

# 2016 FP2020 ANNUAL COMMITMENT UPDATE QUESTIONNAIRE RESPONSE



## NEPAL

[HTTP://WWW.FAMILYPLANNING2020.ORG/ENTITIES/129](http://www.familyplanning2020.org/entities/129)

*In July 2016, the Government of Nepal shared the following update on progress toward achieving its Family Planning 2020 commitment during the 2015-2016 time period (commitment included below for reference).*

### **POLICY & POLITICAL UPDATES**

The Government of Nepal provided the following update on its commitment to revitalize and scale up FP by ensuring the implementation of the Costed Implementation Plan (CIP) on FP (2015-2020) within the Nepal Health Sector Program III (2015-2020).

- Family Planning Costed Implementation Plan (FP-CIP) is an integral part of Nepal Health Sector Strategy (NHSS) and NHSS Implementation Plan (IP). The CIP was taken into account in the development of the NHSS-IP and during the design of programs under the Family Health Division and by other development partners. This ensures activities designed under the FP-CIP are being implemented. However, the full implementation of the FP-CIP is constrained by limited government resources as well as development partners. Furthermore, given the 2015 earthquake and the delays it caused in the implementation of the 'regular' programme, the former National Health Sector Strategy and the 2015-2020 NHSS were extended by one year, respectively, (mid-2016 to mid-2021). The FP-CIP has not yet been officially extended and this needs to be formalized soon.

The Government of Nepal provided the following update toward identifying and addressing barriers to accessing family planning services among individuals and couples belonging to special groups including adolescents and youth and formulate policies and strategies to address them.

- The Government of Nepal has engaged in conducting the "Assessing Supply Side Constraints Affecting the Quality of Adolescent Friendly Health Services and the Barriers for Service Utilization in Nepal" study. Adolescent-related activities that are currently being designed and implemented are incorporating the recommendations from this barrier study.
- Nepal has endorsed a "National Adolescent Sexual and Reproductive Health Program Implementation Guide," which provides specific guidance on national adolescent friendly health services standards and actions required at programmatic, facility, and provider level to support delivery of the ASRH program.
- To increase access to family planning services among special groups especially among urban poor and urban migrants, the government has worked to establish urban clinics. Initiatives like micro planning in family planning have been initiated to reach specific pockets of the population to reduce inequalities in service utilization. Family planning and expanded program of immunization integration has also been initiated in several districts with low CPR.
- Community extension clinics have been established in remote communities to increase service availability and to ensure access to service utilization by poor and marginalized women and girls. In addition, Female Community Health Volunteers (there are 51, 470 throughout Nepal) carry with them condoms and pills along with Iron tablets, ORS, IEC materials etc. in the most remote areas of the country.

The Government of Nepal engaged in the following activities to improve the regulatory frame work to promote public-private partnerships and expand health service delivery points to increase access to quality FP information and services:

- As part of the government commitment to improve family planning services through public private partnership a model has been designed and activity implemented to provide family planning services through private outlets in a public-private partnership model. Recently in Kathmandu, an MOU has been signed with one private hospital to initiate family planning service in the public-private model. This model was recently reviewed during a joint MOH/EDP field visit and a number of recommendations made to improve and expand it.

## **FINANCIAL UPDATES**

The Government of Nepal has provided the following update its commitment to raise the annual government allocation for FP program by at least 7% each year and to raise and invest the financial resources required to meet the policy and programmatic commitments.

- The Government of Nepal fiscal year runs from mid-July to mid-July. Since the commitment was made in March 2015, the government has taken fiscal year 2015/2016 as base year and analyzed whether there was an increase or decrease in the budget allocation thereafter. The analysis from the Family Health Division shows an 18% increase in the family planning budget compared to last year. However, the devastating earthquake of April 2015 has represented a setback in proper implementation of the programme and various delays and constraints in different areas related to family planning, particularly with respect to supply chain management.
- The Government is regularly engaging with donors to raise additional funds for the family planning programme. The Family Planning Costed Implementation Plan outlines the resources required to revitalize the family planning programme in the next five years. However, in the absence of a resource mobilization plan it is challenging to identify the resource gap.

The Government of Nepal has provided the following update on strengthening enabling environments for family planning, including advocacy to mobilize resources from non-health sectors:

- Commitment for resource mobilization from non-health sector yet to be fulfilled. Given the on-going SDG localization process and the inter-sectoriality of the various SDGs more work is required to identify where resources need to be mobilized from non-health sectors in support of FP.

## **PROGRAM & SERVICE DELIVERY UPDATES**

The Government of Nepal provided the following update on strengthening the capacity of health institutions and service providers to expand the FP service delivery network:

- To expand family planning services throughout the country, the Government of Nepal has allowed international NGOs, private institutions and social marketing companies to provide family planning services. Under a public private partnership initiative, the Government of Nepal provides family planning services from private hospitals and clinics.
- The National Health Training Centre is committed to strengthening health institutions and service providers to expand family planning services. Each year, a number of service providers are trained in providing long acting family planning methods.
- Furthermore, a working group on Supply Chain Management was formed and the logistics management information system is being assessed to review the data side. This is an area where a lot of support will be required to ensure that FP commodities reach the various health facilities in a timely basis and according to need.

The Government of Nepal engaged in the following activities to increase the availability of a broader range of modern contraceptives and improved method mix at different levels of the health care system:

- As part of the government commitment to increase availability of a broader range of modern contraceptive methods, a pilot study to assess feasibility and acceptability of one rod Implanon is ongoing. Based on the

recommendation from the study the government will decide whether or not to include the one rod Implanon (Implanon NXT) in the national drug list.

- To increase the method mix, focus is being given to the expansion of long acting reversible contraceptive methods. The government has a policy to provide five temporary methods of family planning from the lowest level of service delivery points, i.e. Health Post. Currently 43% of health facilities provide five temporary modern family planning methods (Condom, Pills, Depo, Implant and IUCD) (Source: Nepal Health Facility Survey 2015).

The Government of Nepal has provided the following activities to enhance family planning service delivery to respond to the needs of marginalized, rural residents, migrants, adolescents and other special groups.

- The government has designed specific programs to reach rural residents, migrants, adolescents and other special groups.
- Family planning micro planning has been designed to fulfill the needs of rural residents, marginalized population adolescents and other groups. With the help of micro planning pockets of inequalities are identified and interventions launched to increase service utilization.
- Satellite clinics are being conducted in remote locations to offer family planning methods of the client's choices.
- To reach with the family planning services in rural and remote locations, voluntary surgical camps in addition to Implant and IUCD are being provided. To increase utilization of services by adolescents and youth, adolescent friendly health services are being established and certified to attract young people and cater to their needs.

The Government of Nepal provided the following update on efforts to increase health care seeking behavior among population with high unmet need for modern contraception by raising the awareness on the importance of family planning through the various communication methods and media by focusing to adolescents and young people:

- The National Health Education Information Communication Center (NHEICC) is leading national SBCC efforts and has a mandate under the National Health Communication Policy of 2012 to play a vital role in supporting the country's goal in improving access to family planning services in the country. NHEICC has designed SBCC campaigns for youth, adolescents, migrants and marginalized and disadvantaged groups, with special focus on greatest unmet need for FP. A new app for adolescents will be launched in the coming months containing information on sexual and reproductive health as well as on available health facilities. There is also a good collaboration in place with the Ministry of Education to provide adolescent friendly corners and educate young people in schools about sexual and reproductive health and make use of the information and services provided through the health sector.

The Government of Nepal provided the following update on strengthening the evidence base for effective programme implementation through research and innovations:

- Government of Nepal is committed to strengthening evidence base for effective programme implementation through research and innovations. With the support from development partners, the Family Health Division is currently involved in research and assessment to enhance effective family planning programming. Currently, a pilot study to examine feasibility and acceptability of Implanon NXT (one rod implant) in Nepal is being conducted.
- The qualitative study on assessing supply side constraints affecting the quality of adolescent friendly health services and the barriers of service utilization in Nepal has been undertaken.
- Recently four literature reviews i) Understanding gaps and barriers in access to and use of family planning services among Muslim communities in Nepal ii) Understanding gaps and barriers in access to and use of family planning services among urban poor population in Nepal iii) Understanding gaps and barriers in access to and use of family planning services among young people in Nepal and iv) Access to family planning services by migrant couples in Nepal are underway.

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*The following text is the commitment made by the government of Nepal at the 2012 London Summit on Family Planning. To review the commitment online, please visit: <http://www.familyplanning2020.org/entities/129>.*

## **POLICY & POLITICAL COMMITMENTS**

Nepal pledges to reposition family planning to foster sustainable social and economic development and to execute the Costed Implementation Plan on FP (2015-2020) within the Nepal Health Sector Program III (2015-2020). Nepal commits to identify barriers to accessing family planning services faced by individuals and couples, including adolescents and youth, those living in rural areas, migrants and other vulnerable or marginalized groups. The government also pledges to formulate policies and strategies to address these barriers. Furthermore, Nepal commits to improving the regulatory framework to promote public-private partnerships.

## **FINANCIAL COMMITMENTS**

The government of Nepal commits to raise and invest the financial resources required to meet its policy and programmatic commitments. In particular, it pledges to increase funding for family planning programs by at least 7 percent annually from 2015 to 2020 and engage with external development partners to raise additional resources. In addition, Nepal pledges to strengthen the enabling environment for family planning by engaging in advocacy to mobilize resources from non-health sectors.

## **PROGRAM & SERVICE DELIVERY COMMITMENTS**

The government of Nepal pledges to broaden the range of modern contraceptives available and improve method mix at different levels of the health care system. Nepal commits to engage in a range of communications and media activities to raise awareness of family planning among populations with a high unmet need for modern contraception, focusing particularly on adolescents and young people. Nepal will expand service delivery points to increase access to quality family planning information and services and facilitate family planning by strengthening delivery networks. The government pledges to support mobilizing resources from other, non-health sectors. Nepal commits to strengthening the evidence base for effective program implementation through research and innovation.