

Phaplu Home for Disabled

Introductory report
by Gustav Mathiasen



Introduction

Himalayan Project is a Danish NGO dealing with financial aid in rural Nepal. Since our beginning in 2000 we have numerous successful projects behind us - from building and restoring several schoolhouses to making new and more efficient water supply. All our projects are concentrated in Upper Solu region of Solu-Khumbu District of Nepal where we are locally known to do good and thorough development work.



Chimbu School, built with support from HP



Schoolchildren in salleri

From years of travelling and working in this region we have experienced the constant need of decent care for disabled first hand. At present in Nepal a problem of little interest, especially in rural areas. As a small but fast growing organisation we believe the time is ready for us to enter a new area of development work ó the area of care for disabled in Upper Solu. This report is to suggest a project of a home for disabled in Phaplu, Upper Solu.

Background

Upper Solu is a rural area on the foothills of the famous Khumbu region with the highest mountains of the world. There is not much functioning infrastructure, sources of income are few and living standard is low. This makes Upper Solu a region of Nepal where development work is particularly needed.



Main street in Phaplu, with view of mt. Numbur.

Phaplu is the place in Solu where infrastructure and basic necessities function best. The local Airstrip have regular flights to Katmandu, and a new road will in the next couple of years make it possible for the first car to enter Solu from the lowland. In Phaplu we find a school and the only hospital in the region. Beside that, Phaplu is only 20 min. walk from Salleri, the district capital with a bank, shops and official

offices. The current ground thesis is to place this project in Phaplu because of the obvious advantages, but nothing is at the moment so definite, that we could not place it anywhere else.



A HP scholar receives a letter from Denmark

To this day people with disabilities and handicaps have been especially neglected in a society that does not count them for much. There is currently no network, neither from government or any other NGO, to help disabled and their families in Solu. In a place where food is short the problem gets very simple. A mouth to feed and no hands to work is a burden.

Along with the tradition of caste system that exist in Nepal, we as an organisation always tries to approach those who need help most, the most neglected castes and untouchables. For example, we focus on donating scholarships to the most poor children and children with small disabilities. However the reality is that many children are simply to physically disable to ever have a chance of attending school when the right facilities are not yet there. Our main focus has always been education, and that will also be an integrated pillar of this project.

The idea

The idea behind Phaplu Centre for Disabled is to create home and a life for the large number of disabled, especially children. More than just a shelter, the idea is to establish facilities for medical care in co-operation with the local hospital, facilities for training at the Centre and facilities for learning at the local school. It is for us very important to think in terms of creating a "full package", with focus on a full days work. Education and rehabilitation is for us equally important, for the success of this project.

Hopes and Aims

The main hope for this project is that we can change the life of disabled by giving them a place in the local society to fill out. By making a home-away-from-home, we hope to give a group of people a social network, decent living standards and skills that can broaden their horizon. By giving access to training and medical care we hope to improve their health. As earlier mentioned in this report, it is today a fact that people with disabilities live under very hard conditions. It



Shanti Centre for Disabled, Budhailkhanta, KTM, march 2007.

is a general tendency, that the cold weather and bad nutrition makes the disabled more disabled.

Co-operators . Denmark / Nepal

Kurt Lomborg. Denmark. Chairman of Himalayan Project, member of Skivehus Rotary Club. klomborg@post11.tele.dk

Gustav Mathiasen. Denmark. Member of Himalayn Project, author of Introductory Report. gustavmat@hotmail.com

Lone Bak-Pedersen. Fundraiser, member of Himalayan Project Denmark. lone@bak-pedersen.dk

Bishnu Subedi. Nepal, Kathmandu. Member of Rotary Club of Kathmandu. talisman@wlink.com.np

Namgyal Sherpa. Nepal, Kathmandu. Manager of Himalayn Project Nepal and Upper Solu Runner (HIPRON). hipron@wlink.com.np / namgyal_108@yahoo.com

Dr. Mingma. Former head administrator at Phaplu Hospital doctor_mingma@hotmail.com

Sunil Kharki. Nepal, Phaplu. Headmaster, Dudh Kunda School.

Ang Ngyma Lama. Nepal, Phaplu. Former President of District of Solu-Khumbu. humanright112@yahoo.co.in

Shanti Griha. A german based NGO in the Katmandu Valley, Runs the Shanti Center for Disabled in Budhanilkhanta. shantiseva@wlink.com.np

HRDC ó Banepa - fodhrdcl@wlink.com.np

Location

When visiting Phaplu in March 2007 I specifically looked at possible land to place this project. We have been looking for land with three different qualifications. First, is the land suitable for building (does it have a decent elevated plateau so as to minimize removal of dirt, etc.). Secondly, is it close to the hospital and the school. An idea is, that a wheelchair driver is able to get either place on their own, when distance is reasonable, and if we supply the necessary tracks. Thirdly, can the land hold possible extension of this project in the future?

With these qualifications in mind we have found three different plots of land in Phaplu that could meet our demands. They are all privately owned, which naturally means that expenses for purchasing land are higher than if government were willing to provide the land. This will lead to a discussion that is very important between HP, the constituted ownership of the centre and the local authorities. We stress that Phaplu is not the only solution, but for obvious reasons the most convenient. See only these three plots as suggestions for the time being, until project has had the chance of further investigating all the possibilities.

Plot 1

Right between the School and the hospital is a ground where this project originally was thought to be. With distances of 50 meters or less to both school or medical facilities wheel chair tracks is easily constructed and transport would be less than from any of the other plots.

There are slopes to north, west and east facing sides that makes the area suitable for building smaller. In the centre of the plot is an elevated plateau where the buildings could be. This plateau is only about half or less of the full land size.

In between this plot and the hospital ground is a minor gorge with a ödry creekö. In terms of building wheel chair tracks to the hospital we might have to consider a bridge to make this way accessible. A wheel chair track to the school involves many curves, since the slope here is very steep upward.



There are currently no buildings on this site besides a small water tank. Along the south boundary of the plot is the common way to the school, a dirt track where all students go to and from school. A network of water pipes that supply the entire village with water lies above ground across the entire compound. These must be dug down.

The plot of land, which is requisite to build this centre, is actually made up from six different plots owned by six different persons. If one is not interested to sell, then the ground will lose much value to the project. The location of these plots seem to have all that could give land in Phaplu value. They are close to the airport and a new road that is being constructed. This means that this apparently is the most expensive land in town, and again with six landholders we could expect very high prices. We do not have a fixed price for this plot, but from what we have recently heard, the project could not choose a more expensive solution than this plot.

The plot is in total 12 ropani, of which we can expect about half will be accessible for disabled.

Plot 2

The second plot of land probably has the advantage of price. It is held by one landowner who is willing to sell for a more suitable price.

The ground in it self is unfortunately not as suitable for constructing houses as we could hope for. It is basically one descending slope from east to west. Construction will have to include a lot of dirt removal. The site is overgrown with trees of which many have to be moved.



In general this site is lower than both the hospital and the school. We can from this site not expect to make wheel chair tracks to the school because there are too many obstacles for a disabled to overcome. Access to and from the main road is not a problem. This would be the way to school, though it does require help from others.

The plot is in total 9 ropani, of which we can expect half or less will be accessible for disabled.

Plot 3

This plot lies to the east of the airstrip, and has good views of the Tamakani Valley. It is elevated high above the main road, and there is currently no access to it, but this can be made. The plot itself is a nice plain plateau with timber forest to the back (towards east) and great views to the front.



It is more distant from the village than any of the other suggested plots. Distance to hospital and school from here is farther than from other sites. Wheel chair tracks can be made, but they

involve much more construction, and we are dependent on hospital willingness to let us built across their land. This plot and the school are almost same level, and it is possible to build a track that winds through the forest to the back of the compound and the hospital, and straight into the schoolyard, that is possible to drive in a wheelchair without or with little help.

This plot is big, and can hold any future extensions if this should once be relevant. It could even hold a garden or a small farming project, if the project wishes to make one. The whole site is relatively level, and a wheel chair should basically be able to go anywhere on the site.

Project phases

- Establishing ownership of the Disabled Centre
- Purchasing land
- Construction phase
- Working phase

Establishing ownership of the Disabled Centre

The project should be owned by an organization which involves all involved or partners of interest in the process of establishing and running the Disabled Centre. It could be individual persons (national and international), NGOø, GOø, INGOø and IGOø.

This organization shall investigate and survey the local need, as well as take experiences from other places of similar objectives. It shall on basis of the survey make a description on the need and magnitude on the local level. And finally on basis of this description take decisions on what, where, when, how etc.

Purchasing land

The land shall be purchased and registered by the owner of the Disabled Centre. This centre should take off with a local initiative, based on the local wish for this project that I learned during my stay in Upper-Solu. In this phase it is important that people who wish to take active part in the project do so, by focusing on how to purchase suitable land with minimum expenses. It will not only make the total budget stronger, but also be a sign to other interested donors that the people behind this project has the interest to make the best with the money they have. In that way the project will make it easier for it to find funds.

Construction phase

The construction can initiate when the land is purchased and registered. The actual construction of the centre will naturally follow after the organization behind this project has thoroughly investigated the need and made all the relevant decisions. In light of that, it makes not much sense to sketch a complete and definite construction plan at this time. However, I see it as an important part of this report to sketch out some headlines that in my personal opinion should follow the building, construction, and this project in general, throughout.

From my point of view there must be buildings and facilities to accommodate for the following.

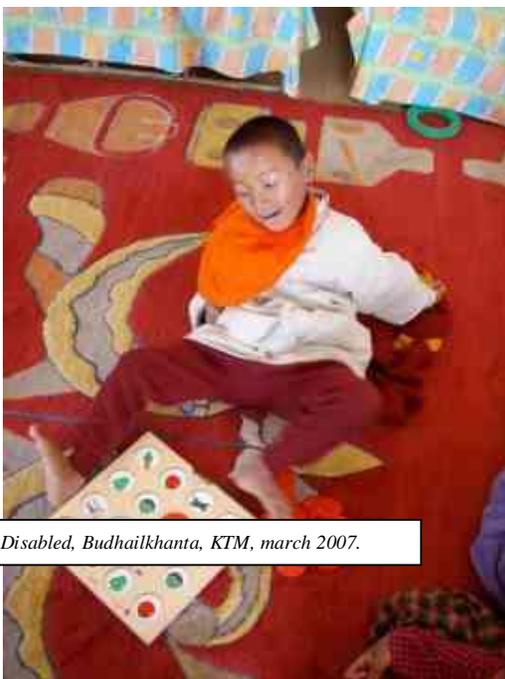
- Common rooms with room for eating, playing and socialising.
- Sleeping facilities for 2-8 people in a room.
- Kitchen facilities, with enough space to make food for a large number of people.
- Educational facilities and/or a workshop.
- Bathing and toilet facilities.

When constructing houses for *common rooms* and *sleeping* there is a number of important things to keep in mind. As mentioned under the description of location it is a major concern for me that the land is as levelled as possible to make it easier to get around the compound in a wheel chair. This must of course be the same for the buildings. All buildings must be in one level with no stairs or other such obstacles to make any part of it inaccessible for the disabled with less mobility¹.



Accessibility in general is a keyword. Doors, both internal and external, must have a width so a wheel chair or a rolling bed can pass through. Surface on the floors

¹ One good argument against this though, could be that a staircase can work as a good facility for physiological training (walking). The idea must at all times be, that no place must be exclusively for those who can access it.



Shanti Centre for Disabled, Budhailkhanta, KTM, march 2007.

must be of a material that support this, preferably wood (see further down). *õPath waysö* must be a part of the building, so everyone can get around on their own. Bars (horizontally on walls) is a good idea for those who can walk with little support. This also means that rooms must be big enough to place *õislandsö* in the middle of each room, away from the walls. In general all these things are mentioned to keep in mind that we wish to create facilities that encourage training and activity for crawlers, walkers and wheelchair-drivers.

Heating through the cold winters is in my opinion a necessity, but keep in mind that open fire is the least wished solution. It is bad

ecologically (in terms of forest destruction), it creates an unhealthy indoor environment and, last but not least, it is very dangerous, especially for disabled (Infant disabilities from falling into fire is common). Stoves with chimneys are an expensive solution (must be brought from outside via plane), but with no doubt the best.

I have experienced one important thing that is special for Nepal, and which we must keep in mind when planning and constructing facilities in general. When eating, playing or relaxing disabled in general have always at home been sitting directly on the floor. This is obviously not good for their muscles (since they hardly get around) and it has also in many cases been directly dangerous for their health due to the cold surfaces. However we have experienced at a home for disabled in KTM (Shanti Griha) that, especially children, seem to enjoy toddling around on floors. If we make sure to have wooden floors throughout the sleeping rooms and common rooms, and place thick woollen carpets (a local speciality) on *õislandsö* away from *õpath waysö* we can overcome the danger of marks and wounds from being in contact with cold floors. What is especially great about this solution is, that we have seen children socialise better when they can actually reach each other (which is not possible when sitting fulltime in a wheelchair), and that they, when having a soft surface to fall back on, do a lot more exercise (crawling and walking) than they otherwise would. Jumping straight out of bed and play on a soft floor before breakfast is a good way to start a day. A table is not necessarily needed either. Meals seem to taste better when sitting!

All in all, these carpet islands create a play friendly atmosphere that does not have all the tools (wheelchairs, bathingtables etc.) that make the people who live here special. Further more, it would be a good idea to include beam bags, hammocks, fatboys (you name it!), to keep the atmosphere fun and cozy.

The *kitchen facilities* must of course be big enough to accommodate for the number of people living at the centre. And further more have enough space for the disabled to join in and help with the daily cooking. Make sure to fit kitchen tables etc. to the right *õwheelchair-sizeö*. Again make sure to include a sensible solution with fire, both in terms of safety and wood-economy or consider electrical cooking.

Shanti Griha Workshop, Budhanilkhanta, KTM, march 2007.



Educational facilities can be made in a number of different ways. This is still an area of concern that needs a lot of discussion before we know exactly where and how to focus. Do we make our own facilities, or do we choose to focus on restoring and upgrading an existing School?

Further more we have discussed the use of a workshop, where local specialities could be produced and sold, and perhaps make a small income to support the centre financially.

Bathroom facilities must accommodate for a number of different users. For bathing we must be able to have right equipment for those who need help with everything, down to supplying the simplest necessities for those who can do everything or most on their own.

For the first group I imaging a construction like a raised bench or table with sides, where the person who is being washed can lay down. The construction must have a waterproof surface and a drain in the corner. This construction takes up equal floor space as a normal size bed, and the bathroom must be big enough for that. For those who need little or no help, we can construct a normal shower with a chair or a bench that is made of painted metal, so that it will not rust, and with a soft waterproof surface that is comfortable.

For toilets, the traditional Nepalese squatting toilets cannot be used with disabled. We need either a real western ceramic toilet or a chair with a hole and a toilet seat. Wall surfaces must be as smooth as possible and made of very fine plaster. See perhaps for inspiration the Himalayan Project Concept paper on toilet Complex Construction of February 2007. The concepts of environmental fertilisation in this project could in my opinion very well apply to this toilet. Where privacy in other rooms are less emphasised, it is of course important to keep bathroom and toilet a confidential and private space.

Shanti Centre for Disabled, Budhanilkhanta, KTM, march 2007.



Outdoor facilities should in my opinion include a playground and a pathway around the buildings that makes wheelchair racing possible.

One specific wish that has been mentioned by Ang Ngyma Lama, one of our co-operators in Phaplu, which has proved successful in project like this in other parts of Nepal, is to keep traditional Nepalese architecture in mind when building. Every region has

a specific way of building, which differs a lot from more western or modern architecture. The good side to this idea is to make a more homely and lively atmosphere. The obvious downside is the non-practical aspects of accessibility that characterises the traditional architecture. However non-practical, a compromise is not impossible and should be sought. Solukhumbu has enough of dull western inspired houses.

Working phase

Working phase includes the daily run of the centre. How do we make sure to create the best surroundings for the disabled on a daily basis? In my opinion it is important first of all to find a manager that can express leadership on behalf of the wishes of the organization behind the Disabled Centre. It is important to find a person that knows and understand both the needs of disabled of different kinds and the remaining staff attached to the centre. He/She will maintain the daily running, manage budgets, hold the overall guidelines (e.g. in terms of tuition, rehabilitation etc.), all in communication with remaining staff, and on basis of the decisions taken by the organization behind the Disabled Centre, in which he/she also takes part. Preferably it should be a person with relevant experience or education, a person that can show the needed empathy and finally, a person from the local community (however not necessarily), to increase chances of a long term involvement.

The remaining staff should include caretakers, staff that do the needed nursing, light rehabilitation (physical exercise, daily medication etc.) and care, preferably with some sort of nursing experience or education (NMA, CMA or higher). We can and shall not expect to find professional nurses to fill out all positions as caretakers, and in my opinion it is not necessary. In actual fact, if the management finds anyone from the local area who can learn the job, show empathy and bring a positive atmosphere to the centre, this person, with or without education should be favoured.

Other staff includes cooking and cleaning personal, maintenance responsible and perhaps some sort of educational and/or vocational teaching personal if this is chosen to be an integrated part of the centre. Total numbers needed in each group of staff responds with the needs that the organization finds in their investigation, and how they choose to construct the daily scheme for the centre.

In my opinion it is important to construct a daily scheme that includes focus on rehabilitation (prescribed and encouraged by the local hospital, and managed by the caretakers), education and care (includes food, hygiene, help etc.). All three aspects are equally important, and it is important to keep in mind when talking number of staff. The higher quality of care in general, the easier it will be to find money that can keep the project running.

One cook or kitchen-responsible should be attached to the centre. This person is responsible for the daily run of the kitchen and buying food. The kitchen-responsible manage a budget in cooperation with the manager. If the total task proves too big, a helper can be hired to assist the cooking.

The task of maintenance-responsible includes keeping ground and buildings in good shape, making small reparations, and helping with small task that needs to be done in general. One person should be enough at any state for this job, and a special budget is not likely necessary.

And finally, in the extend possible, as many of above mentioned tasks that could be filled in by a person who is disabled him/her-self should be given to such persons. Even if it involves special education.

Economy

When talking economy for a project like this, we work with three different budgets, a land-purchasing budget, a construction budget and a "daily run-budget".

The land-purchasing budget is an isolated part of the total developing budget, and must be minimized as much as possible with the initiative of the locals who take active part in this project. Buying land is a lucrative business and many donors and organisations are simply not willing to put their money on land unless they know that costs are minimized as much as possible. Remember, they are not interested in investing, but to give a donation to a good project. Besides that, minimizing expenses for purchasing land is the most important sign of interest that the local community can give a donor. Donors recognise this genuine effort and are often more interested in supporting a project (for example in the construction phase) when they see it.

The construction budget includes costs for piloting and developing the land and building houses. The money to cover the construction budget is not the major concern at the moment. We do not at this point work with a specific budget or a specific donor, but with our long experience in development work we of course have a grasp of how we solve this problem. When the "Owner of the Project" has started the project by registering a suitable piece of land, which all partners can agree on, it isn't considered a major problem by Himalayan Project to find donors for the construction phase.

The budget for the daily running of the centre is on the other hand of major concern already now, and we will not take any further steps before a reasonable and sustainable plan has been made.

- 1) We hope that the local government (District and VDC), with whom we wish to have a close and good relationship, will look positively on this project in their community, and see to help the Disabled Centre economically and practically as far as possible. We take it very seriously when we stress the importance of local involvement. Not only in terms of economy, but also as a sign of interest and good faith for the people that will receive help through this project.
- 2) We should expect that local Institutions will cooperate with our Centre to support the social aspect. It could be Phaplu Hospital giving some services for free, the local school implementing the disabled students or giving some services at the centre, Airlines giving free seats when available for medical transportation, tourism benefited places having benefit from more visitors at the centre etc.
- 3) We also expect an interest from central administration through Ministry of Education or Ministry of Health and Population.
- 4) We should expect or hope that parents and family to the enrolled users of the centre will contribute to the operation of the centre by paying fee, giving volunteer labour or provisions.
- 5) The Centre should by own efforts seek to obtain contributions and donations from well to do locals or other Nepalese, as well as from foreign visitors and foreign organizations.
- 6) The Centre itself can create economy
 - Production of local specialities or souvenirs to sell to tourists on their way to Everest Base-camp or Mani Rimdu or just visiting Phaplu. This is thought as

more an occupational activity than a major source of income, but of course every penny counts, and with the right ideas it could be a major factor.

- Other productions to be exported to Kathmandu or even to foreign countries
 - Production of provisions and other necessities at the centre (like carpets) so they shall not be purchased from outside
 - Tourist guiding at the very centre
 - Doing mutual services for each other relieving the staff
- 7) Besides the help from local government we will look in to a continuously support from International and specifically Danish side.
- We have good experiences with scholarships, where a Danish donor commits to pay the tuition for one of our schoolchildren, and a parallel for this project is a possibility.
 - Creating direct links between the Phaplu Centre and International Centres for Disabled for mutual benefit and development
 - Individual persons who will do a personal effort to collect funds. Lone Bak-Pedersen is involved and has agreed to do an effort for this part.
 - Seeking funds through private foundations, which support development work in poor countries. If the chance of making our own foundation especially for the Disabled Centre should ever come, this to is a possibility.
 - Danida ó the Danish Governmental Development Organization shall be sought to support this Centre for a period of time.
 - Regular donations from International Organizations supporting disabled
 - Temporary donations for unspecified or specified sub-projects from humanitarian organizations.

From Himalayan Project side we shall be ready to work on finding the major contributions in the beginning, but gradually the Centre itself should take over an increasing part of the economy to create a self sustainable Institution. But Himalayan Project shall also be aware that the Centre probably never will be able to run by own means but always will be dependent on support from outside.

One of the above mentioned sources to cover the daily-run-budget will not do it alone, but hopefully all together we can keep this project running sustainable for many years. We from our side have the will to work hard and do everything in our power to make a financial plan that will cover the costs of the daily running. The project is too important to not make the extra effort.

The question of economy is of course the most crucial for the realisation of this project. What is very important to mention at this time about economy is, that this project will by far be the biggest and most expensive Himalayan Project has been involved in until now. We are confident that we will succeed in finding donors. But mark that



Gustav Mathiasen (standing, 3. from right) and Rasmus Johansen (sitting, 1. from right) in Tamakani April 2007.

we always demand our co-operators to give thorough and precise reports and budgets, and in this case, with bigger budgets than ever, we especially emphasise this. In other words, we will through the construction and general running of this project focus especially on check-ups. The co-operation between the local co-operators, Himalayan Project and donors, is the backbone of this organisation, also in this project.

Conclusion

To sum up the headlines that I think is essential for the realisation of the project I would like to emphasise the importance of establishing a set of overall aims. This centre is a project to make the life better for disabled in Upper Solu, by *rehabilitation, education and care*. The importance of this must not be forgotten in the next hard process of establishing ownership for the Disabled Centre and the following construction.

When the people in the local community who find this project important and starts engaging in the process of investigating it is important that they work hard and fast, so that the process can begin. The next big issue is to find out all the things that we do not know. How many disabled are there in Upper Solu? Where are they? What are their disabilities? How many can get this offer? Which age? What kind of disability? What kind of care (short term or long term)? There are a lot of questions that needs answers, and before anyone can give them there must be a thorough investigation based on a survey from Nepalese side, and a following discussion on what is needed and what is possible.

I would like to mention that I have experienced a good will behind this project, both from Danish and Nepalese side. It is an important issue and an important project that deserves to be realised. I hope that this introductory report can start the necessary discussion that will lead to the first step, and finally end up in what is a great home for the disabled in Upper Solu.

Finally I will stress that this a Personal Introductory Report written to start up a discussion on the Project. Nothing in this Introductory Report is fixed or established. Everything is open for discussion. A discussion which should lead to a Project Proposal, which can be introduced to future donors and interested co-operators. As this first step is taken personally by me, I will express the hope that the stakeholders of the project which wants to enter the scene in the next period will communicate their proposals and opinions with me. I will then be the co-ordinator, who will see to that all stakeholders can take part of the discussion and decision making.

Yours sincerely
Gustav Mathiasen
Nørre Alle 30, 3., lejl. 9
8000 Århus C
Tel.: 0045 61 68 90 05
gustavmat@hotmail.com