

Progress Against Targets
NHSP-2 Logical Framework
2012/13

Report Prepared for Joint Annual Review (JAR)

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Government of Nepal (GoN)
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ACRONYMS

AA	assistant anaesthetist
AIDS	acquired immune deficiency syndrome
ANC	antenatal care
ART	antiretroviral therapy
AWPB	annual work plan and budget
BEONC	basic emergency obstetric and neonatal care
CEONC	comprehensive emergency obstetric and neonatal care
CPR	contraceptive prevalence rate
CS	caesarean section
DHO	district health office
DoHS	Department of Health Services
EDP	external development partner
EHCS	essential health care services
EOC	emergency obstetric care
FCHV	female community health volunteer
FHD	Family Health Division
FSW	female sex worker
GBV	gender-based violence
GoN	Government of Nepal
HDMC	hospital development management committee
HFMOCC	health facility operation and management committee
HHS	household survey
HIV	human immunodeficiency virus
HMIS	Health Management Information System
HP	health post
HRH	human resources for health
IBBS	integrated bio-behavioural survey
ICD	International Classification of Diseases
IFA	iron/folic acid
JAR	joint annual review
LLIN	long-lasting insecticide-treated bed net
LMIS	Logistics Management Information System
M&E	monitoring and evaluation
MDGP	doctor of medicine general practitioner
MLM	male labour migrant
MoF	Ministry of Finance
MoHP	Ministry of Health and Population
MSM	men who have sex with men
MSW	male sex worker

MWRA	married women of reproductive age
NA	not available
NCASC	National Centre for AIDS and STI Control
NDHS	Nepal Demographic and Health Survey
NHSP-2	Second Nepal Health Sector Programme
NHSSP	Nepal Health Sector Support Programme
NLSS	Nepal Living Standards Survey
OAG	Office of the Auditor General
Obs/Gyn	obstetrician/gynaecologist
OCMC	one-stop crisis management centre
ODA	official development assistance
ORS	oral rehydration salts
PHAMED	Public Health Administration, Monitoring and Evaluation Division
PPICD	Policy, Planning and International Cooperation Division
PWID	people who inject drugs
RHD	regional health directorate
SBA	skilled birth attendant
SHP	sub-health post
STS	Service Tracking Survey
TWG	technical working group
WRA	women of reproductive age

1 BACKGROUND

A results framework was developed and approved by the Ministry of Health and Population (MoHP) in 2010 to monitor the following objectives of the Second Nepal Health Sector Programme (NHSP-2, 2010–2015):

1. To increase access to and utilisation of quality essential health care services (EHCS).
2. To reduce cultural and economic barriers to accessing health care services and harmful cultural practices in partnership with non-state actors.
3. To improve the health system to achieve universal coverage of essential health care services.

The results framework contained indicators for monitoring the progress of NHSP-2. In 2011/12, MoHP and its external development partners (EDPs) agreed that the results framework should be reviewed and revised. Following several technical working group (TWG) meetings and workshops in 2012, a monitoring and evaluation (M&E) framework was prepared for NHSP-2. The results framework was renamed as NHSP-2's 'logical framework' and was endorsed by the government on 17 May 2012. It was hoped that this document, as well as showing progress against NHSP-2 targets, would help highlight where targets did not exist, where targets existed but would not realistically be achieved by 2015, and where targets existed but were not ambitious enough (for example, where the 2015 target had already been achieved).

Joint annual reviews (JARs) of NHSP-2 have been held in January 2012 and January 2013. These meetings were attended by representatives from the Government of Nepal (GoN) and external development partners. A report similar to the current background report were prepared, shared and discussed at both of the previous JARs. The current report is prepared for review and discussion at the JAR 2014, which will be held in January 2014.

The objectives of this report are:

- to assess the progress in 2013 of the NHSP-2 logical framework indicators towards the 2013 targets; and
- to present disaggregated data (where possible) for 2013 achievements.

Section 2 of this document shows achievements in 2011, 2012 and 2013 against the logical framework targets. Data for 2011 are compared with the 2011 targets; data for 2012 and 2013 are compared with the 2013 targets. To illustrate the progress, indicators where the targets have been achieved are shaded in green, those where 90% of the target has been achieved are shaded in amber, and those where less than 90% of the target have been met are shaded in red (see Table 1). Not all indicators have targets for all years. Where there is no target for 2011 and/or 2013 the achievements in the corresponding years are shaded in blue. The cells are shaded grey where it has not been possible to obtain 2011, 2012 and /or 2013 data.

Table 1: Key for the shading of tables in Section 2

Year 2011, 2012 and 2013	Colour
Achieved 100% progress against the target ¹	Green
Achieved at least 90% progress against the target ¹	Amber
Did not achieve at least 90% progress against the target ¹	Red
No data for particular year	Grey
No target set for a particular year	Blue
¹ Data for 2011 are compared with 2011 target; data for 2012 and 2013 are compared with 2013 target	

2 PROGRESS AGAINST TARGETS

Achievement data for 2011 are compared with the 2011 targets while the data for 2012 and 2013 are compared with 2013 target. The key sources of information used for monitoring the progress of NHSP-2 logframe indicators in 2013 are Health Management Information System (HMIS) data for Nepali financial year 2069/70 (2012/13), the Service Tracking Survey, 2013 (STS 2013 — Mehata et al. 2013b), and records from MoHP's divisions and centres.

Notes:

- The STS 2013 findings presented here are only preliminary findings.
- The GoN achievement data is for the Nepali financial year. For example 2013 data is actually 2012/13 data.
- Additional information about the indicators may be obtained from MoHP (tel. [977-1] 4262489]), or NHSSP, c/o MoHP; telephone: (977-1) 4264250, 4264301; email info@nhssp.org.np

2.1 Goal: Improved health and nutritional status of people, especially the poor and excluded

Code	Indicator	Achieved 2011		Achieved 2012		Achieved 2013		Targets		
		Data	Source	Data	Source	Data	Source	2011	2013	2015
G1	Total Fertility Rate (per woman)	2.6	NDHS	NA		NA		3	2.8	2.5
G2	Adolescent Fertility Rate (women aged 15-19 years, per 1,000 women in that age group)	81	NDHS	NA		NA		-	85	70
G3	Under-five Mortality Rate (per 1,000 live births)	54	NDHS	NA		NA		55	47	38
G4	Infant Mortality Rate (per 1,000 live births)	46	NDHS	NA		NA		44	38	32
G5	Neonatal Mortality Rate (per 1,000 live births)	33	NDHS	NA		NA		30	23	16
G6	Maternal Mortality Ratio (per 100,000 live births)	281	NDHS	170	WHO 2010	NA		250	192	134
G7	HIV prevalence among men and women aged 15-24 years (per 100,000 population)	NA		NA		NA		0.1	0.08	0.06
G8	Malaria annual parasite incidence rate (per 1,000 population in one year)	0.16	HMIS	0.11	HMIS	0.11	HMIS	Halt and reverse		
G9	% of children under five years of age who are stunted	40.5	NDHS	NA		NA		40	35	28
G10	% of children under five years of age who are underweight	28.8	NDHS	NA		NA		39	34	29
G11	% of children under five years of age who are wasted	10.9	NDHS	NA		NA		10	7	5
G11	% of low birth weight babies	12.4	NDHS	NA		NA		-	13	12

2.2 Purpose: Increased utilisation of health services, and improved health and nutritional behaviour of the people, especially by the poor and excluded

Code	Indicator	Achieved 2011		Achieved 2012		Achieved 2013		Targets			Notes
		Data	Source	Data	Source	Data	Source	2011	2013	2015	
P1	% of infants breastfed within one hour of birth	44.5	NDHS	48.5	HHS	NA		-	55	60	NDHS data reflect children born in last two yrs. HHS data reflect children born in last one yr.
P2	% of infants exclusively breastfed for 0-5 months	69.6	NDHS	65.9	HHS	NA		35	48	60	
P3	% of one-year-old children immunised against measles	88	NDHS	86	HMIS	87	HMIS	88	90	90	
P4	% of children aged 6-59 months who have received vitamin A supplements	90.4	NDHS	90.0	HHS	NA		≥90	≥90	≥90	
P5	% of children aged 6-59 months suffering from anaemia	46.2	NDHS	NA		NA		45	44	43	
P6	% of households using adequately iodised salt	80	NDHS	NA		NA		80	84	88	
P7	Contraceptive Prevalence Rate (CPR) – modern methods (%)	43.2	NDHS	41.4	HHS	45.3	HMIS	48	52	67	For married women of reproductive age (MWRA)
P8	% of pregnant women attending at least four antenatal care (ANC) visits	50.1	NDHS	43.2	HHS	55.1	HMIS	45	65	80	
P9	% of pregnant women receiving Iron/Folic Acid (IFA) tablets or syrup during last pregnancy	79.5	NDHS	47.2	HHS	50.4	HMIS	82	86	90	HMIS monitors 180 day supply of IFA to pregnant woman
P10	% of deliveries conducted by a Skilled Birth Attendant (SBA)	36	NDHS	39.1	HHS	45.3	HMIS	-	40	60	NDHS data for last five years, Household Survey (HHS) data for last year.
P11	% of women who had three postnatal check-ups as per protocol (1st within 24 hours of delivery, 2nd within 72 hours of delivery, and 3rd within 7 days of delivery, as % of expected live births)	35.8	HMIS	31.4	HMIS	NA		-	43	50	Data do not reflect PNC visits as per protocol.
P12	% of Women Of Reproductive Age (WRA) (15-49) with complications from safe abortions (surgical and medical)	49	NDHS	1.2	HMIS	1.6	HMIS	<2	<2	<2	NDHS data relate to all abortions, not just safe abortions.
P13	Prevalence rate of leprosy (%)	0.79	HMIS	0.85	HMIS	0.84	HMIS	Halt and reverse			
P14	Obstetric direct case fatality rate	0.17	EOC monitoring	NA		NA		<1	<1	<1	

2.3 Outcome 1: Increased and equitable access to quality essential health care services

Code	Indicator	Achieved 2011		Achieved 2012		Achieved 2013		Targets			Notes
		Data	Source	Data	Source	Data	Source	2011	2013	2015	
OC1.1	% population living within 30 minutes travel time to a health post (HP) or sub-health post (SHP)	61.8	NLSS	47.2	HHS	NA		60	70	80	NLSS figures = for HHS not population
OC1.2	% of population utilising outpatient services at SHPs, HPs, primary health care centres (PHCCs) and district hospitals	11.0	HMIS	11.6	HMIS	12.7	HMIS				
OC1.3	% of population utilising inpatient services at district hospitals (all levels of hospitals)	1.4	HMIS	1.5	HMIS	1.6	HMIS				
OC1.4	% of population utilising emergency services at district hospitals (all levels of hospitals)	2.4	HMIS	2.7	HMIS	2.9	HMIS				
OC1.5	Met need for emergency obstetric care (%)	2.3	EOC monitoring	15.9	HMIS	NA		-	43	49	
OC1.6	% of deliveries by caesarean section (CS)	4.6	NDHS	3.9	HHS	1.3	HMIS	4	4.3	4.5	NDHS data = for last 5 years, HHS = for last yr.
OC1.7	Tuberculosis treatment success rates (%)	90	HMIS	90	HMIS	90	HMIS	90	90	90	
OC1.8	% of eligible adults and children currently receiving antiretroviral therapy (ART)	NA		NA		NA		24	55	80	

2.4 Outcome 2: Improved health systems to achieve universal coverage of essential health care services

Code	Indicator	Achieved 2011		Achieved 2012		Achieved 2013		Targets			Notes
		Data	Source	Data	Source	Data	Source	2011	2013	2015	
OC2.1	% of children under five with diarrhoea treated with zinc and oral rehydration salts (ORS)	5.2	NDHS	23.7	HHS	95.3	HMIS	7	25	40	
OC2.2	% of children under five with pneumonia who received antibiotics	35.1	NDHS	26.9	HHS	42.1	HMIS	30	40	50	
OC2.3	Unmet need for family planning (%)	27	NDHS	NA		NA		-	20	18	
OC2.4	% of institutional deliveries	35.3	NDHS	36.5	HHS	45.3	HMIS	27	35	40	NDHS data for last 5 years. HHS and HMIS data for last yr.
OC2.5	% of women who received contraceptives after safe abortion (surgical and medical)	41	HMIS	33	HMIS	29.5	HMIS	55	60	60	
OC2.6	% of clients satisfied with their health care provider at public facilities	96	STS	91.3	STS	89	STS	68	74	80	
OC2.7	Tuberculosis case detection rate	73	HMIS	73	HMIS	78	HMIS	75	80	85	

2.5 Outcome 3: Increased adoption of healthy practices

Code	Indicator	Achieved 2011		Achieved 2012		Achieved 2013		Targets		
		Data	Source	Data	Source	Data	Source	2011	2013	2015
OC3.1	% of children under five in high-risk areas who slept under a Long-lasting Insecticide-treated Bed Net (LLIN) the previous night	NA		10.4	HHS	NA		75	80	80
OC3.2	% of key populations at higher risk (sex workers, Men who have Sex with Men (MSM), People who Inject Drugs (PWID), Male Labour Migrants (MLMs)) reporting the use of condom at last sex	NA		NA		NA				
	Female sex workers (FSWs)	82.6	IBBS	NA		NA		82.6	-	85
	Male sex workers (MSWs)	NA		NA		NA		-	-	80
	MSM	NA		NA		NA		-	75	80
	PWID	46.5		NA		NA		46.5	60	80
	MLMs to India	NA		NA		NA		-	65	80
OC3.3	% of PWID reporting the use of sterile injecting equipment the last time they injected	95.3		IBBS	NA		NA		≥95	≥95
OC3.4	% of households with hand washing facilities with soap and water nearby [^] the latrine	47.8	NDHS	18.4	HHS	NA		-	65	85

2.6 Output 1: Reduced cultural and economic barriers to accessing health care services

Code	Indicator	Achieved 2011		Achieved 2012		Achieved 2013		Targets		
		Data	Source	Data	source	Data	source	2011	2013	2015
OP1.1	% of women utilising the Female Community Health Volunteer (FCHV) fund (among WRA)	NA		NA		NA		-	8	10
OP1.2	Number of health facilities providing adolescent-friendly health services	78	FHD	455	FHD	NA		-	500	1,000
OP1.3	% Health Facility Operation and Management Committees (HFMOCs)/Hospital Development Management Committees (HDMCs) with at least 3 female members and at least 2 Janajati and Dalit members	42	STS	41	STS	72	STS	-	70	100

2.7 Output 2: Improved sector management

Code	Indicator	Achieved 2011		Achieved 2012		Achieved 2013		Targets		
		Data	Source	Data	Source	Data	Source	2012	2013	2015
OP2.1	% EDPs providing Official Development Assistance (ODA) on rolling 3-year period basis		PPICD	NA		NA		-	50	90
OP2.2	% of health sector aid reported by the EDPs on national health sector budgets		PPICD	39		33		-	50	85
OP2.3	% of actions documented in the action plan of the aide-memoire completed by the next year		PPICD	NA		NA		-	100	100
OP2.4	% of EDPs reporting to JAR their contribution to the health sector (including expenditure) aligned to the agreed annual reporting format for EDPs as developed by MoHP		PPICD	NA		NA		-	100	100

2.8 Output 3: Strengthened human resources for health (HRH)

Code	Indicator	Achieved 2011		Achieved 2012		Achieved 2013		Targets			Notes
		Data	Source	Data	Source	Data	Source	2012	2013	2015	
OP3.1.1	% of sanctioned posts that are filled – doctors at PHCCs	50	STS	19	STS	23	STS	85	88	90	
OP3.1.2	% of sanctioned posts that are filled – doctors at district hospitals	69	STS	56	STS	47	STS	85	88	90	
OP3.1.3	% of sanctioned posts that are filled – nurses at PHCCs	74	STS	59	STS	39	STS	85	88	90	
OP3.1.4	% of sanctioned posts that are filled – nurses at district hospitals	83	STS	83	STS	55	STS	85	88	90	
OP3.2	% of district hospitals that have at least one Doctor of Medicine General Practitioner (MDGP) or Obstetrician/Gynaecologist (Obs/Gyn), five nurses (SBA trained), and one Anaesthetist or Assistant Anaesthetist (AA)	13	STS	0	STS	0	STS	-	60	80	STS 2011 did not measure whether nurses were SBA trained. STS 2012 assessed district hospitals that did not have sanctioned posts for Obs/Gyn and anaesthetist/AA.
OP3.3	Number of production and deployment of:										
	SBA	2,562	HMIS	3,637	HMIS	NA		4,000	6,000	7,000	
	MDGPs	NA		NA		NA		-	28	56	
	Anaesthetists		22		44						
	Psychiatrists		28		56						
	Radiologists		27		55						
	Physiotherapists		10		20						
	Physiotherapy Assistants		35		70						
	Radiographers		50		100						
	AAs		31		62						
	Procurement specialists		3		7						
	Health legislation experts		1		3						
	Epidemiologists		3		7						
	Health economists		3		7						
Health governance experts	1		3								
OP3.4	Number of FCHVs	48,680	HMIS	48,897	HMIS	48,934	HMIS	50,000	52,000	53,514	

2.9 Output 4: Improved service delivery

Code	Indicator	Achieved 2011		Achieved 2012		Achieved 2013		Targets			Notes
		Date	Source	Data	Source	Data	Source	2011	2013	2015	
OP4.1	Number of One-stop Crisis Management Centres (OCMCs) to support victims of gender-based violence (GBV)	6	Pop. Div. MoHP	10.5	Pop. Div. MoHP	15	Pop. Div. MoHP	5	10	20	The figure for 2012 is in % not numbers 2013 target revised 10 to 16 by OPMCM in 2069/70..
OP4.2	Number of HPs per 5,000 population	0.12	HMIS	0.14	HMIS	0.23	HMIS	–	0.5	1	
OP4.3	Number of PHCCs per 50,000 population	0.37	HMIS	0.35	HMIS	0.37	HMIS	–	0.7	1	
OP4.4	Number of district hospital beds per 5,000 population	1.06	HMIS	0.8	HMIS	1.6	HMIS	–	0.6	1	
OP4.5	% of districts with at least one public facility providing all Comprehensive Emergency Obstetric and Neonatal Care (CEONC) signal functions	39	STS	62	STS	100	STS	–	68	76	
OP4.6	% of PHCCs providing all Basic Emergency Obstetric and Neonatal Care (BEONC) signal functions	14	STS	39	STS	23	STS	–	50	70	
OP4.7	% of HPs with birthing centre	79	STS	93	STS	97	STS	≥80			
OP4.8	% of safe abortion (surgical and medical) sites with post-abortion long-acting family planning services	91	STS	90	STS	91	STS	≥90			
OP4.9	% of HPs with at least five family planning methods	13	STS	8	STS	18	STS	–	35	60	
OP4.10	% of households in all high-risk areas with at least one long LLIN per two residents	NA		10.5	HHS	NA		≥90	≥90	≥90	
OP4.11	% of key populations at higher risk (PWID, sex workers, MSM, MLMs) reached with HIV prevention programmes										
	PWID	71.4	IBBS survey	NA		NA		71.4	75	80	
	FSWs	60		NA		NA		60	–	80	
	MSWs	NA		NA		NA		–	93	95	
	MSM	NA		NA		NA			80	80	
MLMs to India	NA	NA			NA		50		80		
OP4.12	% of PHCCs with functional laboratory facilities	NA		NA		NA		90	95	100	
OP4.13	% of public hospitals, PHCCs, and HPs that have infrastructure as per GoN standard	Hospital	NA	63	STS	NA		50	65	80	
		PHCC	NA	69		NA					
		HP	NA	37		NA					

2.10 Output 5: Increased health knowledge and awareness

Code	Indicator	Achieved 2011		Achieved 2012		Achieved 2013		Targets		
		Data	Source	Data	Source	Data	Source	2011	2013	2015
OP5.1	% of WRA (15-49) aware of safe abortion sites	58.8	NDHS	28.2	HHS	NA		-	35	50
OP5.2	% of WRA (15-49) who know at least three pregnancy-related danger signs	NA		52.2	HHS	NA		-	40	50
OP5.3	% of WRA (15-49) giving birth in the last two years aware of at least three danger signs of newborns	NA		44.9	HHS	NA		-	40	50
OP5.4	% of population aged 15-24 years with comprehensive correct knowledge of HIV/AIDS by sex	M	33.9	NDHS	NA	NA		33.9	40	50
		F	25.8					25.8	25.8	40

2.11 Output 6: Improved M&E and health information systems

Code	Indicator	Achieved 2011		Achieved 2012		Achieved 2013		Targets			
		Data	Source	Data	Source	Data	Source	2011	2013	2015	
OP6.1	% of timely and complete data on annually reportable M&E framework indicators reported by the end of December of the following year	NA		NA		NA		-	100	100	
OP6.2	% of health information systems implementing (using) uniform standard codes	0	HMIS	0	HMIS	0	HMIS	-	100	100	
OP6.3	% of tertiary and secondary hospitals (public and private) implementing the tenth version of the International Classification of Diseases (ICD-10) and reporting coded information to the health information system	Public	65	HMIS	100	HMIS	100	HMIS	-	75	100
		private	NA		NA		NA				
OP6.4	% of health facilities (public and private) reporting to the national health information system (by type or level)	Public	NA		100	HMIS	100	HMIS	-	80	100
		private	NA		NA						

2.12 Output 7: Improved physical assets and logistics management

Code	Indicator	Achieved 2011		Achieved 2012		Achieved 2013		Targets		
		Data	Source	Data	Source	Data	Source	2011	2013	2015
OP7.1	% of public health facilities with no stockouts of the listed free essential drugs in all four quarters	79.2	LMIS	NA		NA		70	80	90
OP7.2	% of the budget allocated for operation and maintenance of the physical facilities and medical equipment	NA		NA		NA		at least 2		

2.13 Output 8: Improved health governance and financial management

Code	Indicator	Achieved 2011		Achieved 2012		Achieved 2013		Targets			Notes
		Data	Source	Data	Source	Data	Source	2011	2013	2015	
OP8.1	% of health facilities that have undertaken social audits as per MoHP guidelines in the last fiscal year	31	STS	21	STS	15	STS	5	15	25	STS 2011 did not monitor whether it was as per MoHP guidelines
OP8.2	% of MoHP budget spent annually	76.3	FMIS	79.7	AWPB	NA		83	84.5	86	
OP8.3	% of budget allocated to district and below facilities (including flexible health grants)	59.5	AWPB	59.4	AWPB	NA		60	65	70	
OP8.4	% of irregularities (<i>Beruju</i>) among total public expenditure	6.2	OAG report	7.1	OAG report	NA		6	5	4	
OP8.5	% of District Health Offices (DHOs) receiving budgeted amount within one month of budget disbursement from MoHP/Department of Health Services (DoHS) with clear-cut guidance for expenditure	100	Finance Section	100	AWPB	100		-	100	100	

2.14 Output 9: Improved sustainable health financing

Code	Indicator	Achieved 2011		Achieved 2012		Achieved 2013		Targets		
		Data	Source	Data	Source	Data	Source	2011	2013	2015
OP9.1	% of MoHP budget allocated to EHCS	76.8	AWPB	75.01	AWPB	72.7		75	75	75
OP9.2	% of health sector budget as % of total national budget	7.1	MoF (Red Book)	6.05	AWPB	6.5		7.5	8.5	10
OP9.3	% of government allocation (share) in total MoHP budget	39.2	MoF (Red Book)	60.3	AWPB	67		60	65	70

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