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.

Why is there a delay in rescuing the laborers from abroad?

<table>
<thead>
<tr>
<th>No. of individuals who had to be rescued until Ashad 11</th>
<th>24,148 from 30 countries</th>
</tr>
</thead>
<tbody>
<tr>
<td>No. of individuals who had been rescued until Ashad 14</td>
<td>12,151 from 21 countries</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>No. of dead bodies brought back to Nepal</th>
<th>57 from 7 countries</th>
</tr>
</thead>
<tbody>
<tr>
<td>No. of dead bodies still in labor destinations</td>
<td>120</td>
</tr>
</tbody>
</table>

The Supreme Court has issued an interim order to rescue all those whose employer companies has been closed prior to the end of the contract period.

From the list made public by the government on the basis of priority, only half of the Nepali citizens have been able to return home so far. There are protests everywhere about the expensive airfares. However, those workers who are unable to return home at their own expense are still in dire situations. Why is there a delay in rescuing the workers under various pretexts when there is still Nrs. 6 billion in the Foreign Employment Welfare Fund deposited from the laborers?

Nepal Update

Tested
PCR Tested: 2,377,644
Positive: 14,529
Active: 9,168
Deaths: 31

The local government hasn’t provided the details of expenditure incurred in corona prevention even after requesting with a letter of Right to Information. Nor the details are on the website, where can the public complain about this?

It is heard that corona infection is increasing among children in Sudurpaschim province. If so, there might be difficulty in protecting the children.

175 children below the age of 9 have been infected with coronavirus in Sudurpaschim province. Almost all the children who have been infected have returned from India with their parents. Since the risk of infection in children is high, the parents have to stay extra alert. But they shouldn’t panic as of now.

It is said that lockdown has been extended until 7 Shrawan with current modality. But the provision of SMS has been made strict. What does this mean?

The implementation of SMS has been made strict due to the increase in the number of complaints about the public violating health guidelines prescribed by the government. It means, S = Social Distancing (maintain a mandatory distance of at least 2 meters in all kinds of gathering), M = Mask Use (use surgical or three-layered cloth mask before stepping out of the house), and S= Sanitize (all the public places and institutions should mandatorily arrange soap and water or sanitizer to clean hands and ensure everyone has used it before entering the building).

It is heard that the government is facilitating the process to bring back the dead bodies of those who died during foreign employment. Can the bodies of those who died of coronavirus also be rescued?

Only the dead bodies of those foreign migrants who died of reasons other than coronavirus are being brought to Nepal from the international flights. The Foreign Employment Board had informed earlier that the cremation rituals of the Nepalis who died of coronavirus in the course of foreign employment should be done in concerned countries according to their rules and for that, the compensation would be provided to the relatives or responsible person close to the migrant worker who has died.

To receive our regular updates through WhatsApp
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
DIAL 32100 from your NTC simcard for accessing all COVID-19 information for FREE
Migrant workers in major destination countries

- **Saudi Arabia**: 194,225 Nepalis infected
- **Kuwait**: 46,940 Nepalis infected
- **Bahrain**: 27,414 Nepalis infected
- **Qatar**: 97,003 Nepalis infected
- **UAE**: 49,069 Nepalis infected
- **OMAN**: 42,555 Nepalis infected
- **Malaysia**: 8,643 Nepalis infected
- **South Korea**: 12,904 Nepalis infected

Useful information for the laborers working in various foreign destinations:

**UAE**
- The Nepali Embassy has made public the name list of 15,305 individuals returning home. Out of the four flights from UAE, the tickets have been opened for the individuals to book on the date and time as per their convenience.

**Kuwait**
- The Nepali Embassy has made public the name list of those willing to return Nepal from the charter flight.
- The second phase lockdown has been loosened. The timing for the curfew has been changed to 8:00 PM-5:00 AM which will be effective from 30 June.
- Corona test report
- Exit paper
- Use of Mask, gloves along with social distance measures is mandatory while visiting the airport.

**Saudi Arabia**
- The information issued by the consulate for the convenience of the workers regarding the precautions to be taken while going to the airport and the documents required:
  1. Passport
  2. Flight ticket or mobile soft copy

Source: https://coronavirus.jhu.edu/map.html
https://www.covid19.nirma.org.np/
$ 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

**Provincial Government**

Province-wise budget percentage of Ministry of Social Development, its growth and percentage spent on health sector compared to the total budget

**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

**Health sector spending as % of total budget**

- Province 1: 6%
- Province 2: 5%
- Bagmati: 2%
- Gandaki: 4%
- Province 5: 3%
- Karnali: 6%
- Sudurpaschim: 7%

**Budget of MoSD as % of total budget**

- Province 1: 19%
- Province 2: 13%
- Bagmati: 13%
- Gandaki: 15%
- Province 5: 16%
- Karnali: 16%
- Sudurpaschim: 20%

**Percentage increase in budget of MoSD compared to last year**

- Province 1: 92%
- Province 2: 10%
- Bagmati: 96%
- Gandaki: 56%
- Province 5: 90%
- Karnali: 160%
- Sudurpaschim: 158%
All provincial governments have increased their budget to the Ministry of Social Development, which is responsible for allocating budget for health expenses, for the upcoming year (2077/2078). Province 2 and Karnali have, comparatively, increased their budget in this ministry the most by exciting 100% of this year’s (2076/2077). However, the investment in health sector spending is still very low compared to the total budget. On average, only 5% of the provincial budget has been allocated to the health sector, which does not really improve the situation. Therefore, although the total budget in MoSD has increased substantially, the budget allocated for health development in these provinces doesn’t paint a good picture going forward.

Additionally, an urgent need to increase the capital expenditure rather than recurrent expenditure for MoSD and so, almost all provinces have abided to raise them. Province 2 has increased the budget for this by a lot (23% difference compared to 2076/2077) while Karnali Province has actually decreased this. This puts the province in a difficult situation, considering the pandemic caused by Coronavirus still hasn’t subsided and could actually become worse in the future. Greater capital expenditure needs are very necessary and the government should be taking the current falling health system into high consideration before allocating their budget.

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.
Addressing Menstruation and Menstrual Health Management during Pandemic

Nearly 300 million women and girls around the world menstruate every day. The COVID-19 pandemic and the government enforced lockdown has affected the lives of women who menstruate, making it difficult for them to access menstrual hygiene products and facilities. Likewise, the lack of proper health facilities and gender-friendly toilets in quarantine centers has made it even more difficult. Although the government has allocated budgets to improve the quarantine centers and facilities, there is no specific mention of menstrual health hygiene and sanitation products. With the increase in the number of positive cases every day and the need for safer quarantine and isolation centers, it becomes crucial to address the need for menstrual hygiene and sanitation products along with other WASH facilities.

Distribution of menstrual hygiene products

Some reports have shown that people from vulnerable and marginalized communities might be forced to prioritize other needs over menstrual and personal health care essentials during the pandemic. They might be obliged to use unsafe alternatives which might increase their health risk in the future. The local government should allocate a budget and distribute free menstrual hygiene products in these communities which will not only help them to get menstrual products but also help them to manage their period safely in a hygienic and dignified manner.

Gender-Friendly toilets in quarantine and isolation centers

With the increase in the number of positive cases every day, the need for safer quarantine and isolation centers is also increasing. Along with the access to clean water and soap in the centers, the government should also focus on building/creating gender-friendly toilets in the centers (toilets with door and lock, access to menstrual products, dustbin for the disposal of the product,) so that people who menstruate while staying in quarantine and isolation centers can practice and manage their period in a safe and dignified manner.

Educate, Aware and Inform about menstruation

The most COVID-19 affected regions in Nepal are unfortunately also the regions that practice menstruation taboo and tradition. As important as it is to spread awareness around preventive health measures, it is equally important to have a local and national level intervention to tackle the stigma around menstruation. The government can start integrating the television and radio programs for the school curriculum that they have started to promote menstruation educational awareness materials.

Sumi Limbu
Social-Gender Activist
Sushila Mishra Bhatta
Deputy mayor
Dhangadhi Sub-Metropolitan City
The focus of the local government now should be on bringing strategic policies and programs to minimize the cases of COVID-19, rehabilitate migrant returnees, connect them to labor and income, distribute relief according to prescribed guidelines to the pregnant women, individuals with disability and senior citizens.

Uma Thapa Magar
Deputy mayor
Nepalgunj Sub-Metropolitan City
The challenge to the local level was to immediately manage the infected individuals and build infrastructures for them. However, many directives were created only after the outbreak. But the spread of possible infection has reduced today due to the immediate actions adopted by the government representatives. This has given public the feeling that government is with them in times of crisis.

Laxmi Gautam
Deputy mayor
Itahari Sub-Metropolitan City
The federal government did instruct to establish the quarantine, but procuring materials was still a challenge. The private hospitals provided the beds with a condition of return later and the local business persons provided other assistance. We managed to create a 100 bed capacity quarantine by following all the criteria set by the government.
The above graph shows the status of COVID-19 cases in SAARC countries. Almost, one million cases have been reported in SAARC nations so far, while India alone has half of the total cases. Nepal has the fifth highest number of cases and total deaths after Bhutan, Maldives and Sri Lanka. Nepal has a close connection with India where daily cases are increasing at a steady pace and many migrants have been entering Nepal from other neighboring countries as well. It seems very difficult to contain the virus in Nepal for some time unless infection is properly controlled in all the SAARC countries or unless migration is made completely safe.

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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