

Nepal

Population¹ (000s)

(2024)

29 651



Urban population² (%)

(2024)

22.4



GDP per capita³

(current US \$) (2023)

1 324



Life expectancy at birth⁴

(years) (2021)

70

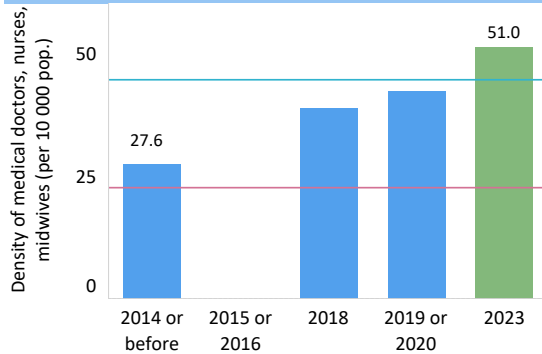


UHC SCI⁵ (2021)

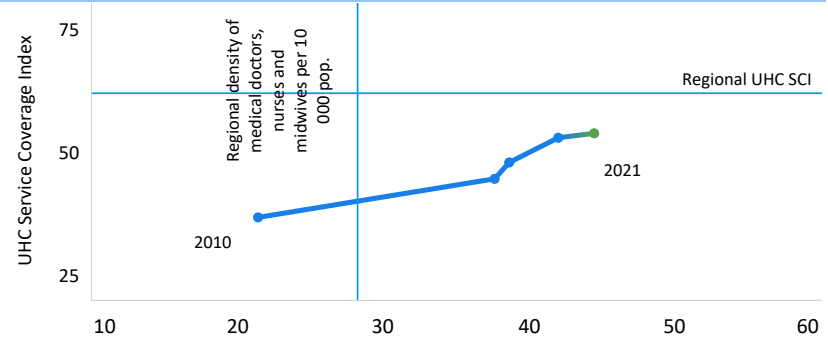
54



Trend in the density of medical doctors, nurses and midwives⁶ (SDG indicator 3.c.1)

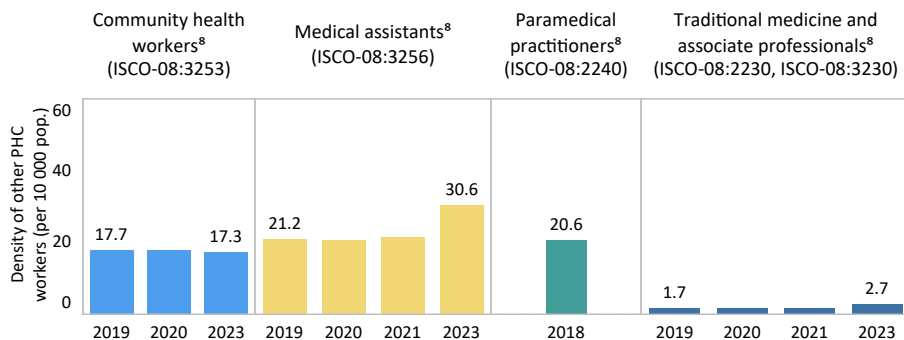


Trends in UHC Service Coverage Index (SDG indicator 3.8.1) and the density of medical doctors, nurses and midwives (SDG indicator 3.c.1), 2010–2021⁷



44.5 per 10 000 pop.: GSHRH:2030 (2016) 22.8 per 10 000 pop.: World Health Report (2006)

Density of other key primary health care (PHC) workers

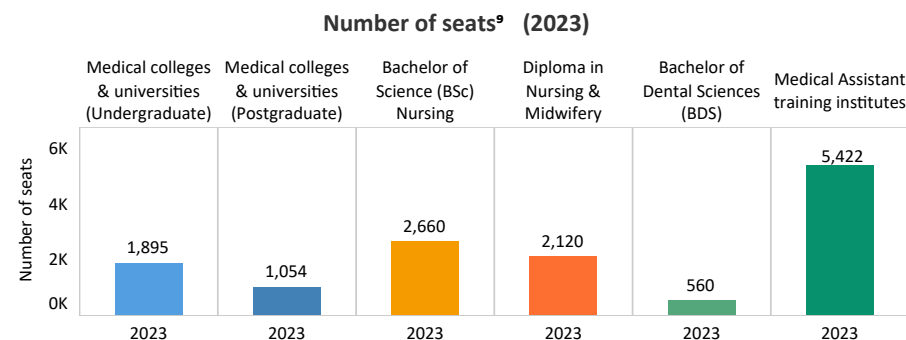


Countries in the SE Asia Region benefit from a range of key occupations close to communities. These health workers, central to the effective functioning of primary health care and district health systems, are often the first point of contact for those most vulnerable and for emergency response.

Distribution of health workforce

Data not available

Production of select health workers



The increasing production of health workers across countries of the SE Asia Region speaks of a further increase in the availability of health workers in the near future. It is crucial to align this growth with evolving population and health system needs.

Progress over the decade

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| Strategic direction & governance | The National Health Policy 2019, Public Health Service Act 2018, Local Government Operation Act 2017 collectively guide the alignment of the HRH policy and management to population needs, topography and federal structure |
| | National Medical Education Act 2018 and formation of Medical Education Commission aim to align health personnel production and distribution to national health priorities |
| | The Nepal Health Sector Strategic Plan, 2023–2030 and Human Resources for Health Strategic Plan, 2021–2030 together aim to strengthen HRH development, utilization, governance and information systems in line with national health priorities |
| Transformative education | The Medical Education Commission is mandated through the Medical Education Act to regulate the quality, distribution, access and cost of health professional education in the country |
| | A national-level common entrance exam has been enacted, the Federal Government's single-channel policy provides grants in scholarship |
| | National and provincial health training centres are advancing competency-based training and learning packages at the national and subnational levels |
| Rural retention | Mandatory service for scholarship students after graduation, longstanding practice of financial and non-financial incentives for defined remote areas |
| | Establishment of the Provincial Public Service Commission and localized recruitment |
| | Establishment of medical academia in provinces, primarily focusing on remote areas, scholarships for potential students from remote areas and provisions for deployment to home districts with incentives |
| Key innovations for strengthening the PHC workforce | Task-shifting, such as rural ultrasound training for nurses, anaesthesia training for health assistants and staff nurses and mental health training for paramedics |
| | Expansion of telemedicine services and various digital health services by government, nongovernment and academic institutions to support health workers, especially from rural settings |
| | Initiation of school health nurse programmes in provinces with local recruitment and cost-sharing practices by local governments |
| International migration | Significant challenge of international migration, with continued imbalance between production, distribution and utilization |
| | Memorandum of understanding between the Government of the United Kingdom of Great Britain and Northern Ireland and the Government of Nepal on the recruitment of health-care professionals |
| Identified achievements, challenges and future priorities | <p>Achievements: strong national policies, strategic plans and legal frameworks supporting health workforce development; establishment of the Medical Education Commission to regulate health professional education and implementation of a common entrance examination; continuing professional development guidelines and modules for nursing professionals; piloting of workload indicators of staffing need (WISN) in selected health facilities of provinces; and task-shifting practice across selected cadres</p> <p>Challenges: limited focus on systematic, need-based production, skill mix and utilization of human resources for health; uneven distribution and high mobility; insufficient and vacant posts in public sector, and limited HRH management information system for policy decision-making</p> <p>Priorities: need-based health workforce projections, its production, distribution and utilization; strengthen HRH information management system; and capacity-building support for professional regulatory bodies and subnational governments</p> |

References

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- National Health Workforce Accounts (Regulatory bodies) online portal as of 1 September 2024. United Nations World Population Prospects 2024 was used to calculate latest health workforce densities. For prior years' and for consistency, previous progress report-identified health workforce densities are presented.
- See for UHC SCI: WHO Global Health Observatory (GHO), accessed on 17 July 2024; See for density of medical doctors, nurses and midwives: 2021 data from National Health Workforce Accounts (Regulatory bodies) online portal as of 1 September 2024. United Nations World Population Prospects 2024 was used to calculate latest health workforce densities. For prior years' and for consistency, previous progress report-identified health workforce densities are presented.
- National Health Workforce Accounts (Regulatory bodies) online portal as of 10 September 2024; Ayurveda Medical Council, Nepal Health Professional Council, Nepal health Professional Council, Department of Health Services Annual Report 2023: data reported from Ministry of Health obtained via the WHO Country Office (July 2024). United Nations World Population Prospects 2024 was used to calculate densities.
- Medical Education Commission; Council for Technical Education and Vocational Training: data reported from Ministry of Health obtained via the WHO Country Office (July 2024).