

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.

Is health care easily accessible to citizens?

Government expenditure on health (in Gross National Budget)



6.5%
(90 Arab 59 Crore)

Personal expenditure on health care



44%

Number of health workers per 1 lakh population



4450

Number of doctors per 1 lakh population

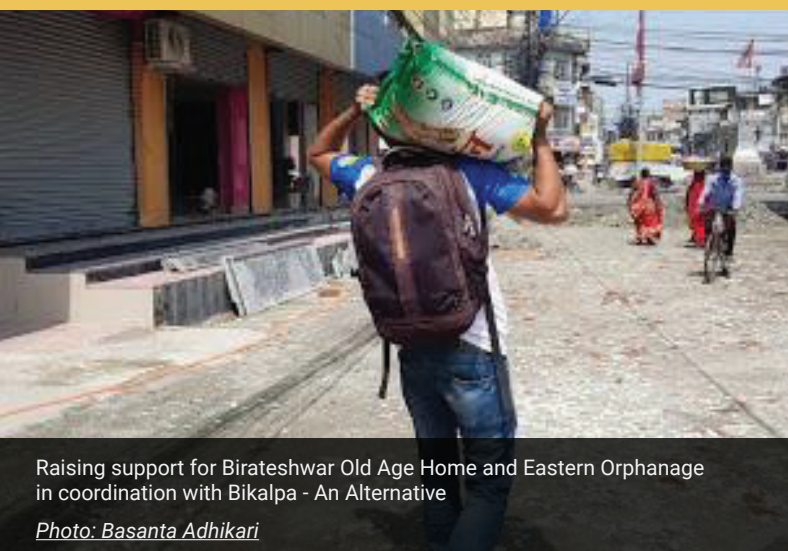


85

The above data is based on the government's 2077/78 aim to upgrade the health service. As the budget in the health sector has increased by **Rs 22 Arab** from last year, the proportion of personal expenditure on health care is anticipated to decrease by **10.4%** compared to last year. However, the number of doctors still don't seem enough. At least **1176** individuals need to be seen by a single doctor, which shows that we are still lagging behind in terms of easy access to healthcare for citizens.

Source: <https://cutt.ly/mu71T6i>

Nepal Update



Raising support for Birateshwar Old Age Home and Eastern Orphanage in coordination with Bikalpa - An Alternative

Photo: [Basanta Adhikari](#)

Tested

PCR Tested: 1,99,737

Positive: 11,162

Active: 8,486

Deaths: 26

NEPAL



Source: <https://covid19.mohp.gov.np/#/>

Rumors & Facts



It is heard that the entire fund under Local Infrastructure Development Partnership Program should be spent on corona prevention.

The remaining amount allocated under the Local Infrastructure Development Partnership Program in villages and municipalities that hasn't been used will be used on prevention, control, diagnosis and treatment of COVID-19. For this, the Chief Administrative Officer should calculate the unused amount from the allocated budget in their local unit and inform the Program Steering Committee Coordinator and the District Coordination Committee. The amount obtained should be spent, accounted and audited in accordance with the law.

Source: <https://mofaga.gov.np/uploads/notices/Notices-20200622150630172.pdf>



It is said that the private hospitals conduct very few tests of coronavirus and also charge a high price.

The private hospitals licensed to test coronavirus must have laboratories that can test at least 200 individuals per day. Private laboratories will only be able to test the samples sent by government laboratories. Thus, those hospitals won't be able to charge any fee from the patients for the test. The government will reimburse Rs. 5500 per sample to the private laboratories.

Source: https://drive.google.com/file/d/1Bc-HEAmzED_Zwg7taEmgq-Mb6azQ4Va/view



Nobody seems to be following the guidelines while going outside. Hasn't the government decided any punishment or penalty on this?

If someone is found violating the safety guidelines introduced by the government for the period of systematic lockdown, the action would be taken against him/her as per the Emergency Services Act 2014, Infectious Diseases Act 2020, National Criminal Code 2074 and Local Administration Act 2028 and other prevailing laws. It would be monitored by local administration.

Source: <https://cutt.ly/XirCH8Q>



Aren't the children suffering from malnutrition receiving treatment?

Taking into consideration the health of malnourished children, the Nutrition Rehabilitation Center is providing services even in this dire situation. Such nutritional rehabilitation homes should ensure the adequate stocks of essential F 75, F 100 and other food and medicine, and the health workers should regularly monitor and take care of the enrolled children. The government has also implemented the guideline 2077 prescribing that the children who have been discharged should be followed up every week in the first months, 15-15 days in the second month, and on a monthly basis in the fourth, fifth and sixth months.


Source: https://drive.google.com/file/d/1V5FRhbaTrcd1oE_Bf48F07wI18UHjqY5/view

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1. Add +27 60 080 6146 to your contact list.
2. Send a message saying **Nepal** to the contact.



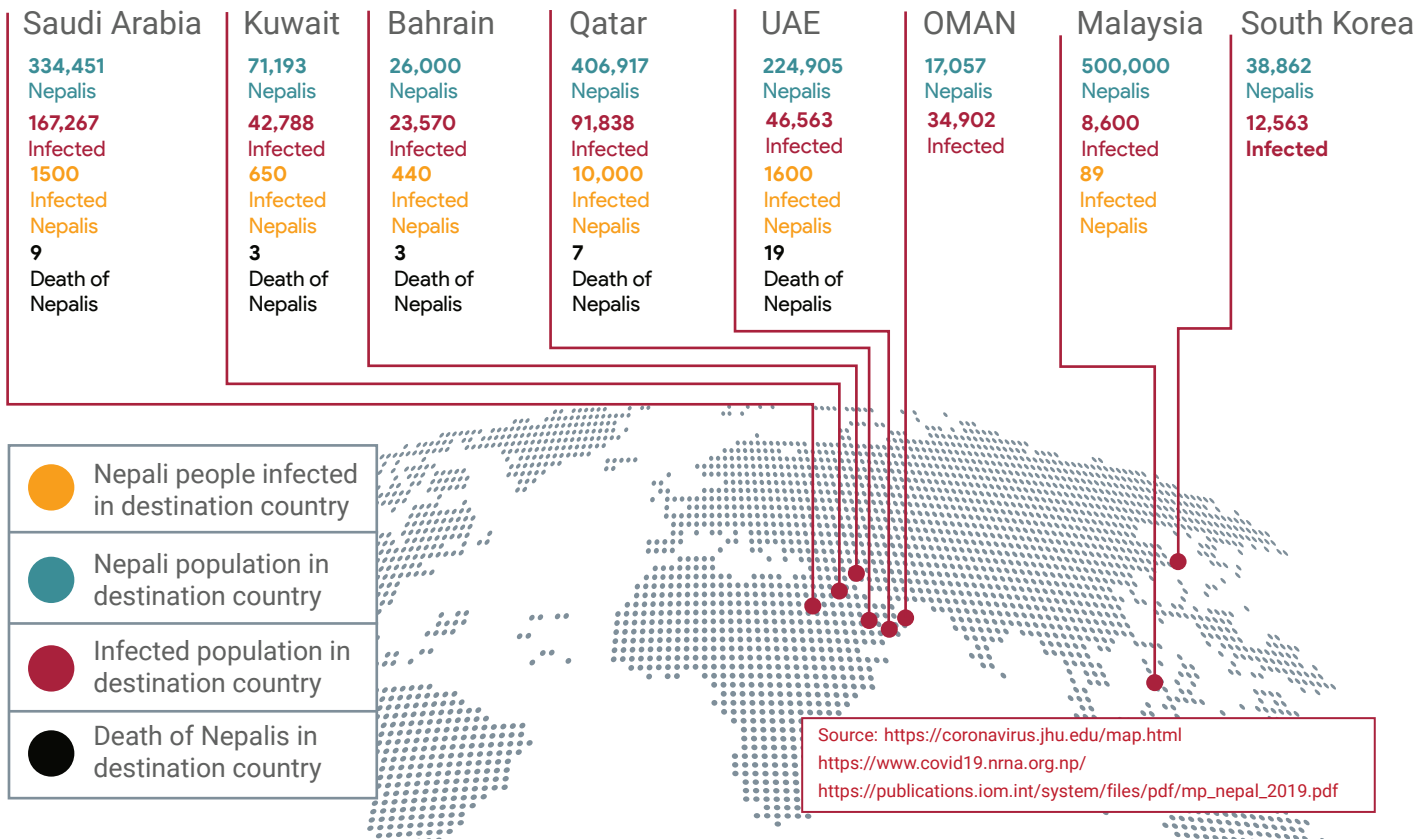
Toll-free **HOTLINE** on
COVID-19

Brought to you by 

DIAL 32100
from your NTC simcard for accessing
all COVID-19 information for FREE

Open Migration

Migrant workers in major destination countries



ShramikSanjal

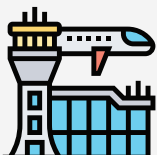
Are you staying in Nepal on leave? If you have a visa of UAE and are willing to go to UAE, then follow these procedures:

1. Firstly, fill and submit all the personal details asked by www.ica.gov.ae. Then, if you get approval from ICA, you will receive a number which should be kept for taking air tickets. But if you have a visa of Dubai Emirates and want to go to its airport, you have to fill the form from the other side of GDRFA and get approval.



2. The labor permit which would be provided by the Department of Labor has been halted at present. If the period of the labor permit issued earlier is more than 3 months, then only you could receive a ticket.

3. Two forms have to be filled after reaching the UAE. On which, one is about self-declaration about staying in quarantine and following the guidelines, and the next is about health details. Those forms have to be printed and submitted in the UAE airport.



4. In the airport, the sample for the PCR testing is taken but to conduct it at own expense. You have to stay on home quarantine until the results come out, and if you are tested positive, you have to stay on home quarantine again for 14 days.

\$ Follow the Money

Total

Federal Government

Spent

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

Around 1.48B NRS

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

Around 2.26B NRS

Donors

ADB
250M USD
World Bank
28.7M USD
IMF
130.9M USD
European Union
82M USD

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

Provincial Government

Province Names	Province 1	Province 2	Bagmati Province	Gandaki Province	Province 5	Karnali Province	Sudurpaschim Province
Total Amount	Around 294M NRS	Around 266M NRS	Around 429M NRS	Around 183M NRS	Around 156M NRS	Around 254M NRS	Around 425M NRS
Spent Amount	Around 193M NRS	Around 133M NRS	Around 136M NRS	Around 154M NRS	Around 779M NRS	Around 239M NRS	Around 364M NRS

Expenses on quarantine management by selective local governments

Rs. 7,226,360

6

Quarantine Centers

Sainamaina Municipality

Rs. 2,706,412

12

Quarantine Centers

Ghorahi Sub-metropolitan City

Rs. 4,590,000

4

Quarantine Centers

Butwal Sub-metropolitan City

Rs. 4,600,000

51

Quarantine Centers

Yasodhara Municipality

Rs. 1,392,886

15

Quarantine Centers

Vyas Municipality

Rs. 10,000,000

38

Quarantine Centers

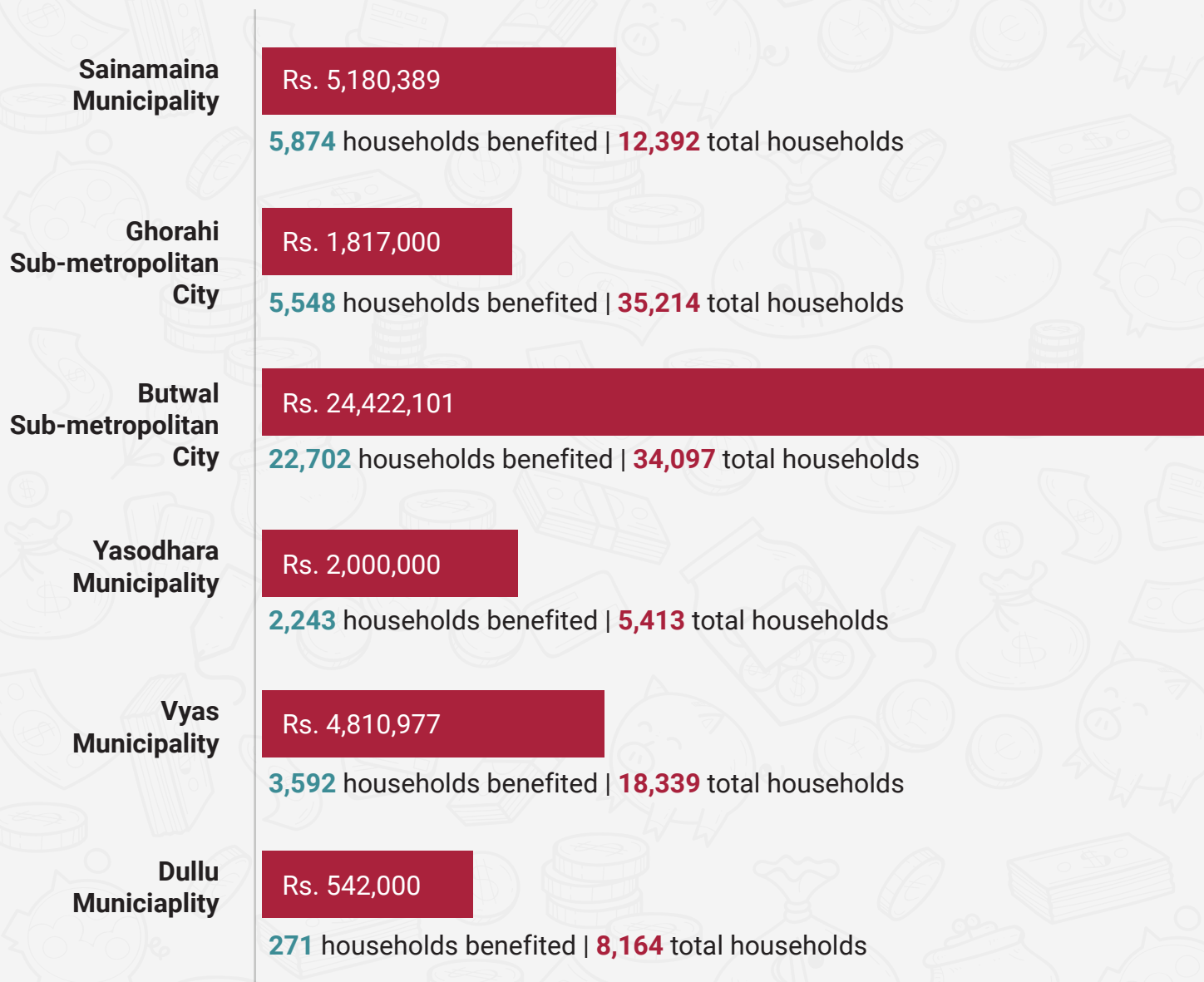
Dullu Municipality

Local governments are directly responsible for the management of quarantine and providing relief to the victims of the coronavirus. Analysis has been made of those local government units which have made their expenses public, although there is still dearth of information on financial expenses and their results. The expenses per quarantine centers is very high considering the media reports of mismanagement in quarantine. Also, categorized information on quarantine management has been made public by very few local governments.

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.

\$ Follow the Money

Expenses on relief distribution by selective local governments. Why is it so high?



It can be calculated from the above graph that the coverage of households that have benefited from relief as a percentage of total households in the local government units is very high. Sainamaina and Yasodhara both have provided relief to over 40% of the household within their jurisdiction while Butwal has provided relief to more than 65% of its total households. These percentages are a little extreme when we take into the fact that even when the number of positive cases are rising, Nepal is yet to witness the peak effects of the virus. Data on the number of people in quarantine in these local units would make it more feasible to make a valid claim, but the total number of households affected by the virus and are receiving relief from the government seems astronomically high begging the question whether or not the published data is really accurate.

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We will keep collecting the data and revise it in the days ahead.*

Children held hostage and trafficked to India are also returning home during the lockdown

50% of the children rescued are below **16 years** of age



The incidents of trafficking towards India increased by **5** folds in **five** years



Each year **10 to 15 thousand** women and children are sold in India



26% affected (children below **18 years** of age) become victims of sexual abuse

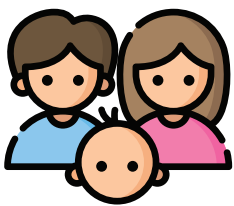


Until the road networks and border points weren't closed, the gangs that encouraged the menial labor in the Indian market were active in various districts of Province 2. The parents of these children, who were spotted by the trafficking gangs while they were studying at the school, were initially given 10,000 Indian Rupees to take them to Indian markets. Those parents who handed their children to the traffickers would lodge complaints to the police citing that their children are held hostage or sold in cities like Delhi, Mumbai after the children do not return for two three months. But the hearing wouldn't be done. Although there is a provision for the investigation office to demand continuous hearing in human trafficking cases, various studies indicate that there would be difficulty in judicial hearings until the perpetrators are arrested.

Dalit Communities in the brokers target

It has been observed that the children from Dalit communities are becoming easy targets for the brokers. According to Education and Human Resource Development Center, Bhaktapur, 28% of children from dalit communities are outside schools. Only 1% of children from Chidimar, Musahar and Dom communities go to the school. Due to poverty, these communities easily hand over their children to the brokers for the sake of livelihood.

The children are returning



Currently, those children who had been held hostage, sold and robbed are also returning home to be safe from COVID-19. The children in cities like Delhi, Mumbai and Chennai are returning home on foot after the business of those who engaged them in menial labor came to standstill and the virus started to take a toll. The son of Gopal Paswan from Jaleshwar returned home. The parents had sent the boy who was still studying in school to Mumbai by being allured. The boy confessed that his dream of seeing his parents would remain unfulfilled if the lockdown hadn't been imposed.

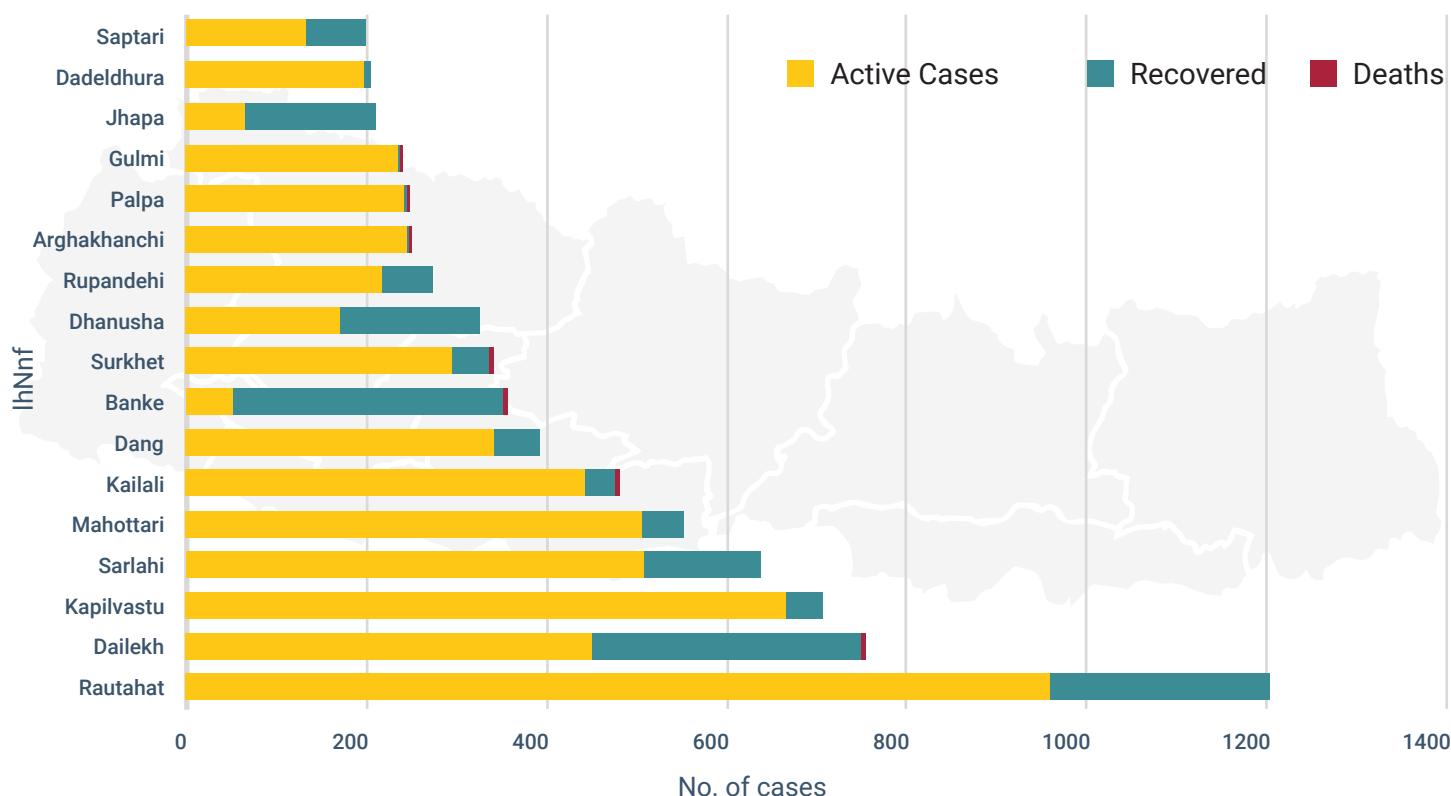
Crucial to keep record of the trafficked individuals

There is no exact number as to how many trafficked individuals have returned. Just as how these children were trafficked through the Indian borders, they have returned home hiding from the borders. This is the right time to collect the information of these children who have returned home due to the lockdown. For this, the local level can collect the data through ward offices. Similarly, it is important for the government to keep these groups in the top priority in the reintegration programs.

Rakesh Prasad Chaudhary

Even districts with lower concentration of COVID-19 cases show inadequate treatment mechanisms

Districts with 200+ COVID-19 cases in Nepal



The above graph shows the districts having 200+ COVID-19 cases in Nepal. These districts together hold about **68.5 percentage** of total active cases in Nepal. These districts contribute to almost 70 percent of total recovered cases and 14 deaths out of 24 have been reported in these districts because of COVID-19. Unfortunately, remaining deaths have occurred in districts having lower concentration of cases. This shows the inadequacy of treatment mechanisms even in the places having less pressure in health delivery systems.

Source: HEOC, MoHP, SitRep

DISCLAIMER

The sources of rumors, information, and issues presented here are collected from a variety of organizations, government agencies, international organizations, news articles, social media, and Community Frontliners in all 7 provinces of Nepal, as well as the CivActs team based on their conversations with over 2000 people in May 2020. The issues highlighted are chosen based on prevalence, relevance, and its potential impact on society. The information presented here is correct at the time of the issue.

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



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