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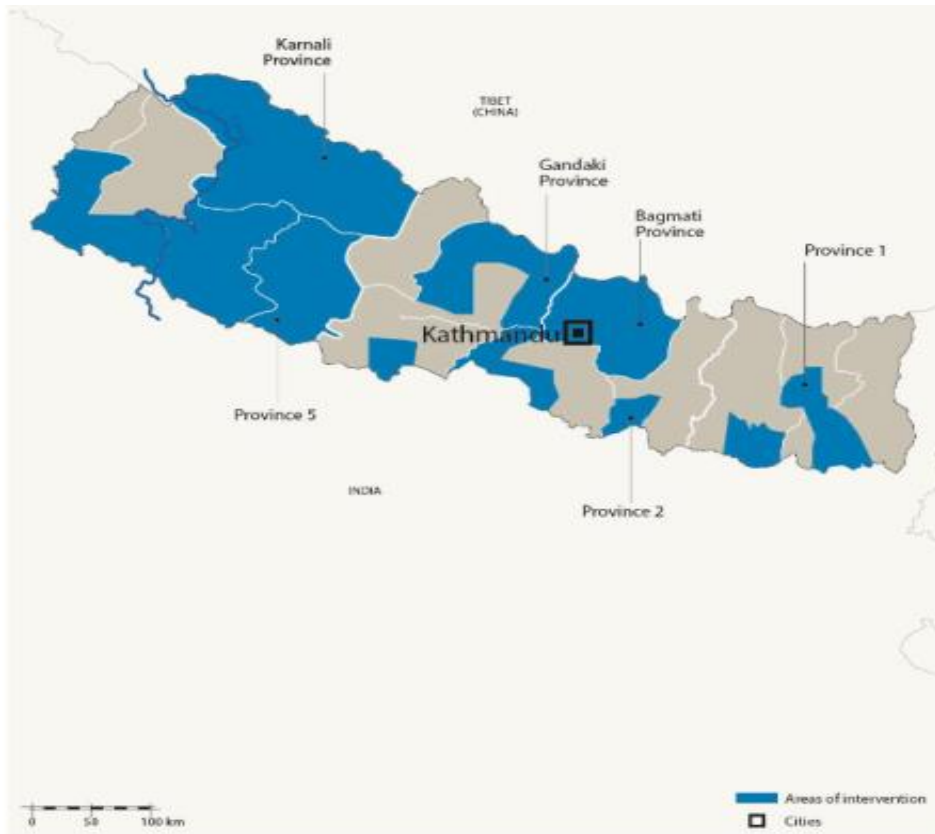
Nepal





HI Team and intervention areas

The HI Nepal program has 85 staff members.





General data of the country

a. General Data

Country ¹	Nepal	Neighboring country (India)	France
Population	26.674.920	1.393.409.033	67.499.343
IHDI	0.446	0.65	0.90
Maternal mortality	250	143	4
Gender Development Index	0.933	0.820	0.987
Population under HCR mandate	20.729	245.935	580.898
INFORM index	4.9	5.2	2.3
Fragile State Index	80.6	75.3	30.9
GINI Index	32.8	35.7	32.4
Population covered by at least one social protection benefit (%)	17	24.4	100

b. Humanitarian law instruments ratified by the country

Humanitarian law instruments	Status
Mine Ban Treaty	Not signed
Convention on Cluster Munitions	Not signed
UN Convention on the Rights of Persons with Disabilities	Ratified

c. Geopolitical analysis

1. Social/cultural/demographic elements

¹ https://hinside.hi.org/intranet/jcms/pl1_2540344/fr/2020-update-country-indicators-2ndary-data-/-donnees-secondaires-mises-a-jour



Nepal is a Federal Democratic Republic since 2015. It is a landlocked country flanked on the north and south by China and India respectively. Nepal's ecological zones run east to west about 800 km along its Himalayan axis, 150 to 250 km north to south. The country is divided into three main geographical regions: the Himalayan region, the mid-hill region and the Terai (plain) region. According to Central Bureau of Statistics (CBS), the population of Nepal as of June 2011 was 26.5 million. The sex ratio at the national level is accounted to be 91.6, meaning that there are 796,422 more females than males in the country. In terms of geographic regions, Terai constitutes 50.27% of the total population while Hill and Mountain constitutes 43% and 6.73% respectively.

2. Political Scenario

Nepal was a Hindu Kingdom under a constitutional monarchy until 2006. On 18 May 2006, the House of Representatives unanimously voted to curtail the power of the king and declared Nepal a secular state. On 21st November 2006, Nepal's decade-long armed conflict ended with the signing of the Comprehensive Peace Accord (CPA) between the Government and the Communist Party of Nepal (Maoist). Nepal was subsequently divided into 7 provinces and 75 districts. The period from 2014 to 2017 has been marked by the transition of Nepal towards federalism and absolute abolition of monarchy. This resulted in the first ever elections held in close to 20 years (early 2017) as well as violence and a complete blockade for several weeks of the border between Nepal and India. In September 2015, 89% of Nepal's Constituent Assembly representatives approved a new constitution. A central provision of the new constitution was the restructuring of Nepal into 7 federal provinces delineated according to physical geographical characteristics, as well as on the basis of existing administrative divisions.

In November 2017, Nepal had its first general [election](#) since the civil war ended and monarchy was abolished.



3. Economic elements²

Nepal has been hit hard by COVID-19, although the situation has improved more recently. As the outbreak became widespread in mid-2020, a nationwide lockdown was implemented from March to July in 2020, followed by localized lockdowns, including in the Kathmandu Valley up until mid-September. During this time transportation, education and tourism- related activities were significantly restricted. Since October, the number of cases has been declining steadily, allowing a gradual easing of movement restrictions. Nepal launched its vaccination program on January 27, 2021, and about 5.9 percent of the population (or 1,791,606 people) were inoculated by mid-March 2021. Thus, there are good prospects that further outbreaks of COVID-19 can be contained.

After contracting for the first time in 40 years in FY20-by 1.9 percent-the economy showed signs of moderate recovery in the first half of FY21. Activity resumed in wholesale and retail trade, transport, and financial services, while favorable monsoons drove agricultural growth. However, tourism remained at a standstill and private investment anemic given high levels of overall uncertainty related to the epidemic as well as political developments. Uncertainty arising from the epidemic has also contributed to fiscal risks due to the degree of fiscal stimulus provided to support individuals and firms and which will need to eventually be rolled back for fiscal sustainability. Political uncertainty also heightened in December 2020 when the Prime Minister dissolved Parliament. The Supreme Court overturned the decision, reinstating Parliament in February 2021 and precipitating the split of the two-party majority coalition in March 2021

² <https://www.worldbank.org/en/country/nepal/publication/nepaldevelopmentupdate>



Summary of HI presence in the country

HI has been present in Nepal since 1996, initially implementing a regional project in Bangladesh, India and Nepal, through the South Asian Regional Office based in Kathmandu. The official general agreement between HI and the government of Nepal was signed in 2000 for a period of five years, renewed on a 5 years basis since then. After a phase of rapid expansion, the program consolidated around four components and entered a phase of strategic planning, long-term orientations and operational synergies with government authorities, matching with the conflict end and the starting peace process. After the earthquake in 2015, the program has further diversified with a focus on health and rehabilitation and access to services in particular Inclusive livelihood, inclusive education and livelihood recovery. Currently HI Nepal implements 9 projects. The Nepal program always largely revolved around a flagship project on rehabilitation. Today, the portfolio of thematic areas is increasing and the team is developing its experience in the field of Inclusive Education inclusive disaster risk reduction and Livelihood.



Overview on ongoing projects

Sectors of services where HI conducts projects and focus on beneficiaries and operational partnerships

Main sectors of intervention	Objective of project in the sector	Main activities	Beneficiaries	Final beneficiaries	Partners	Location	Dates of beginning and end of the project and donors funding it
Physical Rehabilitation	Physical Rehabilitation Activity (PRA) program supports the establishment of a sustainable, integrated, public-private rehabilitation system in order to improve the mobility and functional independence of victims of conflict and women, men, girls and boys in need of rehabilitation	Support LCDMS/MOHP to develop guidelines and policies for rehabilitation service provision. Strengthen the rehabilitation professional associations to build a continuous medical education system and promote workforce development. Support equipment strengthening of targeted physiotherapy units and five rehabilitation centres. Train health workers in detection and referral of people with physical impairments Strengthen referral system. Establish family caregivers' platform & network.	At least 31,100 people (at least 42% female) 10, 497 people in need of rehabilitation services benefitted till June 2021	At least 31,100 people (at least 42% female)	Community Based Rehabilitation (CBRB) National Federation of the Disabled- Nepal (NFDN) National Disabled Fund (NDF) Nepalgunj Medical College (NGMC) Nepal National Social Welfare Association. (NNSWA) Prerana	All provinces with some specific activities in Karnali Province, and Bardiya, Banke and Dang Districts of Province 5	17.06.19-16.06.24 (USAID)



Integrate private rehabilitation service providers into the health system through a public-private partnership model. Support to the network of private rehabilitation service providers. Support PRCs to develop and implement sustainability business plans.

Inclusive Education

Reading for All Project will contribute to the goal of improving reading outcomes for children with disabilities in grades 1–3 in 10 districts.

The project closely work with stakeholders to implement the following key area:
 1) Improve data quality on children with disabilities;
 2) Enhance institutional and technical capacity at various levels to deliver quality reading instruction and support to children with disabilities;
 3) Test inclusive instructional models that can be scaled for specific groups of children with disabilities; and
 4) Provide inclusive teaching and learning support to children with disabilities to mitigate and respond to the effects of COVID-19.

Screen 277,418 children from pre-primary to grade 3 with an early screening tool;
 Train 771 primary school teachers and 40 resource class teachers to effectively teach students with disabilities;
 Train 229 GON education officials on disability inclusive education;

World Education, 2 Resource Partners 10 district based Disable People Organizations. Ministry of Education Science and Technology (MoEST), Center for Education and Human Resource Development (CEHRD)'s inclusive education section,

Banke, Surkhet, Bhaktapur, Kaski, Dhankuta, Parsa, Mustang, Dang, Kailaki, and Dadeldhura

05.18 / 09.22 (USAID)



Inclusive Education Livelihoods	<p>Engage (Empowering a New Generation of Adolescent Girls with Education) supports girls with disabilities from the most marginalized communities by providing them formal education support through various interventions, employability skills development and enhancing girls with disabilities'</p>	<p>Parents/caregivers of out of school and marginalized girls support girl's education. Out of school and marginalized girls have increased knowledge of life skills. Out of school marginalized girls enroll in/attend formal/non-formal education after graduating from bridge literacy/numeracy classes Out of school and marginalized girls find safe employment after graduating from non-formal education Educators use inclusive, gender responsive and child safeguarding pedagogy</p>	<p>2,343 girls (marginalized girls and girls with disabilities)</p>	<p>2,525 girls (marginalized girls and girls with disabilities) There are 275 girls are with disabilities</p>	<p>Curriculum Development Center (CDC), Education Review Office (ERO), relevant local representatives (municipalities/ education focal person) Disabled Empowerment and Communication Centre (DEC-N)</p>	<p>Banke (HI) , Parsa and Sarlahi (VSO)</p>	<p>24.08.18 / 31.08.22 (FCDO via VSO)</p>
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economic opportunities through linking them into the small-scale labor market are the major interventions.

Inclusive Education

SIKAI - (Strengthening Inclusive Education in Nepal) will improve access to, participation and achievement in education for excluded children, both in and out of school, with a specific focus on caste, disability, ethnicity and gender

Early Screening; Identify and Support Children with disabilities; Capacity building of teachers; Conduct Inclusive sports and Extra-Curricular activities in schools; Provide training and orientation to parents/caregivers of children with disabilities; Improve function of local government through capacity development, improvement of data management and other support

54,230 (8,266 Men, 8,266 Women, 18,094 boys and 19,603 girls)

32,808 (4,967 Men, 4,967 Women, 10,979 Boys and 11,895 Girls)

Consortium Partners – World Vision International Nepal, World Education Nepal

Sarlahi

1.07.18 / 30.06.23

(DFAT Australia via World Vision)

Implementing Partner - Rastriya Rojgaar Prabardhan Kendra (RRPK)

Inclusive Education

DID TO53: “Strengthening Systems of Inclusive Education for Children with Disabilities in

The project works on 3 components: 1)Activities To develop and support local government, schools and other stakeholders to implement policies, procedures and plans as part

32000 (Children with disabilities:2300 without disabilities:29700

32000 (Children with disabilities:2300 without disabilities:29700 0

Consortium Partners: Leonard Cheshire (LC);Sense International (SI) Downstream

Kalika Municipality and Bharatpur Metropolitan City in Chitwan

01/01.22 /18.12.24

FCDO



Nepal and support at all levels of Early Childhood Development, Mainstream Education and Training”

The project is a scale task order and works to ensure Girls and boys with disabilities including those with complex disabilities and other children with learning support needs have equitable access to quality education and demonstrate learning achievements in basic level grades

of systems to support education of children with disabilities and other children with other learning needs; 2) activities that build capacities of and helping them translating these capacities into daily work among parents, children, school authorities and other community members/ stakeholders on education of children with disabilities and 3)Actions to document and share evidences of what has worked well and what has not including the lessons from the project to local, national and international stakeholders.

The project will have at least 2 research products.

Partners: District, HI: Autism Care Province 3, Chitwan Society (ACCS) LC: National Federation of the Deaf Nepal (NFDN) SI: Committed Nepal (CMI)

Cross-cutting Advocacy and Networking

DID TO21: Nepal Country Lead

To Coordinate the work under the DiD programme in the Nepal

Not Applicable

Not Applicable

Not Applicable

Nepal

15.11.21 / 31.12.22



		Develop joint advocacy plans Promote evidence-based disability-inclusive decision-making on policies and programmes at country level				FCDO
SRH Education Livelihoods	SARAL (DID TO 15: Strengthening Adolescents Reproductive health And Livelihoods) envisaged impact is “Young people with disabilities’ well-being is improved, through equitable access to inclusive SRH services and livelihood opportunities.	Young people with disability and their family members will be empowered through raising awareness, involving them in clubs, and facilitating their access to SRH and livelihood services.	Youth (10-24 years old), particularly those with disabilities (physical, intellectual, mental, sensorial)	Disabled Empowerment Centre Nepal (Surkhet, Nepal) and the National Federation of the Deaf Nepal. Consortium Partners: Light for the World, SENSE International and BRAC,	Bheriganga Birendra nagar ; of Surkhet	4.09.19 / 30.09.22 FCDO
		Service providers’ quality and availability of inclusive SRH services will be improved at public health facilities by improving accessibility, non-discrimination and participation, in particular by strengthening staff’s capacities and providing essential equipment (specific to SRH services).	Service Providers Local Authorities			
		At system, governance level municipality authorities, particularly the Disability Coordination Committee (DCC) and the Social Development Section (SDS),				



		will get orientation and technical support					
Access to livelihoods, education and health services	AC-5 project supports the access of women and children with disabilities/impairments to healthcare, education and livelihood services through a holistic approach	Train and support health workers on prevention, early detection, treatment and referral of childbearing related impairments and childhood impairments Train key education actors on Inclusive education approaches and pedagogy using the updated IE training manual Build capacity of targeted government and private livelihood service providers to adapt their services (i.e. skills development, access to finance) as per the needs of people with disabilities Support the Leprosy Control Division(LCD) to develop and implement procedures for integrated care of impairments in children and women Identification of livelihood opportunities of the beneficiaries and training them based on their skills and interest	Person with disabilities Health workers Mother Groups Female Community Health Volunteers Disabled People Organization Parent and Teacher Associations Government and private service providers/authorities	13,094 beneficiaries - 10,125 adults with disabilities - 2,271 children and youth with disabilities (6-17 yrs.) - 698 young children with disabilities (0-5 yrs.)	1. Rasuwa Disability Rehabilitation Center (DPO)- Rasuwa 2. Community Development & Environment Conservation Forum (NGO)- Sindhupalchok; 3. Community Service Association of the Disabled and Blind (DPO)- Dolakha 4. Disable Welfare Association (DPO)- Dhading 5. Disabled Human Rights Forum (DPO)- Nuwakot 6. Unification Nepal –Gorkha (Only AC5)	Dhading: Nuwakot: Rasuwa: Sindhupalchok Dolakha Gorkha (Only for AC-5)	01/01.18 / 31.12.22 MOFA-LUX



Train mother groups and Female Community Health Workers on Early Child development using the Blue box

Health System Strengthening DRM

Resilience - Strengthening health sector (authorities, health service providers) and community resilience in 6 earthquake affected municipalities through inclusive emergency preparedness and through creating an inclusive DRR policy framework; aims to minimize the risks of mortality, morbidity and

Develop 6 Local Disaster Climate Risk Management Plans at municipality level & 6 Ward Disaster Climate Risk Management Plans based on the VCA outcomes. Conduct 6 Mock drill/simulation exercises on a mass causality incidence in hospitals to test the MCM plans jointly with LDCRC and municipalities tasks forces. Set up 12 small scale mitigation scheme identified by communities (2 per wards) Provide multipurpose cash grant to 100 vulnerable people to access service providers including, livelihood, education and social/protection and facilitate the access to shelter reconstruction.

1,032 beneficiaries

01 Dec 2018 – 31 March 2022
MOFA LUX



	pauperization for people living in disaster-prone communities in Nepal	Support to Ministry of Health and Population to organize meeting/workshop for developing or reviewing TOR of Health Emergency Operational Center (HEOC), Provincial HEOC and National Emergency Medical Team.				
DRR	Forecast based Actions and Shock Responsive Social Protection (FbA-SRSP) in Provinces 5 (Lumbini Province) and Sudur Paschim, Nepal	Result 1: A multi-hazard Forecast-based Action mechanism is jointly developed and tested at the local level, with a scalability capacity approach. Result 2: Replicable options for the SSA-system to be used as a shock-response mechanism enabling its continuous delivery in the face of disasters and in anticipation are developed and tested in 5 municipalities. Result 3: Consolidated learnings and evidence collected at the local level contribute to the formulation of the national roadmap on SRSP for Nepal.	Population in flood affected areas in Bardiya:- Gulariya Municipality, Barabardiya Municipality, Thakurbaba Municipality; & Kailali, Tikapur Municipality, Janaki Rural Municipality	Final beneficiaries: 52,755 Partners	Danish Red Cross is the Consortium lead, with HI as a technical partner. DRC's local implementing partners is Nepal Red Cross Society, and District Chapter Bardiya & Kailali (HI coordinates with NRCS through DRC)	MOFA LUX 1 June 2020 to 31 May 2022



Donors

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