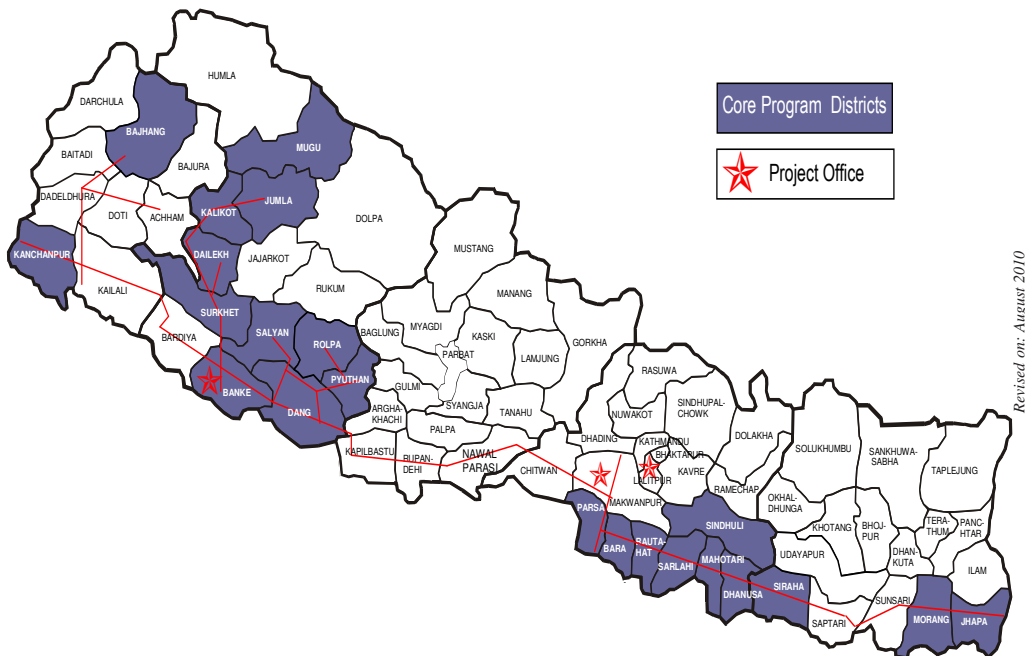


Geographic Coverage

Twenty-two districts are supported as core program districts (CPDs), accounting for 37% of the population of Nepal (see map). CPDs fall into two geographic clusters, each supported by a field office. One cluster is in the central/eastern terai, where we are building on inputs provided during NFHP I; the other cluster is in mid-west and far-western regions, consisting mainly of hill and mountain districts, most of which were not covered under NFHP I. Of the 22 CPDs, 13 are considered low Human Development Index districts (UNDP 2004), i.e., among the bottom one-third in the country, and six are considered intermediate. Intensive support is provided in the field, through two field offices as well as the full-time presence of NFHP II staff based in District (Public) Health Offices.

In addition to the CPDs, NFHP II continues to provide technical support on CB-IMCI in several districts where expansion was supported by USAID. Such support will be continued for at least two years or as per program need.



Revised on: August 2010

Contact:

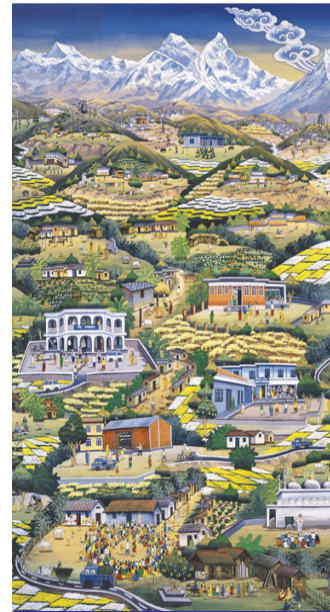
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Nepal Family Health Program II



Introduction

Nepal Family Health Program II (NFHP II) is USAID/Nepal's major Family Planning/Maternal, Neonatal and Child Health (FP/MNCH) bilateral project and runs from 19 December 2007 to 30 September 2012. NFHP II is implemented by JSI Research and Training Institute, Inc. and its partners – Save the Children, EngenderHealth, Jhpiego, World Education, Nepali Technical Assistance Group, Nepal Fertility Care Center, Management Support Services, the Nepal Red Cross Society, United Mission to Nepal, BBC World Service Trust, Digital Broadcast Initiative Equal Access Nepal, and Family Planning Association of Nepal. USAID/Nepal supported a similar FP/MNCH bilateral project between December 2001 to November 2007 (NFHP I), which was also implemented successfully by JSI R&T and partners.

The goal of NFHP II is to improve the provision and use of public sector FP/MNCH, supporting the Government of Nepal's intention to reduce fertility and mortality, as expressed in the Health Sector Strategy (2004); the Nepal Health Sector Program – Implementation Plan (2004-2009); and the Second Long Term Health Plan (1997-2017).

USAID, through NFHP II, expects to achieve the following important results:

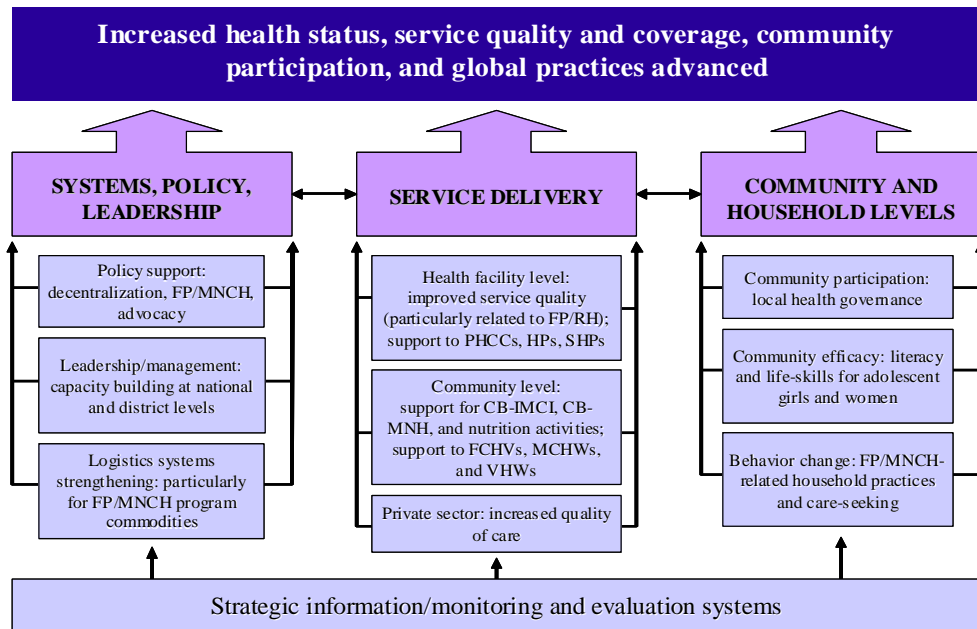
- public health *impact* at scale,
- strengthened *capacity* of Ministry of Health and Population (MoHP) systems,
- increased *coverage* among the *marginalized*,
- increased *community participation* in decision-making concerning management of local health services, and
- advancing *global best practices* in FP/MNCH.



FCHVs at Work:
counting a child's respiratory rate to detect possible respiratory infection (left) and giving a child a dose of vitamin A (right).



The work of NFHP-II is organized within 3 broad areas:



Through its work in: (a) systems, policy, and leadership support and capacity building; (b) service delivery support and improvement; and (c) community and household-level activities, NFHP II works to improve the health status of communities throughout Nepal. The effectiveness of all NFHP II activities is continuously monitored and improvements made through use of strategic information.

Program Description

NFHP II focuses on *community-level* and other peripheral FP/MNCH services and works primarily in support of *public sector* services (although in close coordination with social marketing, NGO and private sectors). Support is provided *at the central level*, primarily to several Divisions and Centers under the Department of Health Services. This support includes technical assistance on development of policies, standards, guidelines, curricula, information systems, preparing annual workplans, program monitoring, etc. Nationwide support is provided to implement various activities such as vitamin A supplementation, FCHV capacity building, and strengthening of the logistics system.

All technical areas and activities are implemented on a fully integrated basis under the leadership of MoHP, with partners co-located at central and field levels, working within a single management structure. At district level, project staff are based in district health offices and focus not only on improving program performance but also on strengthening the capacity of GoN counterparts. Support in core program districts vary by district priorities and are delivered on a phased basis.

Select examples of technical areas and activities covered under NFHP II include:

- **Maternal/reproductive health:** use of the Birth Preparedness Package, prevention of postpartum hemorrhage at health facilities and home birth, strengthening facility-based ante- and perinatal care and skilled care at delivery, use of magnesium sulphate for treatment of eclampsia.
- **Newborn health:** management of low birth weight babies, promotion of essential newborn care practices, community-based infection management.
- **Child health:** Community-Based Integrated Management of Childhood Illnesses (CB-IMCI), mass vitamin A supplementation, use of zinc/ORS for diarrhea treatment.
- **Family planning:** comprehensive and routine services, increasing access through Maternal & Child Health Workers and Village Health Workers, voluntary surgical contraception.
- **Information and logistics systems:** strengthening the Health Management Information System and Logistics Management Information System at central, regional, district and health facility levels.
- **Performance improvement:** technical support visits at facility/community levels, FP/MNCH in-service training/system strengthening, facility-based infection prevention, performance improvement activities including district Quality Assurance Working Group.
- **Local health governance:** capacity building of Health Facility Operational and Management Committees (HFOMC).
- **Testing innovative FP/MNCH approaches:** such as use of chlorhexidine for umbilical cord care, distribution channel for newborn vitamin A supplementation, and use of Gentamicin in Unijet by FCHVs to treat newborn infection.
- Support to the Female Community Health Volunteers (FCHV).
- **Women's and girls' empowerment:** increasing functional literacy, health education, and girls' access to school.



Community members learn about family planning methods during a Health Exhibition

An HFOMC creates a social map for identifying dalit and marginal clusters



An FCHV using the Birth Preparedness Package to orient mothers



A pregnant woman undergoes an antenatal checkup at a health facility