Nepal Family Health Program Year Three Assessment

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Introduction

The Nepal Family Health Program (NFHP) began in December 2001. This assessment covers Year Three of the project (Mid-July 2003 – Mid-July 2004). The main body of the report provides information for 20 indicators based on various sources including published and unpublished data from the Health Management Information System (HMIS) and the Logistics Management Information System (LMIS) maintained by the Ministry of Health, monitoring data collected by NFHP, and a survey of Female Community Health Volunteers (FCHVs) conducted by New Era. The indicators are those appearing in the NFHP monitoring and evaluation plan as of November 2003. A summary of indicators and targets is shown in Appendix A.

The NFHP is implemented in 17 core program districts (CPDs) covering approximately 35 percent of the total population of Nepal. The core program districts are: Jhapa, Morang, Siraha, Bara, Dhanusha, Rasuwa, Banke, Bardiya, Bajura, Kailali, Kanchanpur, Sunsari, Chitwan, Parsa, Nawalparasi, Mahottari, and Rautahat. NFHP supports the strengthening of the district and community health system with a focus on family planning and maternal health services, and provides technical assistance for five national health programs including family planning, safe motherhood, vitamin A, community-based integrated management of childhood illness (CB-IMCI), support for female community health volunteers, and support for the national integrated logistics system.

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¹ Limited technical assistance is also provided in 10 additional districts but they are not included in this assessment.

Overall Program Indicators

Performance	Indicator	Data source	Frequency of	Reference	Value of
indicator	definition		data collection	period	indicator
0-1 Under Five	Number of	DHS	Approx. every	The five year	91
Mortality*	deaths under age		five years	period	confidence
National	five per 1000			preceding the	interval=
	live births			survey	(82-101)
CPDs only					99
Non-CPDs	Unit: Rate				87
0-2 Total	Average number	DHS	Approx. every	The three year	4.1
Fertility Rate*	of children that		five years	period	confidence
National	would be born			preceding the	interval=
	to a woman			survey	(3.9-4.3)
	during her childbearing				
	years at current				
	rates				
	Tutos				
CPDs only					4.0
Non-CPDs	Unit: Rate				4.2
0-3	Percentage of	DHS	Approx. every	2001	35.4%
Contraceptive	married women		five years		
Prevalence	of reproductive				
Rate*	age using a				
National	modern				
	contraceptive				
	method				
CDD I					40.00/
CPDs only	Units Dancontage				40.0%
Non-CPDs	Unit: Percentage				32.5%

^{*} Also a USAID PMP indicator

These national level population-based indicators are derived from the 2001 Nepal Demographic and Health Survey, a nationally representative survey of 8,726 ever-married women age 15-49 and 2,261 ever-married men age 15-59. These indicators were discussed in the Baseline Assessment.

These indicators will not be available again until the next Demographic and Health Survey is conducted.

- ✓ The EOP target for indicator 0-1 is 70 per 1000.
- ✓ The EOP target for indicator 0-2 is 3.6 children per woman.
- ✓ The EOP target for indicator 0-3 is 41 percent.

Component I Indicators

Performance indicator	Indicator definition	Data source	Frequency of data collection	Reference period	Value of indicator
1-1 Availability of Commodities at Health Facilities*	Percentage of health facilities (PHCs, HPs, SHPs) that maintain availability of 7 key commodities in CPDs year round Unit: Percentage	LMIS	Quarterly+ Annually	Mid-July 2003 – Mid-July 2004	44 %

^{*} Also a USAID PMP indicator

This indicator measures the year round availability of seven key commodities at health facilities: condoms, oral pills, ORS packets, DepoProvera, iron tablets, Vitamin A tablets, and cotrimoxazole. The data are provided by storekeepers at health facilities (primary health care centers (PHCs), health posts (HPs) and sub health posts (SHPs) to the Logistics Management Division at the Ministry of Health.

The data show that, in the 17 core program districts (CPD), forty four percent of facilities maintained year round availability of all seven commodities compared to 27 percent during the previous year. It is worth noting that the indicator is based on a stringent criterion – the availability in all four quarters of all seven commodities. This means that if a facility is out of stock of even one commodity in one quarter it will not meet the requirement for the indicator.

Overall, the commodity most likely to be out of stock is Vitamin A tablets. Across districts, the average percentage with Vitamin A tablets available ranges from 54 percent in Bara to 93 percent in Kailali. The average availability of condoms, injectables, and pills is 85 percent or greater in every district. Among the other three commodities, the average percentage available is less than 80 percent in only a few districts.

- ✓ The Year Three target for indicator 1-1 is 38 percent.
- ✓ The EOP target for indicator 1-1 is 50 percent.

		Average percent of health facilities reporting availability of commodity in a quarter (averaged across four quarters)								
District	Condom	Injectab les	Pills	ORS	Vitamin A	Cotrim	Iron	All 7	with all seven commodities in all four quarters	
Jhapa	96	96	92	96	85	95	99	73	44	
Morang	95	96	93	96	89	94	96	72	42	
Siraha	91	97	96	92	71	93	92	55	24	
Sunsari	100	98	98	98	97	99	97	90	65	
Bara	83	93	88	70	58	86	91	54	15	
Chitwan	98	98	97	99	92	93	94	82	56	
Dhanusha	89	95	93	86	77	92	93	61	27	
Mahottari	98	99	98	97	82	95	96	77	38	
Parsa	98	99	96	99	86	93	94	75	44	
Rasuwa	98	97	99	94	98	97	99	90	67	
Rautahat	98	100	100	98	95	99	98	91	67	
Nawalparasi	94	97	95	96	87	93	91	73	40	
Banke	95	97	96	93	96	79	84	69	19	
Bardiya	85	94	89	91	90	94	80	62	27	
Bajura	86	99	95	86	87	97	90	68	26	
Kailali	98	99	100	98	98	96	97	93	79	
Kanchanpur	99	99	97	99	92	98	97	88	67	
17 CPDs	94	97	95	93	87	94	93	75	44	

Performance indicator	Indicator definition	Data source	Frequency of data collection	Reference period	Value of indicator
1-2 Availability of Commodities at Community Level	Percentage of FCHVs who have 4 key commodities available Unit: Percentage	Survey	Annually	August- September 2004	48%

This indicator measures the availability of four key commodities among Female Community Health Volunteers (FCHVs). FCHVs are community-based health workers who are trained to provide basic health services and health education, including distribution of condoms and oral pills, treatment of ARI in children, treatment of diarrhea with ORS, and the distribution of Vitamin A capsules to children (Bernklau, 2002). NFHP collaborates with the Ministry of Health to support the FCHV program in the 17 core districts.

The data for this indicator were collected in a survey of a sample of 1640 FCHVs in randomly selected wards throughout the 17 core program districts. The survey was conducted by New Era Ltd. One hundred FCHVs were selected in each district. Questionnaires are not available for 60 of the selected FCHVs due to a variety of reasons. Across districts, the number of complete interviews ranges from 89 to 99. All interviews were conducted in August-September 2004.

The sample was designed to be representative of the FCHVs in each district and of the total population of FCHVs in the 17 districts. To select the sample, all VDCs and their corresponding wards in each CPD were listed. Then, wards were selected systematically using a sampling interval calculated by dividing the number of wards by 100. Within each selected ward, the FCHV was selected for interview. In wards that contained more than one FCHV, one was randomly selected for interview. To combine the respondents into a sample that is representative of all FCHVs in the CPDs, the data are weighted by the total number of FCHVs in each district (see table below). These totals are taken from records kept by NTAG (Nepal Technical Assistance Group). These numbers are close, but not identical, to those reported in the 2003/2004 HMIS report.² The number of unweighted and weighted cases and the results for indicator 1- 2 are shown below.

There are two types of FCHVs in the districts. 'Treatment' FCHVs are trained to identify and treat cases of pneumonia in children under age five. 'Referral' FCHVs are trained to identify and refer cases of pneumonia but not to treat them, so they would not be expected to have cotrimoxazole available. Indicator 1-2 is defined as the percentage of FCHVs who had available at the time of interview all of the commodities they would be expected to have. For 'Treatment' FCHVs, these would include all four commodities – condoms, pills, ORS, and cotrimoxazole. For 'Referral' FCHVs, these would include only condoms, pills, and ORS.

The overall percentage of FCHVs who had the expected commodities is 48 percent with district percentages ranging from 18 percent in Bara to 77 percent in Chitwan and Kanchanpur. The low percentages with ORS in a few districts – Bara, Rautahat, Siraha, Bajura, and Dhanusha – contribute to low overall availability of commodities in these districts. There are a number of reasons for the decline in availability in some districts. First,

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² The total number of FCHVs is identical in the NTAG records and the HMIS, except for 5 districts. In all 5 districts, the HMIS total is greater than the NTAG total (Differeces are: Jhapa–4, Nawalparasi-8, Bajura-17, Kailali-71, Kanchanpur-86).

beginning last year, the Ministry of Health budget for ORS was sent to districts for district-level procurement instead of central procurement, as was the practice previously. This change resulted in some districts procuring less ORS than needed or as budgeted. Second, the price of ORS at the district level is somewhat higher than at the central level which also resulted in fewer packets procured. Third, an epidemic of diarrhea/gastroenteritis occurred in June-July 2004, which caused a sudden surge in demand. Finally, due to the ongoing conflict situation, large numbers of health facilities and FCHVs are inaccessible for supervision and monitoring. This prevented the effective monitoring of ORS availability by NFHP and MOH staff

Note that the value of this indicator is not directly comparable to the value computed from the Baseline FCHV survey. In that survey, it was not possible to separate treatment from referral FCHVs so the figure was biased downward by the inclusion in the denominator of referral FCHVs who did not have cotrimoxazole.

Number of weighted and uweighted cases, FCHV survey 2004

Unweighted cases Weighted cases

	Unweighted cases	Weighted cases
Jhapa	97	59
Morang	96	79
Sunsari	98	143
Siraha	98	128
Dhanusha	98	122
Mahotari	99	92
Rasuwa	94	33
Rautahat	96	122
Bara	99	118
Parsa	97	99
Chitwan	94	54
Nawalparasi	99	95
Banke	96	89
Bardiya	96	112
Bajura	89	33
Kailali	95	161
Kanchanpur	99	101
17 CPDs	1640	1640

Percentage of FCHVs who had commodities available during interview, 2004

		All FC	HVs		Treatm	nent FCHV	s only	All FCHVs
				Weighted			Weighted	3 or 4
District	Condoms	Pills	ORS	number	Cotrim	All four	number	commodities
Jhapa	70.1	83.5	92.8	59	90.9	61.8	34	57.7
Morang	88.5	87.5	92.7	79	95.7	73.4	77	72.9
Sunsari	84.7	89.8	90.8	143	92.5	68.8	117	68.4
Siraha	88.8	87.8	60.2	128	64.4	42.4	77	41.8
Dhanusha	63.3	54.1	56.1	122	87.9	24.2	82	26.5
Mahottari	83.8	84.8	69.7	92	84.0	54.0	46	55.6
Rasuwa	73.4	77.7	80.9	33	83.1	55.8	27	55.3
Rautahat	63.5	67.7	34.4	122	50.7	19.7	90	18.8
Bara	75.8	76.8	23.2	118	71.8	21.1	85	18.2
Parsa	87.6	67.0	77.3	99	79.0	53.2	63	48.5
Chitwan	91.5	91.5	92.6	54	92.2	77.8	52	76.6
Nawalparasi	70.4	75.5	85.7	94	77.1	57.1	67	54.1
Banke	43.8	44.8	72.9	89	97.9	35.4	45	28.1
Bardiya	82.3	66.7	83.3	112	93.3	56.7	35	50.0
Bajura	73.0	80.9	50.6	33	89.8	30.7	33	31.5
Kailali	76.8	74.7	85.3	161	86.7	56.7	51	55.8
Kanchanpur	91.9	86.9	96.0	101	97.7	79.1	44	76.8
CPDs	77.2	75.5	72.0	1639	82.4	49.5	1024	48.1

[✓] The Year Three target for indicator 1-2 is 52 percent
✓ The EOP target for indicator 1-2 is 60 percent (revised in Year Two).

Performance indicator	Indicator definition	Data source	Frequency of data collection	Reference period	Value of indicator
1-3 Pneumonia Treatment*	Number of pneumonia cases in children (0-59) months treated by community health workers (FCHVs, MCHWs, VHWs) and health facilities in CPDs where community based pneumonia has been initiated	NFHP monitoring records	Annually	Mid-July 2003 – Mid-July 2004	250,144
	Unit: Number				

^{*} Also a USAID PMP indicator

The indicator measures the number of pneumonia cases in children aged 0-59 months that were treated by community health workers (CHWs) including FCHVs, maternal child health workers (MCWs), and village health workers (VHWs) and by health facilities in selected districts. It does not include children treated by the private sector.

During the reference period, 16 of the 17 CPDs had trained community health workers to identify and treat pneumonia among children. These data are taken from the treatment books maintained by CHWs and reported to the District Health Office. The data are then compiled by NFHP staff.

The indicator shows that, during Year Three, 146,267 children aged 2-59 months were treated for pneumonia by CHWs and 103,877 children aged 0-59 months were treated in health facilities for a total of 250,144 children. This represents an increase of 24,247 cases compared to Year Two. There are several districts in which the number of children treated in health facilities has declined compared to Year Two but larger increases in the number of cases treated by CHWs results in a net increase.

- ✓ The Year Three target for indicator 1-3 is 235,000 in 16 districts.
- ✓ The EOP target for indicator 1-3 is 260,000 in 17 districts (revised in Year Two).

Number of pneumonia cases treated by CHWs and health facilities by year

		eumonia	cases tre IWs	ated by	# of pneumonia cases treated in health facilities			
District	(c)		2-60 mont	hs)			0-60 months	s)
	2000- 2001	2001- 2002	2002- 2003	2003- 2004	2000- 2001	2001- 2002	2002- 2003	2003- 2004
Jhapa	8861	10694	13060	13209	8611	11551	14255	12208
Morang	17177	17295	19921	22698	8418	7942	9068	8330
Sunsari	8761	9166	11081	10220	8055	11203	10604	7614
Siraha	8272	13648	15051	13574	10927	17037	17443	13098
Dhanusha	1	-	6471	10042	-	-	7809	9181
Mahotari	-	-	2912	10973	-	-	6310	6650
Rasuwa	1148	879	1238	1355	929	1049	1216	971
Rautahat	12746	10050	9506	12889	6780	6294	8482	8482
Bara	5756	5720	7462	10994	3905	5092	6141	7702
Parsa	3961	4196	5407	8529	3961	4170	4052	3881
Chitwan	6195	4528	5653	5535	4631	4398	4020	3476
Nawalparasi	4988	6462	5879	6791	6401	6871	6392	5762
Bardiya	7329	4607	8093	5276	5067	5555	5147	6819
Bajura	2306	1751	1751	3554	825	1134	1715	2272
Kanchanpur	-	3889	2717	3000	-	4464	4041	3554
Kailali	•	-	-	7628	-	-	-	3877
12 CPDs	87500	88996	104102	114624	68510	82296	88535	80615
13 CPDs	-	92885	106819	117624	-	86760	92576	84169
15 CPDs	-	-	116202	138639	-	-	106695	100000
16 CPDs		-	-	146267	-	-	-	103877

Number of pneumonia cases treated by CHWs and health facilities and increase in number treated

District	_		cases treat ealth facili	•	Increase in number of cases treated compared to previous year		
	2000- 2001	2001- 2002	2002- 2003	2003- 2004	Year 1 - Baseline	Year 2 – Year 1	Year 3 – Year 2
CPDs with trained CHWs	156,010	179,645	225,897	250,144	23,635	46,252	24,247

Performance indicator	Indicator definition	Data source	Frequency of data collection	Reference period	Value of indicator
1-4 Quality of Pneumonia Treatment*	Percentage of children presenting to health workers (FCHVs, MCHWs, VHWs) with pneumonia symptoms who received appropriate treatment (in CPDs where community- based pneumonia treatment has	Super- vision checklist FCHV record review	Annually	Mid-July 2003 – Mid- July 2004	95 %
	been initiated) Unit: Percentage				

^{*} Also a USAID PMP indicator

This indicator measures the percentage of children presenting to CHWs with pneumonia symptoms who received appropriate treatment. "Appropriate treatment" is defined as cases that are followed up by the health worker on the third day and who received the correct dose of cotrimoxazole for their age group. (Different doses are prescribed depending on whether the child is 2-12 months old or 13-59 months).

The data are collected by NFHP field staff who review the treatment books of a sample of CHWs. During the reference period, 2,300 CHWs were interviewed in 16 CPDs (those listed in the previous indicator). The ten most recent pneumonia cases recorded by each CHW were examined and checked for appropriate treatment.

During the reference period, 96 percent of children with pneumonia symptoms were followed up on the third day and 98 percent were given the appropriate dose of cotrimoxazole for their age. Ninety five percent were both followed up and given the appropriate dose compared to 93 percent during Year Two.

Children Presenting to Health Workers and Receiving Appropriate Treatment, 16 CPDs

Number of	Number of children		Number who received appropriate treatment			Percentage who received appropriate treatment		
CHWs interviewed	presenting to HWs with pneumonia symptoms	3 rd day follow- up	Appropri ate dose for age	Both	3 rd day follow- up	Approp riate dose for age	Both	
2,300	12,819	12,363	12,622	12,233	96	98	95	

- ✓ The Year Three target for indicator 1-4 is > 90 percent in 16 districts.
- ✓ The EOP target for indicator 1-4 is > 90 percent in 17 districts.

Performance indicator	Indicator definition	Data source	Frequency of data collection	Reference period	Value of indicator
1-5 FCHVs Services Reflected in HMIS Data	Percentage of FCHVs reports included in service data through HMIS in CPDs	HMIS	Annually	Mid-July 2003 – Mid- July 2004	84 %

This indicator is intended to measure the extent to which the HMIS is able to assess the separate contribution of FCHVs to service delivery.

Each FCHV should submit 12 monthly reports. The denominator of the indicator is obtained by multiplying the number of FCHVs by 12. The number of reports received is the numerator. Overall, 84 percent of FCHVs reported compared to 80 percent in Year Two. Note that the number of FCHVs reporting increased substantially in Bajura, Kanchanpur and Kailali districts. The number of FCHVs reporting in Bajura in 2002/2003 was most likely an error as the number of FCHVs in NTAG records for that year was 245 and is 262 in current data from the HMIS.

- ✓ The Year Three target for indicator 1-5 is \geq 85 percent.
- ✓ The EOP target for indicator 1-5 is >= 85 percent (revised in Year Two).

FCHVs Reporting

		2002/2003		2003/2004			
District	Number of FCHVs Reporting	Reports Received from FCHVs	Percentage	Number of FCHVs Reporting	Reports Received from FCHVs	Percentage	
Jhapa	441	5,149	97	445	5,123	96	
Morang	585	6,791	97	585	6,761	96	
Siraha	954	10,859	95	954	11,248	98	
Sunsari	1,064	8,096	63	1064	8,916	70	
Bara	882	8,364	79	882	9,581	91	
Chitwan	405	3,588	74	405	3,839	79	
Dhanusha	909	10,191	93	909	10,708	98	
Mahotari	684	7,744	94	684	7,896	96	
Parsa	738	7,520	85	738	8,530	96	
Rasuwa	245	1,623	55	245	1,839	63	
Rauthat	909	8,285	76	909	9,487	87	
Nawalparasi	705	6,330	75	713	6,910	81	
Banke	665	6189	78	665	6,208	78	
Bardiya	831	7330	74	837	8,068	80	
Bajura	135	1671	103	262	1,968	63	
Kailali	1,197	8790	61	1268	10,392	68	
Kanchanpur	644	6238	81	835	6,873	69	
17 CPDs	11,993	114,758	80	12,400	124,347	84	

Performance indicator	Indicator definition	Data source	Frequency of data collection	Reference period	Value of indicator
1-6 Treatment of Night-blind Pregnant Women*	Number of pregnant night- blind women treated with Vitamin A in intervention CPDs	NFHP program reports	Annually beginning in year 2/3	Mid-July 2003 – Mid-July 2004	NA

^{*} Also a USAID PMP indicator

The Vitamin A supplementation program for pregnant women has been piloted in three districts (Sunsari, Parsa, and Chitwan). The program began after July 2004 in Parsa and Chitwan, and in Sunsari in January 2004; therefore, a full year of data are not available for any district. Data from NTAG indicates that a total of 64 pregnant night blind women were treated in Sunsari between January and June 2004.

✓ The EOP target for indicator 1-6 is TBD.

Performance	Indicator	Data source	Frequency of	Reference	Value of
indicator	definition		data collection	period	indicator
1-7 ORT Use in	Percentage of	DHS survey	Every 5 years	2001	47%
Children Under	children (under 5				
5*	years) with				
National	diarrhea in				
	preceding 2				
	weeks who				
	received Oral				
	Rehydration				
	Therapy (ORS				
	or increased				
	fluids)				
CPDs only					43%
Non-CPDs					49%
	Unit:Percentage				

^{*} Also a USAID PMP indicator

This indicator measures the extent to which children under age five with diarrhea were treated with oral rehydration therapy (ORT). ORT includes either treatment with an ORS packet or an increase in fluids. These data are derived from interviews with women of reproductive age in the Nepal Demographic and Health Survey which was conducted January – June 2001.

This indicator will not be available again until the next Demographic and Health Survey is conducted.

✓ The EOP target for indicator 1-7 is 60 percent.

Performance indicator	Indicator definition	Data source	Frequency of data collection	Reference period	Value of indicator
1-8 Measles Vaccination	Percentage of children who received measles vaccination by 12 months of age in CPDs Unit: Percentage	HMIS	Annually	Mid-July 2003 – Mid- July 2004	90 %

^{*} Also a USAID PMP indicator

The recommended age for measles vaccination in Nepal is when the child reaches nine months of age or soon after. All children should be vaccinated before they reach their first birthday. This indicator measures the percentage of children who received measles vaccine by age 12 months during the reference period. The number of children age 9-11 months vaccinated for measles is taken from the 2003/2004 HMIS reports. The denominator used is the number of children aged 0-11 months from the HMIS. The number of children age 0-11 months approximates the number of births that occurred in the prior year (less those who died) which, in turn, is roughly the number of children who would pass through the target age for vaccination in a given year.

In the 17 CPD districts, 90 percent of children were vaccinated during this period compared to 84 percent during Year Two. In Dhansuha, Rautahat, and Mahottari, coverage exceeds 100 percent. It is not clear whether this is due to an error in the number of children vaccinated or in the estimate of the number of eligible children.

- ✓ The Year Three target for indicator 1-8 is >80 percent.
- ✓ The EOP target for indicator 1-8 is > 80 percent.

Measles vaccination coverage

		2002-2003		2003-2004			
District	Number of children aged 9-11 months vaccinated	Number of children aged 0-11 months	Coverage (Percent)	Number of children aged 9-11 months vaccinated	Number of children aged 0-11 months	Coverage (Percent)	
Jhapa	16,761	20,750	81	17,712	17,728	100	
Morang	22,380	25,086	89	21,149	22,356	95	
Siraha	15,606	16,676	94	13,944	15,477	90	
Sunsari	16,312	18,943	86	16,378	18,186	90	
Bara	13,766	15,993	86	14,793	17,151	86	
Chitwan	11,445	15,136	76	10,432	14,831	70	
Dhansuha	18,931	22,038	86	19,974	19,024	105	
Mahottari	14,426	15,521	93	15,933	14,371	111	
Parsa	13,209	13,956	95	12,645	15,221	83	
Rasuwa	1,271	1,650	77	1,245	1,404	89	
Rautahat	16,793	13,151	128	16,764	13,979	120	
Nawalparasi	13,572	19,341	70	14,286	17,751	80	
Banke	9,204	14,061	65	11,262	12,671	89	
Bardiya	9,294	13,783	67	10,700	12,710	84	
Bajura	4,058	5,075	80	3,451	4,455	77	
Kailali	16,765	22,266	75	17,738	22,638	78	
Kanchanpur	9,112	12,179	75	10,146	13,529	75	
17 CPDs	222,905	265,606	84	228,552	253,482	90	

Performance indicator	Indicator definition	Data source	Frequency of data collection	Reference period	Value of indicator
1-9 Pneumonia Treatment*	Percentage of expected pneumonia cases in children (0-59 months) treated by community health workers (FCHVs, VHWs, MCHWs) and health facilities in core program districts where community-based pneumonia treatment has been initiated Unit: Percentage	NFHP Monitoring Reports	Annually	Mid-July 2003 – Mid-July 2004	67 %

^{*} Also a USAID PMP indicator

This indicator measures coverage of pneumonia treatment. The number of expected pneumonia cases is based on an assumed incidence rate of 300 per 1000.

Based on the assumed incidence rate and the total population of children age 0-59 months reported in the HMIS, there were 371,984 cases of pneumonia among children age 0-59 months during Year Three in the 16 districts in which community-based pneumonia treatment has been initiated.³ Approximately 67 percent of cases were treated either in health facilities or by CHWs. Fifty eight percent of treated cases were treated by CHWs.

- ✓ The Year Three target for indicator 1-9 is 66.8%.
- ✓ The EOP target for indicator 1-9 is 70%.

³ Although CHWs only treat children age 2-60 months it is appropriate to use children age 0-60 months in the denominator because children under age 2 months should be treated in health facilities.

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Percent of children with pneumonia treated by CHWs or health facilities and percent of presenting cases treated by CHWs

District	Estimated # of cases of pneumonia (children 0-59 months)*		months with treated by	ren age 0-59 n pneumonia r CHWs or facilities	% of presenting pneumonia cases treated by CHWs	
	2002-2003	2003-2004	2002-2003	2003-2004	2002-2003	2003-2004
Jhapa	26648	26956	103	94	48	52
Morang	34369	34783	84	89	69	73
Siraha	25395	25680	128	104	46	51
Sunsari	27240	27620	80	65	51	57
Bara	26382	26731	52	70	55	59
Chitwan	20790	21095	47	43	58	61
Dhanusha	30372	30740	47	63	45	52
Mahotari	24445	24706	50	71	48	62
Parsa	23557	23872	40	52	57	69
Rasuwa	1948	1969	126	118	50	58
Rautahat	23331	23600	77	91	53	60
Nawalparasi	26113	26512	47	47	48	54
Bardiya	18708	19021	71	64	61	44
Bajura	5669	5716	61	102	51	61
Kailali	-	33512	-	34	1	66
Kanchanpur	19134	19471	35	34	40	46
16 CPDs	334103	371984	68	67	52	58

^{*30} percent of total number of children age 0-59 months from HMIS

Component II Indicators

Performance	Indicator	Data source	Frequency of	Reference	Value of
indicator	definition		data collection	period	indicator
2-1 Districts Offering Post- Abortion Care Services	Number of CPDs with hospitals or PHCs offering PAC services	Supervision reports	Annually	2004	13
	Unit:Number				

Thirteen district hospitals currently have functioning post-abortion care (PAC) services. These hospitals are located in Nawalparasi, Chitwan, Parsa, Bara, Dhanusha, Banke, Kailali, Jhapa, Morang, Sunsari, Bardiya, Siraha and Kanchanpur. The criteria for 'functioning' post-abortion care include: at least 3-4 clients per month, a physical facility that has been upgraded according to a needs assessment, trained manpower, infection prevention practices, family planning services and counseling, and a commitment on the part of the facility to provide these services.

- ✓ The Year Three target for indicator 2-1 is 10 CPDs.
- ✓ The EOP target for indicator 2-1 is 17 CPDs.

Note that the definition of this indicator changed slightly in Year Three. Previously, the indicator was "Number of district hospitals offering PAC services in CPDs". Since there are a few district hospitals which do not meet the criteria for establishing PAC services, NFHP will establish them in a primary health center in the same district that does meet the criteria.

Performance indicator	Indicator definition	Data source	Frequency of data collection	Reference period	Value of indicator
2-2 HMG/NGO RH Coordination	Number of CPDs holding RHCC meetings in their districts at least quarterly Unit:Number	NFCC reports	Annually	Mid-July 2002 - Mid-July 2003	4

This indicator measures the number of CPDs with Reproductive Health Coordination Committees (RHCCs) meeting at least quarterly. These committees are composed of representatives from both government and NGO institutions and are intended to facilitate the provision of reproductive health services in a district. During Year Three, 4 of the 17 CPDs had formed an RHCC that met at least quarterly (Kailali, Kanchanpur, Dhanusha and Bara). The main reasons provided by other districts for not holding a meeting at least quarterly are: (1) lack of leadership in the facilitating organization (2) lack of working guidelines (3) duplication of similar committees in the district and (4) lack of budget.

- ✓ The Year Three target for indicator 2-2 is 12 districts.
- ✓ The EOP target for indicator 2-2 is 17 districts.

Performance indicator	Indicator definition	Data source	Frequency of data collection	Reference period	Value of indicator
2-3 Couple Years of Protection (CYP) in CPDs*	Annual protection against pregnancy afforded by contraceptives distributed in CPDs Unit: CYPs	HMIS	Annually	Mid-July 2003 – Mid-July 2004	717,403

^{*} Also a USAID PMP indicator

Couple years of protection (CYP) estimates the protection provided by family planning services during a one-year period, based upon the volume of all contraceptives distributed to clients during that period for condoms, pills, and injectables and on new acceptors for IUDs, Norplant, and sterilizations. The CYP is calculated by multiplying the quantity of each method distributed to clients by a conversion factor, which is an estimate of the duration of contraceptive protection provided per unit of that method. For this assessment, six methods are included in the calculation of CYP: pills, condoms, DepoProvera, Norplant, IUD, and sterilization. The CYP for each method are then summed over all methods to obtain a total CYP figure.

The total CYP for the 17 program districts is 717,403 compared to 645,069 for Year Two. This is an increase of approximately 11 percent. The overall increase is due to increases in all methods. For individual districts, the CYP varies from around 113,000 in Morang to about 3,000 in Rasuwa.

- ✓ The Year Three target for indicator 2-3 is 690,224.
- ✓ The EOP target for indicator 2-3 is 821,354 (7 percent annual increase) (revised in Year Three).

⁴ The USAID-accepted conversion factors used here are: pills: 15 cycles per CYP, condoms: 120 units per CYP, DepoProvera: 4 doses per CYP, IUD: 3.5 per IUD inserted, NORPLANT: 3.5 per implant inserted, sterilization: 10 years per procedure. All CYPs for long-term methods are credited in the year in which the client accepted the method. The conversion factors used by the Ministry of Health differ from those used here.

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Couple Years of Protection (CYP) by method and district, Year Two 2002-2003

District	Condom	Pills	Depo	IUD	Norplant	Sterilization	All methods
Jhapa	3,178	3,097	12,519	637	931	20,430	40,792
Morang	4,662	4,624	18,037	1,054	1,243	74,560	104,179
Siraha	3,852	851	5,714	298	354	25,720	36,788
Sunsari	2,295	1,782	10,317	378	543	30,470	45,785
Bara	2,446	565	3,223	39	-	18,190	24,463
Chitwan	3,860	1,236	5,403	333	578	25,640	37,049
Dhanusha	3,017	546	4,396	431	1,383	50,360	60,132
Mahottari	1,186	540	2,574	637	25	26,840	31,800
Parsa	1,685	461	4,635	357	263	57,050	64,451
Rasuwa	478	77	694	4	4	1,800	3,056
Rautahat	1,761	611	2,257	109	154	25,270	30,161
Nawalparasi	4,285	1,423	6,955	602	791	21,410	35,465
Banke	2,944	865	4,094	455	553	15,170	24,081
Bardiya	2,887	749	4,977	252	217	17,660	26,741
Bajura	679	282	934	-	-	2,540	4,436
Kailali	8,141	2,574	10,155	504	350	32,640	54,365
Kanchanpur	2,988	1,116	3,682	189	182	13,170	21,326
17 CPDs	50,344	21,399	100,563	6,276	7,567	458,920	645,069

Couple Years of Protection (CYP) by method and district, Year Three 2003-2004

District	Condom	Pills	Depo	IUD	Norplant	Sterilization	All methods
Jhapa	3,357	2,947	13,407	641	802	30,430	51,582
Morang	4,531	4,488	16,626	2,223	2,139	82,700	112,706
Siraha	3,233	1,006	5,771	613	399	36,160	47,180
Sunsari	2,491	2,106	10,501	1,001	648	26,410	43,157
Bara	2,106	656	3,516	200	60	18,430	24.967
Chitwan	4,870	2,128	6,441	581	665	25,310	39,995
Dhanusha	4,302	724	5,706	168	585	43,970	55,454
Mahottari	2,090	1,472	5,133	994	102	36,740	46,531
Parsa	1,960	515	4,950	532	396	69,240	77,592
Rasuwa	569	91	784	49	21	1,710	3,225
Rautahat	2,068	689	2,636	53	95	33,630	39,170
Nawalparasi	3,928	1,449	7,012	294	522	17,030	30,235
Banke	5,024	1,213	5,716	564	683	14,560	27,758
Bardiya	3,763	813	11,684	497	693	17,220	34,670
Bajura	630	264	824	-	-	2,540	4,258
Kailali	7,579	2,888	9,765	399	595	34,530,	55,756
Kanchanpur	3,072	1,015	4,019	214	378	14,470	23,167
17 CPDs	55,572	24,465	114,489	9,020	8,778	505,080	717,403

Performance indicator	Indicator definition	Data source	Frequency of data collection	Reference period	Value of indicator
2-4 Health Facility Supervision	Percentage of PHCs and HPs in CPDs that receive a quarterly supervision visit by DHO staff Unit: Percentage	NFHP supervision reports	Quarterly+ Annually	Mid-July 2003 – Mid-July 2004	87 %

This indicator measures the extent to which Primary Health Centers (PHCs) and Health Posts (HPs) are provided with adequate supervision by District Health Office staff. Some supervisory visits to Health Posts are made by staff of Primary Health Centers and some by staff working at the District Health Office. The data are collected during NFHP monitoring visits. During the visit, health facility staff are asked whether they received a supervisory visit in the last quarter.

Since individual health facilities are visited a variable number of times by NFHP staff in a given year, the data from one visit chosen at random is used for those facilities for which there is more than one observation available. For Year Three, 49 of 61 PHCs were visited at least once by NFHP staff and 101 of 146 HPs were visited. The decline in the number of facilities monitored by NFHP staff compared to Year Two is due mainly to security issues.

The percentage of primary health centers that received a quarterly supervision visit from DHO staff is 94 percent compared to 92 percent in Year Two. The comparable percentages for health posts are 83 and 79.

Type of HFs	# monitored by NFHP	# supervised by DHO staff of those monitored by NFHP	% supervised by DHO staff
Primary Health Centers	49	46	94 %
Health Posts	101	84	83 %
Total	150	130	87 %

- ✓ The Year Three target for indicator 2-4 is >=85 percent
- ✓ The EOP target for indicator 2-4 is >=85 percent.

Component III Indicators

Performance indicator	Indicator definition	Data source	Frequency of data collection	Reference period	Value of indicator
3-1 Couple Years of Protection (CYP) at the National Level*	Annual protection against pregnancy afforded by contraceptives distributed nationally	HMIS	Annually	Mid-July 2003 – Mid-July 2004	1,474,035
	Unit:CYPs				

^{*} Also a USAID PMP indicator

The total CYP at the national level is 1,474,035, an increase of almost eight percent compared to Year Two. There are increases in CYP for all methods.

National CVP Year Two 2002-2003

	National C11, 1cal 1 wo 2002-2003											
Method	Condom	Pills	Injectables	IUD	Norplant	Sterilization	All methods					
CYP	131,641	66,543	340,434	21,970	22,495	785,710	1,368,791					
	National CYP, Year Three 2003-2004											
Method	Condom	Pills	Injectables	IUD	Norplant	Sterilization	All methods					
CYP	142,289	70,914	363,191	28,452	29,040	840,150	1,474,035					

- ✓ The Year Three target for this indicator is 1,437,231.
 ✓ The EOP target for this indicator is 1,625,124 (5 percent annual increase) (revised in Year Three).

Performance indicator	Indicator definition	Data source	Frequency of data collection	Reference period	Value of indicator
3-2 Reporting of LMIS Data by Health Facilities	Percentage of functioning health facilities (DHOs, PHCs, HPs, and SHPs) nationwide reporting LMIS data within 2 months after end of quarter Unit: Percentage	LMIS	Quarterly	Mid-July 2003 – Mid-July 2004	88 %

This indicator measures the extent to which functioning health facilities report LMIS data in a timely manner (within two months after the end of the quarter). Overall, 88 percent reported within two months compared to 85 percent in Year Two.

	Primary Health Centers					Health Posts				Sub-Health Posts				All		
Region	Qtr.					Qtr.						Qtr.			Otr. Avg.	
	1st	2nd	3rd	4th	Avg.	1st	2nd	3rd	4th	Avg.	1st	2nd	3rd	4th	Avg.	Qu. Avg.
Eastern	87	94	96	96	93	92	91	86	93	91	86	86	82	87	85	90
Central	88	83	92	88	88	87	91	92	92	91	85	88	86	87	87	88
Western	95	92	84	95	92	95	91	86	98	93	95	95	89	97	94	93
M-Western	89	85	85	85	86	82	80	77	84	81	75	78	76	80	77	81
F-Western	89	89	100	94	93	70	86	91	97	86	74	79	89	94	84	88
Total					90					88					85	88
					Total	No. o	of PH	Cs + I	IPs +	SHPs =	4,01	7				

[✓] The Year Three target for indicator 3-2 is \ge 85 percent.

[✓] The EOP target for indicator 3-2 is \geq = 85 percent.

Performance indicator	Indicator definition	Data source	Frequenc y of data collection	Reference period	Value of indicator
3-3 Vitamin A Supplementation Coverage*	Percentage of children (6-59 months) nationwide who received a vitamin A capsule during the preceding round of supplementation	Mini- surveys	Annually	Mid-July 2003 – Mid- July 2004	98
	Unit: Percentage				

^{*} Also a USAID PMP indicator

This indicator measures coverage of Vitamin A supplementation among children aged 6-59 months during the preceding round of supplementation. The data are derived from post supplementation mini-surveys of mothers/caretakers. Selected districts participate in the surveys for each of two rounds in each fiscal year with different districts included in each round. The data for the two rounds are then combined, weighted by the estimated number of children in the target population (age 6-59 months) in each district, and a national level estimate is derived (as described in Houston, 2000). The value of the indicator used here was calculated by NFHP staff.

Vitamin A Supplementation Coverage 2003/2004

Target Population (6-59 months) (A)	Estimated # of children (6-59 months) nationwide who received A Vitamin A Capsules (B)	National Weighted Coverage (C) (B/A) * 100
3,219,166	3,156,745	98

[✓] The Year Three and EOP targets for indicator 3-3 are to maintain the level of Vitamin A coverage at greater than 90 percent.

Performance indicator	Indicator definition	Data source	Frequency of data collection	Reference period	Value of indicator
3-4 HMG Purchase of Contraceptives	Percent increase in HMG budget contribution to the purchase of family planning commodities	HMG budget	Annually	Mid-July 2003 – Mid-July 2004	6.9 (million rupees)
	Unit:Percent				

For Year Three, the amount budgeted by HMG for the purchase of family planning commodities was 6.9 million rupees, a decrease since Year Two but above the Year Three target.

- ✓ The Year Three target for indicator 3-4 is a 10 percent annual increase (absolute value of 6.65 million rupees).
- ✓ The EOP target for indicator 3-4 is to maintain a 10 percent annual increase (which would result in an absolute value of approximately 8 million rupees at EOP).

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Appendix A: Indicators and targets

					ar 1 -2002)		ar 2 -2003)		ear 3 3-2004)		
Indicator	Definition	Data Source	Baseline (2000- 2001)	Target	Actual	Target	Actual	Target	Actual	Year 4 (2004- 2005)	Year 5 (EOP)* (2005-2006)
Overall Progra											
0-1 Under Five Mortality (National)	Number of deaths per 1000 live births	DHS	91 per 1000 live births	NA	NA	NA	NA	NA	NA	NA	70 per 1000 live births
0-2 Total Fertility Rate (National)	Average number of children that would be born to a woman during her childbearing years at current rates	DHS	4.1	NA	NA	NA	NA	NA	NA	NA	3.6
0-3 Contraceptive Prevalence Rate (National)	Percentage of MWRA using modern contraceptive methods	DHS	35.4%	NA	NA	NA	NA	NA	NA	NA	41%
Component I			1		l .		l .	·			•
1-1 Commodities Available at Health Facilities	Percentage of health facilities (PHCs, HPs, SHPs) that maintain availability of 7 commodities in CPDs year round	LMIS	20%	26%	27%	32%	27%	38%	44%	44%	50%
1-2 Commodities Available at Community Level	Percentage of FCHVs in CPDs who have 3 or 4 key commodities available	FCHV survey	NA	NA	12%	12%	48%	52%	48%	56%	60%

					ar 1 -2002)		ar 2 -2003)		ear 3 3-2004)		
Indicator	Definition	Data Source	Baseline (2000- 2001)	Target	Actual	Target	Actual	Target	Actual	Year 4 (2004- 2005)	Year 5 (EOP)* (2005-2006)
1-3 Pneumonia Treatment	Number of pneumonia cases in children (age 0-60 months) treated by community health workers (FCHVs, MCHWs, VHWs) and in health facilities in districts where community-based pneumonia treatment has been initiated	NFHP monitoring records	156,010 in 12 districts	171,000 in 13 districts	179,645 in 13 districts	178,000 in 15 districts	225,897 in 15 districts	235,000 in 16 districts	250,144 in 16 districts	250,000 in 17 districts	260,000 in 17 districts
1-4 Quality of Pneumonia Treatment	Percentage of children presenting to health workers (FCHVs, MCHWs, VHWs) with pneumonia symptoms who receive appropriate treatment in CPDs where community-based pneumonia treatment has been initiated	Super- vision checklist, record review	92% in 13 CPDs	>90%	95% in 13 CPDs	>90%	93% in 15 districts	>90%	95% in 16 districts	>90%	>90 %
1-5 FCHVs Services Reflected in HMIS Data	Percentage of health facilities in CPDs reporting FCHV service data (separately) through HMIS	HMIS	60%	65%	71%	70%	80%	>=85%	84%	>=85%	>=85%

				Yea (2001)	ar 1 -2002)	Yea (2002-					
Indicator	Definition	Data Source	Baseline (2000- 2001)	Target	Actual	Target	Actual	Target	Actual	Year 4 (2004- 2005)	Year 5 (EOP)* (2005-2006)
1-6 Treatment of Night-blind Pregnant Women	Number of pregnant night-blind women treated with Vitamin A in intervention CPDs	NTAG monitoring records	0%	NA	NA	NA	NA	NA	64 (Jan- June in Sunsari)	TBD	TBD
1-7 ORT Use in Children Under 5	Percentage of children (under 5 years) with diarrhea in preceding 2 weeks who received Oral Rehydration Therapy (ORS or increased fluids)	DHS	47%	NA	NA	NA	NA	NA	NA	NA	60%
1-8 Measles Vaccination Coverage	Percentage of children who received measles vaccination by 12 months of age in CPDs	HMIS	77%	77%	77%	79%	84%	>80%	90%	>80%	>80%
1-9 Pneumonia Treatment	Percentage of expected pneumonia cases in children (0-59) months treated by community health workers (FCHVs, VHWs, MCHWs) and health facilities in core program districts where community-based treatment has been initiated	NFHP Monitor- ing Records	62%	63.6%	65%	65.2%	68%	66.8%	67%	68.4%	70.0%

				Year 1 (2001-2002)		Year 2 (2002-2003)		Year 3 (2003-2004)			
Indicator Component II	Definition	Data Source	Baseline (2000- 2001)	Target	-2002) Actual	(2002-	Actual	(2003 Target	Actual	Year 4 (2004- 2005)	Year 5 (EOP)* (2005-2006)
2-1 Districts Offering PAC Services	Number of CPDS with hospitals or PHCs offering PAC services	Super- vision reports	4	4	4	7	6	10	13	13	17
2-2 HMG/NGO Coordination	Number of CPDs holding RHCC meetings in their districts at least quarterly	NFCC reports	NA	2	2	7	7	12	4	15	17
2-3 Couple Years of Protection	Annual protection against pregnancy afforded by contraceptives distributed in CPDs	HMIS	572,172	612,224	602,148	644,298	645,069	690,224	717,403	767,621	821,355
2-4 Health Facility Supervision	Percentage of PHCs and HPs in CPDs that receive a quarterly supervision visit by DHO staff	TBD	Unknown	NA	NA	NA	82%	>=85%	87%	>=85%	>=85%
Component III											
3-1 Couple Years of Protection (National)	Annual protection against pregnancy afforded by contraceptive distributed	HMIS	1,284,649	1,348,882	1,271,119	1,334,675	1,368,791	1,437,231	1,474,035	1,547,737	1,625,124
3-2 Reporting of LMIS Data by Health Facilities (National)	Percentage of functioning health facilities (DHs, PHCs, HPs, and SHPs) reporting LMIS data within 2 months after end of quarter	LMIS	79%	80%	90%	81%	85%	>=85%	88%	>=85%	>=85%

				Year 1 (2001-2002)		Year 2 (2002-2003)		Year 3 (2003-2004)			
Indicator	Definition	Data Source	Baseline (2000-2001)	Target	Actual	Target	Actual	Target	Actual	Year 4 (2004- 2005)	Year 5 (EOP)* (2005-2006)
3-3 Vitamin A Supplemen- tation Coverage (National)	Percentage of children (6-59 months) who received a Vitamin A capsule during the preceding round of supplementation	Mini- surveys	96%	> 90%	96%	> 90%	98%	> 90%	98%	> 90%	> 90%
3-4 HMG Purchase of Contraceptives	Percent increase in HMG budget contribution to the purchase of family planning commodities	HMO budget	Rs. 5 million	+ 10% of baseline Rs. 5.5 million	+200% Rs. 10 million	+10% of Year One target Rs. 6.05 million	-24% Rs. 8.5 million	+10% of Year Two target Rs. 6.65 million	+4% Rs. 6.9 million	+10% of Year Three target Rs. 7.3 million	+10% of Year Four target Rs. 8.0 million

^{*} NFHP began in December 2000 but the Nepali fiscal year runs from mid-July to mid-July so the data for many indicators refer to this period. The project ends in December 2006 but the indicators will only cover the period through mid-July 2006.