



NEPAL: COVID-19 Pandemic

Office of the UN Resident Coordinator Situation Report No. 49

As of 1 November 2021

This report is produced by Office of the Resident Coordinator in collaboration with partners. It covers the period from 18 September to 29 October 2021. The next report will be issued on or around 26 November 2021.

HIGHLIGHTS

- 15 million doses of Covid-19 vaccines have been administered to date, covering 43% of people over 18 will one dose and 32.6% with two.
- Heavy rains have generated a more severe impact than any 2021 monsoon event, with more deaths in one week than over the course of monsoon. Impacts are estimated to be heaviest in agriculture sector with serious implications for food security in the coming months.
- Rapid assessment of crop and agricultural losses in ongoing and will inform medium term planning for Food Security Cluster.
- Cholera/dysentery outbreak in two municipalities requires renewed efforts to contain with reports of cases increasing in four additional municipalities
- High mobility and low testing during the ongoing festival period leaves the current picture of transmission and cases fuzzy, creating challenges for planning.



Flood waters inundate the road in Saptari

9,318

Active cases

11,416

Total deaths

325,258MT

Est. crop loss
(Heavy rains, estimated)

136

Deaths
(Heavy rains)

108

Affected palikas
(Heavy rains)

SITUATION OVERVIEW

After the official end to monsoon season on 11 October, incessant rainfall, between 17-20 October across Sudurpaschim, Karnali, Lumbini and Province One triggered the heaviest floods and landslides of 2021, resulting in loss of lives, infrastructures and heavy losses and damage in the agriculture sector, especially the ready to harvest paddy crops. Humanitarian partners have been mounting a response to immediate needs and preparing to assess mid- to long-term needs in the agricultural sector, expected to have far reaching implications for food insecurity in the coming months.

In addition, a cholera/dysentery outbreak began in two municipalities of Kapilvastu in early October, and despite three weeks of active response, is reportedly spreading beyond these hotspots in four neighbouring municipalities.

At the same time, Covid-19 cases have been declining in absolute terms; however, official data is difficult to interpret due to the sharp decline in testing rates. Test positivity has increased, particularly in those areas where testing is at its lowest. As Nepal is in the middle of the biggest festival period, with high intra- and inter country mobility, the impact on transmission and true case numbers is expected to only be reliably interpreted towards to end of November.

Humanitarian partners continue to respond to the secondary impact of Covid-19 as well as the heavy rains and cholera outbreak, and take actions to mitigate a new wave of Covid-19 at this critical juncture.

PRIORITY NEEDS

Health

- Vaccines, including for children.
- Strengthening points of entry (PoEs) in terms of physical infrastructures for health desk and holding centers, WASH facilities, data management, screening and testing kits, IPC measures and skilled human resources.
- Support information management units for real time information from PoEs, labs, isolation centers, hospitals, etc.
- Mobilizing contact tracing and case investigation teams with optimal utilisation of Antigen testing kits.
- Hospital resources (adult and pediatric ICU beds, ventilators and consumables; oxygen plants and oxygen concentrators; high flow nasal canula; medicines; etc.).
- Training to human resources/addition of skilled human resources in isolation centers, hospitals, etc.

WASH

- Support to Kapilvastu district to contain the recent cholera and dysentery outbreak (since the first week of October) that has hit two municipalities hard, and is reportedly spreading in four neighboring municipalities.
- Continued and expanded WASH response in Lumbini, Karnali, Sudurpashchim and Province Two, for recent post-monsoon heavy rains, floods and landslides; and support provinces to conduct damage and needs assessments.
- Continue support to school reopening with safe hygienic practices.

CCCM/Shelter

- In Province One flood and landslide affected households require establishment of temporary settlements including tents, tarpaulin, mattress, and early recovery support in Panchthar (50 tents, 500 tarpaulins, 500 mattress, early recovery support to 200 families), and Ilam (tents, mattress, early recovery support, sanitary products).
- In Sudurpashchim 900 HHs in Kanchanpur and 550 HHs in Kailali are in need of relief due to flood and landslide. Hundreds of HHs in hill districts in the province require temporary settlement establishment as well as relief support.
- PoEs in Kakarbhitta, Province One and Birgunj, Province Two require flow management and RCCE along with infrastructural updates and continuous support in areas of health, protection, and WASH.

Risk Communication and Community Engagement

- With most schools starting to reopen in Nepal since mid-September for in-person classes, communication efforts need to focus on the safe reopening of schools as well as learning continuity of children.
- Mainstreaming of mental health concerns across communications to address stigma and promote health-support seeking behaviour.
- Renewed and tailored communication on keeping safe against COVID-19 during the period of festivals.

Food Security

- Huge impact of heavy rains in paddy crops creates a greater risk of food insecurity for the year and in the long-term, directly affecting to the most vulnerable, marginalized and smallholder farmers.
- As of 25 October, Ministry of Agriculture and Livestock Development estimates that the loss of paddy crop is equivalent to NRP 8,268 million in flood and 325,258 metric-tonnes of paddy, with greatest losses in Lumbini.

Protection

- Ongoing protection issues include socio-economic vulnerability, gender-based violence including child marriage, domestic violence and child labour as a negative coping mechanism. Continuity of protection services, including vulnerability assessment, helplines/hotlines, one stop crisis management centers (OCMCs) is critical.
- Children without parental care have remained a matter of concern. Out of 86 cases¹ related to children without parental care, 19.7% are caused by abandonment by parent(s) and 20% COVID-related deaths. Continuation of alternative care support and arrangements is crucial to ensure protective care of children.

Nutrition

- Continuous assistance to local governments to strengthen and expand outpatient therapeutic centres (OTCs) to the health posts and via female community health volunteers (FCHVs) for the management of 20,000 severe acute malnutrition (SAM) cases.
- Provision of personal protective equipment (PPE) for 52,000 FCHVs so they can continue to provide community-based health and nutrition programmes.
- Blanket supplementary feeding for children aged 6-23 months, and pregnant and lactating women in Province Two, Karnali and Sudurpashchim.

¹Protection Monitoring and Incident Reporting (PMIR)

Education

- Guidelines/advocacy to raise general awareness and compliance with public health safety measures at schools.
- Conduct training for teachers on learning loss initiatives and psychosocial support to teachers and students.
- Assist local governments in safe reopening of schools, adhering to public health safety protocols and mapping of risk zones in line with provisions of smart lockdowns.
- Detailed damage assessment of schools and education infrastructure due to post-monsoon heavy rains.

Gender in Humanitarian Action

- Flood affected people are at increased risk of infection by COVID-19, especially if displaced and staying in collective shelters.
- Vulnerable people whose settlements have been washed away by floods are in need of food and non-food items as immediate relief support.
- Electricity outages in affected areas during flooding and landslides has made it more difficult for excluded groups to access real-time information.
- Need to address special needs of the excluded groups such as Dalits impacted by the floods and landslides.
- Adequate food and security provisions for affected women and girls living in shared spaces and collective settlements and therefore facing increased security risks.
- Distribution of dignity kits and sanitary items for women and girls is a critical need.

OPERATIONAL RESPONSE

Health

- Health partners are actively supporting COVID-19 vaccination campaigns in all provinces for the first and second doses of AstraZeneca and Sinopharm as specified by Ministry of Health and Population.
- Advocacy on quick supply of vaccines to Nepal continues by health partners at different level.
- Partners have provided with four ultra cold freezers to store the Pfizer vaccines and six additional freezers are in the process of procurement.
- Cluster members are supporting PoEs through establishment and upgrading of PoE infrastructure, training and orientation for PoE staff, screening and testing, human resource support, infection prevention and control.
- Support to trainings on data recording and reporting of vaccination, screening and testing at PoEs, information management in IMUs, pediatric care, essential care and hospital preparedness for emergencies.
- Cluster members are supporting response to acute watery diarrhea cases in Kapilvastu through equipment for sample testing, medicines (ORS, paracetamol, etc.), water purification, preparation and dissemination of IEC and BCC materials, health promotion activities, home visits and community surveys and case reporting and recording.

WASH

- Provided WASH and infection prevention and control (IPC) services to 9,012 health care workers, staff and patients in 27 health care facilities; 74 people including staff members and service seekers in two government institutions; and hygiene kits and masks to 30 people in communities.
- Supported renovation of handwashing stations and toilets, water supply facilities in 75 schools, serving more than 45,396 staff and students.
- 39 school staff (28 males, 11 females) oriented on IPC WASH.
- Support in Kapilvastu to respond to the cholera/acute gastroenteritis (AGE) and dysentery outbreak.
- Partners are engaged to contain the Kapilvastu cholera situation, including volunteer mobilization for door-to-door visits, support to household and communities for water sources and drinking water disinfection and dissemination of 12,000 WASH information stickers in local language for awareness-raising and behavior change.
- Cluster members have also been responding to the recent post-monsoon heavy rains, flood and landslide around the country. Over 3,600 households have benefitted from supplies provided by cluster members, including hygiene kits, buckets and mugs (3,645 sets), water purifier tablets (4,850 packets) and solutions (250 bottles), masks (30,000) and soap (30 bars).

CCCM/Shelter

- In Province One, injured survivors from floods and landslides in Dharan and Dhankuta have been sent to BPKIHS, Dharan and Buddhabare-6 Health Post, Dhankuta. The search for missing people in Itahari and Ilam is ongoing. Affected families residing in temporary shelters have been provided with NFIs and tarpaulin setups.
- Five teams of health workers have been mobilized for affected families in Sunsari. Public representatives, search and rescue staffs have been mobilized in affected areas in both districts.
- In Sudurpashchi Cluster partners have provided relief to displaced families in Kanchanpur and Kailali districts with tents, blankets, mattress, kitchen kit, water, and dignity kits.

- Risk assessment conducted through engagement with immigration and border authorities and relevant government counterparts, with the objective of assessing conditions at PoEs and identify the most effective means to generate consistent, optimal and sustainable results in Protection, Health and WASH at PoEs.

Risk Communication and Community Engagement

- Social media messages on keeping children safe in schools targeting parents and teachers garnered 8.7 million impressions, 6.5 million aggregate reach and 936,000 engagements on social media channels.
- RCCE working group supported MoHP and the National Health Education, Information and Communication Centre (NHEICC) to launch the national Mental Health Campaign. Toolkit of messaging and products for amplification across all channels and throughout October has been well received.
- Compilation of festival-related messaging shared and reinforcement of Mask Campaign assets.

Food Security

- Cluster lead, Ministry of Agriculture and Livestock Development (MoALD), formed an “Assessment Team” to coordinate in all seven provinces, with representatives from federal and provincial levels. The team is facilitating the collection of information through rapid assessment of damage and loss in the agricultural sector in consultation with provincial governments, other relevant government agencies, palikas, lead farmers and key humanitarian actors at the field level. Draft information is expected to be available next week.
- A Food Security Cluster meeting will be convened following reporting from all seven provinces and a needs and gaps study will be a key agenda item.
- Information from the rapid assessment can be used for immediate programming for the response and early recovery planning for the affected community.
- Cluster members have already provided some affected households in Kanchanpur and Kailali with short term food support.
- A second stage study, which will be led by MoALD and supported by Cluster members, is expected to be instrumental in framing immediate, mid-term, and long-term response and recovery plans for the most affected farmers to assist in coping with livelihoods and addressing food insecurity.

Protection

- 871 people (296 males and 575 females), including those affected by floods/landslides, received one-on-one counselling services. Further, 4,805 people (1,604 males and 3,201 females) were reached through awareness-raising activities on psychosocial wellbeing, focusing on the World Mental Health Day 2021. 109 children from child correction homes in Rupandehi district, Lumbini Province were oriented on identifying psychosocial stress and coping mechanisms. 99 teachers (52 males and 47 females) were trained on mandatory reporting of incidents related to violence against children including GBV, psychosocial support and referrals of students experiencing distress in Dhanusa, Parsa and Rautahat districts.
- Protection helplines and emergency intervention services, including appropriate care arrangements and emergency assistance, reached 348 children (151 boys, 197 girls), of which 65 cases (26 boys, 39 girls) were referred to different services such as health, security, justice, etc.
- 67 women and girls supported with lifesaving essential dignity and kishori kits to address their protection and hygiene concerns. 3,513 people (1,470 males and 2,043 females including 5 people with disability) were sensitized on GBV prevention and response. 106 key stakeholders and GBV frontline service providers (16 males, 86 females, 4 non-binary, including 3 persons with disabilities) trained on GBV prevention and response.
- 189 calls from persons of concern (refugees) received through the 24/7 hotline service and protection needs addressed accordingly. 979 protection services (psychosocial support, GBV response) provided to refugees.
- Cash support provided to all Bhutanese and mandate refugees to purchase food and household supplies.

Nutrition

- 1,868 children aged 6-59 months with severe acute malnutrition (SAM) have been admitted in the 817 outpatient therapeutic centres (OTCs) and 22 nutrition rehabilitation homes (NRH) across the country.
- Ongoing infant and young child feeding information dissemination and counselling services via SMS, home visits, telephone, radio, TV and other social media communication channels.

Education

- 64,143 children (50% girls) were reached during the reporting period, through the distribution of printed self-learning materials in Province Two, Gandaki, Lumbini, Karnali and Sudurpaschim.
- 4,392 teachers and students of 137 schools were reached with psychosocial training and support and provided stress management training in Province Two, Gandaki, Karnali, and Sudurpaschim.
- Distributed individual student kits to 5,877 adolescent girls from the most marginalized communities enrolled in formal education through Girl's Access to Education (GATE) programme.
- 150 school kits distributed to 992 teachers (34% females) at community schools to foster the overall learning growth and continuity of children.

KEY GAPS AND CHALLENGES

Health

- Procurement of vaccines, especially for children.
- Non-adherence to public health and social measures.
- Lack of appropriate infrastructures with proper WASH and IPC facilities at PoEs.
- Lack of real time data collection, analysis and dissemination for rapid evidence-informed policy decisions.

WASH

- With festival season and recent heavy rains, cholera and dysentery cases continue in Kapilvastu, even after three weeks of interventions since the outbreak in first week of October. With reports of increasing cases in municipalities neighbouring hotspots, comprehensive containment interventions through WASH and food hygiene behaviour and disease prevention education are essential at scale as these practices are seen to be neglected by communities.
- The assessment of impacts on WASH services due to recent post-monsoon floods and landslides in affected districts has been delayed by the festivals and unavailability of human resources, as well as difficulty to access some affected areas due to damaged roads.
- As the Tihar and Chhath festivals are around the corner, there is concern around increasing COVID-19 cases during or after these festivals, due to high mobility of people and the observation of basic hygiene protocols, including use of masks, hand washing and social distancing, being neglected by the general public.

CCCM/Shelter

- Lack of maintenance of infrastructure at PoEs and inadequate space for new, necessary infrastructures, including isolation centers.
- Lack of human resources at PoEs for flow management and required services, such as protection, health, WASH.
- Lack of RCCE in communities around PoEs and lack of proper enforcement of COVID-19 measures.
- Lack of systematic data collection of migrants returning to Nepal and leaving for India at PoEs.
- Lack of coordination amongst provincial and local government agencies regarding COVID-19 and mobility in PoEs.

Risk Communication and Community Engagement

- Festival season has led to increasingly risky COVID-19 behaviours, with crowds, increased mobility, festival gatherings, and complacency.
- This year's prolonged monsoon season has required additional life-saving messaging.

Protection

- The continuity of civil registration services and adaptation remains an issue. Access to civil registration and legal identity is particularly challenging for specific groups, including children of survivors of GBV and people with disabilities. Interim measures addressing case backlogs caused by the pandemic and longer-term measures addressing structural barriers are needed.
- Limited information and services for elderly people and people with disability remain a major challenge due to mobility constraints.

Nutrition

- Early detection of severe and moderate acute malnutrition in children under-five at the community level is a challenge. A simplified approach, in which all severe and moderately acute malnourished children are treated with ready-to-use therapeutic food at outpatient therapeutic feeding centres, has been initiated nationwide.
- Procurement and supply of Supercereal is insufficient for blanket supplementary feeding programme targeting 6-23 months children and pregnant and lactating women.

Education

- Effective return to school by children at all levels remains challenging due to long-term disengagement from learning and increased pressure to contribute to households' economic needs.
- Monitoring of school reopening and adherence of safety protocol is challenging due to random closure/opening of schools and lack of real-time monitoring mechanisms.
- Lack of resources to respond to education needs by cluster members.

Gender in Humanitarian Action

- Recent flood, landslide and heavy rain induced temporary displacements increases the chances of trafficking and physical abuse as those living in makeshift shelters are more vulnerable.
- People with disabilities, women, children, elderly and other vulnerable groups are at risk during emergencies.
- There are reports of increasing mental health-related issues among affected populations in impacted areas. However, services are not universally available and not reaching all groups in need.