United Nations Children’s Fund
Executive Board
First regular session 2023
7–10 February 2023
Item 4 (a) of the provisional agenda*

Country programme document
Nepal

Summary
The country programme document (CPD) for Nepal is presented to the Executive Board for discussion and approval at the present session, on a no objection basis. The CPD includes a proposed aggregate indicative budget of $25,477,000 from regular resources, subject to the availability of funds, and $120,000,000 in other resources, subject to the availability of specific-purpose contributions, for the period March 2023 to December 2027.
Programme rationale

1. The population of Nepal was 29.19 million, including 10.45 million children, in 2021.\(^1\) As the country is ageing fast, this “demographic window of opportunity” is rapidly closing.\(^2\) From 1990 to 2018, the urban population grew 2.9 per cent annually,\(^3\) fuelled by rural-urban migration.

2. Nepal has achieved significant progress towards the Sustainable Development Goals, yet the country was hard hit by the coronavirus 2019 (COVID-19) pandemic, with its long-term impact yet to be fully assessed. The economy grew at an average annual rate of 7 per cent between 2017 and 2019,\(^4\) recovering from a drop to 2 per cent in 2020, during the pandemic, to 5 per cent during the period 2021–2022. Nepal is scheduled to graduate from its status as a least developed country in 2026.

3. Pre-pandemic, multidimensional poverty had declined from 30.1 per cent to 17.4 per cent between 2014–2019.\(^5\) However, significant disparities in relation to age, caste, disability, education, ethnicity, geography, gender, migration and wealth remain. Although children constitute 35 per cent of the population, they represent 44 per cent of the poor, thus carrying a disproportionate poverty burden. The pandemic is estimated to have pushed 1.2 million people back into poverty.\(^6\)

4. The 2015 Constitution of Nepal envisions the country as an advanced, socialism-oriented economy, guaranteeing human rights – including child rights – by ensuring good governance and inclusive development in a federal, democratic and republican system of governance. As federalization advances, systems and capacities at federal, provincial and local government levels continue to evolve towards achieving decentralized socioeconomic development.

5. Progress, however, is threatened by climate change and the consequent heightened frequency and magnitude of disaster risks,\(^7\) rising air pollution, increasing incidence of other environmental health hazards, the risk of future pandemics and mega-earthquakes, all of which disproportionately affect children.

6. Between 2014 and 2019, neonatal mortality declined from 23 to 16 deaths per 1,000 live births; infant mortality decreased from 33 to 25 deaths per 1,000 live births; and the under-5 mortality rate decreased from 38 to 28 deaths per 1,000 live births, thus putting the Sustainable Development Goal 3 target for health within reach. Adolescent pregnancies and early childbearing contribute to higher neonatal and infant deaths.\(^8\) The availability of services for managing birth complications remains low.\(^9\) Up to 28 per cent of children among disadvantaged castes, as well as those in remote rural areas and poor urban communities, are not immunized. Priorities for the Nepal Health Sector Strategic Plan 2022–2030 include pandemic recovery of essential

\(^2\) Ibid.
\(^8\) Data from National Planning Commission, Central Bureau of Statistics, and UNICEF, Multiple Indicator Cluster Survey 2019, Nepal, unless otherwise stated.
health services, tackling the non-communicable disease burden and increasing environmental health risks, and addressing disparities in service delivery.

7. Stunting among children under the age of 5 years continued to decrease from 37 per cent to 32 per cent between 2014 and 2019; yet this is not on track to achieve Sustainable Development Goal targets, and disparities persist across provinces, income, castes and ethnic groups. The prevalence of child wasting increased from 10 per cent to 12 per cent between 2014 and 2019. Persisting child malnutrition is attributed to a combination of factors including poor maternal nutrition status, particularly among young adolescent mothers, with 46 per cent of pregnant women being anaemic. Social and gender norms further contribute to poor adolescent nutrition, with iron-deficiency anaemia in girls aged 10–19 years twice as prevalent as in boys. Poverty and poor feeding practices contribute to less than half of children aged 6–23 months meeting the minimum dietary diversity and only 30 per cent meeting the minimum acceptable diet, with further deterioration observed during the pandemic. Efforts to tackle malnutrition have been strengthened through consecutive Government Multi-Sector Nutrition Plans.

8. Despite notable progress in access to basic drinking water services reaching 95 per cent of the population in 2019, only 19 per cent of the population has access to safely managed drinking water related to limited investment and capacity. The poorest children are seven times more likely to be without access to safe drinking water than those from the richest families. About 5 per cent of the population have reverted to open defecation, due to social norms, challenging the country’s open defecation-free status. While 78 per cent of schools had improved water sources and 83 per cent improved sanitation facilities, very few have met the quality standards for gender and disability. Climate change poses increased risks of depletion and contamination of water sources, especially for pipe-water supply, impacting people in hills and urban areas.

9. Nepal has made substantial progress in raising enrolment rates to 88 per cent in early childhood education and 95 per cent in basic education in 2020/21. However, only 34 per cent of girls and 31 per cent of boys completed a full 12 years of schooling, and there were more than 420,000 children out of school. Only two fifths of school-age girls and boys achieved a foundation level of literacy or numeracy, with poorer learning outcomes among children from disadvantaged groups and underserved communities. Despite innovative programmes to support continuity of learning, the extended school closures during the COVID-19 pandemic are expected to have caused a substantial loss of learning and to have further exacerbated weaknesses in access, quality and equity. The School Education Sector Plan aims to improve equity in the education sector and accelerate progress on recovering the learning loss.

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11 Ibid.
12 Ibid.
13 Ibid.
15 Ibid.
10. The country’s commitment to child rights is enshrined in the Constitution. Despite progressive legislation and policies, violence, including gender-based violence and exploitation affecting children, especially adolescent girls, remain major concerns. While child labour had decreased from 1.8 to 1.1 million between 2008 and 2018, rising trends in child labour and trafficking were reported during the pandemic. With 33 per cent of girls getting married before the age of 18 years, child marriage rates remain persistently high despite a law outlawing the practice. The incidence of physical and psychological violence, particularly gender-based violence, increased dramatically during the pandemic, with 80 per cent of the reported victims of gender-based violence being minors, mostly adolescent girls. Children also increasingly face greater risks of online sexual abuse and exploitation.

11. COVID-19 exacerbated mental health concerns, with a 40 per cent increase in teenage suicide rates adding to the trauma experienced by victims of violence, including gender-based violence. The majority of adolescents reported experiencing stress and symptoms of depression during the pandemic. Mental health issues remain stigmatized, affecting the take-up of psychosocial counselling and emerging mental health services.

12. Social protection schemes cover 25 per cent of the population. Despite being disproportionately poor and representing 36 per cent of the population, children receive only 6 per cent of the social protection budget through the Child Grant. Only 13.7 per cent of persons with disabilities received cash benefits. Despite advances in the Civil Registration and Vital Statistics system, an estimated 23 per cent of children under the age of 5 years do not have birth certificates and are not covered by the safety net.

13. Key lessons learned from the current country programme and the COVID-19 pandemic response include: the need for greater focus on developing provincial and local government capacities to strengthen child-friendly systems and services; the importance of wealth, geography, mobility, ethnicity, caste, gender and disability considerations to be reflected not only in policies and plans, but also in equity-focused programming and budget allocations to close gaps in service coverage; and the imperative to further accelerate climate mitigation and disaster resilience approaches across all programmes.

Programme priorities and partnerships

14. The country programme is aimed at supporting the Government to ensure all children, including adolescents, realize their rights and have opportunities to develop their full potential, free from poverty, in an inclusive, protective society and in a safe and sustainable climate and environment. UNICEF will contribute to children – especially the most disadvantaged – increasingly utilizing inclusive, improved quality health, nutrition, water, sanitation and hygiene, education and child protection

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20 UNICEF, Nepal Child and Family Tracker.
21 Ibid.
22 “3 Years Fact Sheet on Gender-Based Violence – July 2017 to July 2020 – Nepal Police”.
24 “3 Years Fact Sheet on Gender-Based Violence – July 2017 to July 2020 – Nepal Police”.
services and accessing social protection benefits, protected from disasters and other shocks. Considering the triple challenges of Sustainable Development Goal attainment, pandemic recovery and climate change-induced disasters, the country programme will support Nepal in maximizing the remaining ‘demographic window of opportunity’ by developing the human capital of the currently large cohort of children. Geographically, it will focus on the most deprived and disaster-prone areas, including remote rural and poor urban areas and the hardest-to-reach children.

15. The country programme has six components: health; nutrition; climate-resilient water, sanitation and hygiene (WASH); education; child protection; and social protection and child-friendly governance. Four overarching priorities will permeate the programme:

(a) **Child-friendly governance** building capacities for child-friendly policies, plans, strategies, programmes, resource allocations and strengthening service delivery systems at national, provincial and local government levels involving children, families and communities.

(b) **Gender-equality programming** by promoting the well-being and agency of adolescent girls through equitable schooling and skills development, adolescent health and nutrition, positive gender norms, enhanced protection and prevention of child marriage, early pregnancy and gender-based and other violence, and mental health support.

(c) **Social inclusion focus** addressing disparities by age, caste, disability, education, ethnicity, geography, gender, migration and wealth status by modelling effective, equity-focused service delivery approaches.

(d) **Disaster risk reduction, climate resilience and environmental sustainability** building community resilience, child-sensitive climate adaptation and mitigation models, and enhancing child-centred disaster risk reduction and emergency response capacities of young people and government.

16. The following strategies will support these overarching priorities across the components:

(a) Multisectoral convergent programming to achieve catalytic results for children from early childhood to adolescence and for those with a disability;

(b) Social and behaviour change to promote positive gender and social norms, behaviours and practices that foster transformative programming;

(c) Child rights advocacy and participation to engage children and influencers in advocacy with decision makers and to mobilize the public for action, including through the U-Report mechanism;

(d) Evidence, data and analysis to facilitate knowledge leadership on children to inform policy, financing and implementation;

(e) Innovation, including access to and use of digital technologies, to deliver innovative programming for children;

(f) Public-private partnerships, including with development partners, civil society, the private sector, academia and the media to leverage resources and co-create programming for children.

17. The country programme builds on Nepal’s significant progress and commitment towards the Sustainable Development Goals. It contributes to the country’s Fifteenth and emergent Sixteenth Plan and national sectoral and multisectoral strategies, plans and frameworks. It is aligned with the 2030 Agenda for Sustainable Development and its Sustainable Development Goals, the UNICEF Strategic Plan, 2022–2025 and the United Nations Sustainable Development Cooperation Framework (UNSDCF) 2023–
2027, under which UNICEF will coordinate the inclusive and transformative human development outcome and contribute to all other outcomes, enhancing its joint and complementary work with other United Nations entities. The country programme formulation has been informed by consultations with central, provincial and local governments, development partners, including United Nations agencies, civil society and private-sector stakeholders, and children.

**Health**

18. This component is aimed at ensuring children, pregnant and lactating women, and their caregivers, especially the most vulnerable in underserved rural and peri-urban communities, utilize high-impact accessible, quality health interventions and practise healthy behaviours. The programme also aims to contribute to addressing mental health concerns and the impact of air pollution and re-emerging vector-borne diseases brought on by climate and environmental changes, as well as non-communicable diseases and disability.

19. In partnership with the Ministry of Health and Population and partners, UNICEF will contribute to improved health policies, strategies and an enabling multisectoral policy environment. The programme will prioritize health system strengthening in support of pandemic recovery and Nepal’s Health Sector Strategic Plan 2022–2030 to achieve Sustainable Development Goal 3 within the framework of the health Sector Wide Approach and UNSDCF Outcome 2.

20. To support the country’s federalization, UNICEF will contribute to improving national, select provincial and local government capacities and systems strengthening, facilitating a locally driven planning approach to improve maternal, newborn, child and adolescent health outcomes. UNICEF will model service delivery approaches and contribute to strengthening primary health-care and health-seeking behaviour using immunization services as an entry point, with particular focus on reaching missed communities and zero-dose children.

21. Health institutional and front-line worker capacities will be enhanced to improve the delivery of maternal, newborn, child and adolescent health-care interventions. Strategies will include a gradual shift from service delivery to evidence-informed system strengthening, promoting digital transformation, community and child engagement and social behaviour change, as well as advocacy for improved policies and costed plans at all levels.

**Nutrition**

22. This component is aimed at the prevention and reduction of wasting, stunting and micronutrient deficiencies among children and at improving women’s nutrition, with a focus on adolescent girls and the most underserved communities, including peri-urban areas. In support of Nepal’s Multi-Sector Nutrition Plan and in contribution to UNSDCF Outcome 2, UNICEF will facilitate improvements in diets, positive nutrition practices and integrated services implemented by line ministries responsible for education, food, health, nutrition, social protection, and water and sanitation and coordinated by the National Planning Commission.

23. In the federalization context, UNICEF will strengthen nutrition governance by enhancing the capacities of select provincial and municipal governments and decentralized health and nutrition institutions to plan, budget and implement equitable, gender-responsive, disability inclusive policies, programmes and protocols for scaling up prevention, early detection and treatment of all forms of malnutrition in children, adolescents and women. Special focus will be on equipping health and
nutrition professionals with the requisite knowledge and skills to promote child-
centred feeding and care practices

24. The programme will support small-scale modelling of effective gender and
equity-focused strategies targeting the most left-behind children and women, and
advocate for application and scale-up through national and subnational policies,
programmes and resource allocations. Evidence-based strategies for community
engagement and social behaviour change will inform improved community-level
feeding and parenting practices and behaviours.

Climate-resilient water, sanitation and hygiene

25. This component is aimed at ensuring that more children and their families,
especially girls, women, and children with disabilities and from underserved
communities, equitably access and use safe, climate-resilient, gender-responsive
WASH services and adopt hygiene behaviours, with a focus on provinces
experiencing the highest threats to water security and quality. The component will
further contribute to multisectoral efforts to leverage child-sensitive climate change
mitigation and environmental sustainability policies, plans and measures that engage
adolescents. It contributes to the WASH Sector Development Plan, the National
Adaptation Plan and Nationally Determined Contributions, and UNSDCF Outcomes 2
and 3, guided by the Ministry of Water Supply and the National Disaster Risk
Reduction and Management Authority.

26. The programme will support enhanced access to sustainable and safely
managed, climate-resilient water and sanitation services including menstrual hygiene
management in households, schools and health facilities, particularly in underserved
rural and urban slum areas, and contribute to sustaining the country’s open defecation
free status. UNICEF will strengthen disaster-resilient systems, promote groundwater
recharge and the use of alternative energy and proven water conservation
technologies, working in partnership with the Government and the private sector.

27. To support federalization, UNICEF will continue to enhance the planning and
implementation capacity of provincial and local governments with a focus on rolling
out the municipal WASH plans, including improved data through the NWASH tool,
institutional strengthening, resource allocation, monitoring and reporting. The
programme will enable water and sanitation user committees to enhance water quality
management sustainably and to promote resilience in times of water scarcity.

28. The programme will further leverage child-centric climate adaptation models in
national flagship programmes and empower adolescents as agents of change for
climate change adaptation, environmental sustainability and disaster risk reduction
measures in their communities, working through the Child and Youth
Clubs.

Education

29. This component is aimed at enabling children to complete a full course of good
quality education in an equitable, inclusive and safe environment, with a particular
focus on children from the most disadvantaged communities. UNICEF will contribute
to Nepal’s School Education Sector Plan within the framework of the education Sector
Wide Approach and UNSDCF Outcome 2.

30. In collaboration with the Ministry of Education, Science and Technology, the
programme will intensify efforts to address chronically low levels of learning in Nepal
as well as recover the pandemic learning loss. The programme will equip children
with the foundational skills needed to complete their education, by prioritizing early
grades literacy and numeracy, particularly among girls, children with disabilities,
from disadvantaged minorities and migrant families, and those with a different mother
tongue. UNICEF will advocate for greater policy commitment and enhanced resource allocation for equitable and inclusive education.

31. To support federalization, UNICEF will support three tiers of government to develop comprehensive policies, common framework for capacity development and costed education plans. The programme will strengthen education capacities and systems to support children’s school readiness, improve children’s learning and create safe and child-friendly schools. UNICEF will develop alternative pathways and digital offerings to help out-of-school children to re-enter school or acquire essential life skills. The programme will address harmful social and gender norms in education to enable more girls, children with disabilities, and those from disadvantaged communities to have an equitable education chance.

Child protection

32. This component will support Nepal to build an inclusive, protective environment that prevents and responds to violence, exploitation and abuse against children and women. It is aimed at ensuring that children, especially adolescent girls, those with disabilities, from disadvantaged caste and ethnic minorities, and migrant families receive improved protective services including birth registration, prevention and response to gender-based and other forms of violence, particularly child marriage, child labour and trafficking, and sexual exploitation. The programme will contribute to UNSDCF Outcomes 2 and 4, the Act Relating to Children 2018, the National Child Policy and the National Master Plan on Child Labour 2018–2028, working in collaboration with the Ministry of Women, Children and Senior Citizens, other relevant government entities, and partners.

33. In the federal context, UNICEF will strengthen capacities of central, select provincial and local governments to develop inclusive policies, legislation and regulatory frameworks, costed plans and integrated monitoring systems, and leverage increased public financing for child protection. The programme will contribute to developing child-friendly social welfare and justice systems and to building relevant workforce capacities at selected subnational levels to ensure quality child protection services, including safe reporting, survivor-centred assistance and strengthened accountability for child survivors.

34. The programme will prioritize social and behaviour change and child participation approaches in engaging with community, government and other stakeholders to address social norms that drive harmful and abusive practices and to promote positive social norms.

Social protection and child-friendly governance

35. This component will contribute to multisectoral collaborative efforts to reduce multidimensional poverty, strengthen household resilience to shocks and stress, and foster child-friendly governance across the three government tiers. UNICEF will apply a system strengthening data and capacity-building approach to: enhancing the quality and use of disaggregated data and evidence on children to inform inclusive planning and budgeting; promoting child-centred public finance management systems; building a more coordinated, shock-responsive and child-sensitive social protection system; and strengthening integrated child-focused social sector planning and implementation, particularly at provincial and local levels. The programme will contribute to UNSDCF Outcomes 1, 2 and 4.

36. UNICEF will support the national and selected provincial and local governments to operationalize the Integrated National Social Protection Framework and to enhance coverage and gender and disability sensitivity of the Civil Registration and Vital
Statistics system, the National Shock-Responsive Social Protection Framework, the universal Child Grant programme, and the provincial Beti Bachao, Beti Padhao programme. It will also innovate on cash-plus models.

37. To support federalization, UNICEF will build capacities of national and targeted provincial and local authorities to develop child-friendly policies, strategies and budgets that enable improved delivery of quality social services. Engagement with parliamentarians, media and citizens, particularly children, will enhance transparency.

38. UNICEF will support national disaggregated data surveys and real-time monitoring analysis. It will also strengthen research capacities and networks to generate, analyse and disseminate evidence to inform equitable planning and financial investments for children.

Programme effectiveness

39. This component is aimed at ensuring that the country programme is effectively coordinated, managed, monitored and supported at all levels to meet quality programming standards in achieving results for children, including through efficient operational support. It will facilitate programme leadership and coordination for risk-informed programming, emergency preparedness and response, community engagement, social and behaviour change, advocacy and communication.

Summary budget table

<table>
<thead>
<tr>
<th>Programme component</th>
<th>Regular resources</th>
<th>Other resources</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health</td>
<td>2 299</td>
<td>17 000</td>
<td>19 299</td>
</tr>
<tr>
<td>Nutrition</td>
<td>2 598</td>
<td>18 100</td>
<td>20 698</td>
</tr>
<tr>
<td>Climate-resilient water, sanitation and hygiene</td>
<td>1 944</td>
<td>24 000</td>
<td>25 944</td>
</tr>
<tr>
<td>Education</td>
<td>2 129</td>
<td>27 600</td>
<td>29 729</td>
</tr>
<tr>
<td>Child protection</td>
<td>2 449</td>
<td>10 000</td>
<td>12 449</td>
</tr>
<tr>
<td>Social protection and child-friendly governance</td>
<td>2 140</td>
<td>8 000</td>
<td>10 140</td>
</tr>
<tr>
<td>Programme effectiveness</td>
<td>11 918</td>
<td>15 300</td>
<td>27 218</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>25 477</strong></td>
<td><strong>120 000</strong></td>
<td><strong>145 477</strong></td>
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</tbody>
</table>

Programme and risk management

40. The country programme will be coordinated by the Ministry of Finance and the National Planning Commission, while programme components will be managed by relevant ministries, and provincial and local governments, in collaboration with development partners, civil society and the private sector. UNICEF will contribute to development partner and UNSDCF coordination across the social sectors. As humanitarian cluster lead for Nutrition, WASH, Education and Protection, UNICEF will support the Government in preparedness, partner coordination and response to disasters and other emergencies and foster humanitarian-development programming linkages and transitions.
41. The country programme will be risk-informed to address assessed threats to children and to planned results. UNICEF will mitigate disaster risks through continued enhancement of emergency preparedness and response capacities of disaster management authorities. Risks of sexual exploitation and abuse will be mitigated through comprehensive prevention and response measures for staff and partners. Risks posed by reduced investments in children due to shrinking fiscal space and development aid uncertainties will be mitigated through enhanced leveraging of public and private resources and prioritization of high impact cost-effective strategies.

42. This country programme document outlines UNICEF contributions to national results and serves as the primary unit of accountability to the Executive Board for results alignment and resources assigned to the programme at the country level. Accountabilities of managers at the country, regional and headquarters levels concerning country programmes are prescribed in the organization’s programme and operations policies and procedures.

**Monitoring, learning and evaluation**

43. The results and resources framework, the costed evaluation plan and the Integrated Monitoring and Evaluation Plan will form the basis for outcome and output monitoring and reporting. They are aligned with the results frameworks of the country’s Fifteenth Plan and sector plans/strategies and the UNSDCF. Annual reviews with the Government and partners will assess progress, identify opportunities and risks and make appropriate programming adjustments.

44. UNICEF will support the Central Bureau of Statistics and line ministries to strengthen Sustainable Development Goal data management, particularly through the Multiple Indicator Cluster Survey, routine management information and monitoring systems of government programmes to ensure systematic collection, analysis and progress monitoring of the situation of children, with special focus on caste, ethnicity, disability, gender equality and social inclusion.

45. UNICEF will enhance its capacity-building support for improved monitoring, statistical and evaluation capacities at provincial and municipal levels, enabling local government programming that is responsive to the specific vulnerabilities of children. Building on good practice during the pandemic, UNICEF will continue the real-time situation monitoring and enhance its field monitoring to inform programmatic strategies.
Annex

Results and resources framework

Nepal – UNICEF country programme of cooperation, March 2023–December 2027

**Convention on the Rights of the Child:** Articles 2–42

**National priorities:** Nepal Fifteenth Plan; Health Sector Strategic Plan; Multisector Nutrition Plan; Water, Sanitation and Hygiene (WASH) Sector Development Plan; School Education Sector Plan; National Child Policy; National Social Protection Framework

**United Nations Sustainable Development Cooperation Framework (UNSDCF) outcomes involving UNICEF:** 1–4

**Related UNICEF Strategic Plan, 2022–2025 Goal Areas:** 1–5

<table>
<thead>
<tr>
<th>UNSDCF outcomes</th>
<th>UNICEF outcomes</th>
<th>Key progress indicators, baselines (B) and targets (T)</th>
<th>Means of verification</th>
<th>Indicative country programme outputs</th>
<th>Major partners, partnership frameworks</th>
<th>Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outcome 2.</td>
<td>1. Children, adolescents, pregnant and lactating women and caregivers have improved access to, and better utilization of, high-quality health interventions and are practising healthy behaviours, especially those among vulnerable populations in most underserved communities</td>
<td>* Universal health coverage index for reproductive, maternal, newborn and child health interventions B: 53 T: 70</td>
<td>Sustainable Development Goal 1.1 Ministry of Health and Population (MoHP), partners at federal, provincial and municipal level have improved capacity and resources to deliver inclusive high-quality reproductive, maternal, neonatal, child and adolescent health interventions.</td>
<td>MoHP</td>
<td>2 299</td>
<td><strong>Total</strong> 19 299</td>
</tr>
<tr>
<td></td>
<td>Percentage of pregnant women under the age of 20 years delivering their babies in a health facility B: 81% T: 90%</td>
<td>Nepal Multiple Indicator Cluster Survey (NMICS)</td>
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<td></td>
<td>Percentage of children aged 0–11 months vaccinated with three doses of DTP-containing/Penta vaccine B: 81% T: 95%</td>
<td>NMICS</td>
<td></td>
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<td>UNSDCF outcomes</td>
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<td>including during disasters.</td>
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<td>Percentage of adolescents who report symptoms of depression/anxiety reporting contact with health professional or counsellor for mental health care B: 0% T: 15% in Karnali and Madhesh Pradesh</td>
<td>Mental health measurement of adolescent population</td>
<td>1.2 National immunization systems and service capacities are strengthened and leveraged (as part of primary health care) to deliver equitable health services, especially among zero-dose children and missed communities. 1.3 Children, caregivers, front-line workers, and national and subnational institutions have improved capacity to provide mental health interventions. 1.4 Strengthened health and</td>
<td>German Development Bank (KfW), Japan International Cooperation Agency (JICA), Korea International Cooperation Agency, Gavi, the Vaccine Alliance</td>
<td>RR OR Total</td>
</tr>
<tr>
<td>UNSDCF outcomes</td>
<td>UNICEF outcomes</td>
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</tbody>
</table>
| Community engagement systems in targeted provinces that address emerging priorities, and environmental and disaster impacts. | * Percentage of children under the age of 5 years who are stunted (National; Karnali; Sudarpashim; Lumbini; Madhesh Pradesh) | B: 32%; 48%; 41%; 36%; 34%  
T: National: < 20% and subnational: < 35% | NMICS | 2.1 Nutrition stakeholders and select communities have improved knowledge, skills and resources to improve diets, services and practices to prevent all forms of malnutrition and manage wasting in early childhood. | National Planning Commission (NPC), MoHP, MoEST, Ministry of Federal Affairs and General Administration (MoFAGA), Ministry of Home Affairs (MoHA), Ministry of Finance (MoF), Ministry of Agriculture and Livestock Development, PLGs | 2 598  18 100  20 698 |
| * Percentage of children under the age of 5 years who are wasted  
B: 12%; 18%; 14%; 14%; 21%  
T: < 5% national and subnational < 10% | NMICS | 2.2 Federal and local government stakeholders | | | | |
| Percentage of children aged 6–23 months receiving a minimum number of food groups | NMICS | | | | | |

2. The most vulnerable infants, young children, adolescents, and pregnant and breastfeeding women, especially from underserved communities, can access and utilize gender-responsive, quality, high-impact nutrition interventions and adopt healthy diets and nutritional care practices.
<table>
<thead>
<tr>
<th>UNSDCF outcomes</th>
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<tr>
<td></td>
<td></td>
<td>B: 40%</td>
<td></td>
<td>have improved knowledge, skills and resources for delivering high-impact and equitable maternal and adolescent nutrition services.</td>
<td>European Union, World Bank, USAID; KfW World Food Programme, Food and Agriculture Organization</td>
<td>RR OR Total</td>
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<td></td>
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<td>T: 60%</td>
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<tr>
<td>Percentage of women aged 15–49 years with anaemia</td>
<td></td>
<td>B: 41%</td>
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<td></td>
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<td>T: 30%</td>
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<tr>
<td>Nepal Demographic and Health Survey (NDHS)</td>
<td></td>
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<td>2.3 Increased knowledge among families on nutritious foods, healthy diets and optimal young child feeding, care and hygiene practices.</td>
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<td>2.4 Increased capacity of Government and partners for equitable, gender-responsive, evidence-based and risk-informed nutrition</td>
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<td>Outcome 2, as above</td>
<td>3. More children and families, especially those with a disability and from the most disadvantaged communities, including in humanitarian contexts, equitably access and use safe, climate-resilient WASH services and live in a healthier, more sustainable environment.</td>
<td>* Proportion of population using safely managed drinking water service at community level  B: 19%  T: 40%</td>
<td>NMICS</td>
<td>3.1 Increased capacity of local governments, community and other WASH stakeholders to safely manage gender-responsive, equitable, sustainable, WASH services and menstrual hygiene programmes in communities, schools and health facilities, including in times of disaster.  3.2 Strengthened systems and</td>
<td>Ministry of Water Supply (MoWS)  Ministry of Energy, Water Resources and Irrigation MoFAGA, MoHA National Disaster Risk Reduction and Management Authority (NDRRMA) PLGs  Finland, Norway, European Union, FCDO, civil society organizations (CSOs)</td>
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<td>increased capacity of three tiers of government and other WASH stakeholders to plan, implement and monitor equitable, climate-resilient and gender-responsive WASH in select underserved areas.</td>
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<td>3.3 Adolescents and their communities have locally accessible institutional capacities to reduce vulnerabilities relating to climate change, predictable disaster risks and environmental degradation.</td>
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<td>Outcome 2, as above</td>
<td>4. The education system provides equitable,</td>
<td>Proportion of children who demonstrate foundational reading (girls; boys; children with functional</td>
<td>NMICS</td>
<td>4.1 Government and communities have increased</td>
<td>MoEST School Management</td>
<td>2 129 27 600 29 729</td>
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<td>inclusive and good-quality education, from pre-primary to Grade 12, in a safe and supportive environment for all children, especially those from the most disadvantaged backgrounds.</td>
<td>difficulties; Madhesh Pradesh; Lumbini; Karnali; Sudarpashim; disadvantaged castes) B: 40%; 38%; 33%; 26%; 37%; 46%; 30%; 15% T: 43%; 42%; 38%; 30%; 42%; 50%; 34%; 18%</td>
<td>capacity to deliver inclusive and good-quality early learning opportunities.</td>
<td>Educational Management Information System (EMIS)</td>
<td>Committee Federation PLGs European Union, World Bank, ADB, JICA, Norway, Finland CSOs</td>
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<td>Proportion of children who demonstrate foundational numeracy B: 36%; 38%; 34%; 32%; 35%; 33%; 22%; 17% T: 40%; 41%; 39%; 37%; 40%; 38%; 27%; 21%</td>
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<td>New entrants in Class 1 with experience of early childhood education and development B: Girls: 75%; boys: 75% T: Girls: 86%; boys 86%</td>
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<td>Survival rate to Grade 12 B: Girls: 34%; boys: 32% T: Girls: 43%; boys: 42%</td>
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<td>Outcome 4. By 2027, more people, especially women, youth, and the most marginalized and poor increasingly participate in, and benefit from, coordinated, inclusive, accessible, participatory, transparent, and gender-responsive governance, access to justice and human rights at federal, provincial, and local levels.</td>
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NDHS = National Demographic Health Survey
NLFS = Nepal Labour Force Survey
NMICS = Nepal Multiple Indicator Cluster Survey
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<td>women in physical and online settings.</td>
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<td>5.3 Children, and their parents/caregivers have increased capacity to prevent and respond to violence, address discriminatory gender and social norms at home, school, community and in the digital space.</td>
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<td>Outcome 1. By 2027, more people, especially women, youth, the most marginalized and poor, increasingly benefit from, and contribute to, inclusive, resilient, and sustainable socioeconomic transformation at federal, provincial and local levels.</td>
<td>6. Children benefit from strengthened policies, budgets and programmes that address multidimensional poverty, vulnerability and exclusion especially among children from marginalized communities, children with disabilities, adolescent girls and those living in places at high risk of disaster.</td>
<td>* Percentage of children living in poverty B: 21.8% T: 15%</td>
<td>Nepal MPI</td>
<td>6.1 Strengthened federal and select provincial government technical and analytical capacity for evidence-based planning and budgeting.</td>
<td>MoF, NPC, NDRRMA, MoHA CBS, MoWCSC, MoFAGA, PLGs</td>
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<td>Outcomes 2 and 4, as above</td>
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<td>6.2 National and subnational governments and communities have the capacity to mobilize citizens' engagement, including children's participation.</td>
<td>ILO, UNDP, UN-Women, PLGs</td>
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<td>6.3 Strengthened government capacity at all levels for social protection programme scale-up.</td>
<td>European Union, FCDO, Norway, World Bank, CSOs</td>
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<td>7. The country programme is efficiently designed, coordinated, managed and supported to meet quality programming standards and achieve results for children.</td>
<td>Percentage performance indicators meeting scorecard benchmarks B: 80% T: 90%</td>
<td>Scorecard InSight</td>
<td>7.1 UNICEF staff and partners are provided with guidance, tools and resources for effective planning and monitoring, communication, advocacy, and partnerships; social and behaviour change, emergency and disaster response, and risk management</td>
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