



Nepal COVID-19: Cluster Update #30



8 January 2021

COVID-19 situation

Deaths	Positive cases	Recovered cases	Tested for COVID-19	Persons in isolation	Persons in quarantine
1,903	263,605	256,644	1,969,292	5,058	342

Source: <https://covid19.mohp.gov.np/#/> (as of 7 January 2021)

Overview

Over the past month a decrease in the rate of RT-PCR testing has been accompanied by a decline in the number of officially recorded active cases, cases in isolation and test positivity rate. The distribution of active cases across the country is not even, with five districts having no active cases (Mahottari, Sarlahi, Siraha, Mugu and Rukum-East), while five other districts have over 200 active cases each (Myagdi, Kathmandu, Lalitpur, Kailali and Kapilbastu).

A nationwide demonstration was organized on 28 December by opposing political parties following the President's approval of the Prime Minister's recommendation to dissolve the House of Representatives and conduct fresh parliamentary elections in two rounds on 30 April and 10 May 2021. Health experts have expressed their concern over the increased risk of COVID-19 infection due to the large number of rallies, protests and programs organized by various parties across the country without observance of COVID-19 health and safety measures.

The Government cannot confirm if the new strain of coronavirus recently discovered in the United Kingdom has entered the country owing to genome sequencing facilities not yet being established. The Ministry of Health and Population (MoHP) has received 100,000 antigen test kits which will be utilized to strengthen case investigation and contact tracing, monitor trends of disease incidence in the community, detect early cases in the areas of widespread transmission, and respond to a suspected outbreaks of COVID-19 in remote settings. This testing kits have been distributed to Gandaki Province, Province One and Sudurpaschim Province. MoHP has oriented more than 350 health managers and supervisors on the use of these antigen-rapid diagnostic tests at the community level in order to perform community-based testing and surveillance in hot spot areas across the country to break the transmission chain.

On 4 January Kathmandu was recorded as the most polluted city in the world, with PM 2.5 levels reaching 488 micrograms per cubic meter ($\mu\text{g}/\text{m}^3$) at 5:45pm at Ratnapark station as per the United States Environmental Protection Agency (EPA) Air Quality Index. Due to the rising pollution level of Kathmandu Valley, Health Emergency and Disaster Management Unit of MoHP requested residents to follow precautions to stay safe from both pollution and COVID-19 in a press release on 5 January.



As of this week, 263,193 cases have tested positive for COVID-19 through RT-PCR and 1,899 deaths have been reported. Testing capacity has increased to 82 testing sites, of which 35 are private laboratories. The Health Cluster has been supporting the National Public Health Laboratory (NPHL) in monitoring the quality standard of designated COVID-19 laboratories in the country through the National Quality Assurance Program (NQAP). A total of 15 designated COVID-19 labs participated in the NQAP this week. All participating laboratories were satisfactory with $\geq 90\%$ concordance. A virtual session: 'Training on SARS-CoV2 Antigen RDT, its principle and practices' was facilitated during the reporting period, with the objective of orienting Field Medical Officers (FMOs) and Information Management Assistants (IMAs) in all seven provinces of the country.

As of 6 January 2021

Total PCR testing sites: **82**
Total PCR tests done: **1,964,160**
(average of 5,383/day in past week)
Total PCR positive cases: **263,193**
Total active cases: **5,133** (2.0%)
Total discharged: **256,161** (97.3%)
Total deaths: **1,899** (0.7%)
Total isolation beds: **13,861**
Total quarantine beds: **22,420**
Total people in quarantine: **342**

The Cluster provided support to NPHL on:

- Quality assurance for 25 laboratories participating in the Royal College of Pathologists of Australia quality assurance program;
- Monitoring of online data entry for WHO Global Round of Proficiency Testing for SARS-CoV2 and ensuring timely reporting from all participating laboratories;
- Validation of Biosewom PCR kit and Strong Streep Antigen Detection Kit;
- Drafting of a background note on SARS-COV-2 variant-detection and containment;
- Addressing result analysis issues in PCR testing, frequent review of SARS-COV-2 real time PCR results, audit of result interpretation and support in root cause analysis to address non-conformities.

Support was also provided to the National Influenza Centre (NIC) on reviving virus isolation facilities and preparation of a quality manual as part of quality improvement activities.

The assessment of the 14 government hospitals, four medical colleges and 17 private hospitals on critical equipment inventory and oxygen source and consumption, ongoing since 2 December, has been completed. The temporary establishment of four points of entry (PoEs) at ground crossings with technical and financial support of Cluster members has been completed. These PoEs are to be handed over to local governments at a date to be determined. The establishment of a health desk, along with infrastructure support, at Tribhuvan International Airport (TIA) has also been completed.

Family Welfare Division, in collaboration with partners, developed a training package to orient doctors and nursing staff working in antenatal care, post-natal care, labour rooms, operating theatres and postnatal wards along with anaesthetist assistants on post-partum haemorrhage, the leading cause of maternal mortality during the lockdown. During the reporting period, a total of 106 doctors and nurses were trained from comprehensive emergency obstetric and neonatal care (CEONC) sites in nine hospitals of Province Two. In partnership with Nepal Red Cross Society, ambulance services for pregnant women seeking MNH services from health facilities in 16 districts were supported.

Health Directorate, Lumbini organized a training, with support of health partners, for health workers on infection prevention, remote and on-site COVID-19 risk communication and basic DHIS in Barghat, Nawalparasi, for 22 participants (16 male, 16 female) from Palpa, Gulmi and Nawalparasi. Health partners also supported PHLMC to conduct a joint onsite coaching for the district vaccine store and vaccine sub-centre of Kapilvastu.

Challenges

The presence of people in rallies and mass gatherings as a result of the changing political scenario is creating a significant risk of increasing COVID-19 transmission and cases. Further challenging this context is the lack of adequate human resources to follow up with asymptomatic COVID-19 positive cases at the community level. It is also challenging to apply public health measures in an optimum way in compliance with national guidelines.

Mental health and psychosocial support

Psychological first aid and counselling

Protection Cluster members have reached 379 people (115 males, 263 females and one other gender) over the reporting period with one-on-one psychosocial first aid and counselling services. The main issues reported are concerns over health, excessive worry and stress due to the prolonged emergency and uncertainty, including loss of jobs. Among the total supported, 46 persons were referred to various services (nine for psychiatric consultations, five for legal services, 16 for health services and 16 for security services).

Awareness-raising and communication on psychosocial wellbeing and mental health

Through the deployment of community-based psychosocial workers (CPSWs), Protection Cluster members reached 1,134 participants (493 males and 641 females) over the reporting period through awareness raising interventions on psychosocial wellbeing in all seven provinces. Similarly, 709 participants (344 males and 365 females) were reached through group orientation sessions on stress management and various psychosocial issues (virtual and face-to-face) across the country. Those reached include humanitarian actors, community members and persons in quarantine sites and isolation facilities. Moreover, Protection Cluster trained 25 counsellors on psychological first aid and psychosocial support, linking with discrimination and gender-based violence, as well as on responding to people with suicidal ideations.

Mental health support to children, parents and caregivers

In partnership with CWIN Nepal, the Cluster has been supporting the organization of online mental health and wellbeing sessions targeting children, adolescents and parents/caregivers. Those trained mental health workers conducted 185 sessions and reached a total of 3,507 people (723 girls; 521 boys and 2,263 parents/caregivers) in the last two weeks.

Care for caregivers

In partnership with the National Health Training Centre, an online training manual on mental health has been developed and rolled out through civil society organizations, with the aim of helping frontline health workers cope with COVID 19-related stress. A total of 237 health workers working in isolation centres and COVID-19 designated hospitals benefitted from such training sessions in the last two weeks.

In partnership with Nursing and Social Security Division, in the light of potential school reopening, the Cluster has begun providing mental health awareness and support to students delivered in sessions by school nurses. Twenty-one school nurses of Bagmati Province were trained for this during the reporting period. Likewise, sessions for youths aiming to fill the gap in mental health care started with 350 youths during the reporting period.

Challenges

Uncertainty about the future due to the prolonged pandemic has further increased fear, anxiety and boredom among the general population. Changes in children's behaviour, including regressive behaviour, social withdrawal, aggression and a surge in anxiety have been observed.



Protection Cluster

Child protection

During the reporting period, 456 unaccompanied, separated or other vulnerable children (197 boys, 259 girls) were supported with appropriate care arrangements (family reintegration, placement in interim/transit care) and/or other emergency support and relief; of which 72 (37 boys, 35 girls) were referred to different services such as health, security, justice, etc. In addition, 625 people (379 males, 246 females) were oriented to identify, and respond to, the needs of unaccompanied, separated or other vulnerable children.

Gender-based violence (GBV)

During the reporting period, 247 people (240 females and 7 males) received multi-sectoral support through peripheral health facilities, safe houses/shelters, one stop crisis management centres (OCMCs), legal and psychosocial counsellors and police from Province One, Province Two, Bagmati, Lumbini, Karnali and Sudurpaschim. 69 people (all females) received lifesaving supplies, such as dignity, kishori, and hygiene kits in provinces One, Two, Bagmati, Lumbini, Karnali and Sudurpaschim. 162 service providers and stakeholders (98 females and 64 males) were trained on providing survivor sensitive GBV prevention and response services. Furthermore, 1,468 people (1,199 females and 269 males) were sensitized on GBV prevention and response interventions across all provinces. Increased capacity building and sensitization on GBV, with a focus on early/forced child marriage in Lumbini Province, has resulted in an increase in reporting of early child marriage over the past month.

Persons of concern/refugees

During the reporting period, 60 calls from persons of concern were received through the 24/7 hotline service and their protection needs were addressed accordingly. A total of 492 protection services (psychosocial support, GBV) were provided to refugees over the reporting period.

Challenges

It has been challenging to provide psychosocial services to the survivors of GBV due to limited human resources, including adequate training, which has been particularly highlighted during this reporting period at the one stop crisis management centre (OCMC) in Baitadi.



Food Security Cluster

Over the past two weeks Cluster members reached 41,157 people with food (835), cash/voucher (10%) or agricultural tools (7%) assistance, including ongoing assistance to 1,842 people. The Cluster has planned support for an additional 137,378 people in 234 palikas of 54 districts.

The Nepal COVID-19 Market Update #8 was released this week, major findings of which include:

- Retail prices of most food commodities fluctuated in November 2020; however, prices of food staples remained stable. Prices of some vegetables, fruits and pulses declined, while prices of chicken meat and milk increased.
- Continued improvement in market function was observed, with adequate availability of food and non-food commodities in markets, and improved supply and transportation of goods reported across the country, particularly in rural areas.
- Demand for food and non-food commodities, however, remained at medium level and did not show improvement.
- The prolonged COVID-19 crisis, combined with uncertainty, limited employment opportunities and in turn lower purchasing power has resulted in the retail prices of most essential commodities remaining volatile. The continued pressure on vulnerable households can affect their ability to access essential food and non-food commodities, and thereby have negative impact on their food security status.

This is the season for cold wave and snowfall in Terai and mountain areas respectively. There has been no report of significant cold wave impact in the Terai to date. Daily life has been hugely affected by snowfall and cold in Humla, Mugu, Dolpa, Jumla and Kalikot districts. However, local farmers are likely to benefit from improved winter crop production due to the snowfall.

There is no current issue of acute food insecurity, and the outlook for the coming three months is positive. The government has released its estimate of paddy production in 2020/21 at 5.62 million MT. The high production is attributed to timely and sufficient monsoon rainfall, improved variety of seed, an increase in seed replacement rate from 14.5 in 2016/17 to 23.42 in 2020/21, availability of wage labours due to lockdown, improvement in irrigation technology and facilities and reduced impact of pests and diseases. Despite the shortage in fertilizer in Nepal, many Tarai farmers were able to access fertilizer in Indian markets across the border. Winter crops (wheat and barley) are growing well.

Challenges

Job loss and income reduction caused by the COVID-19 crisis has affected household food security. Inadequate food consumption and food insufficiency are more common among households that reported job loss and income reduction, compared to households that did not. Similarly, households with low education levels, with a disabled household member, and female-headed households, daily wage labourers and migrant workers are found to face higher levels of food insecurity.



WASH Cluster

Cluster members are continuing to provide assistance across Nepal from federal to local levels, though there will be fewer Cluster members engaged in the COVID-19 response in 2021 than in 2020. Considering the need to better coordinate with other sectors in the face of a potential second wave, WASH Cluster has recently initiated a joint meeting of WASH, Health and Education Clusters' leads and co-leads to support a more integrated and coordinated COVID-19 response. The joint meeting is being convened at least once a month for critical discussion and joint response.

WASH support to IPC in health care facilities, quarantine and isolation centres

WASH Cluster continued to provide critical WASH support to 6,763 people in quarantine centres and 185 people in isolation centres. Three handwashing stations were provided in health care facilities and 19 were installed in quarantine centres. In addition, one water tank of 1,000 litres capacity was provided to a quarantine centre during this reporting period.

WASH in communities

Cluster members provided critical hygiene supplies to 293 families, buckets and water purification tablets to 733 families, and hygiene kits to 134 families, as well as 568 soap bars. Cluster members also reached 200,000 people through various risk communications programmes related to hygienic behaviour using various media, including television, radio, megaphone announcements, etc.

Training, orientation and knowledge management

Just over 100 frontline workers, stakeholders and WASH partners at various levels were oriented on various subjects related to WASH and COVID-19 related infection prevention and control.

Challenges

Changes in government leads and focal persons at the provincial level as well as the changed political context following the dissolution of Parliament have diluted the COVID-19 response and second wave preparedness, including priorities for WASH and IPC. While the Cluster is conducting provincial and federal level reviews and a lessons learnt exercise, it aims for more prioritised interventions in a possible second wave, considering the more limited number of partner agencies now engaged in the COVID-19 response.

With winter and cold waves impacting the southern belt of Nepal, health care facilities, isolation centres and schools, among others, are unprepared to address WASH requirements in relation to COVID-19. People tend to compromise hygiene etiquette in cold weather, which brings heighten risk of transmission. Home isolation also continues to present a challenge due to a lack of appropriate mechanisms for daily monitoring of asymptomatic cases or people with mild symptoms. This must be addressed through multi sectoral collaboration, led by health sector and local government with contribution from WASH.



Nutrition Cluster

291 children under five years with severe acute malnutrition were treated using ready to use therapeutic food (RUTF) in the past two weeks. In addition, a total of 18,184 pregnant and lactating women received telephone counselling on maternal, infant and young child feeding (IYCF) and care.

176 FM radio stations are broadcasting nutrition and COVID-19 messages. In the past two weeks 18,184 households were reached with nutrition messages. In addition, IYCF and COVID-19 messages reached more than 77,917 households through SMS.

Challenges

The blanket supplementary feeding programme (BSFP) for the prevention of acute malnutrition, targeting over 115,000 children age 6-59 months and more than 85,000 pregnant and lactating women (pregnant women: 32,000, lactating women: 51,000) faces a resource gap of approximately USD 1.025 million.

It is difficult to screen, identify and refer children aged 6-59 months who are severely wasted for treatment due to lack of protective materials (such as masks, gloves and sanitizers) for female community health volunteers as well as fear of COVID-19 preventing families in need from visiting health facilities.



Education Cluster

The Ministry of Education, Science and Technology has allocated NPR 3.15 billion to local governments for implementation of the School Education Emergency Action Plan. The action plan includes provisions for the development and distribution of learning materials, internet access for teachers and students through closed user group (CUG) mobile service, extension of internet services in schools, establishment of temporary learning facilitation centres, implementation of home schooling, teacher mobilization and management of health and safety materials in schools.

Education Cluster formed five thematic working groups (TWGs) on 21 December 2020 to ensure efficient and quality technical guidance and strategic inputs on education interventions.

Two-day trainings on School Reopening Framework 2077, psychosocial counselling and the school disinfection process were conducted in three municipalities in Kapilbastu district reaching 72 headteachers. In addition, 155 teachers were provided with a five-day training on various distance teaching modes such as radio, TV and online.

School cleaning and disinfection is almost complete at 89%, which represents 2,088 schools used as quarantine, isolation or holding centres across 295 municipalities. WASH facilities have also been installed/repared in an additional 17 schools in Province One.

Challenges

The repair and reconstruction of school infrastructures damaged while in use as quarantine, isolation or holding centres is severely challenged by resource constraints. As per available data from 158 municipalities the estimated budget requirements for such repairs is NRS 127 million. According to field monitoring reports, reopened schools are not taking sufficient COVID-19 safety measures.



Logistics Cluster

The national Logistics Cluster meeting was held on 23 December, with 34 participants from 18 organizations. During the reporting period, nine trucks were dispatched with approx. 44 mt (242 cbm) medical supplies of GIZ Nepal, PHLMC, Province Two and Management Division, MoHP to the provinces. During the reporting period, one truck with approx. 1 mt (5 cbm) medical supplies of GIZ Nepal was received for storage at the HSA in Kathmandu.



Early Recovery Cluster

A total of 8,600 households (made up of over 42,500 people) have benefited from Early Recovery activities over the past three weeks. A total of 950 HHS received cash/vouchers for livelihood promotion; 450 farmer families were supported with construction of irrigation systems; 1,050 families were provided with agriculture inputs and tools; 3,500 households benefited from cash-based community infrastructure works; 750 households were provided with different vocational trainings; 545 households received start up financial support for their MSMEs and 225 families were provided with entrepreneurship promotion related trainings. All Early Recovery activities are being implemented in close coordination with respective local governments.

A skills mapping of migrant workers across all seven provinces was conducted in order to identify the existing skills of migrants and recognize their prior learning and ability to contribute to the COVID-

19 recovery process by engaging them in local economic activities. The mapping engaged 700 migrants (100 per province).



Risk Communication and Community Engagement

Reach

During the reporting period, RCCE workstream members reached more than 10 million people through Radio programmes titled “*Banchin Amaa*” and “*Milijuli Nepali*” and television programmes called “*Corona Care*” and “*Swastha Jeevan*”. The radio and television programmes discussed issue related to school reopening, do's and don'ts during home isolation, in offices, shops and other places, care of COVID-19 positive children, how COVID-19 is transmitted via hands, proper use of mask, etc. More than 9 million people are being continuously reached with messages on home isolation through short public service announcements on radio and television. In the reporting period, more than 12 million people were reached with key messages on COVID-19, including through a new campaign #MaChhuNi, focussing on mental health and psychosocial issues.

Community engagement

More than 29,478 volunteers (64% male, 36% female), including 207 boys and 186 girls, were involved in COVID-19 community engagement actions, disseminating messages on COVID-19 prevention and control through community-based platforms reaching about 50,000 people (32% female) across the country. Messages on proper use of mask and maintaining two meters distance, avoiding crowded areas, and school safety were disseminated through door to door visits, group discussions and megaphone announcements.

Feedback mechanisms

A total of 5,763 questions and concerns were answered through hotlines and television programmes in the last two weeks. Most of the calls and questions were related to the availability of PCR testing services and testing requirements, home isolation protocols and treatment services, as well as COVID-19 vaccines. 732 community support groups from 53 urban and rural municipalities addressed the COVID-19 related concerns, confusions, issues, questions of 16,627 people (48% female) through door to door visits and community discussions.

Challenges

Attitudes of ‘no more COVID-19’ or ‘there is no coronavirus in our community’ among the general public and local level representatives have contributed to a sharp decline in adherence to public health and safety measures outside of Kathmandu city. With the decreasing number of COVID-19 positive cases and low risk perceptions, individuals and communities do not see the need to reinforce COVID-19 responsible behaviour.



Inter-Agency Gender in Humanitarian Action

COVID-19 continues to create challenges for street-based sex workers and women working in dance bars. In a recent meeting organized by Maiti Nepal on 28 December 2020, about 50 sex workers from Ratna Park and Gangabu bus park area reported challenges in meeting basic daily necessities (food, medicine), paying rent and school fee for their children. Lack of legal documentation, such as citizenship, further hindered their access to relief material and other services. Deteriorating mental

health conditions, continued stigmatization and discrimination by the community and service providers were also highlighted. Several women noted that despite harassment, abuse and violence including by police officials, they were unable to file cases of gender-based violence (GBV). Some of the key recommendations included: need to decriminalize sex work; sensitization of law enforcement authorities, access to social protection measures and provision of alternative livelihoods.

In series of consultations organized by the National Disability Women Association, Blue Diamond Society in December 2020, challenges faced by people with disabilities, the LGBTIQ community, women in informal sectors and women survivors of conflict were shared. Several households were facing a financial crisis, having lost jobs during the COVID-19 pandemic, and were struggling to meet their basic needs related to food, nutrition, children's education, health and hygiene. Increasing mental stress and gender-based violence were also noted as critical concerns. LGBTIQ persons who have failed to receive support from their families and relatives are sometimes compelled to choose sex work for survival. This is creating the additional risk of HIV infection on top of COVID-19.

The women's organization Madwi reported that due to cold wave, elderly people, pregnant and lactating women, *Dalit* children, *Musahar and Dom* communities of Ishnath, Rajpur municipalities, (Province Two) and vulnerable groups in Lamki, Chuha Tikapur municipalities (Sudurpashim) are facing additional challenges. They lack warm clothes and many of them are suffering from common cold, diarrhea, pneumonia, and vision related difficulties. There was an urgent need to provide nutritious food to children, pregnant and lactating mothers, and warm clothes and blankets for children and the elderly. Further, these communities are facing extreme financial hardships due to the lack of seasonal work.

To strengthen access to information of excluded and vulnerable groups on the COVID-19 response, The Story Kitchen and Antenna Foundation have established two toll-free hotline numbers: 1660136040 and 9801571236. Information related to COVID-19 response, GBV and available services will be provided through these hotlines. A virtual platform, www.covidsuchana.org, to provide information on COVID-19 from a GESI lens has also been established.

For further information, please contact the UN Resident Coordinator's Office:

Prem Awasthi, Field Coordinator, prem.awasthi@one.un.org, Tel: +977 (1) 552 3200 ext.1505, Cell +977 9858021752

For more information, please visit <http://un.org.np/>, <https://reliefweb.int/>

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