

Citizen Well-being program (नागरिक आरोग्य कार्यक्रम)

IMPLEMENTATION PLAN



Government of Nepal
Ministry of Health and Population
Department of Ayurveda and Alternative Medicine



World Health
Organization
Nepal

Citizen Well-being program

(नागरिक आरोग्य कार्यक्रम)

IMPLEMENTATION PLAN



Government of Nepal
Ministry of Health and Population
Department of Ayurveda and Alternative Medicine



World Health
Organization
Nepal

ACKNOWLEDGEMENT

Growing concern for improvement of healthy lifestyles, Government of Nepal has announced a Nagarik Aarogya Karyakram - Citizen Well-being program to make citizen healthy leading to a healthy society. The Nagarik Aarogya Karyakram envisions that health can be promoted and maintained at home and quality of life can be achieved by practicing regular Ayurveda, Yoga meditation and healthy lifestyle. Ayurveda is the science of life that envisions to protect and promote the health of healthy individual and alleviate the disorders in diseased. Nagarik Aarogya Karyakram Guidelines have been issued by Department of Ayurveda & Alternative Medicine to raise public awareness to the local level and bring change in the lifestyle by making people responsible for their health by conducting it as a campaign activity with the slogan "My Health My Responsibility". This Implementation Plan is developed to achieve the outputs of Nagarik Aarogya Karyakram-Citizen Well-being program. During the process of preparing this Implementation Plan feedback and opinion were taken from Ayurveda Physician from Ministry of Social development from all the 7 provinces, Ayurveda experts, Ayurveda Physician and invited experts. Policy-makers, academia, private sector and other relevant stakeholders were deeply involved through series of meetings and workshop.

I deeply appreciate the great efforts made by Ayurveda Consultant and all those involved in the process of preparing this Implementation Plan and look forward for the Implementation Plan being translated into action by enhancing the partnership among all stakeholders. I am thankful to all staff from Department of Ayurveda & Alternative Medicine and the team involved for extending valuable co-operation and support in preparing this Implementation Plan.

This acknowledgement would be incomplete without expressing my immense gratitude and cordial thanks to WHO Nepal and MoHP for providing support and assistance.



Dr Vasudev Upadhyay

Director General

Department of Ayurveda and Alternative Medicine

TABLE OF CONTENTS

Acknowledgement	iii
List of Abbreviations	v
Executive Summary	vi
Background	1
Scope	2
Vision	3
Mission	3
Goal	3
Objectives	3
Structural arrangement	4
Challenges	4
Opportunities	4
Activities	4
Federal Citizen Well-being Committee	5
Province Citizen Well-being Committee	6
District Citizen Well-being Committee	7
Local Citizen Well-being committee	8
Citizen Well-being Group	8
Outcomes	9
Achievements and Progress	9
Scope of Implementation Plan	10
Stakeholder Analysis	11
Resource management and coordination	13
Records and data management	13
Monitoring and supervision	13
Implementation Plan	14
Financial resources required	20
Indicator	21
Contributor list	22

LIST OF ABBREVIATIONS

MoH&P	Ministry of Health & Population
DOAA	Department of Ayurveda & Alternative medicine
MOSD	Ministry of Social Development
NCD	Non communicable Diseases
COPD	chronic obstructive pulmonary diseases
RMNCH	Reproductive, Maternal, Newborn and Child Health
WHO	World Health organization
DAO	District Administration office
B.S	Bikram Sambat
Y1=	First Year
Y2=	Second Year
Y3=	Third Year
Y4=	Fourth Year
Y5 =	Fifth Year
Q1=	1 st Quarter of year
Q2=	2 nd Quarter of year
Q3=	3 rd Quarter of year

EXECUTIVE SUMMARY

Non communicable diseases (NCDs) kill 41 million people each year, equivalent to 71% of all deaths globally. Each year, 15 million people die from a NCD between the ages of 30 and 69 years; over 85% of these "premature" deaths occur in low and middle-income countries. Tobacco use, physical inactivity, harmful use of alcohol and unhealthy diets; all increase the risk of dying from a NCD. (WHO fact sheet 2018). Nepal is not an exception of these problems and similar pattern of morbidity and mortality have been seen here. 66% of the deaths in Nepal are due to NCDs and probability of dying due to one of the four major NCDs between 30 and 70 years of age is 22%. To address these issues, Nepal has formulated and has been implementing many policies, strategies, plans and programs. The Public Health Service Act (2075 B.S) has stated about the right of citizens to obtain free basic health services including Ayurveda and other accredited alternative health services. Furthermore, Public Health Service Regulations (2077 B.S) has incorporated promotive and curative health care through Panchakarma Purvakarma, Yoga and use of Shatavari for lactating mother as the basic health services.

Multisectoral Action Plan for the Prevention and Control of Non Communicable Diseases (2014-2020) has emphasized on early detection and treatment of NCD which is primarily the prerogative of MoHP. The prevention of risk factors requires a multi-sectoral "Health in All Policies" approach. Every citizen should be informed about healthy lifestyles for making "**My Health, My Responsibility**" campaign effective. Similarly advocacy needs to be carried out with potential stakeholders for creating and enabling environment conducive for a healthy and active lifestyle.

Taking all these factors into consideration, the Government of Nepal has announced a Nagarik Aarogya Karyakram - citizen Well-being program up to grass-root level (Tole-Tole) to make citizen healthy leading to a healthy society. The Nagarik Aarogya Karyakram envisions that health can be promoted and maintained at home and quality of life can be achieved by practicing regular Ayurveda, Yoga meditation and healthy lifestyle. It would further help in bringing positive lifestyle change and ultimately achieving the goal of "**Prosperous Nepal, Happy Nepali**". Nagarik Aarogya Karyakram Guidelines have been issued by Department of Ayurveda & Alternative Medicine to raise public awareness to the local level and bring change in the lifestyle to make the people responsible for their health by conducting it as a campaign. Understanding importance of Nagarik Aarogya Karyakram in developing Nirogi Nepali it has been kept as the first priority program of Department of Ayurveda & Alternative Medicine. This implementation plan is developed to achieve the outputs of Nagarik Aarogya Karyakram-Citizen Well-being program.

Scope: Implementation and establishment of healthy lifestyle culture to reduce the burden of NCD's and its risk factors.

Vision: Healthy Nepali (Nirogi Nepali) through Nagarik Aarogya Karyakram (Citizen Well Being Program).

Mission: The promotion of good health and well being of people through empowering them for informed decision in an effort to prevention of non- communicable diseases and communicable diseases.

Goal: The overall goal is to make people physically, socially, mentally and spiritually healthy through their own action at all levels by providing quality service of health promotion through Nagarik Arogya Karyakram .

Objectives

- Multi-sector involvement to prevent Communicable and non-communicable diseases and promote My Health My Responsibility
- Advocacy to the political leadership.
- Reduction of modifiable risk factors of NCD significantly.
- To implement Nagarik Arogya karyakram to all level through community participation and engagement.

Increased community participation and engagement in citizen well-being program, adoption of healthy lifestyles and increased health seeking behavior of people and reduction in morbidity and mortality from NCD are the expected outcomes. The overall outcome is increasing social harmony and sustainable awakening of good national spirit through the spontaneous use of its national health system will support social harmony and overall national unity through health.

The Nagarik Aarogya Karyakram -Citizen Well-being program Implementation Plan will translate the Nagarik Aarogya Karyakram -Citizen Well-being program into action. This plan will be implemented between the fiscal years 2021 to 2026. Orientation training will be conducted before conducting the program. The responsibility of running the program smoothly within the stipulated time will be the responsible person of the Citizen Well-being Committee. Ayurveda and alternative medicine institutions will provide structural and technical support in respective areas. In addition to the government agencies, the civil societies, Tol Bikas santha, non-governmental organizations and private enterprises also have influence and opportunity in incorporating Ayurveda and ancient alternate medicine practices to build healthy behavior lifestyles for the prevention and control of NCDs. Depending on the nature of the program, public awareness message and

service oriented programs should be conducted within the stipulated time frame to achieve the specified objectives. The program activities include existing activities of Ayurveda & Alternative medicine health centre and few entirely new actions/activities. The total cost for committee formation, orientation and activities over the five years of implementation is estimated to be NPR 475.9 Millions. Province Government and Local Level need to provide additional support in the campaign activities through finance and other logistics for achieving the desired outcomes. Data of voluntary activities conducted and service recipients of yoga groups and healthy lifestyle assessment must be recorded and reported. The progress and program report mentioned in the annual target of the approved programs must be prepared by MOSD with the support of Province Citizen Well-being committee and sent to the DOAA and Federal Well-being Committee. Routine monitoring and supervision of the programs will be done. The only limitation of this document is that it is based within the frame and programs mentioned in Nagarik Aarogya Karyakram Guideline 2076.

Background

Article 35 of the Constitution of Nepal (2072 B.S.) guarantees the right of every citizen to free and equal access to basic health care from the government. Article 51 of Part 4, h(7) has emphasized on protecting and promoting Nepal's traditional medicinal system such as the Ayurveda, natural medicines and homeopathy. The National Health Policy (2076 B.S) has called for expansion of Ayurveda services as having the National Ayurveda Health Policy (2052 B.S) and National Urban Health policy (2072 B.S). Various national and international policies have highlighted the importance of Ayurveda services in primary health care and for the prevention of Non-communicable Diseases (NCDs). The Public Health Service Act (2075 B.S) has mentioned the right to obtain free basic health services and Ayurveda and other accredited alternative health service are also included. According to the Public Health Service Act, every citizen shall have the right to obtain quality health service in an easy and convenient manner and it shall be the duty of every citizen to be involved in the programs relating to health as prescribed by the Government of Nepal, from time to time, under the prevailing law. The Provincial and Local Governments may make necessary addition to the basic health services and shall bear the burden of financial expenses of the services. The Local Level may provide the basic health service in partnership with any health institutions operated under the Province and the Federation. Public Health Service Regulations (2077 B.S) has mentioned Panchakarma Purvakarma, Yoga and Shatavari for lactating mother as basic health services.

The 15th 5-year plan (Fiscal Year 2019/20 – 2023/24) has emphasized to systematically develop and expand Ayurveda, natural medicine, and other medicines. Promoting universal health coverage by integrating Traditional & complementary medicine (T&CM) services and self-health care into national health systems is one of the strategic objectives of WHO Traditional Medicine Strategy 2014-2023. In line with the sentiments of South East Asia Regional NCDs targets Nepal has also adopted targets to be achieved by 2025. According to the findings of STEPS survey 2019 national prevalence percentage of currently using any tobacco products is 28.9, national prevalence percentage of people eating processed food high in salt is 19.5 which signify the need for preventive approaches.

Based on the available health indicators in Nepal, as the prevalence of Non-communicable diseases such as obesity, cancer, hypertension, heart disease, diabetes, kidney, liver and lung diseases, mental illness, dental disease, etc. is on the rise. Non-communicable diseases are a major public health problem in Nepal accounting for around 66% annual deaths in 2016. The major Non-communicable diseases responsible for these deaths included cardiovascular, cancers, chronic respiratory diseases and diabetes. Changing lifestyles, diets, water, land, air pollution, contamination of food and excessive use of pesticides, chemicals in food and vegetable production are increasing the number of

non-communicable diseases. Citizens in our community are suffering from various physical and mental problems and lifestyle diseases. NCDs are on the rise while we have still not conquered the communicable diseases and RMNCH issues. Lack of personal hygiene, lack of education and lack of access to health, our society still has a significant number of people suffering from infectious diseases. Although significant developments have been done in the health sector, still indicators like Infant Mortality Rate (IMR) is 32, Under 5 Mortality Rate years is 39 which need to be addressed.

The national agenda is to achieve Sustainable Development Goals in keeping with the international commitments Nepal has made time to time, to make citizens healthy; there is a need to increase investment in modern medicine as well as the medicines pertaining to Ayurveda, Naturopathy and Homeopathic treatment, and good governance and research in the health sector. Under the strategy to include health in all policies through multi-sector coordination, every citizen will be informed about healthy foods as per the concept of the healthy kitchen for making "My Health, My Responsibility" campaign effective, and coordination and collaboration will be carried out with the stakeholders for construction and establishment of cycle lanes, one home one kitchen-garden, public park, gym hall, yoga practice and panchakarma center for promoting a healthy environment and active lifestyle. Taking all these factors into consideration, the Government of Nepal has announced that a Nagarik Aarogya Karyakram -citizen Well-being program will be conducted in Tole-Tole to implement the concept of healthy Citizen, healthy society and healthy life in its policies and programs.

Department of Ayurveda & Alternative medicine (DOAA) primarily manages the delivery of Ayurveda services and promotes healthy lifestyles through its network facilities all across the country. Ayurveda works through simple and therapeutic measures along with promotive, preventive, curative and rehabilitative health of people. Ayurveda health services are being delivered through existing 2 Ayurveda Hospitals, 14 Zonal Ayurveda Dispensaries, 61 District Ayurveda Health Centres, 305 Ayurveda dispensaries and 218 new Nagarik Aarogya Kendra under establishment across the country. The primary vision of Ayurveda is to preserve & promote the health of healthy individual and alleviate the disorders in diseased. Considering Ayurveda supplements and activities that can enhance the immune system can play a positive role in the management of infectious diseases, Ayurveda and alternative medicine guideline was issued for the prevention and treatment of covid-19 which made a significant contribution to covid-19 prevention and management. A positive lifestyle, proper diet, yoga, meditation, pranayama, etc. can make a significant contribution to health promotion and rehabilitation. The Package of Essential Non-communicable Diseases (PEN) has been introduced to screen, diagnose, treat and refer Cardio Vascular Diseases, COPD, cancer, diabetes, and mental health at health posts, primary health care centers and district hospitals for early detection and management of chronic diseases within the community. Through lifestyle changes,

health confidence and intellectual morale can be increased and the mind can be purified. Considering all different aspects, it is indicative the means to stay healthy are available at home; quality health can be achieved by practicing regular Ayurveda, yoga meditation and positive lifestyle following the rules of general health. Citizen Well-being Program will help in bringing lifestyle change and help in making "Prosperous Nepal, Happy Nepali" meaningful. This will help in the promotion and rehabilitation of health care. Therefore, the Citizen Well-being Program Guideline have been issued with the support of the Department of Ayurveda and Alternative medicine to raise public awareness to the local level and bring change in the lifestyle to make the people responsible for their health by conducting citizen well-being program as a campaign.

Scope

Implementation and establishment of healthy lifestyle culture to reduce the burden of NCD's and its risk factors.

Vision

Healthy Nepali (Nirogi Nepali) through Nagarik Aarogya Karyakram (Citizen Well Being Program)

Mission

The promotion of good health and well being of people through empowering them for informed decision in an effort to prevention of non- communicable diseases and communicable diseases.

Goal

The overall goal is to make people physically, socially mentally and spiritually healthy through their own action at all levels by providing quality service of health promotion through Nagarik Arogya Karyakram.

Objectives

- Multi-sector involvement to prevent communicable and non-communicable diseases and promote My Health My Responsibility.
- Advocacy to the political leadership.
- Conduct awareness program, significant reduction of Gender-based violence, social crime and psychosomatic disorders.
- Reduction of modifiable risk factors of NCD significantly.
- To implement Nagarik Arogya karyakram to all level through community participation and engagement.

Structural arrangement

For conducting this program following committees will be formed

- Sanghiya Nagarik Aarogya Samiti (Federal Citizen Well-being Committee) at the center.
- Pradesh Nagarik Aarogya Samiti (Province Citizen Well-being Committee) in the province.
- Jilla Nagarik Aarogya Samiti (District Citizen Well-being Committee) in the district.
- Sthaniya Nagarik Aarogya Samiti (Local Citizen Well-being Committee) at the local level and
- Nagarik Aarogya Samuha (Citizen Well-being groups) at the ward level will be formed.

Challenges

- The biggest challenges are in terms of Resources. Continuous Appropriate Budget for human resources and logistics including infrastructure management is the key issue.
- The knowledge and attitude of the People's representatives can affect the program implementation.

Opportunities

- Acquiring community participation and volunteer mobilization in support of People's representatives, influential people, leaders, key persons in community.
- The increasing trend of non-communicable diseases and the felt need of yoga and exercise to fight against them by the people.
- The program can have funding from Federal, Provincial and Local Governments.

Activities

The following activities will be conducted under the program:

- A) Prepare central level Training of Trainers (TOT) for conducting the program.
- B) Inform the high level officials and stakeholders under the Ministry of Health and Population of the Government of Nepal.
- C) Orientation to high level officials and stakeholders under the Ministry of Social Development, Province Government.
- D) Orientation to the Chief of government, non-government offices and officials of health related organizations in the district in coordination with the district and the Province.
- E) Orientation to the local level ward chairperson, ward members and health workers through the District Citizen Well-being Committee.
- F) The Federal Citizen Well-being Committee shall conduct other activities as required.

Activities to be conducted in the campaign

To call upon the Committees constituted to carry out the following activities to make the slogan "My Health My Responsibility" meaningful by cooperating and coordinating with the Citizen Well-being Groups.

- A) Various training related to prescribed Yoga and positive lifestyle.
- B) Conduct campaign -oriented programs related to the use of local herbs, plantation and conservation.
- C) Under the slogan "My Health My Responsibility", the general public, employees, teachers, representatives of political parties, civil society, etc. will clean their houses, fire offices, chowk bazaar, road, community toilets.
- D) Conduct public awareness program related to Ayurveda lifestyle and healthy diet.
- E) Measuring healthy lifestyle of everyone present in the program.
- F) Conduct other activities as prescribed by the Federal Citizen Well-being Committee.
- G) Establish and operate hoarding board electronic display for health promotion in each district.
- H) Printing and distributing poster products for Ayurveda lifestyle, healthy diet and hygiene.
- I) Produce and broadcast audio-visual materials for health promotion in television, radio and newspapers.
- J) Use social media to fulfill the above objective.
- K) Organize competitions including rhetoric and painting related to healthy lifestyle in each ward level school.

Federal Citizen Well-being Committee

There will be 1 Federal Citizen Well-being Committee at the central level for conducting policy directives to run Citizen Well-being programs.

- A) Director General, Department of Ayurveda and Alternative Medicine - Coordinator
- B) Chief, Herbal Medicine and Research Division, Department of Ayurveda and Alternative Medicine -Member
- C) Chief, Ayurveda and Alternative Medicine Section, Ministry of Health & Population – Member
- D) Chief, Monitoring Research and Coordination Section, Department of Ayurveda and Alternative Medicine - Member
- E) Representative of Ministry of Federal Affairs and General Administration- Member
- F) Representative of Coordination Division, Ministry of Health and Population - Member
- G) Chief, Health Promotion Section, Department of Ayurveda and Alternative Medicine - Member Secretary

Duties and rights of the Federal Citizen Well-being Committee

The duties and powers of the Federal Citizen Well-being Committee shall be as follows

- A) To formulate policy regarding the programs to be carried out in accordance with Nagarik Arogya karyakram guideline.
- B) To prepare central level training of trainers for the operation of the program.
- C) Orientation at the Province level in coordination with the concerned province.
- D) To coordinate between the committees.
- E) To arrange the necessary resources to run the program.
- F) To facilitate the program systematically.
- G) To coordinate with the concerned provincial and local bodies to study the effectiveness of the achievements and contributions made from the program.
- H.) To coordinate with the concerned provincial and local bodies to monitor and evaluate the overall program.
- I) To arrange the necessary resources for the program, approve and mobilize the distribution of the received resources.
- J) To take other necessary actions to increase the effectiveness of the program.

Province Citizen Well-being Committee

There will be the following Province Citizen Well-being Committees to implement the programs provided by the Guideline.

- A) Director, Province Health Directorate - Coordinator
- B) Policy, Rules, Planning Criteria and Public Health Division Chief, Ministry of Social Development - Member
- C) Ayurveda and Miscellaneous Health section Chief, Province Health Directorate - Member
- D) Public Health Nursing Officer, Ministry of Social Development - Member
- E) Ayurveda Physician, Ministry of Social Development - Member Secretary

Duties and rights of the Province Citizen Well-being Committee

The duties and powers of the Province Citizen Well-being Committee will be as follows

- A) To manage the program at the Province level under Nagarik Aarogya Karyakram Guideline.
- B) To manage the necessary resources for the continuity of the program.
- C) To organize District level orientation.
- D) To coordinate between various bodies and parties in the Province.
- E) To facilitate the program systematically.
- F) To have the overall program monitored and evaluated.
- G) To take other necessary actions to increase the effectiveness of the program as decided by the Federal Citizen Health Committee.
- H) To report to the Federal Citizen Well Being Committee on the operation of the program and the achievements.

District Citizen Well-being Committee

There will be the following District Citizen Well-being committees to implement the programs provided by the guideline.

- A) Chief, District Coordinating Committee - Coordinator
- B) Chief, Health Office- Member
- C) Chief, Education Development Office - Member
- D) One representative working in the health sector nominated by the concerned District Coordinating Committee-member
- E) Chief, District Ayurveda Health Center - Member Secretary

Duties and rights of the District Citizen Well-being Committee

The duties and powers of the District Citizen Well-being Committee will be as follows

- A) To manage the program as per guidelines at the district level.
- B) To manage the necessary resources for the continuity of the program.
- C) Local level orientation.
- D) To coordinate between the various bodies and parties in the district.
- E) To facilitate the program systematically.
- F) To have the overall program monitored and evaluated.
- G) To take other necessary actions to increase the effectiveness of the program as per the decision of the Province Citizen Well-being Committee.
- H) To report to the Province Citizen Well-being Committee on the operation of the program and the achievements.

Local Citizen Well-being committee

There will be a committee to coordinate the implementation of the program at the local level

- A) Chief / Deputy Chief of the concerned local level- Coordinator
- B) Chief of concerned local level hospital or health institution- member
- C) Concerned local level Health section Coordinator -Member
- D) Concerned local level Education section Chief - Member
- E) Two health campaigners/ Entrepreneurs nominated by the coordinator from the concerned local level-member
- F) Chief, Ayurveda Dispensary - Member Secretary

Note: If there is no Ayurveda dispensary at the concerned local level, the concerned local level health section coordinator will be the member secretary

Duties and powers of the local Well Being Committee

The duties and powers of the Local Citizen Well-being Committee will be as follows

- A) To make policy, plan and implement the program at the local level.
- B) Orientation at ward level.
- C) To arrange resources for the program.
- D) To submit report with recommendations to the District Citizen Well-being Committee and Province Citizen Well-being Committee.
- E) To mobilize volunteers and entrepreneurs.
- F) To facilitate for improvement by monitoring the program.
- G) To perform other works as prescribed by the Federal Citizen Well-being Committee and the Province Citizen Well-being Committee.

Citizen Well-being Group

Citizen Well-being Groups will be formed at the ward level to conduct the program and coordinate the necessary activities.

Chairperson of the concerned ward – coordinator

Members - representatives

- Chief of health institution in Ward.
- Principals of Public school in the respective Ward.
- Representative of Mother group (Ama Samuha)
- Women's Health Volunteer (Mahila Swastha swayemsevika)
- Local social workers

Note: The ward may add members to the Citizen Well Being Group as required. Coordinator may appoint one member to work as Member secretary.

Duties and rights of the Citizen Well-being Group

The duties and rights of the Citizen Well-being Group will be as follows

- A) To implement the program in Tole- Tole to make the slogan "My Health My Responsibility" meaningful.
- B) To mobilize resources for the program.
- C) To mobilize volunteers and Entrepreneur.
- D) Collectively arrange orientation on Yoga Asanas, Pranayama meditation and positive lifestyle training and measuring healthy lifestyle assessment of all present in collective programs.
- E) Introduce local herbs as specified, use campaign and conservation campaign-oriented programs.
- F) To carry out ward level cleanliness sanitation work with the participation of each Tolbasi.
- G. To conduct public awareness program on Ayurveda lifestyle and healthy diet.
- H) To give regular reports to the local level.
- I) To conduct activities under the citizen health program even at the school level.
- J) To do other work as prescribed by the local citizen health committee.

Outcomes

The following achievements of the program will be achieved

- Increased community participation and engagement in citizen well being program (major 4 level committee- Federal, Provincial, district and local level with sub-committee within local level)
- Adoption of improved healthy lifestyles and better environment.
- Reduce morbidity and mortality from NCD.
- Increased health seeking behavior of people.
- Increasing social harmony and sustainable awakening of good national spirit through the spontaneous use of its national health system will support social harmony and overall national unity through health.

Achievements and Progress

The guideline was an important milestone. The program is given priority and emphasis as it is kept in National Policy. Understanding Importance of Nagarik Aarogya Karyakram in developing Nirogi Nepal it has been kept as the 1st Priority program of Department of Ayurveda & Alternative Medicine.

Activities conducted

- Two Orientation Training at Province Level were done which were held at Nepalgunj for Provinces 5, 6, 7 and at Hetauda for Provinces 1, 2, 3, 4 with the support of Department of Ayurveda & Alternative Medicine in 2076.
- Nagarik Aarogya Awareness programs and Yoga Awareness Programs have been done.
- Television talk shows conducted, various supporting Tools have been developed till date – Healthy Lifestyle assessment tool developed- Mero Swastha Mero Jimmebari App,
 - Yoga Video developed for awareness
 - <https://youtu.be/SATJT-YGY-A>
 - <https://youtu.be/XYjYfzhG9sg>
 - <https://youtu.be/2tBBR0uwHts>
 - Other IEC under development phase.
 - Establishment of Nagarik Aarogya Kendra -218 outlets, many established and functioning, some under implementation.
 - Establishment of three Open Vyayamashala.

Scope of Implementation Plan

The Nagarik Aarogya Karyakram-Citizen Well-being program Implementation Plan will bring the Nagarik Aarogya Karyakram- Citizen Well-being program into action. The Federal Citizen Well-being committee supported by Department of Ayurveda and Alternative medicine will lead the implementation with participation of line ministries, Federal, Provincial and local bodies, development partners, nongovernmental agencies, civil society, private sector, cooperatives and local communities. The implementation plan is developed to achieve the outputs of Nagarik Aarogya Karyakram - Citizen Well-being program and ultimately its outcome and goals. This plan will be implemented between the fiscal years 2021 to 2026.

Year	Year 1 (Y1)	Year 2 (Y2)	Year 3 (Y3)	Year 4 (Y4)	Year 5 (Y5)
Nepali Fiscal Year	2078/2079	2079/2080	2080/2081	2081/2082	2082/2083
English Fiscal Year	2021/2022	2022/2023	2023/2024	2024/2025	2025/2026

Orientation

It is necessary to provide orientation training from the concerned Citizen Well-being committee before conducting the program. Federal Citizen Well-being Committee will help in orientation and also provide support to Province Citizen Well-being Committee. Province Citizen Well-being Committee will provide necessary support and help

in orientation to District Citizen Well-being Committee. District Citizen Well-being Committee will help in orientation, and provide necessary support for Local Citizen Well-being Committee. The Citizen Well-being Committee and the Citizen Well-being groups have to make an action plan including the necessary allocation of manpower, target group, etc. to be involved in the time and place of the program before the program is conducted and the responsibility of running the program. While conducting the program, the Citizen Well-being committees will have to discuss and decide on the program in the preparatory meeting. Ayurveda Physician, Ayurveda Health worker will be responsible for providing all technical help.

Stakeholder Analysis

Federal, Province and local government have varying influence, position and potential impact in NCD prevention and control. Depending on their area of influence and responsibilities, implementation of activities can be performed. Many different initiatives are being enforced for health promotion and NCD prevention. The stakeholders have overlapping roles in enforcement and service delivery functions. The regulatory agencies, enforcement bodies, service providers need to ensure pragmatic mechanisms of coordination for planning, implementation and sharing lessons for NCD prevention and control. In addition to the government agencies, the civil societies, Tol Bikas santha, non-governmental organizations and private enterprises also have influence and opportunity in incorporating Ayurveda and alternate medicine practices to build healthy behavior lifestyles for the prevention and control of NCDs.

Responsible Person and Coordinator

Citizen Well-being Committee will be responsible for running the program within the stipulated time. The Citizen Well-being Committee headed by coordinator of Citizen Well-being Committee will assign responsible persons for the planned activities. In order to run the program, coordination can be made with other technical staff in Ayurveda institutes. Ayurveda and alternative medicine institutions will provide structural and technical support in respective areas. DOAA will provide all necessary support for Federal Citizen Well-being Committee. Province Ministry of Social Development will also provide necessary support for Province Citizen Well-being Committee. District level Ayurveda Institution will provide necessary support for District Citizen Well-being Committee. District Ayurveda Institution and Ayurveda Aushadhalaya will provide necessary support for local Citizen Well-being committee. Areas where Ayurveda Aushadhalaya are not present Nagarik Aarogya Kendra will support. In absence of Ayurveda and Alternative medicine health centre, available health post or centre will provide necessary support for Local Citizen Well-being Committee.

The Federal Citizen Well-being Committee will be formed with support from DOAA immediately within first 3 months under the implementation phase. The responsibility of forming the committee will be initiated by Member Secretary, Chief of Health Promotion Branch, Department of Ayurveda and Alternative Medicine with the support from the coordinator Director General DOAA. The Province Citizen Well-being Committee will be formed immediately after orientation by Federal citizen Well-being Committee within next 2 months under the implementation phase. The responsibility of forming the committee will be initiated by Member Secretary Ayurveda Physician, Province Ministry of Social Development with the support from the Director Province Health Directorate. The District Citizen Well-being Committee will be formed immediately after orientation by Province Citizen Well-being Committee under the implementation phase. The responsibility of forming the committee will be initiated by Member Secretary Ayurveda Physician, with the support from the coordinator. The Local Citizen Well-being Committee will be formed immediately after orientation by District Citizen Well-being Committee under the implementation phase. The responsibility of forming the committee will be initiated by Member Secretary Ayurveda health worker, with the support from the coordinator. Technical assistance regarding orientation will be provided by District citizen Well-being Committee and Ayurveda Physician. The District Citizen Well-being Committee coordinated by District Ayurveda Institution will take the responsibility of motivating to establish Local Citizen well being committee at Least in all respective areas of presence of Ayurveda Aushadhaya and Nagarik Aarogya Kendra in first year. Each Local Citizen Well-being committee will establish Citizen Well-being group in at least 5 wards in their respective place in first year. Volunteers and Entrepreneur identification and recruitment will be done with the support of influential or key persons in community. The primary responsibility will be with the Chief or responsible staff of Ayurveda and Alternative medicine health centre.

Program Operation

Depending on the nature of the program, public awareness message and service oriented programs should be conducted within the stipulated time frame to achieve the specified objectives. The program activities include existing activities of Ayurveda & Alternative medicine health centre and few entirely new actions/activities. Continuing existing activities, strengthening, restructuring and adding new activities for health promotion will be promoted. School Ayurveda and Yoga Education Program will also support during implementation at school activities. Programs conducted for health awareness and well-being will be conducted in coordination with Citizen Well-being program. During program operation, community participatory approach, society, family and individual approach to make aware and meaningful regarding "My Health My Responsibility" will be adopted.

Resource Management and Coordination

The total cost for committee formation, orientation and activities over the five years of implementation is estimated to be NPR 475.9 Millions. This implementation plan, developed primarily in 2021, may need some adjustments to these initial estimates. Resource management will be as directed by citizen Well-being Committee in accordance with the financial guidelines. A separate citizen well being fund can also be established out of the amount collected from the Government of Nepal, Province Governments, Local Level, non-governmental and private organization and institution. Prioritization of available local resources, herbs and manpower will be motivated. Necessary contact and coordination should be made to cooperate with the locally active non-profit organizations. The primary responsibility lies in the member secretary and coordinator in coordination with supporting Ayurveda Institution. The resources of other Program with similar theme will be merged during preparation of implementation plan Guideline at province and district level. Province Government and Local Level need to support the campaign activities through finance and other logistics for achieving the desired outcomes.

Records and Data Management

Record data should be managed as per the prescribed form. Records of the voluntary activities, service recipients of yoga groups and healthy lifestyle assessment as per the approved program must be kept in the register and should be sent to District Ayurveda Institution every month which should further be recorded in Ayurveda AIMS. The data should also be sent to the higher Citizen Well-being Committee every 6 month. The progress and program report mentioned in the annual target of the approved programs must be prepared by Province Citizen Well-being committee and sent to the Federal Well-being Committee and DOAA.

Monitoring and Supervision

The monitoring and supervision of the program within the district will be done by District Citizen Well-being committee with the support of Province Citizen Well -being committee. Overall monitoring and supervision of the program at province level will be done by Province Citizen Well -being committee with support of Federal Citizen Well -being committee and DOAA.

Limitations

The limitations of this document is that it is based within the frame and programs mentioned in Nagarik Aarogya Karyakram a Guideline 2076.

Implementation Plan

Strategies	Target	Activities	Responsibility	Supporting Agency	Timeframe					Resources / Amount in Thousand
					Y1	Y2	Y3	Y4	Y5	
1. Committee Formation and orientation	1	Federal Citizen Well-being Committee Formation and orientation	Coordinator & member secretary, DOAA	MOH&P	Q1					150
	7	Province Citizen Well-being Committee Formation and orientation	Coordinator & member Secretary Province Health Directorate, Ministry of Social Development	DOAA	Q2					700
	77	District Citizen Well-being Committee Formation and orientation	Coordinator & member secretary. District level Ayurveda Institution & Province Citizen Well-being Committee	Province Health Directorate, Ministry of social Development	Q2					3850
	500	Local Citizen Well-being Committee Formation and orientation	Coordinator & member secretary, Local Ayurveda Institution	District level Ayurveda Institution	Q3					50000
	150	local Citizen Well-being Committee Formation and orientation	Coordinator & member secretary, Local Ayurveda Institution	District level Ayurveda Institution	Q2					15000
	103	local Citizen Well-being Committee Formation and orientation	Coordinator & member secretary, Local Ayurveda Institution	District level Ayurveda Institution		Q2				10300
	2500	Citizen Well -Being Group Formation and Orientation	Coordinator, local Citizen Well-being Committee, Ayurveda Aushdhalaya, Nagarik Aarogya Kendra	local Citizen Well-being Committee	Q3					
	2500	Citizen Well -being Group Formation and Orientation	Coordinator, local Citizen Well-being Committee, Ayurveda Aushdhalaya, Nagarik Aarogya Kendra	local Citizen Well-being Committee	Q3					
	1743	Citizen Well -Being Group Formation and Orientation	Coordinator, local Citizen Well-being Committee, Ayurveda Aushdhalaya, Nagarik Aarogya Kendra	local Citizen Well-being Committee			Q3			
	1	Organizing interaction program with officials from MoHP, MOSD and stakeholders from National and International Agencies	Federal Citizen Well-being Committee, DOAA	MoHP		Q2				

Strategies	Target	Activities	Responsibility	Supporting Agency	Timeframe					Resources / Amount in Thousand
					Y1	Y2	Y3	Y4	Y5	
2. Policy regarding the programs	1	Meeting / Interactive Workshop to develop the program implementation guideline , Review and finalize on healthy lifestyle assessment tool on existing App	Federal Citizen Well-being Committee , DOAA	MoHP	Q2					500
	1	Review of Existing Policies, plan and Programs New Policy input or changes in need in accordance with Guideline.	Federal Citizen Well-being Committee , DOAA	MoHP		Q2				1000
3.Capacity building	3	Development and publication of Training Manual, Facilitator guideline, participant Hand Book	Federal Citizen Well-being Committee DOAA	NHTC	Q3					5000
	1	Organizing M -TOT Training	Federal Citizen Well-being Committee DOAA			Q1				1000
	7	Organizing -TOT Training	Province Citizen Well-being Committee, MOSD	DOAA		Q3				3500

Strategies	Target	Activities	Responsibility	Supporting Agency	Timeframe					Resources / Amount in Thousand	
					Y1	Y2	Y3	Y4	Y5		
4. Campaign Activity	Y1-500+77	Public awareness Campaigning of healthy life style, healthy diet	Local Citizen Well-being Committee, Ayurveda Aushadhalaya, Nagarik Aarogya Kendra	District level Ayurveda Institution	Q3	Q3	Q3	Q2	Q2	Q2	Y1- 57700
	Y2-650+77									Y2- 72700	
	Y3-753+77									Y3-83000	
	Y4-753+77									Y4-83000	
	Y5-753+77									Y5-83000	
1	Produce and Broadcast a audio, audio-visual material for health in television, radio and social media.	Federal Citizen Well-being Committee, DOAA		Q3						3000	
	Printing poster products for Ayurveda lifestyle, healthy diet and hygiene.	District Citizen Well-being Committee & Local Citizen Well-being Committee, Ayurveda Health Institution	District level Ayurveda Institution							Campaign Activity resource at District level and additional support with Local resources -100	
	Campaign for environment conservation and pollution control, Water treatment at home for drinking, Cleaning Campaign -houses, offices, chowk bazaar, road, community toilets, water resources and dumping sites	Local Citizen Well-being Committee & Citizen Well-being Group involving general public, employees, teachers, representatives of political parties, civil society	Ayurveda Aushadhalaya, Nagarik Aarogya Kendra, Tol Bikas Sanstha, Clubs							Local, province resource - 100 for each Local Citizen Well-being Committee,	
	Campaign on 5 medicinal herbs at home and 25 medicinal plants at surrounding	Individual and Families, Local Citizen Well-being Group	Ayurveda Aushadhalaya, Nagarik Aarogya Kendra, Tol Bikas Sanstha, Clubs							Local resources -100	
	Campaign to Establish and operate hoarding board electronic display for health promotion at the appropriate site of District Headquarter	District Citizen Well-being Committee,	District Ayurveda Health Institution							Province resources-100	

Strategies	Target	Activities	Responsibility	Supporting Agency	Timeframe					Resources / Amount in Thousand
					Y1	Y2	Y3	Y4	Y5	
		Campaign on awareness against health hazardous traditions and Quack Practices and so on	District Citizen Well-being Committee, District Ayurveda Health Institution,	DAO						Province resources
	organize at least any 2 activities	School Awareness program in coordination with School Ayurveda and Yoga Program -organize Competitions related to health lifestyle in ward level school and Distribute Certificate : -Painting -Quiz -Inter school eloquence -Essay	Citizen Well-being Group in coordination with local Citizen Well-being committee, Ayurveda Health Institution	Education Development and Coordination Unit (EDCU)						Local resources
	Routine activity	Campaign on mass yoga Asanas, Pranayama meditation and positive lifestyle through yoga club/group formation	Citizen Well-being Group Local Citizen Well-being Committee & Existing Yoga Samiti if present.	Ayurveda Aushadhalaya, Nagarik Aarogya Kendra, Tol Bikas Sanstha, Clubs						Campaign activity resources and local resources

Strategies	Target	Activities	Responsibility	Supporting Agency	Timeframe					Resources / Amount in Thousand
					Y1	Y2	Y3	Y4	Y5	
5.Measuring healthy lifestyle	once a year in every individual	Measurement and Recording of Lifestyle Assessment With Questionnaire and App , Assess the unhealthy behavior of people	Local Citizen Well-being Group, Ayurveda Health Institution & Nagarik Aarogya Kendra,	Local Citizen Well-being Committee, District Ayurveda Health Institution,						Campaign activity resources and local resources
	At least once a year reach in every individual home	Home visit and Lifestyle Assessment and Family record data	Citizen Well-being group in support of Aushadhalaya & Nagarik Aarogya Kendra,	Local Citizen Well-being Committee						Campaign activity resources and local resources
	Regular activity	Consultation Regarding Lifestyle Change / Modification	Ayurveda Health Institution & Ayurveda Aushadhalaya & Nagarik Aarogya Kendra	Local Citizen Well-being Committee, District Ayurveda Health Centre,						-
		Adding New Initiatives like Herbal decoction Any 1 new initiative at Group	Citizen Well-being Committee, District Ayurveda Health Institution & Ayurveda Aushadhalaya	Local Citizen Well-being Committee, District Ayurveda Health Institution ,						

Strategies	Target	Activities	Responsibility	Supporting Agency	Timeframe					Resources / Amount in Thousand
					Y1	Y2	Y3	Y4	Y5	
6. Recording and reporting	Regular activity	Data Collection and Recording in Registers	Citizen Well-being Groups, Ayurveda Aushadhalaya &, Nagarik Aarogya Kendra,	Local Citizen Well-being Committee, District Ayurveda Health Institution						-
	Every month	Gathering local Well-being group level data on progress of program and sending to district every month	Ayurveda Aushadhalaya &, Nagarik Aarogya Kendra, Every month From Aushadhalaya to District and then to AIMS	District Ayurveda Health Institution ,						-
	Once in 6 months	Report Preparation and Submission with recommendations to Provincial Citizen Well-being Committee and from there to Federal Citizen Well-being Committee	District Ayurveda Health Institution, Provincial Citizen Well-being Committee	MOSD						-
7. Monitoring, supervision and evaluation	Yearly	Co-ordinate with the concerned local bodies in monitoring and supervision	Province Health Directorate with support of DOAA							-
	Yearly	Review along with the other program review	Province directorate DOAA							-
	1	Research study on the effectiveness and contributions made from the program, Behavioral change, Community indicators of changes	Federal Citizen Well-being Committee , DOAA					Q1- Q2		1000
8. Resource Management	1	Publication of the achievements	Federal Citizen Well-being Committee , DOAA					Q3		1000
	Yearly	Resource distribution to Province, District and Local Committees	Federal Citizen Well-being Committee, DOAA	MOH&P						-
		Mobilize Local Community Resources, Proper Collection, Distribution to Citizen Well-being groups, Utilization	Local Citizen Well-being Committee & Tol Bikas Sanstha	Local government						-

Financial Resources Required

Year	Y1 2078/2079	Y2 2079/2080	Y3 2080/2081	Y4 2081/2082	Y5 2082/2083	Total
Federal Citizen Well-being committee	8650	1500	1000	-	2000	13150
Province Citizen Well-being committee	700	3500	-	-	-	4200
District Citizen Well-being committee	11550	7700	7700	7700	7700	42350
Local Citizen Well-being committee	100000	15000+ 65000=80000	10300+75300 =85600	75300	75300	416200
Total	120900	92700	94300	83000	85000	475900

Indicators

S.N	Indicators	Baseline Data	Milestone					Target	Data Source	Monitoring frequency	Responsible Agency
			Y1	Y2	Y3	Y4	Y5				
1	No. of Committee formulated	NA	585	150	103			838	DOAA	Annual	DOAA, PHD,MOSD
2	No. of Group Formation	NA	2500	2500	1743			6743	DOAA	Annual	Local Committee
3	No. of Trainings& Participants	NA	8 &90					8 &90	DOAA	Annual	DOAA
4	No. of Yoga club formation	NA		500	500	2500	2500	6000	DOAA	Annual	Local Committee
5	No. of household reached for Assessment	NA		125000	125000	125000	125000	500000	DOAA	Annual	Local Committee & Ayurveda Health Institution
6	No of risky population for lifestyle consultation	NA		25000	25000	50000	50000	150000	DOAA	Annual	Ayurveda Health Institution
7	% of Citizen well being committees conducting Campaign Activities	NA	69.8	87.7	100	100	100	100	DOAA	Annual	DOAA
8	% of population reached for assessment and health promotion	NA		4	4	4	4	16	DOAA	Annual	DOAA
9	% of local citizen well-being committee reporting to District and then to electronic Ayurveda Information Management System(AIMS)	NA	66.4	86.3	100	100	100	100	AIMS	Annual	DOAA

Contributor list

1. Dr. Vasudev Upadhayay, Director General, Department of Ayurveda & Alternative Medicine, MOHP, Teku, Kathmandu, Nepal.
2. Dr. Pradeep KC, Director, Ayurveda Hospital, Nardevi, MoHP, Kathmandu, Nepal.
3. Dr Munkarna Thapa, Senior Ayurveda Consultant, Division Chief, Department of Ayurveda & Alternative Medicine, MoHP, Teku, Kathmandu, Nepal.
4. Dr. Shyam Babu Yadav, Senior Ayurveda Consultant, Division Chief, Department of Ayurveda & Alternative Medicine, MoHP, Teku, Kathmandu, Nepal.
5. Dr. Baburaja Amatya, Senior Ayurveda Consultant, Policy, Planning and Monitoring Division, MoHP, Kathmandu, Nepal.
6. Dr. Bamshdeep Kharel, Managing Director, Singhdarvar Vaidyakhana Vikas Samiti, MoHP, Kathmandu, Nepal.
7. Dr. Bhakta Bahadur K.C. Chief, Health Promotion and Tobacco Control Section, NHEICC, MoHP, Kathmandu, Nepal.
8. Dr. Guna Nidhi Sharma, Senior Health Administrator, Policy, Planning and Monitoring Division, MoHP, Kathmandu, Nepal.
9. Dr. Krishnaraj Parajuli, Ex- Director General, Department of Ayurveda, MOHP, Teku, Kathmandu, Nepal.
10. Dr. Kasiraj Subedi, Assistant Professor, Ayurveda Campus, Tribhuvan University, Kirtipur, Kathmandu, Nepal.
11. Dr. Buddhi Prasad Poudel, Consultant Ayurveda, Health Directorate, Gandaki Province.
12. Dr. Ramchandra Pandey, Ayurveda Physician, Ayurveda Hospital, Nardevi, MoHP, Kathmandu, Nepal.
13. Dr. Santosh Kumar Thakur, Ayurveda Physician, Department of Drug Administration, MoHP, Bijulibazar, Kathmandu, Nepal.
14. Dr Puneshwar Keshwari, Ayurveda Physician, Department of Ayurveda & Alternative Medicine, MoHP, Teku, Kathmandu, Nepal.
15. Dr. Narayan Shrestha, Ayurveda Physician, Department of Ayurveda & Alternative Medicine, MoHP, Teku, Kathmandu, Nepal.
16. Dr. Prakash Gyawali, Ayurveda Physician, Department of Ayurveda & Alternative Medicine, MoHP, Teku, Kathmandu, Nepal.
17. Dr. Bikas Raj Ghimire, Consultant Kayachikitsa, National Ayurveda Research and Training Centre, MoHP, Kirtipur, Kathmandu, Nepal.
18. Dr. Pratibha Tripathi, Assistant Professor, Dept. of Swasthavritta, Ayurveda Campus, Tribhuvan University, Kirtipur, Kathmandu, Nepal.
19. Dr. Suchit Kumar Sharma, Ayurveda Physician, Ministry of Social Development, Province No.2.
20. Dr. Rupendra Puri, Ayurveda Physician, Policy, Planning and Monitoring Division, MoHP, Kathmandu, Nepal.
21. Dr. Rabindra Niraula, Ayurveda Physician, Ministry of Social Development, Province No.1

22. Dr. Chetraj Joshi, Ayurveda Physician, Ministry of Social Development, Far west Province.
23. Dr. Pushpa Raj Poudel, Ayurveda Physician, Ministry of Social Development, Province- 5.
24. Dr. Robin Bhusal, Ayurveda Physician, Ministry of Social Development, Bagmati Province.
25. Dr. Yadav Prasad Upadhay, Ayurveda Physician, Ministry of Social Development, Karnali Province.
26. Dr. Achyut Acharya, Ayurveda Physician, Kathmandu, Nepal.
27. Mr. Khimraj Rijal, Senior Kabiraj Nirikshak, Department of Ayurveda & Alternative Medicine, MOHP, Teku, Kathmandu, Nepal.
28. Mr. Govinda Dhakal, Senior Kabiraj Nirikshak, Department of Ayurveda & Alternative Medicine, MOHP, Teku, Kathmandu, Nepal.
29. Mr. Narayan Prasad Acharya, Senior Kabiraj Nirikshak, Chandragiri Municipality, Kathmandu, Nepal.
30. Mr. Bishnu Maya Shrestha, Senior Kabiraj Nirikshak, Department of Ayurveda & Alternative Medicine, MOHP, Teku, Kathmandu, Nepal.
31. Bishworaj Nepal, Under Secretary, Department of Ayurveda & Alternative Medicine, MOHP, Teku, Kathmandu, Nepal.
32. Mr. Surya prasad Bhusal, Account Officer, Department of Ayurveda & Alternative Medicine, MOHP, Teku, Kathmandu, Nepal.
33. Mr. Lal Bahadur Shrestha, Section officer, Department of Ayurveda & Alternative Medicine, MOHP, Teku, Kathmandu, Nepal.
34. Mrs. Sobha Pandey, Nayab Subba, Department of Ayurveda & Alternative Medicine, MOHP, Teku, Kathmandu, Nepal.
35. Mr. Niroj Pokherel, Account Assistant, Department of Ayurveda & Alternative Medicine, MOHP, Teku, Kathmandu, Nepal.
36. Dr Khurshid Alam Hyder, Public Health Administrator, WHO Nepal.
37. Kimat Adhikari, National Professional Officer, Health System Development, WHO Nepal.
37. Rudra Thakuri, WHO Nepal.
38. Dr Nirmal Bhusal, Consultant, WHO Nepal.



Government of Nepal
Ministry of Health and Population
Department of Ayurveda and Alternative Medicine



**World Health
Organization**

Nepal