



MEDICAL PROGRAMME



THE GURKHA WELFARE TRUST (GWT)

The Gurkha Welfare Trust has been working in Nepal since 1969 to “relieve poverty and distress among Gurkha veterans, their dependants and their communities”. As the lead charity for Gurkha welfare, the GWT provides financial, medical and community aid, primarily in Nepal. The Trust’s main priority is the provision of a monthly pension of 10,500 Nepalese Rupees (roughly £81.00) to 5,082 retired Gurkha soldiers or their widows, who often have no other form of income.



In addition to this, the Trust also offers

- **Financial aid:** A Winter Fuel Allowance is paid to all pensioners, and Hardship Grants and Disability Grants are also paid to those with additional needs.
- **Rural Water and Sanitation Programme:** Each year 80 water and sanitation projects are installed, providing clean water and teaching communities how to maintain personal and community hygiene.
- **Schools Programme:** The Trust builds, extends and repairs schools in remote hillside villages, so far benefiting over 600,000 children.
- **Medical Care:** The Trust offers medical care to pensioners and the wider community. This is done at our Area Welfare Centres, in the pensioners’ homes, and at our regular mobile medical camps.
- **Residential Homes:** Our two Residential Homes provide 24-hour care for 52 vulnerable pensioners.
- **Community Centres:** The Trust is building four Community Centres a year to serve as health posts, and a base in times of emergency, as well as a place to meet and celebrate as a community in everyday life.

We have 21 Area Welfare Centres in Nepal, each responsible for ensuring community projects are run smoothly and that local veterans have access to welfare and medical support 24 hours a day, 365 days a year. A workforce of 400 staff is managed from a HQ in Pokhara which is, in turn, managed from an office in the UK.

THE EARTHQUAKES

On 25th April 2015, the first of a series of earthquakes and aftershocks hit Nepal. At a magnitude of 7.8, it was the country’s largest natural disaster in over 80 years. On 12th May, there was an aftershock measuring 7.3, a magnitude so high that it was considered a second earthquake. Since then, Nepal has suffered over 500 aftershocks measuring a magnitude of 4+. Over 8,600 people were killed and around 23,000 injured. Kathmandu and the surrounding areas suffered extensive damage to buildings and in the more rural areas, far from help of any kind, entire villages were completely levelled. More than half a million houses were destroyed, leaving around 3 million people homeless.

As an immediate response, the Trust sent out teams of welfare and medical staff to assess the damages, offer emergency aid and to check on the wellbeing of our pensioners, many of whom live in the most remote villages in the hills. It took our staff just over a month to visit them all; sadly, 13 of them were killed and many more lost loved ones. The damage caused was catastrophic:

- 2,129 pensioners’ homes were either damaged or destroyed.
- 161 schools, 78 water systems, and 14 of our 21 Area Welfare Centres were damaged.

Our long-term support to rebuild Gurkha communities includes rebuilding schools and water systems, providing community support, and expanding our medical programme. And thanks to the generosity of our supporters, over 1,000 pensioner homes destroyed in the earthquakes have now been rebuilt.





OUR MEDICAL PROGRAMME



Nepal's national health service is underdeveloped and access to medical care can be limited, especially in rural areas. Our Medical Programme offers primary and secondary health care to Gurkha veterans and their families:

- Free check-ups and medication are available to our Welfare Pensioners at our AWCs, with GP surgeries being held during pension payment weeks to minimise repeat journeys.
- Our mobile medical staff trek deep into the hills to treat housebound pensioners, and distribute medication and equipment.
- If hospital care is needed, patients are referred to carefully selected government hospitals with costs subsidised by the Trust.

We also hold regular Mobile Medical Camps each year, offering free GP and gynaecological checks, dental extractions, cataract operations and other minor surgeries to remote communities across Nepal. More than 10,500 people benefited from advice and treatment at six Medical Camps last year, and we completed 348 cataract operations, 1,833 dental extractions and 2,411 gynaecological procedures.

THE CHANGING NEEDS OF OUR PENSIONERS

Although the Trust already runs a first-class Medical Programme in Nepal, the changing needs of our beneficiaries must be taken into consideration. Half of our Gurkha pensioners are now aged over 80 and many suffer from chronic age-related conditions. To better support them, we are currently rolling out new Western-style medical clinics at our Area Welfare Centres which will be furnished and equipped accordingly. With quicker diagnosis and enhanced medical support, we can help our pensioners to enjoy an independent and healthier lifestyle for longer. However, with their increasing age, some of our pensioners are now finding it too difficult to travel to our AWCs to receive care.

The most common medical conditions among our pensioners are hypertension, diabetes, osteoarthritis, respiratory disease and digestive disorders. In cases where they are too frail or unwell to travel to their local Area Welfare Centre to collect their Welfare Pension or visit our medical staff, our staff now go out to their homes to deliver the pension and check on their health and wellbeing, as part of our new integrated Pensioner Support Team (PST) initiative.



The Trust will spend approximately £3.5 million this year on medical care.

MEDICAL CLINICS

Our Gurkha pensioners are ageing as a group and their health needs are changing, with many of them now suffering from chronic age-related conditions such as dementia, arthritis, and cardiovascular disease. All our Welfare Pensioners and their dependants are able to access free medical care and advice via medically trained staff located at each of our AWCs. Following a recent independent review of our Medical Programme, we are further enhancing our primary medical care provision to our beneficiaries by rolling out new Western-style medical clinics, and equipping them accordingly.

These new clinics are being established within our existing Area Welfare Centre buildings, and the project consists of a major upgrade of the existing rooms which are currently used for our medical care provision. We completed the first of these new medical clinics during our financial year 2016/17, at our Area Welfare Centres in Kaski and Gorkha, and completely refurbished the existing consulting rooms, pharmacies and dispensaries to bring them in line with first-world standards, providing them with state of the art equipment including ECG machines, defibrillators and oxygen supplies.



State of the art equipment at the new Kaski clinic



The new treatment room

This year, we are rolling out to a further nine of our Area Welfare Centres, working in order of priority of need and beginning with key locations at Dharan, Bagmati, Damak and Butwal, each of which sees a particularly high footfall of Gurkha pensioners and dependants requiring medical care and support from our qualified medical staff. These new Western-style medical facilities will provide an enhanced level of cleanliness, comfort and professionalism, and enable us to treat the medical needs of our elderly pensioners much more effectively.

We intend to complete the whole project by the end of our financial year 2018/19, to enable us to provide a higher standard of medical care to brave Gurkha veterans in their final years.



Patients in the new Kaski clinic reception area

This year, it will cost an average of around £33,000 to refurbish and equip one medical clinic.

PENSIONER SUPPORT TEAMS



Many of our pensioners live high up in the hills

Now that many of our pensioners are very elderly and infirm, and taking into account the rough, often dangerous terrain of many areas in Nepal which prevents them travelling to their nearest AWC for health care, our medical staff often visit them in their own homes to perform check-ups and issue medication or equipment.

Over the past year, our mobile medical staff have begun to work ever more closely with our Area Welfare Officers, and have now formed integrated Pensioner Support Teams (PSTs). These enable a more joined-up package of care to include both financial and medical support at the point of visiting our most vulnerable pensioners in their own homes.



A widow being assessed for further support



A Pensioner Support Team preparing to visit vulnerable pensioners

The new PSTs are being deployed out of a cluster of AWCs and assess each pensioner's needs more holistically, offering advice to their carers and helping them to access appropriate medical care, specialist equipment, or welfare grants as appropriate.

This means that our teams are now working more efficiently for the greater benefit of our pensioners who, whatever help or advice they need, no longer have to embark on a long and treacherous journey to their nearest AWC to receive it.

Head of Logistics Krishna Dhoj Shahi BEM recently commented on the benefits of our Pensioner Support Team initiative: *“Most significantly, old and frail pensioners do not have to travel to the AWC to collect their pension as well as have regular medical check-ups. We are now providing the services at their doorstep...The most challenging aspect for the team is the geographical nature of Nepal. Some of our pensioners live in the most remote parts of the country. The roads are all gravel and dirt roads, and even then sometimes we are required to walk for hours to reach their homes.”*

Our mobile medical care has therefore been made easier by the provision of motorbikes to each of our AWCs, enabling our dedicated staff to reach vulnerable pensioners in remote locations much more quickly and safely, and reducing journey times by days in some instances. On a recent two-day field trip, our Pensioner Support Team visited ten Welfare Pensioners - without the use of motorbikes, some of these pensioners would have been extremely hard to reach, and the whole journey would have taken several days.



Motorbikes help our staff to navigate all kinds of difficult terrain

The rough Nepali terrain means that vehicle accidents are common, and our staff therefore need to have advanced riding skills. Our aim is to ensure the highest possible safety of our project teams so that they can reach our most vulnerable pensioners without putting themselves at unnecessary risk, and we have worked closely with the Institute of Advanced Motoring to design a bespoke package for our mobile staff at highly preferential rates.



The course will be delivered by two IAM trainers to twenty delegates at our Headquarters in Pokhara, Nepal over the course of nine days, and will cost £8,500.





OUR FINANCES

	2016/17
Incoming Resources	
Donations and Gifts	£7,830,000
Legacies	£4,200,000
Grants	£4,575,000
Investment Income	£2,538,000
Other Income	£568,000
Total	£19,711,000
Outgoing Resources	
Direct Charitable Expenditure	£18,907,000
Fundraising/Publicity	£1,827,000
Other Outgoing Resources	£325,000
Total	£21,059,000
Operating Surplus/(Deficit)	(£1,348,000)
Gains/(Losses) on Investments	
Realised	£606,000
Unrealised	£5,898,000
Movement in Constructive Obligation	(£975,000)
Net Movement in Funds	£4,181,000
Funds Brought Forward	£20,486,000
Total Net Assets	£24,667,000
Restricted Funds	£133,000
Designated Funds	£12,151,000
General Unrestricted Funds	£12,383,000

In 2016/17 GWT had an income of £19,711,000 and expenditure of £21,059,000, with our main source of income being charitable donations, legacies and government grants.

The Trust has a long-term Constructive Obligation, as defined by SORP 2015, in respect of its Welfare Pensions. This considers the level of benefit agreed for Welfare Pensions for the year, taking into account the inflation rate, an estimation of 5,325 pensioners with an average age of 79.28, and that on the death of an ex-Gurkha the pension will be transferred to a surviving widow. There are also Gurkhas from the British and Indian Armies not in receipt of a Service Pension who may apply for a Welfare Pension in the future. After taking the Constructive Obligation into account, the Trust's free reserves, which exclude tangible fixed assets, amount to £10,557,000. This represents 70% of the desired level of reserves.

Nepal is a volatile and unpredictable country in which to operate. Over the past 10 years the country has been affected by a Maoist revolution, major earthquakes, blockades, and an inflation ranging from 2.3% to 13.8%. In this environment, the trustees have decided they should hold around one year's regular expenditure, £15m, as reserves to enable us to meet most of the unexpected risks. In these published accounts, we are £4.4m short of our objective.



MONITORING AND EVALUATION

The GWT monitors its projects to ensure that each one is done efficiently, effectively, and will have a sustainable impact on society. The Trust is very experienced in this line of work, having completed many projects in the past, and has a good understanding of Nepal. We produce progress and completion reports. After a build has finished, we conduct regular visits to monitor the state of the buildings and assess the quality and level of maintenance.

The Trust has significant connections and relationships with central and local government and civil society. At a national level, all our projects are sanctioned by the Brigade of Gurkhas' Welfare Coordination Committee (BGWCC) at an annual meeting chaired by Nepal's Defense Secretary and attended by the Secretariats of various Nepal Government Ministries. Our community projects are certified and endorsed by the Village Development Committees (VDC) and District Development Committees (DDC) prior to commencement. School projects are also agreed with the School Management Committees (SMC). All projects are then included in the District Development Plan (DDP). Our staff attend meetings of the DDC. Once a project is completed, it is handed over to the VDC at an official ceremony attended by representatives of the various committees. We also work in partnership with other NGOs, most notably the Kadoorie Agricultural Aid Association.

