THE GLOBAL DISABILTY FUND (GDF) END OF PROGRAMME REPORT – NATIONAL PROGRAMMES

Programme information -Summary

Programme title:	Disability inclusive development in Nepal
Countries	Nepal
Overall programme duration:	April 2022 – March 2025
Budget:	670,000 USD
Overall programme focal persons:	[redacted] UNDP
All PUNOs focal points:	RCO: [redacted] UNDP: [redacted] WHO: [redacted] UN Women: [redacted]
OPDs and Gov focal points	[redacted] Under Secretary, Ministry of Women, Children and Senior Citizens (MoWCSC). [redacted] Director, Epidemiology and Disease Control Division (EDCD). [redacted] Deputy Chief, Leprosy Control and Disability management Section (LCDMS).
Reporting period (please include start and end date of the implementation phase):	January 2023-December 2023 January 2024-December 2024 31 March 2025
Short description of the programme:	The project intends to support the identified priorities for the disability inclusive development in Nepal by: a) Strengthening the policy/planning environment and coordination mechanisms with full and meaningful participation of OPDs, with particular focus on the most marginalized group to advance CRPD implementation; b) Strengthening disability assessment and referral and disability support services; and c) Building the capacity of policymakers, service providers, OPDs and other relevant stakeholders to support the formulation of disability inclusive planning, implementation, and monitoring of SDGs. These interventions will build on the progress made from the ongoing programmes

	on disability, the Aawaaz project (UNPRPD 1st phase project) and will use the resources to leverage and scale up successful models in two provinces of Nepal namely Sudurpaschim and Karnali province.
Target groups[1]	All persons with disabilities, women with disabilities, primary focus on one or more underrepresented groups – indigenous persons with disabilities, Dalit persons with disabilities, persons with intellectual and or psychosocial disability
Thematic focus[2]**:**	Inclusive SDGs planning and monitoring; National Disability Policy and/or Law; Legal Capacity; OPDs capacity building, access to health

Introduction

The purpose of this report – which is consistent with the UNDG Standard Progress Report format – is to provide information on the achievements of the project towards the realization of its stated objectives. In keeping with the UN system on-going efforts to strengthen result-orientation, the report should focus on systemic, structural transformation rather than process, highlighting how the different elements of the result chain described in the approved project document contributed to advance the rights of persons with disabilities in keeping with the Convention on the Rights of Persons with Disabilities. [1]

Reporting teams are encouraged to attach annexes containing additional relevant information (including assessments, evaluations and studies undertaken or published) and share videos, photographs (high resolution image files) or other multi-media materials illustrating the work and impact of the project. It is recommended, however, that all annexes be clearly referenced, using footnotes or endnotes within the body of the narrative.

Please note the report should be accessible.[2]

1.Progress towards impact and specific outcomes

Using the table format provided below, please provide information on the contribution towards impact and outcome indicators. Please make sure to capture, in your description, relevant shifts in addressing gaps in preconditions to CRPD implementation, capacity development as well as in the wider disability inclusion agenda

[1] The following definitions, which are based on the UN Development Group Harmonized RBM Terminology, were used in the "Template for Programme Proposals", utilized by UN Country teams to developed the approved project documents:

- Impact: Positive and negative long-term effects on identifiable population groups produced by a development intervention, directly or indirectly, intended or unintended. These effects can be economic, socio-cultural, institutional, environmental, technological or of other types.
- Outcome: The intended or achieved short-term and medium-term effects of an intervention's outputs, usually requiring the collective effort of partners. Outcomes represent changes in development conditions which occur between the completion of outputs and the achievement of impact.
- Outputs: The products and services which result from the completion of activities within a development intervention.

[2] **Prior to the submission of this report, please check that the document is accessible to persons using screen readers.** In a window system it is possible to do this by going to the File Menu, clicking Check for Issues and then Check Accessibility. If errors, warnings and tips show up in the report of the accessibility checker, please follow the instructions in the checker to make the necessary corrections. On a Mac, click on review and select check accessibility. When the document is accessible the checker will display a report stating *"No accessibility issues found. People with disabilities should not have difficulty reading this document."* Please see Windows Accessibility Checker ; Apple Mac Accessibility Checker for more information.

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and implementation of the SDGs in the country. Where it has not been possible to collect data on indicators, additional narrative information should be provided detailing why that was the case and what plans have been put in place to ensure that the relevant data will be provided.

Expected Impact of the programme/ Impact statement
Enhanced realization of the rights of persons with disabilities through disability-inclusive governance, policies, systems, and development processes aligned with the CRPD and SDGs in Nepal.
Please provide narrative description on the contribution towards the stated impact
During the reporting period, the programme contributed to measurable systemic and institutional changes at local, provincial, and national levels. Evidence of impact is reflected in increased disability-inclusive budget allocations, strengthened governance mechanisms, enhanced participation of persons with disabilities in decision-making spaces, and improved access to services and entitlements. In five municipalities across Karnali and Sudurpaschim provinces, local governments allocated dedicated budgets for disability-inclusive programmes, ranging from NPR 200,000 (USD 1400) to NPR 800,000 (5500) per municipality, supporting activities such as livelihood promotion, assistive device distribution, accessibility improvements, and disability identity card issuance. These allocations marked a qualitative shift from ad-hoc welfare measures towards more structured disability-responsive planning. The programme also contributed to increased realization of rights at the individual level. Persons with disabilities who participated in capacity development and coordination mechanisms reported improved access to government services, including disability identity cards and social security allowances. For example, individuals in Birendranagar and Barahtal municipalities obtained disability ID cards following outreach and awareness activities linked to programme-supported trainings, enabling them to access social protection benefits for the first time. At the institutional level, organizations of persons with disabilities (OPDs) demonstrated increased organizational capacity and sustainability. At least ten OPDs that engaged with the programme subsequently secured additional funding from external sources such as the Disability Rights Fund, Tewa, and local government budgets. This indicates that programme support contributed to longer-term institutional strengthening beyond the immediate UNPRPD funding cycle.

State Outcome 1
National Stakeholders and sub-national stakeholders have the knowledge and practical tools to effectively contribute for development and implementation of disability inclusive policies and systems
Please provide narrative description on the progress made to achieve outcome 1
Significant progress was achieved under Outcome 1 through extensive capacity development interventions for duty bearers and rights holders. During 2024, the NIDWAN-led consortium delivered a total of eleven structured trainings and workshops targeting provincial and local government officials, members of Disaster Risk Reduction Committees, Local Coordination Committees, and OPD representatives. These trainings enhanced the capacity of at least 150 duty bearers across Karnali and Sudurpaschim provinces, enhancing their understanding of CRPD obligations, disability-inclusive governance, and gender-responsive planning and budgeting. In addition, orientation meetings and consultations engaged a further 130 participants, including elected representatives, OPD members, civil society actors, persons with disabilities, and their family members. Among these participants, women constituted approximately 40 per cent, reflecting targeted efforts to address gender disparities in participation. The extended reporting period up to 30 March 2025 captured additional progress through KOSHISH-implemented activities that were partially supported by UNPRPD-aligned resources. Between January and March 2025, KOSHISH conducted three provincial-level capacity development workshops in Karnali, Sudurpaschim, and Madhesh provinces, reaching a total of 188 participants, including 120 men, 67 women, and one participant identifying as other. Fourteen of these participants were persons with disabilities. These workshops focused on the UNCRPD, the Act Relating to the Rights of Persons with Disabilities, the Local Government Operation Act, inclusive governance, and disability responsive planning and budgeting. As a result, elected representatives and government officials committed to allocating budgets for disability-inclusive programmes and improving accessibility within municipal offices. Further progress under Outcome 1 was achieved through strengthening Local Coordination Committees (LCCs) at the municipal level. KOSHISH facilitated six LCC meetings across Karnali, Sudurpaschim, and Madhesh provinces during the same period, engaging a total of 61 participants, including 21 women and 40 men, out of them 9 belong to persons with disabilities). These meetings identified operational gaps within LCCs, particularly in disability identification processes, distribution of disability ID cards, and understanding of CRPD-aligned responsibilities. The meetings laid the groundwork for targeted follow-up capacity development for LCC members and improved coordination between OPDs and local governments. A statistical report on persons with disabilities[3] based on the Nepal's census 2021, was published, through a collaborative effort involving various stakeholders, including the partner organization National Federation of the Disabled Nepal (NFDN), the National Statistics Office

[3] https://censusnepal.cbs.gov.np/results/files/result-folder/Final_Disability_Statistical_Report_12_02.pdf

(NSO), UNDP, and the Ministry of Women, Children, and Senior Citizens (MoWCSC). This disability statistical report provides comprehensive disaggregated disability data and serves as a valuable resource for evidence-based planning, policymaking, and advocacy for disability rights in alignment with the Convention on the Rights of Persons with Disabilities (CRPD). Additionally, a draft questionnaire based on the Washington Group Questionnaire was developed as a groundwork for the upcoming National Disability Survey. This questionnaire was finalized following extensive stakeholder consultations and field testing in Bagmati and Karnali provinces. The thematic report on disability[4] based on Nepal Population and Housing Census (NPHC), 2021 has been developed through a collaborative efforts between NSO and UNDP, further enriching the disability data landscape in Nepal. Likewise, two Low Value Grant (LVG) were awarded to Organizations of Persons with Disabilities (OPDs) to strengthen the capacity of government officials and local representatives at federal and provincial levels, enhancing their role in implementing disability-inclusive policies and advancing commitments under the CRPD and SDGs. To strengthen the capacity of OPDs and provincial governmental bodies on disability data and National Disability Survey, sensitization events were successfully organized across all seven provinces, drawing on insights from the disability statistical report. In terms of knowledge products, a checklist to measure the engagement of OPDs and power to influence the change in decision making processes has been successfully developed in active participation of OPDs representatives, family members of persons with disabilities, federal and local Government representatives, development partners, UN Agencies including thematic disability groups.

Moreover, a report on best practices related to the formulation and implementation of disability-related laws, policies, and services was produced. This report on best practices captures transformative practices and lessons learned in Nepal's journey toward disability inclusion. By leveraging these models and addressing existing challenges, stakeholders can create a more equitable society that upholds the dignity and rights of persons with disabilities. UNDP Nsuccessfully organized a dialogue session in Kathmandu on persons with disabilities that brought together a diverse group of stakeholders and discussed on challenges and implementation status of CRPD. The session offered valuable insights into the current situation, challenges, and progress of disability inclusion in Nepal while also recognizing and celebrating the leadership of persons with disabilities.

Nepal continues efforts towards universal health coverage and health-related sustainable development goals, it is essential to "leave no one behind. MoHP with support from WHO undertook situation assessment on 'Health Equity for Persons with Disabilities'. TAs a continuation of Health Equity for person with disabilities phases, on October 20th -29th Situation assessment of person with disability were conducted. There was also participation from WHO Headquarters (HQ) consultants to WHO disability team, WHO- Southeast Asia regional Office (SERO), WHO CO and MOHP representative. During the assessment period through KII with different sections of MOHP, they are

[4] Persons with Disabilities in Nepal abbx0lg.pdf

envisioned by the Disability Right Act 2017 to integrate the disability within their respective division activities planning and policy development. For e.g.: national health education information and communication section are collaborating with other section within and outside ministries, OPDs and expert for developing/designing/planning for disability inclusive infographic and audiovisual aids with sign language interpreters[7]. Similarly, policy planning and monitoring division is also working at disability inclusive policy and forcing the transformation of conventional vertical National health financing system into holistic and horizontal system to integrate different aspects of disability in terms of human resource, financing, infrastructure, and service delivery statute.

Further reactivation of disability technical group highlighted the provision made on different national policy and action plan (2016), the right of person with disability (2072) and convention of right of person with disabilities and its optional protocol (2008). In parallel, NFDN's continuous work and collaborative efforts for the rights of persons with disabilities at all levels of government which resulted in significant policy advancements including the provision made on the National Policy on Persons with Disabilities, 2080 (2023) and 16th periodic plan of national planning commission institutionalizing disability-inclusive policies and systems[8]. Overall government commitments, ownership accountability for integration disability improved significantly with gradual paradigm shift in perspective of disability and their needs mainly maternal and reproductive health. Besides this disability specific medicine, assistive products and care, procurement, and control mechanism along with financial subsidies are being recognized by government. The program also facilitates high level meetings and workshops including health equity mission with government stakeholders, OPDs, INGOs, Donor agencies and UN bilateral/unilateral agencies. These efforts aimed to promote dialogue among key stakeholders and strategize actions for achieving health equity for persons with disabilities[9]. Stakeholder engagement was further facilitated through consultative workshops on health equity, determined the strategic entry point among 10 strategic entry point and 40 action areas and highlighted the importance of inclusive policies and practices.

This support underscores the commitment to promoting disability inclusion and strengthening rehabilitation services in Nepal. Through collaborative efforts, it aims to improve the quality of life and health outcomes for persons with disabilities, ensuring their full participation and integration into society. The government of Nepal had provided a free PHC, subside service and health insurance along with some grants for certain health condition. There is GESI and SSU to support PWDs, but they need to be functioning and aware of the recent disability policies and strategies in more coordinate ways to facilitate providing services to PWDs. There is also problem with planning capacity VS resource allocation and is working on strengthening social security, referral mechanism, early intervention, establishment of functional rehabilitation unit at public hospitals. Further, persons with disabilities have enhanced their access to local government resources and services in the reporting period. This includes access to disability identity cards, social security allowances and assistive devices.

Likewise, progress has been achieved in institutionalizing disability rights and inclusion across five local governments in Karnali and Sudurpashchim provinces of Nepal in 2024. These local governments have allocated resources to address the needs of persons with disabilities. This is demonstrated through funding allocations for disability-inclusive programmes and livelihood initiatives as well as outreach programme of local government at the community level to provide disability identity cards. For example, [redacted] and [redacted] from Birendranagar municipality received disability ID cards after participating in the project capacity development trainings and learning about disability ID card and social security allowances. After acquiring the disability ID card, they are now accessing the social security allowances from the local governments. Karnali Province, Birendranagar Municipality (Ward 12) conducted door-to-door outreach to facilitate the distribution of disability identity cards and citizenship certificates. Furthermore, local governments have taken steps to improve the accessibility of municipal infrastructure. Notably, well-designed signage was installed at the District Administration Office in Surkhet, utilizing signs and symbols to communicate information, directions, and warnings through various formats, including physical signs, digital displays, and architectural elements to persons with disabilities. These initiatives were informed by accessibility and safety audits, ensuring a systematic approach to disability inclusive urban planning. The above results were achieved through active engagement of disability rights advocates with local and provincial governments, advocating for the integration of disability-inclusive policies and programmes.

Organizations of persons with disabilities (OPDs) have now further improved institutional capacities to contribute to implementation of disability inclusive policies and programmes at the community level. They have demonstrated increased confidence in articulating their priorities and engaging with government stakeholders. The formerly inactive OPDs, which were legally registered but not operational, are now actively engaging in local level planning, budgeting processes, and development initiatives. Their increased recognition by the local authorities has reinforced their role as key stakeholders in the governance processes. These efforts were initiated following sustained sensitization efforts by the project through training sessions and consultations. At the community level, the Deep Disabled Human Rights Organization in Kailari Rural Municipality, Sudurpashchim Province, has secured a new one-year project from the Disability Rights Fund to enhance local disability rights initiatives. Similarly, the Disabled Women Society in Surkhet is implementing a project with support from the Disability Rights Fund while also receiving funding from the Nepal Disabled Women Association, BirendranagarMunicipality, and Tewa for small-scale initiatives. This was the result of institutional capacity development of OPDs supported by the Joint Progrmame.

UN Women, in collaboration with the National Indigenous Disabled Women Association Nepal (NIDWAN) and consortium partners—the National Federation of Disabled Nepal (NFDN) Kailali and the Disabled Awareness and Communication Service Center (DACSC)—has contributed to these results by implementing interventions related to capacity development on disability rights and

inclusion for duty bearers and persons with disabilities, accessibility audits, legal aid policy reviews, dialogue platforms, and consultations.

These efforts align with the UN Disability Inclusion Strategy and underscore the importance of a human rights-based approach to disability inclusion, ensuring that persons with disabilities can participate fully and equally in all aspects of society. UN Women provided technical, financial and coordination support to design the capacity development training curricula, coordinate with local government and follow up support through Provincial Coordinators.

State Outcome 2

Gaps in achievement of essential building blocks or preconditions to CRPD implementation in development and humanitarian programs are addressed.

Please provide narrative description on the progress made to achieve outcome 2

Under Outcome 2, the programme made demonstrable progress in addressing legal, policy, data, and planning gaps that constrain CRPD implementation. At the national level, the programme contributed to policy advocacy efforts that influenced the integration of disability inclusion into Nepal's 16th Periodic Plan. The plan adopted a twin-track approach, mainstreaming disability across sectors while also including targeted measures for persons with disabilities, including women and girls with disabilities.

A major area of progress was the review of legal aid systems and frameworks from a gender and disability perspective. During 2024, a comprehensive review of existing legal aid policies and institutional arrangements was conducted, identifying structural barriers faced by women with disabilities in accessing justice. This review resulted in a policy brief with evidence-based recommendations addressing accessibility, awareness, institutional coordination, data gaps, and financing for disability-responsive legal aid services. The findings were formally disseminated, securing commitments from key institutions including the Law, Justice and Human Rights Committee of the House of Representatives and the Access to Justice Commission under the Supreme Court to improve disability responsiveness within legal aid services.

At the sub-national level, the programme addressed preconditions for CRPD implementation by strengthening evidence for disability-responsive public finance management. Using a disability-responsive budgeting checklist developed under the programme, the annual fiscal plans, policies, and budgets of five municipalities were reviewed in 2024. The analysis revealed that while municipalities had allocated some resources for persons with disabilities, spending was largely concentrated on disability ID card distribution and assistive devices, with limited investment in empowerment, livelihoods, or inclusive services. These findings were shared directly with municipal authorities and used to inform advocacy and planning processes for subsequent fiscal years.

The programme's extended implementation period also captured foundational work undertaken by KOSHISH through a baseline study conducted between January and March 2025. The study covered fifteen municipalities across ten districts in three provinces and generated both quantitative and

qualitative data through desk reviews, focus group discussions, key informant interviews, and surveys administered to persons with disabilities. The baseline assessed disability identification systems, participation of persons with disabilities in governance, inclusion of women with disabilities in local decision-making, and the functionality of Local Coordination Committees. This evidence base directly responds to data gaps that have historically limited CRPD-aligned planning and monitoring.

The Safe Motherhood and Reproductive Health Right Act, 2018 was reviewed from disability perspectives to make it responsive to the needs of women with disabilities in partnership with the Nepal Disabled Women Association (NDWA), a women led OPD. As a result, a comprehensive review report was developed in active participation and consultations with the representatives from OPDs including women and queer individuals with disabilities, relevant Ministries and parliamentarians at the federal level, UN Agencies, Reproductive Health Right Working Groups (RHRWGs), legal experts and advisors. The report has been formally submitted to the Ministry of Health and Population in the presence of Secretary of the Ministry of Health and Population, Dr. Roshan Pokharel, who reaffirmed his commitment to addressing the rights of women with disabilities and marginalized communities during the amendment process.

The capacity and skills of frontline healthcare provider was empowered through training health care worker on Disability management and rehabilitation. Following this the government has integrated the disability management and rehabilitation service at basic health facilities. The provincial government are organising this kind of capacity building training in coordination of national health training institutions and developing more skilled human resource to provide disability management and rehabilitation service at PHC. 21 health care workers have developed their competencies for providing the disability management and rehabilitation service at their basic health facilities. Furthermore, basic rehabilitation training package for health care worker was successfully conducted. Realizing its immense necessary to integrate rehabilitation at PHC and advancing different global and national agendas like SDG, UHC and country national health strategies. Through development of basic rehabilitation service strengthening and integrating rehabilitation system into national health system will be more convincing with strong leadership of government.

Beside this Training on Assistive Product and procurement of 20 different assistive product (from other funds mobilized) was another notable example of capacity building. One batch of mentors training (24 participants) at Kathmandu and two batches of Learners training (57 participant) from Sudurpashchim and Madhesh Parades was organised to capacitate the health care worker with the basic skill of providing simple assistive products and refer for more complex needs.

Training on Assistive Products (TAP) aims to be a comprehensive package that provides and supports localized training for primary healthcare and other community-level workers. In conjunction with other GATE initiatives, the purpose of TAP is to increase effective community-level access to a range of basic assistive products for people living in a broad range of contexts. This kind of training is believed to addressing the unmet need for assistive products for achieving Sustainable development goals, providing UHC, implementing the Convention on the Rights of Persons with Disabilities and helps

further in integration of both rehabilitation and assistive products into national health system. TAP was implemented and field tested first time in Nepal.

The Government of Nepal endorsed the 16th periodic plan which has strongly integrated the disability agenda. The 16th plan has adopted a twin-track approach to promote and mainstream disability rights and inclusion in the development interventions. Under chapter eight of the 16th plan titled 'Gender Equality, Social Justice and Inclusive Society', it has provisioned that the agenda of persons with disabilities including other gender equality and social inclusion (GESI) groups will be internalized, mainstreamed and localized for gender equality and empowerment, social justice and inclusion. Further, it has mainstreamed gender equality, disability and social inclusion as an implementation strategy across sectors. Few examples include:

- Ensure access to education for children who are with autism including all types of children with disabilities and develop entrepreneurship.
- Develop disability inclusive city infrastructure and rural human settlement.
- Coordinate and collaborate with private, governmental and non-governmental organizations for social and economic empowerment of persons with disabilities.
- Design and roll out special social protection programme and prioritize persons with disabilities, including other in receiving public services.
- Making justice system simple, affordable and fast track system to the persons with disabilities including other most marginalized and excluded groups.

Similarly, the Provincial Policy and Planning Commissions of Sudurpashchim and Karnali provinces integrated the disability agenda in their fiscal policy and budget programme for 2024/25. For instance, in Sudurpashchim province, the Provincial Policy and Planning Commission introduced the Dashrath Chand Skills and Capacity Development Programme, targeting the most marginalized and excluded groups, including persons with disabilities. Further, its fiscal plan also includes specific programmes for persons with physical disabilities and children with autism. Additionally, the provincial government has increased the reservation quota for people with disability to 5%, restoring it from 4% in province public service commission act following sustained advocacy by OPDs supported by the project. This marks a significant achievement in ensuring greater inclusion of persons with disabilities in public services and employment opportunities. In Karnali province, the fiscal programme has allocated resources for the distribution of assistive devices to support the rehabilitation of persons with disabilities, in coordination with the local governments. The provincial plan further includes the establishment of rehabilitation centers in partnership with local government authorities, non-governmental organizations, and the private sector. All these results will contribute to the commitment CRPD and ensure that persons with disabilities have the right to recognition everywhere, promote their right to work on an equal basis with others, guarantee access to the physical environment, transportation, information, communications, and other essential services, and uphold their right to fully participate in political and public life.

UN Women contributed to these results by implementing rigorous policy improvement efforts, in partnership with NIDWAN and its consortium partners - NFDN. These efforts include a series of consultations, and high-level policy dialogues which were instrumental in sensitizing government stakeholders and promoting disability-responsive policies to uphold the rights and dignity of persons with disabilities, particularly those who are most vulnerable and underrepresented.

State Outcome 3

National and sub-national development and humanitarian plans, budgets, programs and monitoring processes are disability inclusive.

Please provide narrative description on the progress made to achieve outcome 3

Progress under Outcome 3 is evidenced by concrete changes in planning, budgeting, and participation mechanisms at local and provincial levels. During the reporting period, at least four municipalities in Karnali and Sudurpaschim provinces increased allocations for disability-inclusive programmes following engagement with OPDs and participation in programme-supported capacity development and dialogue platforms. These allocations supported a range of interventions including livelihood promotion for persons with disabilities, operational support for OPDs, disability awareness activities, assistive device distribution, and accessibility enhancements in public facilities.

At the provincial level, both Karnali and Sudurpaschim provincial governments integrated disability inclusion into their fiscal policies and programme frameworks for FY 2024/25. Notably, Sudurpaschim Province revised its public service quota for persons with disabilities from four to five per cent following sustained advocacy by OPDs supported under the programme. This reform represents a significant systemic shift towards inclusive employment and public service participation.

OPDs also strengthened their engagement in development coordination and accountability mechanisms. In 2024, sixty rights holders (27 women and 33 men) from nine OPDs participated in structured capacity development focused on CRPD implementation and conducted a comparative analysis between the UNCRPD and Nepal's Act Relating to the Rights of Persons with Disabilities. Participants included persons with physical, sensory, intellectual, and psychosocial disabilities, as well as parents of children with autism. As a result, OPDs were better positioned to engage in policy dialogue, monitoring, and advocacy at local and provincial levels.

During the reporting period, progress has been made in strengthening disability-inclusive planning and programming at the local level. Notably, four municipalities in Karnali and Sudurpashchim provinces have increased their budget allocations for disability-related initiatives within their municipalities. Key achievements include a shift in attitudes and behaviors within local governments towards disability inclusion, reflected in concrete budgetary commitments and programmatic actions. For example, Kailari Rural Municipality allocated NPR 450,000 for disability-focused initiatives. Bhajani Municipality earmarked NPR 200,000 for the Triveni Disabled Association to support livelihood and income-generating activities, with Ward 2 separately allocating NPR 30,000 for disability inclusion programs. Birendranagar Municipality allocated NPR 800,000, and Barahatal Rural Municipality allocated NPR 700,000 for persons with disabilities and their representative

organizations. These funds cover a range of initiatives, including awareness-raising, distribution of assistive devices, skills training, income-generating activities, and the issuance of disability identity cards.

Ten OPDs have successfully accessed funding from other sources, further strengthening their capacity and impact at the local level as a result of their engagement with the local governments and development partners to advance disability inclusion. These examples demonstrate that local governments are increasingly recognizing the importance of disability inclusion in their development and humanitarian planning. UN Women in partnership with NIDWAN and its consortium partners, have played a crucial role in this progress by strengthening the capacity of government officials through a series of consultations, advocacy efforts, and capacity development initiatives at national, subnational, and local levels enabling them to design and deliver disability responsive planning and budgeting within their constituencies. The capacity development and advocacy efforts were substantiated by the review of the local government budget and programmes from gender and disability lens, using the disability responsive budgeting guideline developed in support of the Joint Programme.

In addition to it, a review report assessing the planning, implementation, and monitoring of humanitarian response framework and development co-operation plans has been prepared. The review highlights significant gaps in Nepal's humanitarian response framework, particularly in disability inclusion. Policies like the Disaster Risk Reduction National Strategic Plan (2018–2030) and Post-Disaster Needs Assessment (2015) failed to integrate disability-responsive strategies, resulting in inaccessible emergency shelters, ineffective early warning systems, and exclusion from economic recovery programs. To address these gaps, the report recommends disaggregated data collection, inclusive disaster preparedness, accessible reconstruction, livelihood opportunities for persons with disabilities, and active OPD engagement in policy design and monitoring. These findings and recommendations can serve as a roadmap for making Nepal's disaster response and humanitarian efforts more disability inclusive. Furthermore, two key mechanisms have been identified to promote OPDs participation in the planning, implementation, and monitoring of progress of the SDGs and promote OPDs participation. These two key mechanisms included development of forum for monitoring Disability Inclusion in SDGs (FMDI-SDG) and supportive mechanism for monitoring progress in disability targets in SDG.

2. Achievement of specific outputs

Please complete by indicating what was achieved on each output and report against the output indicators. In the narrative, please describe any challenges during the output delivery. The narrative could include any qualitative results from the output activities that were completed, contextual specifics e.g. who are the beneficiaries? What are the intervention types? Any unexpected / unplanned results?

Please complete one table per output including all relevant output indicators. Add as many tables as required.

Output 1.1. Capacity of national stakeholders, especially of key duty bearers and rights holders, is enhanced, to ensure more effective contributions towards disability inclusive policies, systems and - for the implementation of the CRPD and SDGs.
Output 1.1.1 Capacity of federal, sub-national government representatives, UNCT enhanced in functioning of disability coordination committees, implementation and monitoring of Act Relating to Rights of Persons with Disabilities, 2017, in finalization of the draft National Policy and Plan of Action on Disability, drafting/ finalization of provincial disability policy, planning/budgeting, development of guidelines and checklist for disability inclusive policy reform, conduct accessibility audit of the premises and services of government.
Brief narrative description on completion of output
Under Output 1.1, substantial progress was achieved through structured and sustained capacity development interventions targeting both duty bearers and rights holders across multiple levels of governance. During 2024, the NIDWAN-led consortium implemented eleven trainings and capacity-building workshops across Karnali and Sudurpaschim provinces, reaching at least 150 duty bearers including provincial and local government officials, members of Disaster Risk Reduction Committees, and representatives from Local Coordination Committees. These engagements focused on strengthening practical knowledge of the UNCRPD, national disability legislation, disability-inclusive governance, and gender-responsive planning and budgeting. In addition, approximately 130 participants, including persons with disabilities, OPD representatives, civil society actors and family members, were reached through inception events and consultation meetings that supported initial engagement and coordination around disability-inclusive governance processes. Building on this foundation, additional capacity development was delivered during the extended reporting period up to 30 March 2025 through KOSHISH-implemented activities aligned with UNPRPD objectives. Between January and March 2025, KOSHISH organized three provincial-level workshops in Karnali, Sudurpaschim and Madhesh provinces, engaging a total of 188 participants, including 120 men, 67 women and one participant identifying as other. Fourteen participants were persons with disabilities. The workshops covered key legal and policy frameworks, including the UNCRPD, the Act Relating to the Rights of Persons with Disabilities, the Local Government Operation Act, and principles of inclusive governance and disability-responsive budgeting. As a direct outcome, elected representatives and municipal officials expressed commitments to integrate disability considerations into local plans, improve accessibility within municipal offices, and allocate local resources for disability-inclusive initiatives . Further progress under Output 1.1 was achieved through the strengthening of Local Coordination Committees. During the same reporting period, KOSHISH facilitated six LCC meetings across municipalities in Madhesh, Karnali and Sudurpaschim provinces, involving a total of 61 participants with 40 men and 21 women, including 9 persons with disabilities. These meetings identified

operational and capacity gaps within LCCs, particularly related to disability identification procedures, distribution of disability identity cards, and alignment with CRPD principles. Collectively, these interventions significantly enhanced the capacity of duty bearers and rights holders to engage in and influence disability-inclusive governance processes at the local level.

Capacity building interventions were conducted at the federal and provincial level to strengthen the understanding and functioning of disability coordination mechanisms. At the federal level a capacity building training was organized for the Disability National Steering Committee and government representatives. The training brought together 20 participants with 9 male and 11 female, including 7 persons with disabilities (2 male and 5 female). The session strengthened participants' understanding of the Committee's roles and responsibilities, inclusive policy formulation, implementation mechanisms, resource allocation, and inter-ministerial coordination. Key recommendations included establishing dedicated resources and coordination mechanisms for disability-related initiatives, strengthening the institutional arrangement of the National Steering Committee, improving coordination on assistive devices, enhancing accessibility across government institutions, and increasing the representation of persons with disabilities in decision-making processes. At the Sudurpaschim provincial level, the training brought together 23 participants with 10 male and 13 female, including 8 persons with disabilities (3 male and 5 female). The training highlighted the importance of clear operational mechanisms, increased budget allocation for disability programmes, capacity building of Organizations of Persons with Disabilities (OPDs), inter-ministerial coordination, awareness and sensitization, accessibility, and regular monitoring and accountability. However, the planned activity in Karnali Province could not be conducted due to the political and institutional challenges affecting the formation and representation of the Provincial Coordination Committee. It was also influenced by challenges related to ensuring adequate and legitimate representation of OPDs, building trust and consensus among stakeholders, strengthening inter-governmental coordination, and responding to evolving political dynamics.

Similarly, a statistical report on persons with disabilities based on the Nepal's census 2021, has been published in the National Statistics Office (NSO) website partnership with National Federation of Disabled Nepal (NFDN), a national cross disability umbrella body of the Organizations of Persons with Disabilities (OPDs), and in close coordination with NSO and UNDP. The process involved extensive consultations and workshops with 258 participants, including 167 males and 91 females, among whom 32 were Janajati, 14 were Dalit, and 155 persons with disabilities. These participants represented government agencies, OPDs, UN agencies, development partners, and other key stakeholders at the federal and provincial level, ensuring a comprehensive and inclusive approach to data validation and analysis.

Likewise, the preparatory work for the National Disability Survey was undertaken, including the development of a draft survey questionnaire aligned with the Washington Group Questions, questionnaire manual for enumerator, advocacy materials and a project document for survey implementation in lead of NSO and partnership with NFDN. The draft questionnaire

was finalized through extensive consultations with diverse stakeholders and field testing in three locations of three provinces namely, Bagmati, Karnali and Sudurpaschim. The project document provides a detailed model of the survey including sample size, sampling techniques, survey tools, methodology, implementation plan, and other essential aspects required for the conducting the survey. Similarly, two thematic reports on disability and caste and ethnicity based on Nepal Population and Housing Census (NPHC), 2021 has been published in the NSO's website through the collaborative efforts between NSO and UNDP. The disability analytical report highlights the socio economic and demographic status of persons with disabilities (PWDs), identifies gaps, and offers recommendations for inclusive policy-making and practices.

During the project implementation period, as a result of continuous and collaborative efforts of the implementing partners, OPDs, and other stakeholders, the National Policy on Persons with Disabilities, 2023 (2080), formulated by Ministry of Women, Children, and Senior Citizens (MoWCSC) was passed by the cabinet meeting of Government of Nepal on 21st December 2023.

Reporting on Output 1.1.1 Indicators (Refer Annex 2)

Indicator*	**Start level** Baseline (Beginning of the project reporting period)*	**Target***	**End level** End line (End of the project reporting period)*	**Means of Verification**
1.1.1: # of trainings (disaggregation by type of capacity building[10]) developed and delivered in the UNPRPD programme. (Diss-aggregated by topics[11])	0	4 Training / workshop/ meeting	11 training/ workshops - AR 2024	Training/workshop/ meeting reports Attendance Training
1.1.2: # of participants (disaggregated by type of stakeholder[12]) disaggregated by sex, disability, rural/urban participating in capacity building activities funded or		200 (inclusive of participants from federal, provincial and local level, at-least 33% women) 24 AR	258 participants (167 males and 91 females, among whom 32 were Janajati, 14 were Dalit, and 155 were persons with disabilities) 24 AR	Training/workshop/ meeting reports Attendance Training reports, training evaluation

Indicator*	Start level Baseline (Beginning of the project reporting period)*	Target*	End level End line (End of the project reporting period)*	Means of Verification
provided by UNPRPD programmes.			Total 101 including 61 representatives from Local Coordination Committee and 40 from Provincial level workshops (31 women, 70 men, including 10 people with disability)	forms, moodometer, photographs, data disaggregation sheet

Output 1.1.
Output 1.1.2: Capacity of OPDs, particularly women and girls with disabilities and underrepresented groups to organize themselves, to participate monitoring mechanisms of constitutional commissions (NHRC and others), to contribute, and to advocate for disability responsive annual planning, programming, and budgeting at the local government in line with SDGs are increased
Brief narrative description on completion of output
To strengthen the capacity of OPDs and provincial governmental bodies on disability data and National Disability Survey, total eight sensitization events were successfully organized across all provinces and one at the federal, drawing on insights from the disability statistical report. These events engaged approximately 419 participants, including 216 males and 203 females, among whom 126 males and 85 females were persons with disabilities. This sensitization event has empowered community members, particularly women, girls, and under-represented groups with persons with disabilities such as Deafblindness, intellectual disabilities, autism, psychosocial disabilities, hemophilia, and Down syndrome and other. Additionally, it has supported the evidence-based advocacy agendas to influence policy changes and raise awareness effectively. Similarly, eight sensitization events across all provinces and one at the federal level were successfully conducted to inform and sensitize the Organizations of Persons with Disabilities (OPDs), government representatives, and other stakeholders about the key provisions and commitments outlined in the National Policy on Persons with Disabilities, 2023 (2080). As a result of these events, Madhesh Province's Minister for Sports and Social Development, Pramod Jayswal, publicly pledged to introduce a Provincial Disability Policy in the near future. At the federal level, Ministry of Women, Children, and Senior Citizens (MoWCSC) committed to actively engage Organizations of Persons with Disabilities (OPDs) and incorporate stakeholder feedback in developing

the policy's action plan. The Ministry also committed to finalizing the action plan within one year, with active engagement from OPDs throughout the process. Likewise, the dissemination event in Dhangadhi motivated the National Autism Committee to prioritize promoting a provincial-level disability policy.

Similarly, a total of 150 duty bearers in Sudurpashchim and Karnali provinces have further strengthened their capacity in the formulation and implementation of gender- and disability-responsive policies and plans. These duty bearers include officials and elected representatives from five municipalities, members of Local Coordination Committees, the Provincial Ministry of Social Development, Provincial Policy and Planning Commissions, Provincial Assemblies, as reported by programme partner report, local governments improved their understanding of disability inclusion and allocated targeted budgets to address the needs of persons with disabilities. Moreover, 130 participants (52 women and 78 men) including elected representatives, bureaucrats, representatives from OPDs and civil society organizations (CSOs), persons with disabilities, and their family members, have increased their knowledge and understanding of disability rights and inclusion. These meetings facilitated stakeholder engagement, fostering commitment to the programme and ensuring the necessary coordination and collaboration to advance gender-responsive policies and inclusive practices for persons with disabilities. UN Women contributed to these results by providing technical inputs to design the capacity development training including development of training manuals while NIDWAN, in collaboration with consortium partners (NFDN and DACSC), rolled out series of capacity development trainings and orientation workshops. The capacity development training package was informed by the findings and recommendations from local budget review from disability lens as well as legal aid policy and framework review conducted by UN Women in partnership with NIDWAN.

To capacitate the caretakers of persons with disabilities, a five-day capacity building training for the 27 (male 4, female 23) caregivers of persons with profound disabilities living in Lalitpur Metropolitan city was conducted to enhance caregiving skills through practical, hands-on learning, ensuring better support for individuals with severe disabilities. The participant selection process prioritized caregivers from low-income backgrounds, first-time caregivers, and those supporting individuals with severe disabilities, ensuring that the training reached those most in need. Additionally, five persons with disabilities attended the training session along with their caregivers, as they could not be left at home and needed to accompany them.

Furthermore, foundational work for the upcoming National Disability Survey was conducted in close coordination with NSO through the development and finalization of the draft questionnaires aligned with the Washington Group Questions, questionnaire manual, project documents, and advocacy materials.

Indicator*	**Start level** Baseline (Beginning of the project reporting period)*	**Target***	**End level** End line (End of the project reporting period)*	**Means of Verification**
1.1.1: # of trainings (disaggregation by type of capacity building[5]) developed and delivered in the UNPRPD programme. (Dissaggregated by topics[6])	0	4	11	Training report
1.1.2: # of participants (disaggregated by type of stakeholder[7]) disaggregated by sex, disability,rural/urban participating in capacity building activities funded or provided by UNPRPD programmes	0	200	419 participants with 216 males and 203 females. Among whom 126 males and 85 females were persons with disabilities. 150 representatives from Local DRR Committee	- Attendance Sheet Training reports, training evaluation forms, moodometer, photographs, data
1.1.3: # and % of participants reporting increased knowledge or capacity to design or revise policies or systems	0	4	11	Training report

[5] Training (in person/online), workshops, seminars etc

[6] 1. CRPD 2. Preconditions for disability inclusion 3 National development plans for the SDGs. 4.women with disabilities and underrepresented groups needs and rights 5 instruments for planning and implementation of UN development 6. other

[7] Governments (type of ministry), OPDs (type of OPDs) UN (RCO, Un agency), other

Indicator*	**Start level** Baseline (Beginning of the project reporting period)*	**Target***	**End level** End line (End of the project reporting period)*	**Means of Verification**
to be more disability inclusive.				
1.1.4: # of OPDs (disaggregated by type umbrella- disability specific- women- underrepresented other) that benefitted from capacity building activities (type of activities[8]) funded by UNPRPD programmes to strengthen the capacity of organizations of persons with disabilities.	0	10 OPDs/self-help groups	10 OPDs	Participants attendance sheet
1.1.5: # of capacity building activities funded by UNPRPD programmes, directed at women and girls with disabilities on their rights and requirements and/or directed at underrepresented groups of persons with disabilities on their rights and requirements. (disaggregated by target group)	0	4	11	Training report

[8] Organizational development (technical or financial support) specific training to participate in processes such as SA, CCA, UNSDCF etc

Output 1.2: Knowledge products (e.g., tools and guidelines) are developed and piloted, particularly to address gaps in achieving the preconditions for disability inclusion.
Activity 1.2.1 Knowledge products (e.g., simplified guideline for assessment and certification of disability, tools for disability budget audit, guideline for digitalization of disability ID card, checklist for participation of persons with disabilities/OPDS in decision making process) developed, piloted, and disseminated.
Brief narrative description on completion of output
A checklist to measure the engagement of OPDs and power to influence the change in decision making processes has been developed. It involved participatory consultations with OPDs representatives, family members of persons with disabilities, federal and local Government representatives, development partners, UN Agencies including thematic disability groups. The key areas that the checklist focused include a) Representation and Inclusion b) Internal Policy Framework for OPD engagement c) Capacity and Resources of OPDs d) Engagement in Policy Development e) Influence on Public Opinion f) Monitoring and building Accountability g) Inclusiveness of Implementation and Monitoring h) Access to Information and Communication i) Impact on Social Change j) Sustainability and Long-Term Engagement k) Feedback from Persons with Disabilities.

Indicator*	**Start level** Baseline (Beginning of the project reporting period)*	**Target***	**End level** End line (End of the project reporting period)*	**Means of Verification**
1.2.1: # of knowledge products (disaggregated by type of product11/thematic focus12) developed, piloted, and disseminated to the relevant stakeholders to inform inclusive practices.	0	Review building codes and checklist and devise set of recommendations; develop a guideline for disability assessment and certification. 1 guideline/tool developed in year one	A checklist to measure the engagement of OPDs and power to influence the change in decision making processes has been developed 3 (local government budget review tool, report on	1. Checklist and tools available on being used by the stakeholders.

Indicator*	**Start level** Baseline (Beginning of the project reporting period)*	**Target***	**End level** End line (End of the project reporting period)*	**Means of Verification**
	2024	2	the review of existing legal aid and policies and frameworks from disability and gender lens and a policy brief were produced)	Copy of final report, printed copies of the reports, event report
1.2.2: # of knowledge products developed that address gaps related to inclusion of women and girls with disabilities and/or underrepresented groups of persons with disabilities (disaggregated by thematic focus).	0	1	1 (A Comprehensive Compiled Report on Local Governments' Policies, Budget and Programs from Gender and Disability Perspective)	Progress report of programme partner
1.2.3: # actors involved in developing and testing of knowledge products (disaggregated by actor (GOV/NGOs/OPDs/Other)				
1.2.4: # of stakeholders reporting increased or strengthened policies and systems as a result of UNPRPD funded KM tools (disaggregated by stakeholder)				

Output 1.3: Models of good practice, learning and exchange mechanisms are developed to share country level experiences, to increase understanding, and to inform innovative practices

Output 1.3.1 Strengthen/establish a platform for learning and exchange at sub-national level, OPDs, UNCT to increase understanding of SDGs, CRPD, and inform innovative practices such as one stop service center and disability service center, disability inclusive health.

Brief narrative description on completion of output

In order to document the best practices/models based on implementation experience on formulation and implementation of disability laws/policies/services, total four consultations workshops were organized at the federal and provincial level. At the provincial level, the consultations were held at Karnali and Sudurpashchim provinces. The consultations brought together 147 participants, with 77 males and 94 females along with 87 persons with disabilities consisting of representatives from local governments, OPDs, ministries, UN Agencies, development partners, UN LNOB GESI Working Groups. This report on best practices captures transformative practices and lessons learned in Nepal's journey toward disability inclusion. By leveraging these models and addressing existing challenges, stakeholders can create a more equitable society that upholds the dignity and rights of persons with disabilities.

Total two dialogue events were successfully organized in Kathmandu to commemorate the 32nd & 33rd International Day of Persons with Disabilities (globally celebrated on 3rd December) in the year 2023 and 2024 respectively. In 2023, the event enhanced the understanding and awareness of disability issues and rights in Nepal, bringing together diverse stakeholders including OPDs, UN agencies, experts, activists, women with disabilities in sports and others to exchange knowledge and experiences in the common platform. The dialogue session brought together 44 representatives (27 Female and 17 male) including 10 representatives having some type of disability ranging from visible to invisible disabilities such as thalassemia and hemophilia which facilitated sharing and cross learning among OPDs and diverse stakeholders on disability rights and inclusion. Similarly in 2024, the dialogue brought 69 people, including representatives from local government, federations of persons with disabilities, OPDs, women with disabilities, queer with disabilities, parent federations of persons with disabilities, UN Agencies, development partners, disability experts, members of National Steering Committee for disability, and many others. The participants comprised of 37 males, 31 females, and one queer individual, with 30 participants being persons with disabilities. The session offered valuable insights into the current situation, challenges, and progress of disability inclusion in Nepal while also recognizing and celebrating the leadership of persons with disabilities. Additionally, the sessions also served as a platform for networking and cross-leaning among OPDs to strengthen collaboration for disability-inclusive development and sharing best practices and learnings with the key stakeholders working towards disability inclusion. To ensure inclusive participation, provision of sign language interpretation and simultaneous language interpretation was ensured throughout both the events.

Indicator*	**Start level** Baseline (Beginning of the project reporting period)*	**Target***	**End level** End line (End of the project reporting period)*	**Means of Verification**
1.3.1 # of UNPRPD Situational Analysis through multistakeholder approach	[…]	N/A	N/A	N/A
1.3.2 # of plannings and processes related to UNPRPD-funded programs and/or beyond UNPRPD-funded programs influenced by UNPRPD Situational Analyses findings (disaggregation by UNPRPD - funded programmes and beyond)	[…]	N/A	N/A	N/A
1.3.3 # of mechanisms[9] to share and exchange learning and evidence to inform inclusive policies and systems. (disaggregated by		- 1 cross provincial multi-stakeholder network will be formed, Two learning/sharing sessions will be facilitated for the network	Two learning/sharing session was facilitated	1. Best practices report shared on one stop service center, disability service center 2. Report of the periodic

[9] Technical/ Advisory Commitees , Knowledge Platforms, Conferences, Summits etc

Indicator*	**Start level** Baseline (Beginning of the project reporting period)*	**Target***	**End level** End line (End of the project reporting period)*	**Means of Verification**
national/ regional/global mechanism)	0		4	learning sessions. 3. Report of the dialogue platform for networking and cross learning among OPDs, UN and other stakeholders Meeting minutes of the Cross Provincial Multi-stakeholder networks formed by NIDWAN
1.3.4 # actors involved in mechanisms to share learning and evidence to inform inclusive policies and systems disaggregated (UN/ GOV/OPDs, other)		- 5 sessions organized to discuss on best practices in UN system, government including at local level, OPD	- 4 sessions organized to discuss on best practices in UN system, government including at local level, OPD	1. Best practices shared on one stop service center, disability service center 2. Report of the periodic learning sessions. Report of the dialogue platform for networking and cross learning

Indicator*	**Start level** Baseline (Beginning of the project reporting period)*	**Target***	**End level** End line (End of the project reporting period)*	**Means of Verification**
				among OPDs, UN and other stakeholders
1.3.5 # of models of good practice, learning and exchange mechanisms addressing the situation of women with disabilities and/or underrepresented groups of persons with disabilities (disaggregation women or underrepresented groups) (disaggregated by disability specific or mainstream)		- Two learning/sharing sessions will be facilitated for the network - 5 sessions organized to discuss on best practices in UN system, government including at local level, OPD		1. Best practices shared on one stop service center, disability service center 2. Report of the periodic learning sessions. Report of the dialogue platform for networking and cross learning among OPDs, UN and other stakeholders

Output 2.1: Legal frameworks and systems (i.e., laws, policies, plans, programs, services, and administrative systems) addressing the preconditions for disability inclusion are newly developed, reviewed, or reformed, to be in line with CRPD standards.
Output 2.1.1 Acts, regulations, policies at federal (Disability Right Act and regulation, National Policy and Plan of Action on Disability (NPPAD) and disability policy at Sudurpaschim and Karnali province reviewed, drafted, or finalized aligned with CRPD standards and SDGs with meaningful participation of OPDs at all stages.
Brief narrative description on completion of output

During the project period, support was provided for the comprehensive review of the Act Relating to the Rights of Persons with Disabilities (ARPD), 2017, led by the National Federation of the Disabled Nepal (NFDN). and developed a three-column amendment document, referred as “Tin Mahale” in Nepali language. The review involved 157 participants across three consultation workshops, including 74 women, 83 men, and 83 persons with diverse disabilities. A three-column amendment document (*Tin Mahale in Nepali language*) was developed and submitted to the Ministry of Women, Children and Senior Citizens (MoWCSC) to inform the proposed legislative amendments. Similarly, to address gaps in disability inclusive legislation, the review of the Safe Motherhood and Reproductive Health Rights Act, 2018 was conducted in partnership with the Nepal Disabled Women Association (NDWA), a women-led OPD. The review involved active participation and consultations with the representatives from OPDs including women and queer individuals with disabilities, relevant Ministries and parliamentarians at the federal level, UN Agencies, Reproductive Health Right Working Groups (RHRWGs), legal experts and advisors. A Tin Mahale amendment document was subsequently developed and formally submitted to the Ministry of Health and Population in the presence of Secretary of the Ministry of Health and Population, Dr. Roshan Pokharel, who reaffirmed his commitment to addressing the rights of women with disabilities and marginalized communities during the amendment process. Throughout this consultative process, provisions of sign language interpreters, simultaneous language interpreters, captioning, and print of the disability act in Braille were arranged to facilitate the active involvement of persons with disabilities.

During this activity implementation period, the disability policy of Karnali Province had been already drafted by the provincial chapter of National Federation of the Disabled Nepal (NFDN) in Karnali province. However, through the consultations with key stakeholders including the representatives from OPDs, NGOs, provincial government representatives from Social Development ministry, department of women and disability, and NGO Federations, it became evident that the draft policy needed to be reviewed and redrafted to ensure its relevance and effectiveness. The policy has been redrafted, incorporating feedback from various stakeholders and incorporating suggestions from Ministry of Social Development through consultations and inter-ministerial meetings. The revised draft has been formally submitted to the Minister of Social Development, who assured that the policy will be endorsed at the earliest opportunity. Likewise, in terms of Sudurpaschim the disability inclusive policy of Sudurpashchim province had already been endorsed. As a result, the project conducted sensitization workshop to provincial government representatives, OPDs and relevant stakeholders regarding the provisions of provincial policies and right of persons with disabilities. Among the total of 70 participants, 23 participants were from the government sector.

Indicator*	**Start level** Baseline (Beginning of the project reporting period)*	**Target***	**End level** End line (End of the project reporting period)*	**Means of Verification**
2.1.1: # of national regulatory frameworks and systems changes targeted by the UNPRPD program disaggregated by 1) legislation/regulation, 2) policies/plans/strategies, 3) capacity building programs, 4) operational guidance/standards, 5) direct services/service overhaul/service modelling, 6) audits/reviews/assessments, 7) governmental programs, 8) administrative procedures, 9) formal monitoring and accountability mechanisms or bodies, 10) regulatory/oversite/monitoring systems, 11) financing and budgeting or 12) other (please explain)	[…]	6 consultations facilitated to collect inputs from wider stakeholders (national/sub-national level, 1 consultation organized, & 1 consolidated feedback report produced and submitted to government - Report with the safer motherhood and reproductive health right act produced, -	3 Consultations were facilitated at the national level to collect inputs from wider stakeholders, one consolidated feedback report was prepared and submitted to the Ministry of Women, Children and Senior Citizen (MoWCSC). - Review report with the safer motherhood and reproductive health right act produced,	Report with recommendation to address the gaps in disability act is produced. Report of the consultation meetings and its attendance. - Report of reviewed Safer motherhood and reproductive health right act.

Indicator*	**Start level** Baseline (Beginning of the project reporting period)*	**Target***	**End level** End line (End of the project reporting period)*	**Means of Verification**
2.1.2: # type of change (development/review/reform) in legal frameworks and systems	[…]	[…]	The Act Relating to the Rights of Persons with Disabilities, 2017 was reviewed to be in line with CRPD standards and the consolidated feedback report was submitted to the Ministry of Women, Children and Senior Citizen (MoWCSC).	Report with recommendation to address the gaps in the disability act is produced.

Output 2.1
Output 2.1.2 Municipal plan/programme/budget and implementation status of disability related provisions (disability act and other inclusive policies) are reviewed and strengthened in collaboration with OPDs to effectively implement the disability act.
Brief narrative description on completion of output
The data collection of persons with disabilities in the remaining 17 wards of Lalitpur Metropolitan City (LMC) was successfully completed in collaboration with the LMC and partnership with the OPD, Independent Living Centre Lalitpur. Out of 29 wards of LMC, data collection in 12 wards had been previously conducted by LMC. The survey was undertaken to address existing data gaps and support evidence-based, disability-inclusive planning and service delivery at the local level. The survey reported 2,149 persons with disabilities with higher prevalence of disability on male (1155) male than in female (994). The survey findings also highlighted gaps in official disability registration, with a significant number of PWDs lacking disability identity cards. This data will be instrumental in improving disability registration systems and ensuring better access to entitlements and services. Additionally, a comprehensive data analysis report covering all 29 wards of LMC was prepared, published, and disseminated in the presence of LMC Mayor Chiri Babu Maharjan and Deputy Mayor Manjali Shakya Bajracharya. The analytical report provides consolidated evidence to inform disability-inclusive planning, policy development, and service provision across the municipality.

Indicator*	**Start level** Baseline (Beginning of the project reporting period)*	**Target***	**End level** End line (End of the project reporting period)*	**Means of Verification**
[…]	[…]	[…]	[…]	[…]
[…]	[…]	[…]	[…]	[…]

Output 2.1
Output 2.1.3 Disability coordination committees at all levels of government are operationalized to execute the implementation of national/sub-national policies and facilitate adequate resource allocation to ensure disability inclusion and services
Brief narrative description on completion of output
A total of six workshops were conducted at the federal level and in Karnali and Sudurpaschim Provinces to strengthen periodic monitoring and evaluation (M&E) of disability-inclusive plans and programmes and to promote advocacy for improved financial resource allocation. Three workshops focused on strengthening M&E practices, bringing together 66 representatives from government institutions, local authorities, disability rights organizations, and development partners, including 34 male and 32 female participants and 7 persons with disabilities. The workshops emphasized the importance of accessible evaluation processes, disability-disaggregated data, improved M&E tools, and stronger accountability and coordination among relevant stakeholders. Additional three workshops focused on advocacy for improved financial resource allocation for disability inclusion, with participation from 87 representatives, including 40 male and 46 female participants and 53 persons with disabilities. The discussions strengthened stakeholders' understanding of the importance of adequate and equitable allocation of resources for disability-inclusive programmes and encouraged greater participation of OPDs, including underrepresented groups, in budget and planning processes. The project also facilitated improved communication and engagement between the Ministry of Women, Children and Senior Citizens (MoWCSC) and Organizations of Persons with Disabilities (OPDs) by supporting a dedicated sign language interpreter at the Ministry for nearly eight months, contributing to more accessible and inclusive government processes.

Indicator*	**Start level** Baseline (Beginning of the project reporting period)*	**Target***	**End level** End line (End of the project reporting period)*	**Means of Verification**
[…]	[…]	[…]	[…]	[…]
[…]	[…]	[…]	[…]	[…]

Output 2.1
Output 2.1.4 Ongoing national programs relating to disability assessment, certification and rehabilitation services including prescription and maintenance of Assistive Technology (AT) are strengthened, necessary structure and training programs/packages/protocols are developed and piloted in line with CRPD standards.
Brief narrative description on completion of output
National rehabilitation strategy has been finalized and submitted for endorsement after series of debriefing, consultation, and discussion meetings with different rehabilitation stakeholders under leadership of EDCD. Considering the standard criteria for national strategy the document is being aligned with legal framework after refined language translation on Nepali Situation assessment of health equity of persons with disability has been completed and progress are underway to develop a plan for action to enhance disability inclusion as a cross-cutting interest of all health program. Similarly, basic rehabilitation packages for health worker have been developed.

Indicator*	**Start level** Baseline (Beginning of the project reporting period)*	**Target***	**End level** End line (End of the project reporting period)*	**Means of Verification**
2.1.1: # of national regulatory frameworks and systems changes targeted by the UNPRPD program disaggregated by 1) legislation/regulation, 2) policies/plans/strategies, 3) capacity building programs, 4) operational guidance/standards, 5) direct services/service overhaul/service modelling, 6) audits/reviews/assessments, 7) governmental programs, 8) administrative procedures, 9) formal monitoring and	[…]	4 consultation meeting on national rehabilitation strategy with EDCD Directors, Expert and Stakeholder at EDCD 6 meetings/workshop for development of basic rehabilitation	1 debriefing meeting and 1 consultation meeting with EDCD directors 2 discussion meeting with rehabilitation stakeholders and experts n presence	4 consultation meeting on national rehabilitation strategy with EDCD Directors, Expert and Stakeholder at EDCD 6meetings/workshop for development of basic

Indicator*	**Start level** Baseline (Beginning of the project reporting period)*	**Target***	**End level** End line (End of the project reporting period)*	**Means of Verification**
accountability mechanisms or bodies, 10) regulatory/oversite/monitoring systems, 11) financing and budgeting or 12) other (please explain)		package for health care workers	of EDCD directors 2 meeting at lcdms for consultation and discussion meeting for drafting the farmwork and check list fro basic rehabilitation package at LCDMS. 3 days workshop to develop the consensus. 3 discussion, consultation, and consensus meeting for final draft of basic rehabilitation package at LCDMS	rehabilitation package for health care workers

Indicator*	**Start level** Baseline (Beginning of the project reporting period)*	**Target***	**End level** End line (End of the project reporting period)*	**Means of Verification**
2.1.2: # type of change (development/review/reform) in legal frameworks and systems	[…]	4 consultation meeting on national rehabilitation strategy with EDCD Directors, Expert and Stakeholder at EDCD 6 meetings/workshop for development of basic rehabilitation package for health care workers	1 debriefing meeting nd 1 consultation meeting with EDCD directors 2 discussion meeting with rehabilitation stakeholders and experts n presence of EDCD directors 2 meeting at lcdms for consultation and discussion meeting for drafting the farmwork and check list for basic rehabilitatio	4 consultation meeting on national rehabilitation strategy with EDCD Directors, Expert and Stakeholder at EDCD 6 meetings/workshop for development of basic rehabilitation package for health care workers

Indicator*	**Start level** Baseline (Beginning of the project reporting period)*	**Target***	**End level** End line (End of the project reporting period)*	**Means of Verification**
			n package at LCDMS. 3 days workshop to develop the consensus. 3 discussion, consultation, and consensus meeting for final draft of basic rehabilitation package at LCDMS	

Output 3.1: Disability inclusion is strengthened in planning, implementation, and monitoring of UN development activities at the country level including in humanitarian settings
Output 3.1.1 Disability is mainstreamed in UNSDCF and other cooperation strategies of UN agencies including humanitarian response framework.
Brief narrative description on completion of output
A review report on planning, implementation, and monitoring of humanitarian response framework and development co-operation plans has been prepared by the national consultant. The review highlights significant gaps in Nepal's humanitarian response framework, particularly in disability inclusion. Lack of accurate data limited accessible infrastructure, and exclusion of OPDs in disaster planning have led to inadequate support for persons with disabilities. Policies like the Disaster Risk Reduction National Strategic Plan (2018–2030) and Post-Disaster Needs Assessment (2015) failed to integrate disability-responsive strategies, resulting in inaccessible emergency shelters, ineffective early warning systems, and exclusion from economic recovery programs. To address these gaps, the report recommends disaggregated data collection, inclusive disaster preparedness, accessible reconstruction, livelihood opportunities for persons with disabilities, and active OPD engagement in policy design and monitoring. These findings and recommendations can serve as a roadmap for making Nepal's disaster response and humanitarian efforts more disability inclusive.

Indicator*	**Start level** Baseline (Beginning of the project reporting period)*	**Target***	**End level** End line (End of the project reporting period)*	**Means of Verification**
3.1.1: # of Common Country Analysis (CCA) including disaggregated data and analysis of the situation of persons with disabilities.	[…]	[…]	[…]	[…]
3.1.2: # UNSDCF where	0	2	1 review report on the planning,	Review reports

Indicator*	**Start level** Baseline (Beginning of the project reporting period)*	**Target***	**End level** End line (End of the project reporting period)*	**Means of Verification**
disability inclusion has been mainstreamed and/or targeted.			implementation, and monitoring of humanitarian response framework has been prepared.	
3.1.3: # of joint programmes funded through MPTFs where the rights of persons with disabilities have been addressed (disaggregation by disability group) through collaboration with UNPRPD programmes				
3.1.4: # Humanitarian Response Plans (HRPs) and Humanitarian Needs Overviews (HNOs) addressing persons with disability				

Indicator*	Start level Baseline (Beginning of the project reporting period)*	Target*	End level End line (End of the project reporting period)*	Means of Verification
needs and rights.				

Output 3.3: OPDs are supported to develop capacity and are systematically engaged in the national development coordination mechanisms and accountability frameworks, (Gov/UN/Independent) around SDGs and in humanitarian coordination mechanisms.
Output 3.3.1 OPDs are supported to develop capacity and are systematically engaged in the national and sub-national development coordination mechanisms and accountability frameworks, (gov/UN/Independent) around SDGs and in humanitarian coordination mechanisms.
Brief narrative description on completion of output
To identify effective mechanisms for ensuring the participation of OPDs in the planning, implementation, and monitoring of progress of the SDGs and promote OPDs participation, a proposal has been developed. The proposal underscores systemic gaps in disability-inclusive SDG implementation and CRPD monitoring in Nepal. While commitments exist on paper, the lack of institutionalized OPD representation, inadequate data collection, and weak policy coordination have hindered meaningful progress. Without dedicated disability focal points in ministries and formal monitoring mechanisms, disability rights remain insufficiently integrated into Nepal's national development framework. Strengthening institutional accountability, policy coherence, and OPD engagement is crucial to advancing an inclusive development agenda aligned with SDGs and CRPD commitments. As a result, two key mechanisms were identified and proposed for ensuring the participation of OPDs in the planning, implementation, and monitoring of progress of the SDGs as below: 1. Forum for monitoring Disability Inclusion in SDGs (FMDI-SDG) 2. Supportive mechanism for monitoring progress in disability targets in SDG In the reporting period, a total of 60 rights holders (27 women, 33 men) from nine OPDs strengthened their knowledge of the UNCRPD commitments and completed a comparative analysis with the Act on the Rights of Persons with Disabilities to assess national compliance. Participants adopted a human rights-based approach to disability, moving beyond impairment-focused perspectives while comparing the national policy against the UNCRPD provisions. Among these rights holders, 37 had physical disabilities, three were deaf, five had low vision or blindness, one had an intellectual disability, and one had a psychosocial disability. Two participants were parents of children with autism. In terms of ethnic representation, 42 participants belonged to the Hill Brahmin/Chhetri community, three to the Hill Dalit

community, and 15 to the Hill Janajati community. Additionally, 21 participants had mild disabilities, seven had moderate disabilities, and 18 had severe disabilities.

To sustain and amplify the capacity development initiatives, the participants were organized into learning and exchange network, facilitated by NFDN, Sudurpashchim Province. Additionally, the initiative strengthened partnerships among OPDs, provincial human rights bodies, and government authorities, fostering sustained advocacy and policy engagement.

UN Women provided technical and coordination support to design the training programme, set up networks and link the OPDs from earlier phase of the joint programme (JP) to sustain and amplify the results.

Indicator*	**Start level** Baseline (Beginning of the project reporting period)*	**Target***	**End level** End line (End of the project reporting period)*	**Means of Verification**
3.3.1: # UN led national and/or regional coordination mechanisms with established consultation processes undertaken to ensure the active involvement of persons with disabilities, including through their representative organizations, in the design, implementation and monitoring of instruments for planning and implementation of UN development activities at the country level	0 2024	3 1 training	1 proposal has been developed to identify the effective mechanisms for ensuring the OPDs participation. 1 training	Proposal of the effective mechanisms for ensuring the OPDs participation. Meeting/orientation and attendance
3.3.2: # of governmental coordination mechanisms with established consultation processes undertaken to ensure the	[…]	[…]	[…]	[…]

Indicator*	**Start level** Baseline (Beginning of the project reporting period)*	**Target***	**End level** End line (End of the project reporting period)*	**Means of Verification**
active involvement of persons with disabilities, including through their representative organizations, in the planning, implementation and monitoring of SDGs				
3.3.3: # of identified persons with disabilities including through their representative organizations participating in the State's formulation/implementation of COVID-19 policy responses				

3. Equality between men and women

Please describe how the programme ensured equality between men and women by responding to the questions below.

How did the programme consider differences in the barriers faced by men and women with disabilities?
The JP has taken into consideration the specific and differential experiences of discrimination faced by women and men with disabilities; further compounded by their intersectional identities based on caste, class, ethnicity, remoteness of the geographical area of the residence, severity of disability amongst others. An intersectional approach has been embedded in the design and implementation of the JP activities. The capacity development package has integrated modules on gender and intersectionality, power relations and access to opportunities and resources and prioritized most marginalized women and men with disabilities in the interventions. UN Women interventions made efforts to ensure 70% participation from women with disabilities and other marginalized communities. In addition, in collaboration with NIDWAN and Koshish, engaged 25 women-led OPDs in Karnali and Sudurpashchim provinces to ensure their voices are heard and their needs are addressed.
In what way did the programme advance gender equality?

The JP has strengthened awareness, knowledge, and advocacy skills of women with disabilities for their participation and representation in the local level policy formulation, decision making and coordination platform such as local coordination committee, local government budget and planning cycle and DRR committee. This has enabled women with disabilities to voice their concern in relevant forum and advocate for the gender and disability inclusion in project locations. Women with disabilities reported increased access to local resources and services by participating in local level planning and coordination platforms. The JP also facilitated provincial and federal level dialogue platforms to raise pertinent issues of gender and disability inclusion and influence provincial planning and federal level 16th plan. Additionally, In Sudurpashchim Province, the Provincial Government has increased the reservation quota for persons with disabilities to 5%, restoring it from 4% following sustained advocacy by OPDs supported by the project. This marks a significant achievement in ensuring gender equality and greater inclusion of persons with disabilities in public services and employment opportunities. Additionally, the programme has provided opportunities for the women-led OPDs, especially by involving organizations like the Nepal Disabled Women Association (NDWA) in the implementation of project activities, such as reviewing the Safe Motherhood and Reproductive Health Rights Act 2018. During any project interventions including consultations, meetings, workshops and trainings, the project advocated and practiced the equal participation of women and women with disabilities.
How have the specific actions undertaken by the programme contributed directly to the empowerment of women and girls with disabilities? Please include here baseline and end line data on how women with disabilities were included and impacted while implementing the project. Kindly note that in the expenditure section below projects are requested to state the overall funding spent on these activities.
With capacity development and advocacy programmes, the participation and representation of women with disabilities in the local level planning and budgeting cycle has increased enabling them to influence planning and budgeting processes of the local governments. They are now serving as members of Local Coordination Committee which is a formal mechanism to advance disability rights and inclusion under the Acts Relating to Persons with Disabilities 2017. Additionally, direct engagement with women-led OPDs have created a safe space for them to express their unique needs, strengthen their leadership capacity, and ensure their voices are heard and their representation is meaningful at decision-making levels.
How did women with disabilities and women led OPD groups (informal/formal) participate in the implementation?
UN Women has entered formal partnership with NIDWAN and Koshish as responsible party (programme partner) to implement activities under the JP. NIDWAN is the women led OPD spearheading the advocacy on indigenous women with disabilities rights and inclusion. NIDWAN is leading overall coordination, planning, technical support and quality assurance of project implementation. The field level implementation is led by NFDN-Kailali and DACSC who are part of the consortium led by NIDWAN. NFDN-Kailali and DACSC engaged with grassroot women with disabilities,

self-help groups and OPDs to deliver capacity development activities, networking and coordination with local and provincial governments to lobby and advocate for gender and disability inclusion in the local level. The other programme partner, Koshish, is making every effort to carry forward this legacy, ensuring the meaningful participation of women-led OPDs by strengthening their capacity, advocacy, and leadership skills.

Likewise, to review the Safe Motherhood and Reproductive Health Rights Act, 2018, UNDP Nepal explicitly called for proposals from the women-led OPDs and entered partnership with NDWA. This collaboration allowed women with disabilities and their representative organizations to contribute their expertise and insights, ensuring that the perspectives and needs of women with disabilities were integrated into key policy reforms. Through this partnership, women-led OPDs played a crucial role in advocating for gender-responsive and disability-inclusive policies.

4. Full and effective participation of persons with disabilities

Please describe how the programme ensured the full and effective participation of persons with disabilities and their representative organizations by responding to the questions below.

How did the programme consider the barriers faced by persons with disabilities for effective participation?

To ensure that the persons with disabilities participate effectively in the programme, UN Women developed and implemented event accessibility check list to address barriers of persons with disabilities from accessibility and reasonable accommodation perspectives. Some of the approaches implemented during the reporting period that led to increased participation of persons with disabilities in the project activities include the following:

- selection of accessible meeting halls and workshop venues,
- use of sign language in the events as per the need,
- checking reasonable accommodation needs in advance and providing support accordingly,
- using accessible evaluation methods such as Mood O Meter for training evaluations.
- using local language during the training.
- Provisions of sign language and simultaneous language interpreter in both virtual and in person programmes including captioning service as per the requirement.
- Printing documents in braille when required (For instance, during the consultations to review the disability rights act, the act was printed in braille for the meaningful participation of person with visual impairment.

Further, UNDP also advocated with LTA hotels to make the hotel accessible to persons with disabilities, to which initially was adjusted for the programme day only and latter some of the hotels also made permanent arrangements. Further, it was ensured that sign language is provided in all the events as per

the need and maintain the roster of sign language interpreters. The roster maintained by UNDP is also mobilized by other UN agencies as per the need.
How were persons with disabilities involved in the programme's governance as well as in the planning, implementation, monitoring and evaluation phases?
The Joint Programme organized a consultation workshop with diverse OPDs to identify the priority issues to be addressed by the joint programme during the planning phase. The JP design was also informed by the country analysis report on the rights of persons with disabilities which collected inputs from diverse categories of persons with disabilities and OPDs. Upon approval of JP, UN Women signed a formal agreement with NIDWAN as responsible party, to implement the programme in the project locations. NIDWAN formed a consortium with two local OPDs namely NFDN-Kailali and DACSC to implement programme activities in Karnali and Sudurpashchim province. Further, OPDs are part of the periodic joint monitoring missions of the JP in project locations.
How have the specific actions undertaken by the programme contributed directly to the full and effective participation of persons with disabilities?
The strengthening of the Local Coordination Committee in project LGUs has enabled persons with disabilities to participate in the local level planning and budgeting process. Moreover, the capacity development of local level DRR Committee, supporting networking and advocacy of OPDs with local government has ensured meaningful participation and representation of persons with disabilities, particularly women with disabilities from marginalized communities. OPDs have reported increased access to decision making and services such as assistive devices, local government resources in the project LGUs. For example, Phul Kumari Chaudhary from Barahtal rural municipality was able to make disability ID cards and access social allowances provided by government to persons with disabilities. The preparation of disability statistical report and disability survey included direct consultations with the persons with disabilities and OPDs which enabled them to actively participate in providing their inputs and feedback including their concerns that are needed to be addressed in disability statistical report and survey preparation processes. Through these consultations, the programme identified gaps in the disability data collected during the census 2021 and ensured to actively address them, validating the experiences and perspectives of persons with disabilities.

Please use the table below to summarize the details of OPDs the programme has engaged with.

Type of OPD (Umbrella, regional, national, specific disability type)	**Contact details** (Email address of contact person of the organization and website where available)	**Overall OPD leadership** (disaggregated according to sex and type of disability)	**OPD representatives engaged in the programme (**disaggregated according to sex and type of disability)

National Indigenous Disabled Women Association Nepal (NIDWAN)-Lead Implementing Agency	[redacted] President, Women with Physical Disability [redacted] www.nidwan.org.np	Led by Women	[redacted] President [redacted] Programme Coordinator [redacted] M&E officer
National Federation of Disabled Nepal-Kailali-	[redacted] Chairperson, Person with Physical Disability	Led by Men	[redacted] District Project Coordinato
Disabled and Awareness Communication Service Center-Consortium Partner Surkhet	[redacted] Chairperson, Person with Physical Disability [redacted]	Led by Men	[redacted] District Project Coordinator
KOSHISH	[redacted] Executive Director [redacted]	Led by Men	[redacted] Team Lead [redacted]
National Federation of Disabled- Nepal (NFDN)-Federal, an umbrella organization, all type of disabilities	[redacted] Federal President, [redacted]	Led by men, Person with physical disability	[redacted] General Secretary [redacted] Program Coordinator [redacted] Advocacy Officer
Nepal Disabled Women Association (NDWA)	[redacted] Chairperson	Led by women with disabilities	[redacted] Chairperson
Parents Federation of Persons with Disabilities (PFPID)	[redacted] President [redacted]		[redacted] Inclusion Officer

Independent Living Center Lalitpur	[redacted] President [redacted]		

5. Ensuring the inclusion of marginalized and underrepresented groups of persons with disabilities

Please describe how the project ensured inclusion of marginalized and underrepresented groups of persons with disabilities by responding to the questions below.

How did the programme consider and identify marginalized and underrepresented groups of persons with disabilities? for example by considering type of disability, gender, age, location, minority status or other contextually appropriate demographic factors.
The programme acknowledged various demographic factors, including the type of disability, gender, ethnicity, and minority status to consider and identify marginalized and underrepresented groups of persons with disabilities. This ensured that persons with various type of disabilities including physical, sensory and invisible disabilities such as thalassemia and hemophilia, as well as women, youths, adults, indigenous, Dalits, Madhesis and Muslims with disabilities, were all included in the program's efforts.
In what way did the programme advance equity regarding rights and needs of most marginalized groups?
[…]
How have the specific actions undertaken by the programme contributed <u>directly</u> to the inclusion of marginalized and underrepresented groups of persons with disabilities?
[…]
How did marginalized and vulnerable persons with disabilities and these groups led by marginalized and vulnerable persons with disabilities (informal/formal) participate in the implementation?
During the implementation of the programme, it ensured that the active participation of persons with disabilities from diverse background particularly, from marginalized and vulnerable groups such as women with disabilities, Dalits, indigenous, Muslims, intellectual and psychosocial disabilities, and others were considered.

Please use the table below to list the type of marginalized and underrepresented groups of persons with disabilities who were included so far in programme implementation.

Type of Marginalized or Underrepresented group	**Organization contact details** (email address of Organization contact where available)
[redacted]	Rainbow Disability Nepal Email: [redacted]
[….]	[….]

6. Partnership-Building

Please provide a narrative on how the programme has contributed to greater UN inter-agency collaboration to advance the rights of persons with disabilities in the country.
The Joint Programme collaborated with local governments, organizations of persons with disabilities, including women's organizations working on disability and self-help groups and established local level dialogue platforms for state citizen dialogue and collaboration. The Joint Programme also created federal level and provincial level platform to discuss and provide inputs in the 16th periodic plan of Nepal as well as revision in the quota system for persons with disabilities at provincial level. Additionally, Joint Programme established a platform for dialogue on gender and disability inclusion, a cross-provincial, multi-stakeholder network bringing together representatives from Karnali and Sudurpashchim provinces. This multi-stakeholder dialogue was proven to be an effective mechanism for sharing and discussing disability-related issues, as well as advocating for provincial and local governments to adopt disability-inclusive planning, budgeting, and service delivery.
Please describe the different stakeholders (for example Government departments, UN entities, OPDs and Civil Society) involved and how they worked together.
The Joint programme engaged with federal, provincial and local level government for policy advocacy and programme implementation. The Joint Programme collaborated with the Ministry of Social Development from Sudurpashchim province and Karnali province to conduct discussion on 16th plan at provincial level. Similarly, the project is working with five local governments to implement its project interventions. namely Godawari Municipality, Kailari Rural Municipality, Bhajani Rural Municipality, Birendranagar Municipality and Barahtal Municipality. In addition, the programme collaborated with members of the National Assembly, the Law, Justice and Human Rights Committee of the House of Representatives, and the National Dalit Commission, as well as honorable members of other thematic commissions, including the National Human Rights Commission Nepal, the Indigenous Nationalities Commission, the National Dalit Commission, the National Tharu Commission, and the National Muslim Commission. Stakeholders also included legal practitioners, representatives from OPDs, and law advocates, among others. Further, the JP has partnered with NFDN and closely worked with National Statistics Office (NSO) and Ministry of Women, Children and Senior Citizen (MoWCSC) at federal level to prepare the disability statistical report. Regarding OPDs, the Joint programme collaborated and partnered with federal, province level OPDs and through them to the local level OPDs were also engaged. Dedicated effort was made to reach out and partner which with women led OPD too.

How has the programme contributed to generating new knowledge on how best to promote the rights of persons with disabilities to support policy and system changes?
[….]
Please also describe in this section any unique expertise and products developed by the programme that could be used to support other countries within a south-south cooperation framework
[…]

7. Creation of knowledge products

How has the programme contributed to generating new knowledge on how best to promote the rights of persons with disabilities to support national level policy and system changes?
In the reporting period, the programme developed tools and produced a comprehensive report by reviewing existing legal aid policies, framework and services, providing all three tiers of government with key recommendations to address existing gaps. This will enable the government to adopt more inclusive policies and strengthen the overall system for OPDs. In addition, the programme has invested in strengthening the knowledge and capacity of OPDs on UNCRPD and conducted a comparative analysis with the Act on the Rights of Persons with Disabilities to assess national compliance. This has contributed to a paradigm shift, supporting the adoption of a human rights-based approach to disability, moving beyond impairment-focused perspectives.
Please also describe in this section any unique expertise and products developed by the programme that could be used to support other countries within a south-south cooperation framework
[…]

Please list type of knowledge products the programme has developed using the table below .

Name of product and type of product (report, guidelines, assessments etc)	**Purpose** Describe what was the purpose of the product	**Process** Describe who participated in the development of product (OPDs, NGOs, Academia etc.) and the different stages of development	**Link /attachment**	**Accessible formats**	**Validation** Has the product been validated by national actors. If yes by whom?
Statistical Report on Persons with Disabilities	To provide comprehensive disability data	The development of the statistical report involved coordination and consultations with diverse stakeholders including the National Statistics Office (NSO), National	https://censusnepal.cbs.gov.np/results/files/result-folder/Final_Disability_Statisti	[…]	Yes, the report has been validated by National

		Federation of the Disabled Nepal (NFDN), MoWCSC, OPDs, other provincial and local governments, UN Agencies, development partners and disability experts.	cal_Report_12_02.pdf		Statistics Office.
[…]	[…]	[…]	[…]	[…]	[…]

8. Communications materials

Branding: Were there any visual assets developed? (For example, banners, notebooks, social media cards).
Yes, PUNOs developed e-banners of the project activities that included logo of UNPRPD. T-shirt was printed to commemorate the International Day of Persons with Disabilities.
Dissemination: What tools work best for communication and dissemination, and what don´t? (For example, dissemination across social media platforms, which platforms have worked best from your experience and why do you think that is the case) Have you collaborated with any 'influencers' or organizations in the country for cross-promotion of the project, civil society or partner organizations? If yes, could you share their handles? Is there a dedicated webpage section or Flickr album.
[…]
Media: Has there been any media coverage? If yes, what were the main obstacles when liaising with the media? Has there been any media request for interviews?
The events organized at federal and provincial level were covered by national and local media. The media covering the news includes the following: • Newslinesnepal.com- https://newslinesnepal.com/2023/10/10/81539/?fbclid= • Indigenous voice.com- https://indigenousvoice.com/news/918?fbclid= • Hamrakura.com-https://hamrakura.com/news-details/157150/2023-10-10?fbclid=IwAR35a7hCDO_IYldumqXIGxxIZaOrVbMc81428OyHslJNmO6MuDuj_pIHXdw Nepali.nagarikpost.com-https://nepali.nagarikpost.com/allnepalkhabar/post/2023-10-11-03-59-21?fbclid=IwAR1CBDigfLY7wiEAweSYmOAjg6xeSCggabMoTAx0vw6bU1l8vXhrEvqkGVg

9. Challenges

Please describe any major challenges that arose during the programme implementation and how this affected the programme implementation.
The implementation of the programme faced several operational and financial challenges, requiring adaptive strategies to ensure effective execution. One key challenge emerged when the Indigenous Disability Empowerment Center in Surkhet encountered difficulties registering at the District Administration Office due to its name including the term "indigenous." In response, NIDWAN

engaged with the Indigenous Nationalities Commission, the District Administration Office, and local authorities, with the Vice-President of Barahatal Rural Municipality mediating the process. As a result, the OPD successfully gained legal recognition and is now actively collaborating with local government on disability inclusion. Budgetary constraints also posed a challenge in organizing the last cross-provincial learning session for elected representatives and members of provincial assemblies. Due to the additional costs associated with inviting targeted representatives, including their staff, NIDWAN adjusted the approach by prioritizing key provincial government officials. This cost-effective strategy ensured meaningful participation while maintaining budgetary discipline. One of the major activities under output 2 aimed to strengthen the disability service center at Dhangadhi Sub-metropolitan city through technological/logistical support and scale the model in 5 additional municipalities. However, this activity had already been initiated by Dhangadhi Sub-Metropolitan City and similar efforts were underway in other municipalities through the Ministry of Women, Children and Senior Citizens (MoWCSC). As a result, the allocated funds were re-directed towards activities that aligned more closely with the government's immediate priorities—specifically, sensitization on the disability study and preparation of the disability statistical report.
Please could you share what action you took to address identified challenges?
[…]

10. Project Sustainability

Please provide an overview of initiatives planned by various stakeholders in order to follow up on activities initiated by the programme.
Several follow-up initiatives are already led by national actors. The National Statistics Office (NSO) will take the questionnaire, manual and field-tested tools developed with the programme into the upcoming National Disability Survey. These tools follow the Washington Group questions and provide a sustainable tool for disability inclusion in national data efforts. The National Rehabilitation Strategy, prepared under the leadership of the Epidemiology and Disease Control Division (EDCD), has been finalised and submitted for endorsement. Provincial governments are organising more training for health workers in disability management and rehabilitation with the national health training institutions, and the government-endorsed training packages have been included in annual budgets. In addition, the programme supported a situational analysis on Health Equity of Persons with Disabilities with the WHO Southeast Asia Regional office, the MOHP as well as the WHO disability team. This helps lay the foundation for disability inclusion to be addressed in national health policy and financing systems in the longer-term. At subnational level, the fiscal programmes of Karnali and Sudurpashchim provinces now fund assistive devices and plan rehabilitation centres with local governments. Sudurpashchim has also restored the 5 per cent reservation quota for persons with disabilities in its provincial public service. The five partner municipalities have allocated their own budgets for disability-inclusive

programmes (NPR 200,000 to 800,000 each). At least ten OPDs have secured further funding from the Disability Rights Fund, Tewa and local government budgets. The KOSHISH baseline study and the Local Coordination Committee meetings have laid the groundwork for follow-up training of committee members.

Please outline how the medium-to-long term sustainability of the work initiated by the project will be ensured after the end of the Project.

The programme worked through government systems rather than alongside them, and this is the main basis for sustainability. Disability inclusion is now part of three things: the 16th Periodic Plan, through a twin-track approach; the fiscal policies of two provinces; and the plans and budgets of five municipalities. Disability indicators have been added to the Health Management Information System (HMIS). The end of programme review rated sustainability as "moderate but promising." It pointed to:

- government ownership
- regular municipal budget allocations
- OPDs that are registered and have office space in municipal buildings
- coordination with OPDs that is now part of regular government practice

Coordination with and support to OPDs provide the second foundation for sustainability. Organizations that were registered but inactive now take part in local planning and budgeting, and local authorities recognise them as partners. The leadership and advocacy skills that persons with disabilities built, including women, Dalit and Indigenous persons with disabilities, stay in their communities after the programme closes.

There are risks to sustainability that remain including:

- limited local budgets and technical capacity
- frequent transfers of government staff
- short-term funding for OPDs
- no permanent national body to coordinate and monitor implementation of the CRPD

Consolidating the programme gains will need longer-term, phased support aligned with government budget cycles. That support should pay particular attention to OPD core costs and to more marginalized persons with disabilities.