

Swastha Saans Nepal

Project Report: Episode 1 of 7

BREATHING HEALTH INTO THE HILLS OF ROLPA

A comprehensive health camp **initiative by NHAFN**,
in **strategic partnership with GAAPP**,
delivering essential respiratory care, screening, and community awareness
to the underserved population of Triveni-5, Nerpa, Rolpa District, Province 5.

फोक्सोको स्वास्थ्य सचेतनाको लागि राष्ट्रव्यापी परियोजना

NHAFN
National Health
Action Force Nepal

GLOBAL ALLERGY
& AIRWAYS
PATIENT PLATFORM

Date of Camp: 21st December 2025
Location: Nerpa, Triveni-05, Rolpa, Province 1
Total Patients Served: 308
Focus Areas: COPD, Asthma, Post-TB Care, CRDs & Prevention

Prepared By :

NHAFN

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Organization Overview

01. Organization Overview

Vision

A healthier, resilient, and prosperous Nepal where every citizen has access to equitable, high-quality health care, preventive services, and is empowered to live a healthy life.

Mission

To reduce health inequities by empowering communities, advancing public health education, and advocating for policies that address Non-Communicable Diseases (NCDs), maternal and child health, and emergency preparedness, while fostering collaboration with local, national, and international partners.



02. Core values

- **Equity**
  Ensuring all individuals, particularly marginalized groups, have access to healthcare services and resources.
- **Inclusivity**
  Engaging communities from diverse socio-economic backgrounds in health programs.
- **Empowerment**
  Building capacity among individuals and communities to make informed health decisions and take action.
- **Collaboration**
  Partnering with governmental, non-governmental, and international organizations to maximize health outcomes
- **Accountability**
  Ensuring transparency, responsiveness, and ethical practices in all our interventions.
- **Sustainability**
  Implementing interventions with long-term impacts and ensuring alignment with global health standards.

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Camp Objectives

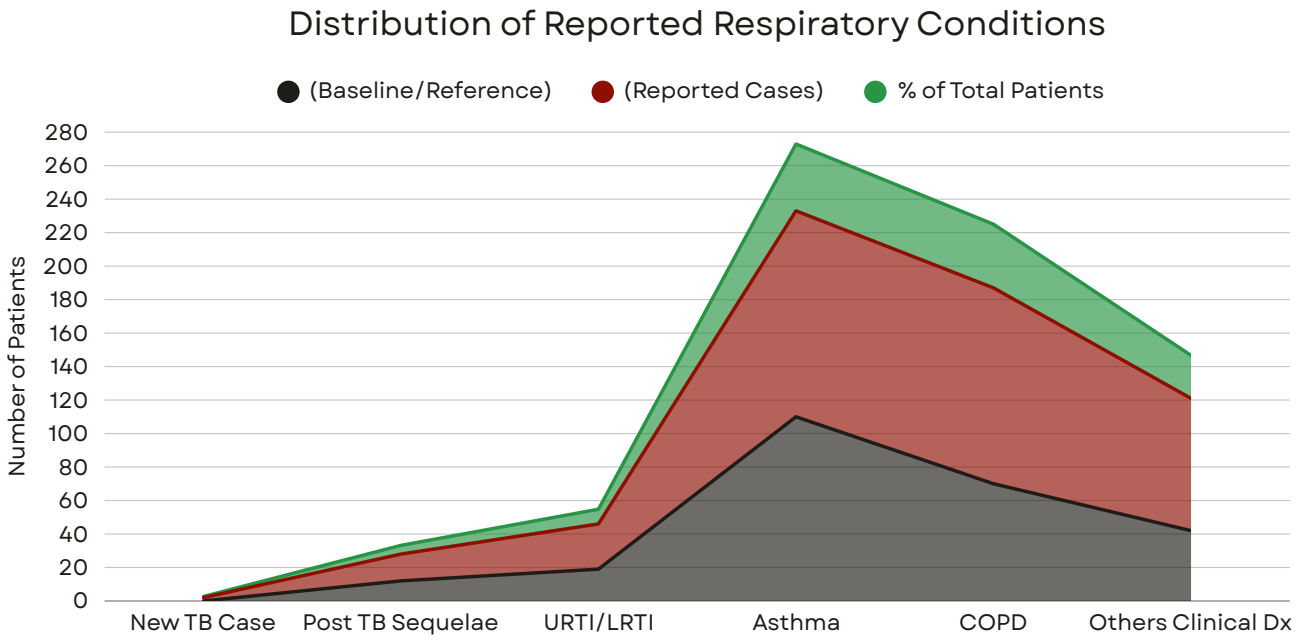
- To provide free screening and management for chronic respiratory diseases.
- To enhance community awareness of CRD prevention and management.
- To demonstrate a replicable model of integrated respiratory care in remote settings.
- To strengthen local health system capacity for CRD management.

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1. Introduction

The Nerpa Health Camp was conducted under the Swastha Saans Nepal Project with support from GAAPP, with a primary focus on chronic respiratory diseases (CRDs). The camp aimed to improve early detection, appropriate management, and community awareness of respiratory illnesses in a geographically remote and underserved area of Rolpa district.

A total of **308 patients** were screened and managed during the camp in a single day. The majority of attendees presented with respiratory complaints, including **chronic obstructive pulmonary disease (COPD)**, **bronchial asthma**, **recurrent upper and lower respiratory tract infections**, and chronic respiratory symptoms in individuals with a **past history of pulmonary tuberculosis (PTB).**



***Note: Patients may have multiple conditions, so totals exceed 308.**

2. Geographical and Public Health Context (Rolpa, Nepal)

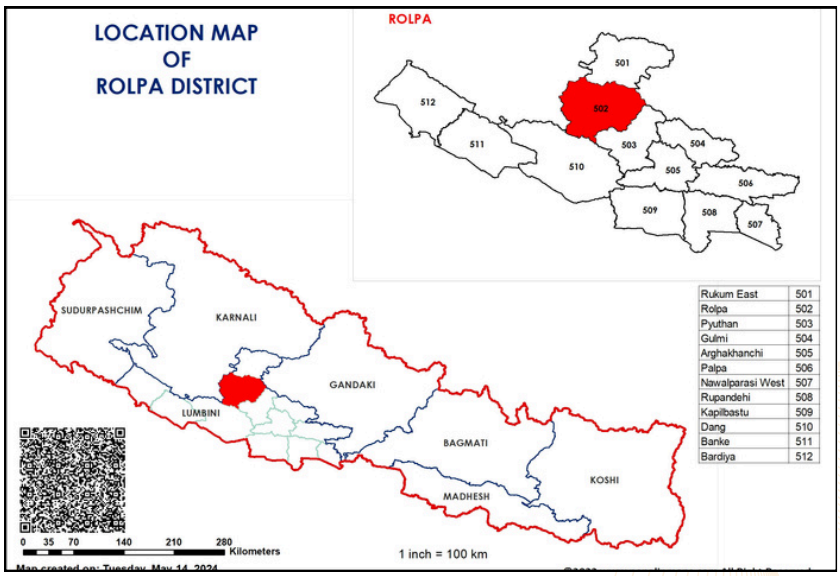
- Rolpa district lies in the mid-hill region of Nepal, characterized by rugged terrain, limited road connectivity, and restricted access to health services. The population largely depends on biomass fuels (firewood, agricultural residue) for cooking and heating, resulting in prolonged exposure to indoor air pollution. Tobacco use, poor housing ventilation, and delayed health-seeking behavior further contribute to the high burden of chronic respiratory diseases.

- In the national context, COPD and asthma are among the leading causes of morbidity and mortality in Nepal, and post-tuberculosis lung disease remains an under-recognized public health problem. The clinical pattern observed in Nerpa reflects these national trends, highlighting the urgent need for targeted respiratory health interventions in rural communities.

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3. Patient Load and Respiratory Disease Burden

Camp in Review ↗



- Total patients screened: **308**
- Predominant clinical presentation: Chronic respiratory diseases
- Common respiratory conditions identified included:
  - **Chronic Obstructive Pulmonary Disease (COPD)**
  - **Bronchial Asthma**
  - **Chronic cough and recurrent URTI/LRTI**
  - **Post-tuberculosis respiratory sequelae**

A significant number of patients reported a past history of tuberculosis, many of whom continued to suffer from chronic respiratory symptoms, indicating long-term lung damage and inadequate post-TB follow-up care.

▲ **120** Inhaler Technique Correction	▲ **303** Medicine Distribution
▲ **308** Health Education (IEC)	▲ **2** TB Referral

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4. Respiratory Diagnostic and Clinical Services ↗

4.1 Chest X-ray Screening

- Chest X-rays were performed for **78 individuals**, primarily those with **chronic cough**, **breathlessness**, **suspected tuberculosis**, **known COPD**, or **abnormal clinical findings**
- Imaging facilitated early identification of **suspected TB**, **post-TB lung changes**, and **other chronic pulmonary conditions**, enabling timely referral and management.



4.2 Spirometry ↗

- Spirometry was conducted for clinically relevant cases to confirm **obstructive airway disease**, **assess disease severity**, and **guide appropriate treatment decisions**.
- This was particularly valuable in differentiating COPD from asthma and optimizing long-term management plans.
- Performed for **45 patients** to confirm obstructive vs. restrictive lung disease.
- **Key finding:** 70% showed obstructive pattern (COPD/Asthma).

▲ 25.3%

▲ 14.6%

Utilization of Diagnostic Services During Health Camp





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5. Quality Improvement in Respiratory Care ↗

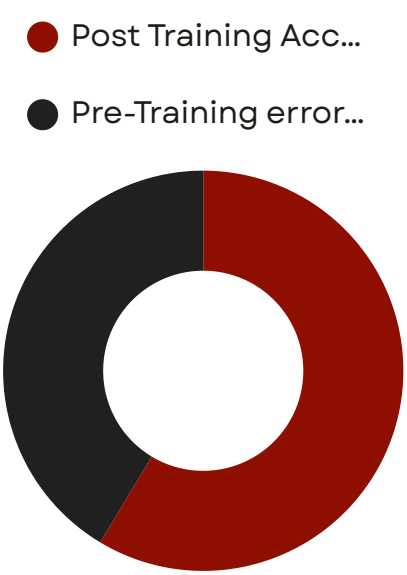
5.1 Inhaler Technique Assessment and Demonstration

- Inhalation technique **was evaluated** for patients diagnosed with COPD and bronchial asthma.
- **Incorrect techniques** were identified in a substantial proportion of patients.
- **Proper inhaler techniques** were demonstrated, practiced with patients, and reinforced through individualized counseling to improve drug delivery and clinical outcomes.

5.2 Medicine Distribution

- Essential respiratory medicines, including **bronchodilators**, **inhaled corticosteroids**, **antibiotics (where indicated)**, and **supportive medications**, were distributed to relevant cases.
- Treatment initiation or optimization was done according to clinical assessment and diagnostic findings.
- Treatment initiated/optimized in 95% of diagnosed cases.





- 102 patients received hands-on training.
- Pre-training error rate: 65% → Post-training accuracy: 92%.

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6. Health Education and Community Engagement ↗

6.1 IEC Material Distribution

- Information, Education, and Communication (IEC) materials related to chronic respiratory diseases were distributed.
- Topics included COPD and asthma awareness, smoking cessation, indoor air pollution reduction, inhaler use, and the importance of early medical consultation.
- Conducted 4 community awareness sessions.

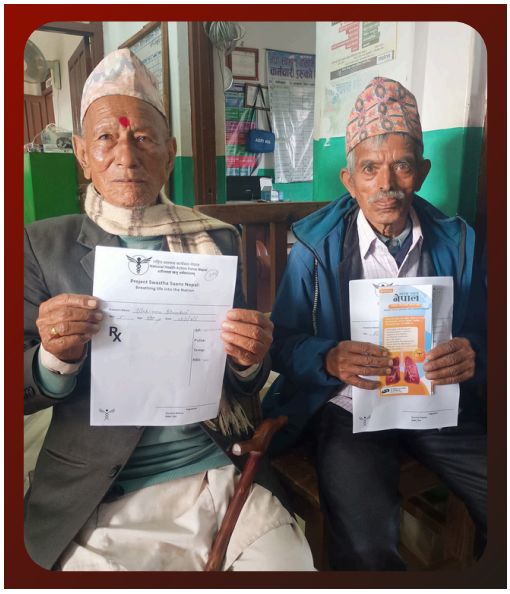
6.2 Knowledge, Attitude, and Practice (KAP) Assessment

- Members of the general public were interviewed to assess knowledge, attitudes, and practices related to respiratory diseases.
- Findings indicated limited awareness regarding the chronic nature of COPD and asthma, poor understanding of inhaler use, and low perception of preventability.
- **Awareness gap:** 70% of respondents unaware of chronic nature of COPD.
- **Positive shift:** Post-camp, 85% expressed intent to seek early care for respiratory symptoms.







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7. Key Outcomes of the Health Camp ↗

- Early detection and management of previously undiagnosed or poorly controlled COPD and asthma.
- Improved inhaler technique competency among patients with chronic respiratory diseases.
- Identification and referral of suspected tuberculosis cases for further evaluation.
- Symptomatic relief and initiation of appropriate treatment for a large number of respiratory patients.
- Enhanced community awareness regarding prevention and long-term management of chronic respiratory diseases.







8. Relevance to GAAPP and Swastha Saans Nepal Project ↗

The **Nerpa Health Camp** directly aligns with **GAAPP's mission** to reduce the burden of chronic respiratory diseases through **early diagnosis**, **quality care**, and **community empowerment**. By integrating diagnostics (X-ray and spirometry), clinical management, patient education, and community engagement, the camp demonstrated a comprehensive respiratory care model suitable for replication in other underserved regions of Nepal.

9. Suggestions for Improvement and Future Directions

- Regular respiratory-focused outreach camps in remote areas
- Expansion of spirometry and chest X-ray services at primary health care levels
- Structured follow-up mechanisms for COPD, asthma, and post-TB patients
- Strengthening community interventions to reduce biomass fuel exposure
- Continued IEC and KAP-based behavior change initiatives
- Closer coordination with TB programs to address post-TB lung disease

10. Conclusion

The Nerpa Health Camp successfully addressed a critical unmet need for respiratory health services in Rolpa district. The high burden of chronic respiratory diseases among the 308 patients screened underscores the importance of sustained, targeted respiratory interventions. Under the Swastha Saans Nepal Project, with support from GAAPP, this camp represents an effective model for improving respiratory health outcomes in rural Nepal through integrated diagnosis, treatment, education, and community engagement.



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APPENDICES





Nerpa Triveni Gaupalika 05, Rolpa, Lumbini Province



Nerpa Triveni Gaupalika 05, Rolpa, Lumbini Province

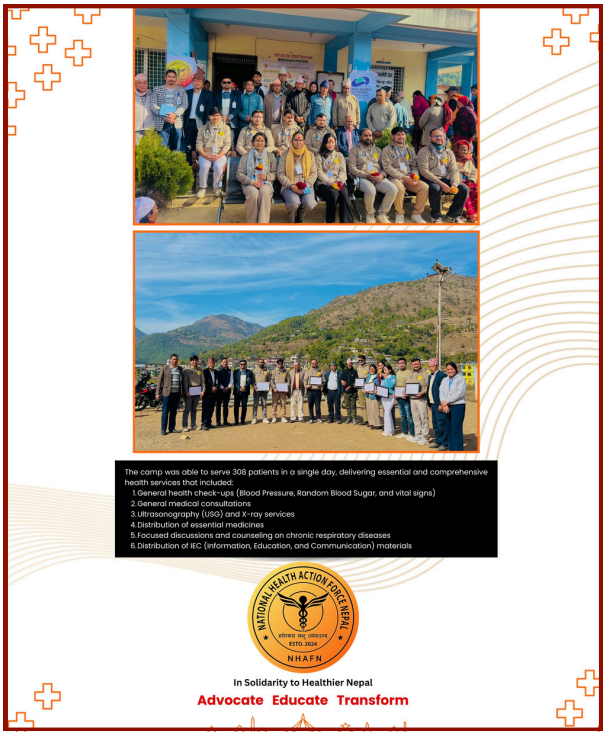


Nerpa Triveni Gaupalika 05, Rolpa, Lumbini Province

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Nerpa Triveni Gaupalika 05, Rolpa, Lumbini Province



The camp was able to serve 308 patients in a single day, delivering essential and comprehensive health services that included:

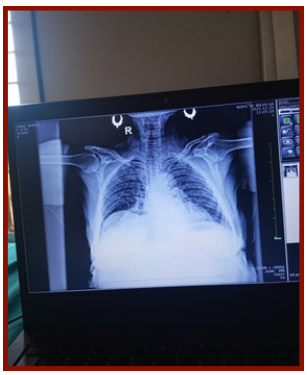
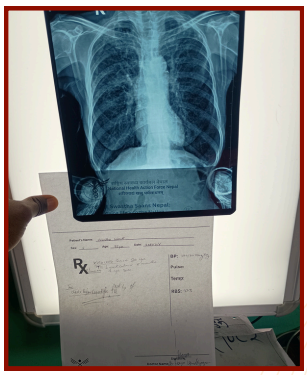
1. General health check-ups (Blood Pressure, Random Blood Sugar, and vital signs)
2. General medical consultations
3. Ultrasonography (USG) and X-ray services
4. Distribution of essential medicines
5. Focused discussions and counseling on chronic respiratory diseases
6. Distribution of IEC (Information, Education, and Communication) materials

In Solidarity to Healthier Nepal

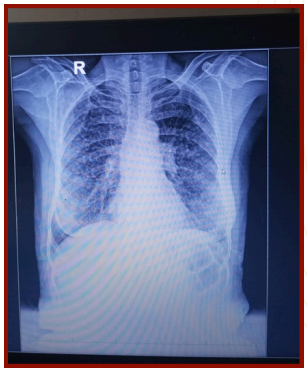
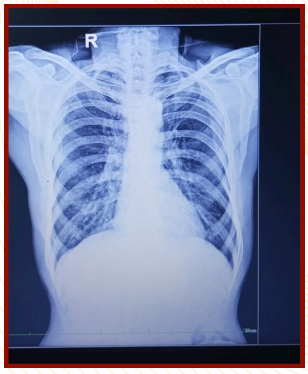
Advocate Educate Transform



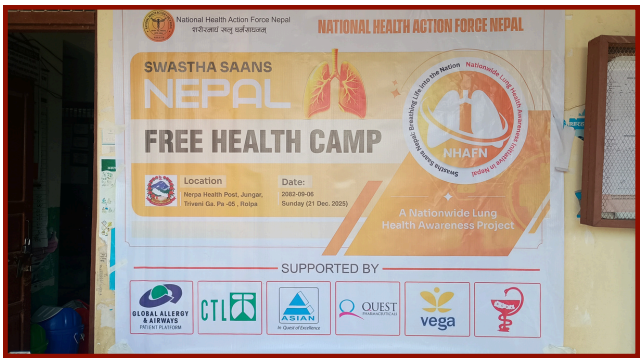




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Thank You! ↗

On behalf of the **National Health Action Force Nepal (NHAFN)** and its **Governing Team**, we extend our sincere gratitude and heartfelt appreciation to all individuals and institutions who contributed to the successful completion of the health camp conducted under Project Swastha Saans Nepal: Breathing Life into the Nation at Triveni Ga. Pa. -05, Rolpa.



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