The Coronavirus CivActs Campaign (CCC) gathers rumours, concerns and questions from communities across Nepal to eliminate information gaps between the government, media, NGOs and citizens. By providing the public with facts, the CCC ensures a better understanding of needs regarding the coronavirus and debunks rumours before they can do more harm.

The disbursement of funds to the province government for isolation management on the basis of projected data

<table>
<thead>
<tr>
<th>Province</th>
<th>Amount (Crore)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Karnali Province</td>
<td>6</td>
</tr>
<tr>
<td>Gandaki Province</td>
<td>4</td>
</tr>
<tr>
<td>Bagmati Province</td>
<td>4</td>
</tr>
<tr>
<td>Sudurpaschim</td>
<td>6</td>
</tr>
<tr>
<td>Province 5:</td>
<td>7</td>
</tr>
<tr>
<td>Province 1:</td>
<td>4</td>
</tr>
<tr>
<td>Province 2:</td>
<td>7</td>
</tr>
</tbody>
</table>

The above mentioned amount has been allocated to 84 different local units through the provincial government to construct, maintain and improve the operation of isolation centers as per the projected infection data of provinces with the Ministry of Health and Population. In order to see how much money was disbursed in the municipalities, go through the link below.

Source: https://www.opmcm.gov.np/

Nepal Update

Quarantine in Samsima Rural Municipality

Photo: Rakesh Prasad Chaudhary

Tested
PCR Tested: 2,23,630
Positive: 13,248
Active: 10,085
Deaths: 29

Source: https://covid19.mohp.gov.np/
It is said that there is difficulty in COVID-19 response in Sudurpaschim Province due to lack of health volunteers. The Ministry of Social Development, Sudurpaschim Province had mobilized 7 staff nurses, 40 health assistants, 24 AHWs and 5 lab assistants as volunteers for COVID-19 response. Now, considering the complaints and needs of the public, 30 more staff nurses have been selected and mobilized from the Health Directorate.

It is heard that the people staying in various shelter homes haven't been properly cared for and managed during the pandemic. Who looks after this issue?

The committee for implementation of the Disaster Risk Reduction and Management Act 2074 and the committee observing protection section under the National Disaster Response Framework 2070 BS looks after the situation in the shelters at the moment. Moreover, the Ministry of Women, Children and Human Rights Commission, National Women Commission, National Human Rights Commission and the Ministry of Social Development of the concerned province and the concerned local level can also regularly monitor the situation of pregnant women, new mothers and other women, children and senior citizens.

We have heard that the government has made another decision for travel passes to go outside the valley. How can we get the pass?

The District Administration Office, Kathmandu has made a new format for the application of vehicle pass public. For that, the individual should submit the application mentioning his/her name, surname, gender, age, permanent address, contact no., the name of the district he/she is visiting, municipality, ward, tole, date of departure, vehicle no., vehicle type, name of the vehicle driver along with recommendation of the local level he/she is visiting or the photocopy of the document that reveals the purpose of the travel.

Now that the lockdown has loosened, the cases of road accidents is also likely to increase. Has the government made any preparations in this regard?

Nepal Police has prepared an action plan to reduce the risk of accidents post-lockdown. According to which, the time card system will be implemented. Speedometer would be used to control and measure the speed of the vehicles. The quality of the road would also be improved. Nepal police is preparing to conduct awareness programs and take action against those violating traffic rules.
### Migrant workers in major destination countries

<table>
<thead>
<tr>
<th>Country</th>
<th>Nepali Population</th>
<th>Infected Population</th>
<th>Death of Nepalis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Saudi Arabia</td>
<td>334,451</td>
<td>182,493</td>
<td>9</td>
</tr>
<tr>
<td>Kuwait</td>
<td>71,193</td>
<td>45,524</td>
<td>3</td>
</tr>
<tr>
<td>Bahrain</td>
<td>26,000</td>
<td>25,705</td>
<td>3</td>
</tr>
<tr>
<td>Qatar</td>
<td>406,917</td>
<td>95,106</td>
<td>7</td>
</tr>
<tr>
<td>UAE</td>
<td>224,905</td>
<td>47,797</td>
<td>19</td>
</tr>
<tr>
<td>OMAN</td>
<td>17,057</td>
<td>39,060</td>
<td>3</td>
</tr>
<tr>
<td>Malaysia</td>
<td>500,000</td>
<td>8,637</td>
<td>3</td>
</tr>
<tr>
<td>South Korea</td>
<td>38,862</td>
<td>12,757</td>
<td>19</td>
</tr>
</tbody>
</table>

Source: [https://coronavirus.jhu.edu/map.html](https://coronavirus.jhu.edu/map.html)  

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**Shramik Sanjal**  
Are you returning Nepal from abroad? Keep note of these 5 things:

1. Do not make your luggage even slightly heavier than specified by the airlines.  
2. Take special care of your health before flying. Such as: don’t eat food that is very cold, eat healthy food, get enough sleep, don’t drink alcohol.  
3. Food may not be available during the trip. It is better to carry unripe food including biscuits in a handbag, and if possible, carry a small sheet.  
4. Make prior planning if you would stay in a local quarantine or hotel before arriving in Nepal. Also, keep in mind that staying in a hotel could be costly.  
5. If the Individuals with special needs such as the sick and pregnant has to stay on home quarantine, then they can contact and coordinate with the concerned ward chairperson and share about their condition. If they can convince the chairperson about their situation, home environment and their level of awareness, they could stay on home quarantine on their recommendation.
Follow the Money

Federal Government

The total expenditure of Nepal government's activities against Coronavirus

Around 1.8B NRS

The Ministry of Defence for the purchase of health equipment to prevent and control COVID-19 released

Around 2.34B NRS

Donors

ADB
250M USD

World Bank
28.7M USD

IMF
130.9M USD

European Union
82M USD

The total fund in Coronavirus Infection Prevention, Treatment and Control Fund

Around 2.26B NRS

The budget allocated from Nepal Government and Ministry of Finance in three rounds

Around 1.48B NRS

Provincial Government

<table>
<thead>
<tr>
<th>Province Names</th>
<th>Province 1</th>
<th>Province 2</th>
<th>Bagmati Province</th>
<th>Gandaki Province</th>
<th>Province 5</th>
<th>Karnali Province</th>
<th>Sudurpaschim Province</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Amount</td>
<td>Around 294M NRS</td>
<td>Around 266M NRS</td>
<td>Around 429M NRS</td>
<td>Around 183M NRS</td>
<td>Around 156M NRS</td>
<td>Around 254M NRS</td>
<td>Around 425M NRS</td>
</tr>
<tr>
<td>Spent Amount</td>
<td>Around 193M NRS</td>
<td>Around 133M NRS</td>
<td>Around 136M NRS</td>
<td>Around 154M NRS</td>
<td>Around 779M NRS</td>
<td>Around 239M NRS</td>
<td>Around 364M NRS</td>
</tr>
</tbody>
</table>

Isolated cases under treatment and Occupancy rates in quarantine in different provinces

- Isolated cases under treatment
- Occupancy rates in quarantine

<table>
<thead>
<tr>
<th>Province</th>
<th>Isolated cases under treatment</th>
<th>Occupancy rates in quarantine</th>
</tr>
</thead>
<tbody>
<tr>
<td>Province 1</td>
<td>188</td>
<td>26%</td>
</tr>
<tr>
<td>Province 2</td>
<td>821</td>
<td>24%</td>
</tr>
<tr>
<td>Bagmati</td>
<td>196</td>
<td>24%</td>
</tr>
<tr>
<td>Province 5</td>
<td>1350</td>
<td>66%</td>
</tr>
<tr>
<td>Karnali</td>
<td>783</td>
<td>21%</td>
</tr>
<tr>
<td>Sudurpaschim</td>
<td>737</td>
<td>43%</td>
</tr>
</tbody>
</table>
Recently, there has been a sharp decline in the number of people in quarantine yet the number of people in isolation, undergoing treatment, keeps increasing. Investment in isolation services increases the capacity of health facilities to respond to health emergencies. These isolation facilities require a lot of money to treat all the patients who are currently in isolation facilities so a comparison of each province's expense to their total spending is done.

As we can see from the above graph, Province 2 and Karnali have spent a large part of their total spending on COVID-19, 77% and 68% respectively, in extending isolation services to people. This proves to be a good thing as the facilities in these provinces are being developed. However, the situation in other provinces, especially in Province 1, Province 5 and Sudurpaschim is dire as their spending in extending isolation services out of their total spending is very less. It seems these provinces have spent more money in relief distribution, building quarantine facilities and procurements, etc than in extending isolation services. The situation of province 5 is even more serious because it has a very hung number of people undergoing treatment in isolation, while even the quarantine facilities are occupied by 66%. Also, from the above graphs, we can see that Sudurpaschim might have to face similar problems where it must adhere to competing demands to invest in both the quarantine facilities and isolation facilities. With the projection from the Nepali government, infections could go as high as 40,000 in Nepal, so it is imperative that the isolation services should be well equipped beforehand. The data for Gandaki Province has not been ascertained yet to make the comparison.

Note: This information is not complete. It has been brought together from different sources available. We will keep collecting the data and revise it in the days ahead.
The role of local government in effective corona response

The success of the government in the management of corona is determined by the effectiveness of the local government units in corona response. In fact, the recent corona epidemic has shown us the significance of all 753 local units. But as a whole, the coordinating role of all three levels of government remains more important.

The challenges of local government

1. The lack of coordination of the local government with the province and federal government, the coordination level includes (CCMC in Federal, PCCMC in Province and DCCMC in local level)
2. The compulsion to keep the infected individual in quarantine due to insufficient capacity of isolation
3. The difficulty in minimizing the risk of infection due to inability to extend the scope of PCR testing.
4. The lack of human resource to implement the decisions of federal government
5. The difficulty in the immediate infrastructure management due to lack of prior preparation and numbers of individuals entering the borders.
6. The potential infected individuals don’t show up for testing and escape from the quarantine.
7. The lack of human resources to make special arrangements for LGBTQ communities, women, children and senior citizens.

Learnings

1. The management of the crisis can't be done alone, the coordination and support from every one is necessary.
2. The transparency in expenditure can ease in garnering support.
3. Everyone has to stay ready for the probable disaster.
4. The public will feel the presence of government when they are in constant contact
5. The local government has to pay equal attention in building the human resource to implement decisions.
6. Considering the growing problem of mental trauma in the crisis, psychological counselling should also be kept in priority as an important aspect of response.

What should be done now?

1. Increase the two-way dialogues between the federal-provincial-local government to give and take feedback and for the federal government to identify needs and formulate policies in coordination with local and provincial government and also make available the resources for implementation.
2. The Ministry should facilitate the formulation of COVID response strategies, budgets, plans and programs at all local level programs for the coming fiscal year.
3. Increase the horizon of PCR testing along with social awareness
4. Document the details of the migrant returnees, people who have lost employment and corona affected families and connect them with income sources along with their proper management- conduct training sessions in the local level, bring subsidized loan schemes.
5. Make public the names of all the relief recipients along with the details of income and expenditure and also inform the public about what works the government representatives are doing.
6. Arrange separate quarantine and isolation for gender minorities, individuals with disabilities and pregnant women.
7. Increase the capacity of the health workers and other staff directly involved in the treatment and management of corona and also encourage them and provide psychological counselling.
COVID-19 test results in Nepal come slow. The above graph shows that in the majority of death cases, results came only after the infected has died. Samples waiting for the test has increased significantly while the average quantity of daily test has not improved. Getting positive tests after death has two major implications: 1) treatment of the suspected cases is influenced as health workers are under the fear of infection and 2) tests are being run only after deaths, or during a very critical stage of COVID-19 infection. This could also mean that the identification of severe cases have been lackluster as treatment could have been possible if a case was to be identified before the patient is in a critical state.

Coronavirus CivActs Campaign is brought to you by Accountability Lab Nepal.