blog: http://blog.CPCS.international