

EXEMPLARS IN GLOBAL HEALTH

NEPAL



Under-Five Mortality

Project Status: **Complete**

TOP-LINE FINDING

From 2000 to 2015, Nepal reduced its under-five mortality (U5M) rate by 53%.

- » Nepal's Female Community Health Workers (FCHVs) delivered key child health interventions, including treatment for diarrhea and pneumonia, and counseling on birth preparedness. FCHVs also helped provide care in hard-to-reach areas.
- » Nepal conducted local research to validate global recommendations and understand local needs. This helped gain buy-in from local officials, foster ownership, and spur implementation.



Stunting

Project Status: **Complete**

TOP-LINE FINDING

In 1995, Nepal had the highest stunting rate in the world. Within 20 years, it reduced its stunting prevalence from nearly 70% to 36%.

- » Nepal's government shifted considerably toward pro-poor policy making after 1990, invested heavily in its health and education systems, and scaled up sanitation-related behavior change campaigns across the country.
- » Along with steady economic improvements, effective donor coordination, and thoughtful supply- and demand-side investments, these broad-based government efforts reached more people with basic services, to dramatically reduce the country's national stunting burden.

PARTNERS



University of Global Health Equity
Nepal Public Health Foundation

PARTNERS



The Hospital for Sick Children (SickKids)
Nepal Public Health Foundation

ABOUT EXEMPLARS IN GLOBAL HEALTH

The Exemplars in Global Health (EGH) program is a global coalition of partners including researchers, academics, experts, funders, country stakeholders, and implementers. Our mission is to identify positive global health outliers, analyze what makes countries successful, and disseminate core lessons so they can be adapted in comparable settings. We aim to help country-level decision makers, global partners, and funders make strategic decisions, allocate resources, and craft evidence-based policies. A small, core team supporting EGH is based at Gates Ventures, the private office of Bill Gates, and closely collaborates with the Bill & Melinda Gates Foundation.

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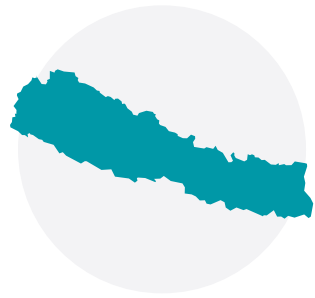
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EXEMPLARS IN GLOBAL HEALTH

NEPAL



Neonatal and Maternal Mortality

Project Status: In Progress

TOP-LINE FINDING

Nepal outpaced other countries in South Asia, with maternal mortality ratio (MMR) declines of 553 to 186 deaths per 100,000 live births between 2000 and 2017, and neonatal mortality rate (NMR) declines from 40 to 21 per 1,000 live births between 2000 and 2018.

- » Nepal expanded health facility infrastructure through increased attention to human resource development, evidenced by the Skilled Birth Attendant Policy passed in 2006. Access to services also increased, from 7.6% in 1996 to 77.5% in 2019.
- » Nepal's fertility decline (2000 to 2017) contributed to 44% of its MMR decline and 47% of its NMR decline, with notable declines in age at first marriage and increased women participation in the workforce.

PARTNERS



South Asian Institute for Policy Analysis and Leadership
The London School of Hygiene & Tropical Medicine (LSHTM)
Countdown to 2030



Vaccine Delivery

Project Status: Complete

TOP-LINE FINDING

Nepal has maintained consistently high coverage of DTP1 since 2000, and from 2000 to 2006, has shrunk the gap between DTP1 and DTP3.

- » Nepal developed a sense of shared goals and responsibility for vaccination among government, partners, and community members through the constitution's codifying of health and vaccines as a right of all Nepalese citizens.
- » Nepal effectively used data to both strengthen decision-making at the national and local levels and foster health system collaboration.

PARTNERS



Center for Molecular Dynamics Nepal (CMDN)
Emory University



Adolescent Sexual and Reproductive Health and Rights

Project Status: In Progress

TOP-LINE FINDING

Nepal has been identified as a positive outlier with a strong trajectory in reducing age-specific fertility rates (ASFR) for 15 to 19-year-olds. Research will explore drivers of this progress and adolescent sexual and reproductive health and rights (ASRHR) more broadly, including prevention and management of unintended pregnancy. Research questions include.

- » The role of contextual factors and health system elements in reducing ASFR for ages 15 to 19.
- » How progress on ASRHR for vulnerable adolescents has been addressed.
- » Specific interventions contributing to progress and their scalability and sustainability.

PARTNERS



Center for Research on Environment, Health, and Population Activities (CREHPA)
African Institute for Development Policy (AFIDEP)