



NEPAL: COVID-19 Pandemic

Office of the UN Resident Coordinator Situation Report No. 42

As of 2 July 2021

This report is produced by Office of the Resident Coordinator in collaboration with partners. It covers the period from 19-25 June 2021. The next report will be issued on or around 18 July 2021.

HIGHLIGHTS

- On 21 June, the Government of Nepal decided to resume more flights with full compliance of public health standards. The Ministry of Culture Tourism and Civil Aviation has asked Civil Aviation Authority of Nepal to resume international flights from 1 July onwards without exceeding 50 percent of total international flights.
- The monsoon rainfall continues to have a localized impact in some areas. According to the Department of Hydrology and Meteorology the monsoon is currently close to the southern part of the country, and more rainfall is predicted for next week.
- Frontline workers continue to be infected by COVID-19, leading to disruptions in essential humanitarian service delivery.
- On 1 July continuous rainfall affected communities across Bagmati, Gandaki and Province Two, temporarily displacing over 300 households, killing two and damaging 160 houses.



Flood affected communities in Sindhupalchowk.
Photo Credit: Pradip Khatiwada/ Youth Innovation Lab

31,368
Active cases

9,145
Total deaths

24.6%
Case positivity

783
Displaced HHs
(monsoon)

1,153
Affected HHs
(monsoon)

SITUATION OVERVIEW

Monsoon rainfall continues to have a localized impact. Local, provincial, and federal governments are engaged in the response. Search and rescue works are predominantly being carried out by federal government agencies. Total monsoon impacts across the country include: 783 displaced families sheltering in various public buildings, significantly increasing COVID-19 transmission risks, 25 deaths, 22 people missing and 1,153 affected families according to Ministry of Home Affairs and Initial Rapid Assessments.

As a part of COVID-19 containment, the government continues prohibitory orders in most of the districts. In Kathmandu valley, the prohibitory orders have been extended until 28 June, and some of the restrictions on the mobility and opening of markets have been revised. Odd-even number plate road access has been introduced on both private and public vehicles and allowed shops and businesses to open on alternative days and times.

PRIORITY NEEDS

Health

- Essential lifesaving commodities: vaccines; ICU beds, monitor and consumables; ventilators and consumables; pediatric ventilators and consumables; PCR test kits with reagents; antigen test kits; Liposomal Amphotericin B (with WHO PQ); Tocilizumab, as requested by MoHP on 7 June.
- Enhanced public health and social measures that ensure universal application.
- Mobilizing contact tracing and case investigation team to break the chain of transmission.

- Registration, health screening and testing with Antigen RDT for all entrants at all points of entry (PoEs).

Reproductive Health

- Increase awareness about timely access to life-saving emergency obstetric care services; strengthen referral mechanisms including availability of emergency transportation services for pregnant women.
- Address the sexual and reproductive health needs of women and girls in quarantine centers and points of entry.

WASH

- WASH response in flood and landslide affected areas of Bagmati and Gandaki provinces.
- Support for preparedness, including stockpiling based on cluster capacities and needs with due consideration of ongoing COVID-19 situation and response interventions.
- Development of targeted and user-friendly IEC materials for health care waste management in various settings in line with national SOPs and COVID-19 interim guidelines, with due consideration of monsoon.
- Advocacy for increased engagement of cluster members and additional funding for response in Province One, Province Three and Gandaki Province.

CCCM/Shelter

- Infrastructure for screening and testing at health desks in PoEs.
- Crowd management at PoEs to ensure adequate infection prevention and control measures to limit transmission.
- Coordination and communication among stakeholders working collectively at ground crossing points.
- Urgent need for temporary shelter for displaced HHS.
- Clearance of debris deposited inside buildings in the most affected area of Melamchi bazar.
- Structural damage assessment for partially damaged buildings.
- Demolition, dismantling and debris clearance of the permanently collapsed structures.

Logistics

- Continued transport and storage services to Ministry of Health and Population and Provincial Health Directorates.
- Heavy rainfall has triggered landslides that continue to block roads and limit humanitarian access.

Risk Communication and Community Engagement

- Continuous reinforcement of the public health safety behaviours at offices, public places and strategic locations under the leadership of municipalities and rural municipalities.
- Ensuring public health and safety measures are practiced by all during relief distribution.

Protection

- Psycho-social interventions for the most vulnerable groups, including those in isolation (including at home). Flooding and landslides have further exacerbated mental health and psychosocial problems.
- Children without parental care, domestic violence, child marriage remain top protection concerns.
- Increased efforts to build capacity of local level gender-based violence (GBV) first line responders, including judicial committees and police on referral pathways and survivor sensitive referral services.

Food Security

- Immediate food assistance for vulnerable families dependent on daily wage income in informal sectors, struggling to ensure their basic day to day food security is a top priority, as they have lost daily wage income opportunities due to lockdowns/prohibitory orders and have no food stocks or savings.
- With the relaxation of prohibitory orders and resumption of construction work and businesses, employment generating programmes (food for assets, enterprise revival support) and unconditional cash assistance to families with vulnerable members who are outside social protection system are priority food security response options.

Nutrition

- Supplementary foods for pregnant and lactating women and 6-23 months old children in affected areas.
- Engagement at local level to expand outpatient management of severe and moderate acute malnutrition to health posts and via female community health volunteers (FCHV).
- Orientation of health care providers (health workers and FCHVs) at local levels to implement simplified approach for the treatment of severe and moderate acute malnutrition at the health facilities.

Education

- Ensure enrolment of children from the most deprived and marginalized communities in the new academic session.
- Access to self-learning materials, particularly for the most disadvantaged children.
- Advocacy to ensure prioritization of vaccination for all teachers to accelerate school re-opening.
- Detail damage assessment of schools affected by flooding.

Gender in Humanitarian Action

- Nutritious food, medical treatment, medicines for poor and Dalit households.
- Proper management of isolation centers with medical services and equipment, medicines, and nutritious food.
- Access to food for those dependent on daily wages.
- Safety kits and vaccination for community volunteers and frontline workers engaged in community outreach and data collection.
- Awareness raising and discussions on vaccination, targeting the most disadvantaged groups at all levels.
- Special provisions by local government for excluded families to support their longer-term economic recovery.

OPERATIONAL RESPONSE

Health

- Working closely with partners to identify opportunities for support, including capacity building in clinical care, dissemination of IEC materials, development of health bulletins, development and support to implementation of public health social measures (PHSM) materials, and identification of commodity support for health systems strengthening, including vaccine delivery.
- Communication with COVID-19 hospitals and Provincial Health Directorate offices to understand needs and gaps in human resources, medical equipment and commodities.

Reproductive Health

- Targeted videos and IEC materials about navigating pregnancy and postpartum care during the COVID-19 pandemic and vaccination being disseminated
- Completed orientation on interim guidelines on RMNCAH (Reproductive, Maternal, Newborn, Child and Adolescent Health) for health service providers and managers in Myagdi, Syangja, Gorkha, Baglung, Tanahun, and Parbat districts.
- Provided PPE for health care and community health workers in health facilities of Province One, Gandaki, Lumbini, and Sudpaschim.
- Provided emergency reproductive health kits to health facilities to deliver essential reproductive health services.

WASH

- Provided WASH and IPC services to 1,774 health care workers, staff and patients in 13 health care facilities; 2,911 people in 17 isolation centers; 70 people in one government institution; over 15,792 returnees in four PoEs and 414 people in home isolation.
- Provided soap and sanitizers to 978 people in communities.
- 9,961 people in communities benefitted through demonstration of proper hand washing.

CCCM/Shelter

- A two-day orientation session was conducted at Birgunj ground crossing point of Province Two to ensure frontline health workers and border officials are aware of international health regulations at PoEs, familiar with infection prevention and control (IPC) measures to be applied & adopted, risk communication, proper screening techniques and recording & reporting of collected information.
- A total of 52 (40 male and 12 female) participants attended the orientation at Birgunj ground crossing point. Out of the total participants 17 were from health sector, 7 were from security forces, 1 from Maiti Nepal, 4 from Customs, 8 were NGOs representatives, 3 from Nepal Red Cross Society and 12 were district administrative officials.
- Two tablets handed over to Chief of Health Division, Birgunj to support recording and reporting at Birgunj PoE.
- Screening and antigen testing of returnee migrants are being conducted at PoEs.
- Land has been designated for the establishment of permanent health desk at Birgunj PoE and the preliminary work for construction has begun.
- Detailed rapid assessment is ongoing in all of the affected areas of Melamchi and Helambu.

Logistics

- Received 8 MT (40 CBM) of medical items (PPE) at HSA, locally purchase by MoHP on 19 June.
- More than 100 dispatches of medical items were made in trucks, mini trucks, vans and cars to hospitals in Kathmandu Valley and other districts.
- Dispatched 4,044 filled oxygen cylinders from refilling plants to Seti, Mahakali and Baitadi hospitals.
- Dispatched more than 1,200 oxygen cylinders to other districts hospitals in Pokhara from Kathmandu and from Nepalgunj to Dailkeh, Rukum, Salyan and Jajarkot.
- Dispatched various medical items and equipment from provincial headquarters (Dhangadhi, Nepalgunj, Kathmandu, Janakpur) to districts hospitals.

- Medical items (ventilators, thermometers, oxygen concentrators, PPE, reagents, test kits, isolation tents), donated by various donors received and stored at HSA.
- Dispatched 38 MT (219 CBM) of medical items to provincial HQ from HSA.
- Dispatched 30 MT (78 CBM) of shelter items for MoHA to Sindupalchowk and Butwal for monsoon preparedness and response.
- Installed 2 MSU (10'x24' meter) in Pathaliya MoHP central warehouse and (10'X36' meter) in Kathmandu HSA to provide extra storage capacity for COVID-19 medical items.

Risk Communication and Community Engagement

- Provided technical support to five municipalities to implement "compulsory mask provision" for the reinforcement and continuity of mask use following the easing of lockdown.
- Conducted survey to assess public health safety measures knowledge, attitudes and practices among the public, which found over 85% of the population reporting staying at home, using mask, and washing hand with soap and water to protect themselves and families from COVID-19.
- Developed audio content on flood and COVID-19 in five languages (Nepali, Newari, Awadhi, Bhojpuri, Tamang).
- More than 6,500 questions and concerns related to the COVID-19 vaccine, testing, COVID-19 cases, deaths and available services responded to through NRCS, Nepal Scouts and SUAHAARA volunteers, hotlines, television, radio and MoHP press briefs.
- Media Hub content is being profiled on most popular TV platform, Nepal Television, every hour e to motivate COVID-19 testing and promote free treatment for COVID-19 patients.

Protection

- Reached 506 people (200 males and 306 females) through PSS awareness raising activities in Lumbini Province.
- Continued operation of protection helplines and emergency intervention services to prevent and respond to abuse, violence and exploitation reaching 317 children (307 girls).
- Provided multi sectoral support to 208 survivors (17 males; 191 females including 31 girls, four people with disabilities and 1 elderly) through peripheral health facilities, safe houses/shelters, one stop crisis management centres (OCMCs), legal and psychosocial counsellors and police.
- 89 women and girls received dignity kits and 1,205 people (382 males, 732 female) were sensitized on GBV prevention and response.
- Support for transportation to 62 vulnerable migrants (34 males, 28 females including 12 children and six elderly person) at points of entry (POEs) in Lumbini and Sudurpaschim. Similar support continued to be provided to pregnant women, survivors of GBV and those at risk to access services in 23 districts.
- Provided two orientation sessions at the PoEs in Province Two to sensitize the health workers and border officials (92 people: 75 males and 17 females) on international health regulation (IHR), infection prevention and control (IPC) measures including risk communication and proper screening techniques.

Food Security

- According to MoFAGA records, various local governments provided in-kind/cash-based food relief to 11,040 households mainly in Lumbini, Karnali, Gandaki, Bagmati and Province One.
- FSC members have been providing food assistance to 1,235 HHs in eight local governments of four districts.
- Take-home ration (THR) distributions begun in six out of seven programme districts, reaching over 21,000 students with rice, lentil & oil rations.
- Nepal COVID-19 Market Update # 1, May/June 2021 found that retail prices of food staples were relatively stable and showed a marginal increase. Prices of fruits, some vegetables and pulses increased sharply, while meat and milk prices declined in May 2021. Markets continued to function without major disruptions, however pockets of low stocks, low level of transportation of goods and labour demand was observed. Demand for food and non-food commodities remained moderate to high. Compared to last year, prices of essential commodities and overall market situation is relatively stable. However, the continued restrictions and declining food stocks, coupled with increasing global food prices could potentially lead to further price volatility. In turn, putting further pressure on vulnerable households, affecting their ability to access essential food and non-food commodities, and thereby have a negative impact on their food security status.

Nutrition

- 529 children aged 6-59 months with SAM admitted and receiving treatment in outpatient therapeutic centres and nutrition rehabilitation homes.
- Infant and young child feeding counselling for caregivers of children under two years in PoEs in Sudurpaschim.
- 10,420 children 6-23 months age and 6,639 pregnant and lactating women have benefitted from ongoing distribution of supplementary food in five districts of Karnali province.
- Completed orientation on "Simplified Approach for the treatment of severe and moderate acute malnutrition" to 61 provincial health and nutrition stakeholders, nutrition cluster members and nutrition focal points of district health offices (DHO) of Province One, Province Two and Gandaki.

Education

- Supported 4,126 children from marginalized communities with learning resources in provinces One and Two.
- Reached 20,312 children with distance learning through radio programs in Karnali and Province Two.
- Provided digital skills and psychosocial support training to 147 teachers in Karnali, Sudurpaschim, Lumbini and Province Two.

Gender in Humanitarian Action

- Health and hygiene related awareness raising being carried out in Kailali and Doti through phone and door to door visits by local government.
- Three isolation centers of Banke district have now received necessary medical kits.

KEY GAPS AND CHALLENGES**Health**

- Procurement of essential commodities, specifically vaccines. There continue to be challenges resulting from a lack of national suppliers and a resulting requirement to import.
- Lack of adherence to public health and social measures (PHSM) at local levels, essential to break transmission.
- Need to mobilise in country emergency medical deployment teams to support existing human resources and enable operation in a shift system to address facility-based care needs.

Reproductive Health

- Availability of key HR for RMNCAH is the major gap – half of the facilities reported no doctor or nurses, 80% reported unavailability of obstetrics & gynecologists, and 86% reported unavailability MDGPs.
- Significant declined in seeking emergency maternal health services - 29% of health facilities reported that women have stopped attending for caesarian section, an emergency obstetric care service to reduce maternal death.
- 2-34% of facilities reported stock-out of different types of essential drugs with the highest stock-out of Misoprostol.
- 40-68% of health facilities reported unavailability of different items of PPE.

WASH

- Flood and landside blocked roads and damaged bridges creating challenges to access, including logistic deployment in the affected area.
- WASH frontline workers, sanitation, cleaning and waste management workers in communities and health care facilities continue to be infected with COVID-19, leading to disruptions in essential cleaning and disinfection works. To prevent themselves, there is demand for vaccination for WASH frontline team in all provinces
- Coordination and information management in WASH due to changes in responsibilities assigned to ministries in the provincial level.

CCCM/Shelter

- Dissemination of information on public health and safety measures to the local people travelling through this ground crossing point.
- Crowd management during high volume influx of travelers.
- Shifting of displaced people who are sheltering at schools, neighbours households and with host families.
- Monsoon causing obstacles to transportation and access to affected areas, mostly in upper part of Helambu.
- No connection by road to Manag Chage Rural Municipality, making air lifting the only response means.

Risk Communication and Community Engagement

- Decrease in public health safety measures practices at offices and public places of many municipalities.

Protection

- Continuity of services for vulnerable groups, including for GBV survivors and those at risk, to access protection services remains a major challenge.
- Difficulty reaching the flood and landslide affected population to provide psychosocial support due to road blockage, limited internet, and phone access in Helambu and Melamchi of Sindupalchowk district.

Food Security

- The daily food and other essential needs of the vulnerable families affected by secondary impact of COVID-19 are largely unmet. The mobilization of resources by humanitarian community for food assistance programmes including employment generating schemes to support the most vulnerable people has been a challenge.

Nutrition

- Health staff fully engaged with COVID-19 response and care, limiting capacity to deliver essential nutrition services.
- Lack of sufficient resources to meet the needs of supplementary food to 6-23 months children, pregnant and lactating women in the most affected areas.
- Three of 22 nationwide nutrition rehabilitation homes (NRH) have been converted into isolation centres, depriving malnourished children of nutrition rehabilitation and care.

Education

- Lack of resources to respond to education needs by cluster members.
- Constraints on printing, transportation and distribution of self-learning materials are hindering the education of disadvantaged children without access to devices or internet.
- Fear and anxiety related to increase in infection and mortality among teachers in many municipalities create further setbacks to education.

Gender in Humanitarian Action

- Dalit Women Rights Forum conducted a rapid needs assessment in two municipalities of Kailali district recently, revealing shortage of medical care services for those in isolation as a major concern. Many people in home isolation do not have hygiene kits including masks, sanitizers, gloves, and sanitary pads. Frontline health workers also have limited access to PPE, including masks and sanitizers. Another big concern is the lack of relief assistance for poor and excluded groups. Pregnant women who are infected are not getting nutritious food to eat due lack of care services and lack of awareness regarding need for nutritious intake.

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