



NEPAL: COVID-19 Pandemic

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HIGHLIGHTS

- Advocacy on quick supply on vaccines to Nepal continues by partners at all levels.
- Nepal reached the landmark of having administered more than 20 million Covid-19 vaccine doses on 10 December.
- To date, Nepal has received 31,419,330 doses of Covid-19 vaccines from various sources.
- There are currently 5,526 active Covid-19 cases recorded.
- Preliminary reports estimate a total loss of NRS 8,268 million due to the unseasonal heavy rainfall of mid-October.
- Oral Cholera Vaccination was completed in Kapilvastu district to respond to increased cases of Acute Watery Diarrhea, in coordination with WASH response.



Vaccination drive in Kathmandu. Source: UNICEF Nepal

SITUATION OVERVIEW

While new Covid-19 cases remained relatively low throughout the reporting period, daily testing rates were also their lowest in several months, owing at least in part to the nationwide celebrations of the most important festivals in Nepal in October and November. This period was also characterized by a high level of internal and cross-border mobility, as Nepalis traveled first to their homes to celebrate with family and then back to locations of employment. Humanitarian actors were watching closely for indications of any uptick in cases following the festive season when the Omicron variant emerged in South Africa in late November and was first detected in Nepal in early December.

The effects of Omicron on Covid-19 cases and hospitalisation are yet to be seen, however there is an environment of heightened vigilance among responders and preparedness measures are being reviewed. Advancing the nationwide vaccination campaign remains a critical focus, with renewed emphasis in light of Omicron. As of 14 December, 58.4% of the population above 18 years had been administered at least one dose of Covid-19 vaccine and 47% had been fully vaccinated.

Efforts on risk communication have also remained central to preventing the spread of Covid-19, as well as supporting the vaccination campaign. In November, the majority of concerns registered through social listening conducted by Risk Communication and Community Engagement members were related to vaccine availability, efficacy, side effects, vaccination of persons with comorbidities and lack of clarity on procedures for obtaining vaccination certificates/QR codes, as well as information on the new variant of Covid-19.

At the same time, the socio-economic strain associated with the various shocks of the pandemic continue to be a major driver of protection risks. Children without parental care, including as a result of migration or death of main caregiver, is the highest reported incident through the Protection Monitoring and Incident Reporting System. In many parts of Nepal, this strain has been further exacerbated by the unseasonal heavy rains that swept across the country between 17-22 October, destroying thousands of hectares of crops during the harvest season – the main source of food over the coming months for thousands of subsistence farmers. In addition, flood-induced displacement is considered a protection concern, mainly in Karnali, Lumbini and Sudurpashchim provinces.

PRIORITY NEEDS

Health

- Universal application of public health and social measures.
- Strengthening points of entry (PoEs) for effective management (registration, screening, quarantine, testing, isolation) of all entrants, as well as in physical infrastructures for health desks and holding centres, WASH facilities, data management tools and equipment, screening and testing kits, IPC measures and skilled human resources.
- Mobilizing contact tracing and case investigation team with optimal utilisation of Antigen testing kits.
- Supporting Information Management Units (IMUs) for real time information from PoEs, laboratories, isolation centers, hospitals, etc.

WASH

- Preparation for possible third wave of COVID-19 in light of the emergency of the Omicron variant, with particular focus on institutions like schools, health care facilities and high-density low-capacity areas.

Risk Communication and Community Engagement

- Sustaining public health and safety measure practices, especially the correct use of masks including outside Kathmandu Valley, and in public and private schools to stop the spread of COVID-19.
- Improving vaccination coverage in low performing municipalities and provinces through promotion of vaccination campaign information and addressing vaccine hesitancy among selected ethnic and religious minorities.

Food Security

- Unseasonal heavy rainfall on 19-20 October 2021 caused landslides in the hills and flooding across the Terai region in Sudurpaschim, Lumbini, Province One, Province Two, and parts of Karnali. The disaster damaged assets, including houses, water and sanitation infrastructure, and food stocks. Large areas of cropland have been damaged, affecting agricultural production and the primary source of livelihoods for many households.
- The rapid assessment using 72-hour assessment approach estimated that food security status of 77,635 people is significantly affected as a result of the flooding, of which 63,897 people, or 11,716 households, are in need of immediate assistance. Moreover, the rapid field assessment carried out by the Ministry of Agriculture and Livestock Development shows that the total area of affected by flood was 171,076 hectares, with an estimation of damage of 85,580 hectares paddy field and 325.258 MT paddy loss.
- The preliminary report estimated a total loss of NPR 8,268 million due to the unseasonal heavy rainfall with the highest loss in Lumbini, followed by Sudurpachim and Province One. Considering the extensive damage to crops – a primary livelihood for agricultural households as well as many daily wage labourers – in-depth assessment of the flood impact on livelihoods is underway. The results of this assessment will provide guidance on mid to long-term recovery options.

Protection

- While socio-economic needs remain high on the list of main drivers of protection risks, the lingering consequences of the monsoon season continue to be felt, with flood-induced displacement considered a protection concern, mainly in Karnali, Lumbini and Sudurpaschim provinces.
- With ongoing protection needs, alert mechanisms, helplines, shelters and one-stop centers continue to be important entry points to the different layers of the social welfare system in Nepal.
- Gender-based violence (GBV) remain a major risk, disproportionately faced by women and girls. The continuity of GBV prevention and response services must be supported and specific gaps addressed, particularly in terms of protective services, access to justice and legal assistance.
- Despite school re-opening, dropout risks for most vulnerable children emerge as top concerns among community members. Coordination between protection and education actors is critical to prevent school dropouts and associated negative coping mechanisms.

Nutrition

- Support to local governments to strengthen and expand outpatient therapeutic centres to the health posts and via female community health volunteers 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 various community-based health and nutrition programmes, including screening and detection of wasted children, supporting pregnant women with maternal nutrition counselling, supporting women to maintain breastfeeding and counselling of caregivers on complementary feeding and healthy diets for children.
- Provide blanket supplementary feeding to children aged 6-23 months, and pregnant and lactating women in Province Two, Karnali and Sudurpaschim.

Education

- Due to the decline in official COVID-19 cases during the reporting period, compliance with public health and safety measures by the general population is also declining, including in schools. However, in light of the emergence of the Omicron variant, school authorities need to be oriented and alerted to ensure compliance to safety measures and safe schools re-opening protocols.
- Continue support to equip teachers with strategies and skills to help children with learning loss initiatives and psychosocial support.

Gender in Humanitarian Action

- Free access to COVID-19 testing for poor and vulnerable communities.
- Vaccination targeting marginalized groups and outreach to ensure access.

OPERATIONAL RESPONSE

Health

- Health partners are actively supporting COVID-19 vaccination campaigns ongoing simultaneously in all provinces for first and second vaccine doses for target groups as specified by the Ministry of Health and Population (MoHP) and as per the National Deployment and Vaccination Plan.
- Advocacy on quick supply of vaccines to Nepal continues by health partners at different levels.
- Partners are supporting various activities at PoEs, including risk assessment of PoE and ground crossing points, establishment and upgrading of PoE infrastructure, training and orientation for PoE staff, screening and testing (COVID-19, HIV, TB, Malaria, etc.), recording and reporting and human resource support.
- Health partners are supporting case management through pediatric essential/emergency critical care training and telemedicine and teleconsultation.
- Oral Cholera Vaccine (OCV) vaccination was completed in Kapilvastu district to respond to the cases of Acute Watery Diarrhea, in coordination with WASH activities.

WASH

- Joint monitoring visits, led by Cluster lead Ministry of Water Supply, for COVID-19 response are ongoing at provincial level with the objective to observe quality of response, sustainability of interventions and areas of improvements at provincial and local levels.
- Joint visits have been completed in Province One, Gandaki, Karnali and Sudurpaschim, covering 15 health care facilities, two points of entry, eight isolation centres, four schools, three quarantine centres, and four government institutions where WASH service/facilities were provided by cluster members.
- During the reporting period, WASH cluster members also continued to respond to the post-monsoon and unseasonal heavy rains, floods and landslides of mid-October. 1,002 households (6,353 people) in Bardiya district were supported with WASH supplies, including, buckets, hygiene kits, and water purification tablets.
- Similarly, 1,100 HHs (7,700 people) benefitted from similar WASH supplies and liquid handwash solution in flood affected areas of Kanchanpur district of Sudurpaschim.

Logistics

- On 11 December one dispatch was made of 1.1 MT and 8 CBM.
- During the reporting period, dispatches of 3.6 MT and 23 CBM have been completed.
- Two 40 foot refrigerated containers were received from United Nations Humanitarian Response Depot (UNHRD) and handed over to the Ministry of Health and Population (MoHP). The reefer containers, located in Patlaiya, Bara District of Province Two, are augmenting the cold-chain capacity of Nepal for the storage of COVID-19 vaccines, which is crucial to the delivery of vaccines around the country and the fight against COVID-19.
- To date, COVID-19 related dispatches have totalled in weight MT 2,780 and volume 10,206 CBM.
- To date, COVID-19 related storage has totalled in weight MT 1,840 and volume 9,776 CBM.

Risk Communication and Community Engagement

- 56 radio journalists were trained on offline community feedback collection to gather insights from remote areas and those not reached through online platforms. Monthly social listening insights, gathered through offline and online platforms, were shared with the Ministry of Health and Population (MoHP) and RCCE stakeholders.
- Over 7 million people were reached through dedicated radio and television programs with content and messaging on COVID-19 testing, public health and safety compliance, vaccine availability and efficacy. Over 10.5 million people were reached on social media with content and messages on reimagining a better post-pandemic world for children, various vaccine arrivals in country and Vitamin A supplementation campaign.
- Initiated local mask movements in support of compulsory mask wearing campaign in public places, with a specific focus on festival season and political parties' conventions. The Province Two Chief Minister's office, provincial health directorate, youth mobilisers and Nepal Scouts volunteers are supporting the mask movements with a focus

on markets, offices, shops and public transportation. Additionally, 26 volunteers were mobilised in nine districts of Karnali and Sudurpaschim provinces to promote public health and social measures.

- For the first time, a youth takeover of MoHP digital media channels was organized on 20 November, wherein mental health related content produced by children and young people was disseminated.
- During the reporting period, around 100 multimedia contents on COVID-19, mental health, Omicron variant, cholera awareness, Pfizer vaccine rollout and safety behaviours during festivals were produced and disseminated through MoHP's Viber and social media channels, Nepal Television, Radio Nepal, partners' radio networks and community activities.

Protection

- Psychosocial support continued to be provided through remote counselling, online platforms, one-on-one counselling and group orientation sessions, including deployment of community-based psychosocial community workers, where feasible.
- 786 people (183 males, 603 females) including those affected by floods/landslides received one-on-one counselling services. Further, 5,805 people (1,964 males, 3,841 females) were reached through group orientation and awareness-raising activities on psychosocial wellbeing. Also, 47 children (all boys) from child correction homes in Parsa district, Province Two were oriented on identifying psychosocial stress and coping mechanisms.
- Protection helplines and emergency intervention services, including appropriate care arrangements and emergency assistance, reached 199 children (36 boys, 163 girls), of which 55 cases (26 boys, 29 girls) were referred to different services such as health, security, justice, etc.
- 522 people (184 males, 338 females) were trained to identify and respond to unaccompanied, separated and other vulnerable children. In addition, 29 volunteers were oriented on protection monitoring and incident reporting.
- 316 women and girls supported with lifesaving essential dignity and *kishori* kits to address their protection and hygiene concerns. 4,692 people (1,224 males, 3,468 females, including 7 persons with disability) were sensitized on GBV prevention and response. Additionally, 264 GBV frontline service providers (99 males, 164 female, 1 non-binary, including 1 person with disability) were trained on GBV prevention and response.
- 6,725 (3,120 females, 3,605 males) returnee migrants including vulnerable people and informal workers were provided with a first dose of COVID-19 vaccine at one of four-exit points of Kathmandu (Kalanki, Balkhu, Koteshwor and Gongabu Buspark).
- 132 calls from persons of concern (refugees) were received through the 24/7 hotline services and protection needs were addressed accordingly. 866 protection services (psychosocial support, GBV response) provided to refugees.

Nutrition

- 1,608 children aged 6-59 months with SAM were treated in 863 OTCs and 22 nutrition rehabilitation homes (NRH).
- 90% of children aged 6-59 months received Vitamin A supplements and 88% of children aged 12-59 months received deworming tablets during the national campaign on 24-25 October, conducted by MoHP.
- Caregivers of 39,441 children below 23 months received infant and young child feeding (IYCF) counselling during the reporting period. Further, support for IYCF information dissemination and counselling services via telephone, radio, SMS, TV and other social media communication channels is ongoing.
- The Cluster is supporting MoHP to implement a simplified approach for the treatment of moderate and severe acute malnutrition nationwide, by using single product ready-to-use- therapeutic food, Orientation of health workers has been completed in 35 of 77 districts.
- In October and November, a total of 33,948 children aged 6-23 months and 21,951 pregnant and lactating women received supplementary food in Karnali province and Province Two.

Education

- The Ministry of Education Science and Technology (MoEST) endorsed the COVID-19 Education Cluster contingency plan on 7 December 2021.
- During reporting period, 24,423 children (51% girls) were reached through the distribution of printed self-learning materials in Province Two, Lumbini and Karnali. Since January, 173,572 children (43.4% girls) from most marginalized communities have been reached with the distribution of formal self-learning materials.
- Psychosocial first aid (PFA) support was provided to 1,000 parents and students (29% female) of Sudurpaschim, Karnali and Gandaki provinces and stress management training to 574 teachers (47.8% female) in Province Two to manage stress and fear among students.
- 4,797 parents (30% female), from early childhood education and development (ECED) to grade three, were supported with parental education sessions to create an enabling environment for learning continuity at home through self-learning pack. Similarly, 1,097 primary school teachers (37% female) were capacitated on remote teaching and the effective use of learning package. Since January, 6,291 teachers and parents (32.2% female) have benefitted from various capacity building skills on remote teaching and learning.

KEY GAPS AND CHALLENGES

Health

- Non-adherence to public health and social measures (PHSM).
- Lack of physical infrastructure for health desks at points of entry.
- Low test rates in some provinces.
- Inadequate case investigation and contact tracing.
- Untimely or non-existent recording and reporting of critical health data in some areas.

WASH

- Discontinuation of hygiene behaviours, as well as discontinuation or dismantling of WASH facilities such as handwashing stations, raises concerns over the sustainability of support facilities to ensure hygiene behaviours.

Risk Communication and Community Engagement

- Decreased risk perception, following the reported drop in COVID-19 cases over the reporting period.
- With the reopening of public transportation, markets, shops, offices, and schools, as well as increase in movements of people with festivals and political parties' conventions, there is simultaneously a greater need and increased challenge to reinforce compulsory and correct use of mask in public places through more innovative social and behaviour change communication.

Protection

- 42% of GBV cases (with 80% of those among minors) reported through the cluster's protection monitoring and incident reporting (PMIR) system, have not received assistance.
- Socio-economic strains continue to weigh on childcare capacities. Children without adequate parental care is the third highest category of incidents reported in the PMIR system, which includes 5% linked to migration of main caregivers, and 29% linked to death of caregivers (including COVID-19 related). Only 52% of reported cases are receiving adequate care.

Nutrition

- Early detection of severe and moderate acute malnutrition in children under-five and referral to health facilities at the local level remains a challenge.

Education

- Monitoring of school reopening and adherence of safety protocol is challenging due to the lack of any real-time monitoring mechanisms.
- Lack of resources to respond to education needs by Cluster members.
- While schools across the country are gradually returning to in-person learning, emergence of the Omicron variant imposes further challenges for schools and municipalities to implement school safety protocols.

Gender in Humanitarian Action

- While some marginalized beneficiaries received cash support to revive their livelihoods after the heavy rains in mid-October, the maintenance of a proper database of marginalized and left behind households at the municipal level, as well as a strategy by local governments to ensure support reaches those most in need is a gap.