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 conditions applicable when operating long distance vehicles

01. Only 50% passengers of the seat capacity can be accommodated
02. Only 1 passenger can be accommodated in each seat of a single row
03. It is mandatory for all passengers to wear a mask
04. It is mandatory to arrange sanitizer at the door of the vehicle and inside the vehicle for passengers
05. Driver and co-driver must wear mask, gloves and visor
06. The vehicle must be disinfected on a daily basis
07. Upto 50% above the prescribed rental rate could be collected as travel cost

The Transportation Management Office, Department of Transportation Management and Traffic Police will monitor whether or not these conditions are being implemented.

Nepal Update

Tested
PCR Tested: 8,82,915
Positive: 59,573
Active: 16,241
Deaths: 383

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

Photo: Lok Bahadur Gharti

The queue of individuals who are crossing Jamunaha Border of Nepalgunj for employment in India

Source: https://covid19.mohp.gov.np/#/
Is the new provision of issuing only 25% of the insurance claim applicable only to those who did corona insurance after the new provision was introduced or does it also apply to those who did insurance under the previous provision?

The Corona Insurance Standards 2077 and Corona Insurance Policies have been amended with effect from 29 Bhadra 2077. Therefore, the insurance company has said that if anyone who did the insurance after 29 Bhadra 2077 has to stay in home isolation, then the company will pay 25% of the insurance claim as relief expense to the insured within 7 days. If the infected individual has to be admitted to a hospital, then a maximum of 75% of the amount insured should be paid on the basis of certified bills. However, for those insured before the date, 100% amount has to be issued on the basis of the corona positive report as per the old agreement.

It is heard that all the businesses and transportation are open. But it is also said that the odd-even system in the Kathmandu Valley is still implemented. What does it mean?

The odd-even system will be maintained in the public and private vehicles operating inside Kathmandu Valley. However, the odd-even rule will not be applicable to the vehicles transporting essential services, goods and office staff. Similarly, the odd-even rule will also not apply to the long distance vehicles entering and travelling outside the valley.

Although it was said that the COVID-19 temporary hospitals will be opened at the local units, it is heard that there is not enough human resource. How is the government managing this?

It is said that the human resource can be hired on a contract basis if the existing human resource is not sufficient. If the hospital is established in a primary health care center, the local unit will make a decision to hire additional doctors and staff nurses. The amount of 4 lakh 50 thousand has been disbursed to each local unit to manage the required human resource.

The Province 5 government has said that a COVID special agricultural program has been started. What does this mean?

The program particularly aims to engage young people who have lost their jobs abroad due to corona in agribusiness and increase agricultural production. This program will be implemented in all 109 municipalities of the 12 districts of Province 5. Under this program, a grant of NRs. 20,000 per person will be provided to a total of 10 thousand 9 hundred people at the rate of 100 people from each local unit who have lost their jobs due to COVID-19 including the returnees of foreign employment. Small equipment are also being distributed to 50 farmers at each local level to assist in agricultural production.
Migrant workers in major destination countries

Saudi Arabia
- Nepali population: 334,451
- Infected: 327,551
- Deaths: 11

Kuwait
- Nepali population: 71,193
- Infected: 96,999
- Deaths: 7

Bahrain
- Nepali population: 26,000
- Infected: 62,484
- Deaths: 3

Qatar
- Nepali population: 406,917
- Infected: 122,693
- Deaths: 16

UAE
- Nepali population: 224,905
- Infected: 81,782
- Deaths: 1

OMAN
- Nepali population: 17,057
- Infected: 91,196
- Deaths: 1

Malaysia
- Nepali population: 500,000
- Infected: 10,052
- Deaths: 2

South Korea
- Nepali population: 38,862
- Infected: 22,657
- Deaths: 3

Some new decisions made by the government of Kuwait and Saudi Arabia

**Kuwait**
- You should leave the country if your visa expires after 1 September. If you do not leave the country even after the visa expires, you will be fined.
- PACI Center will now open for 14 hours. One has to go to PACI Center to get the civil ID. If you do not go to receive the civil ID after its printed, you will be fined.
- Along with 32 countries that have been banned from visiting Kuwait for a long time, 3 more countries have been added to the list. Nepal is also among the banned countries.

**Saudi Arabia**
From September 15, people with residency visas, those working here permanently, working in diplomatic missions and other sectors will be allowed to return. However, it has been stated that the flights will fully operate from 1 January, 2021. A complete decision on this regard will be made by the end of this year.

You can listen to our Facebook live at [www.facebook.com/shramik.sanjal](http://www.facebook.com/shramik.sanjal) every Sunday, Wednesday and Friday evening UAE time (8:00 PM), Kuwait (7:00 PM) and Malaysia (12 Midnight).
Follow the Money

Total expenses by the Government of Nepal until Shrawan 2077 to Fight Against Coronavirus

13.37 Billion NRS

**Federal Government**: 36%
**Provincial Government**: 11%
**Local Government**: 45%
**PM COVID Treatment and Control Fund**: 8%

**Expense Headings at the Federal Government**

- **Medicine and Health Equipments**: Rs. 1,755,240,000
- **Health Infrastructure**: Rs. 2,938,896,000
- **Human Resource Mobilization**: Rs. 57,443,000
- **Quarantine Management**: Rs. 46,946,000
- **Other Expenses**: Rs. 12,473,000

**Expense made by Provincial Government**

- **Province 1**: Budget Allocation (Rs. 336 M) vs. Budget Expenditure (Rs. 207 M)
- **Province 2**: Budget Allocation (Rs. 278 M) vs. Budget Expenditure (Rs. 170 M)
- **Bagmati**: Budget Allocation (Rs. 278 M) vs. Budget Expenditure (Rs. 170 M)
- **Gandaki**: Budget Allocation (Rs. 347 M) vs. Budget Expenditure (Rs. 185 M)
- **Province 5**: Budget Allocation (Rs. 231 M) vs. Budget Expenditure (Rs. 106 M)
- **Karnali**: Budget Allocation (Rs. 298 M) vs. Budget Expenditure (Rs. 263 M)
- **Sudurpaschim**: Budget Allocation (Rs. 439 M) vs. Budget Expenditure (Rs. 429 M)
Dr. Bhojraj Bam
Medical Officer
Raskot Community Hospital, Kalikot
“The number of people returning from India was huge. The school was also not allowed to be used for quarantine. We made a tin hut and established a quarantine. We collected and tested the swab of about 1,500 people living there. Out of those, 24 were confirmed of infection. We didn’t send them home until they tested negative. We tested one person up to six times. We even kept the person in quarantine for 65 days. It isn’t that no questions were raised on why a single person was forced to stay in quarantine for so long. But as a result of it, the infection couldn’t spread at the community level.”

Kumari Puja Baduwal
Hospital Nursing Director, District Hospital, Pyuthan
“As most of the delivery cases come to the district hospital, it is not possible to wait for the result of the corona test to begin the treatment of the patient. Such service seekers should be served immediately even by putting our own life at risk. It isn’t known who has the infection and who does not. As a result of it four of my colleagues have also been infected with corona. My 23-month-old daughter also lives with me. As soon I reach home, she comes to hug me. Each time I take my daughter in my arms, I get afraid that I might infect her.

Rajeshwor Prasad Shah
Belahi Health Post, Chakarghatta, Sarlahi
“Currently, the most challenging thing for a health worker like me is the lack of awareness among the service seekers. We take full safety measures but the service seekers come for treatment without even using a mask. We have to do their treatment when they come to the health post. We try to raise awareness among those who come to the health post. We fear that infection might spread from the service seeker itself. Fortunately, infection hasn’t been confirmed so far in Ward no. 2 where I have been working. But also, I have been fully following the safety procedures.”
The path shown by food bank

In the time when the daily life of people are being affected by corona, with the motto of let the ones who have enough offer support and ones who are struggling embrace the support themselves, the food banks are being set up in different parts of the country. This has given some relief to the group which is struggling to make ends meet due to lack of employment and other reasons. Following the similar practice of humanitarian service, food banks have been set up at two places in Nepalgunj- Karkando and Hospital Road.

The Nepalgunj Sub-Metropolitan City has said that it will cooperate with the Food Bank jointly set up by Bas Nepalgunj and Rotary Club of Nepalgunj. The Sub-Metropolitan City has also decided to provide food worth NRs. 5 Lakh to the food bank. Dhawal Shamsher Rana, Chief of the Sub-Metropolitan City, also said that he would contribute one month’s salary and allowance worth NRs. 50,000 to the bank. The Federation of Nepalese Chamber of Commerce and Industry (FNCCI) has promised that it would provide necessary assistance to the food bank.

Immediate assistance is also being provided from those who have enough to those who are struggling. But the question may arise in its sustainable solution. How long will it last? However, its effectiveness will determine its further importance and practicability. This also challenges the government’s controversial process of distributing relief.

Seen in this light, the above example reinforces the conclusion that the partnership between the government and the private sector is the only option in social development. If the government moves forward in partnership with the private sector not just to distribute relief but to create employment for the unemployed, the opportunities can be expanded within the country itself in future by using youth labor and skills and help end the labor market dependency on foreign employment.
The above graph shows the number of COVID-19 cases in different provinces, who are in need of critical care in ICU and ventilators. Bagmati province has the highest number of cases in critical care. The data shows that cases who need critical care are very few in Nepal compared to active cases in the country. However, there is evidence that people who have died were confirmed COVID-19 later. This is the indication that there might be more cases who actually need critical care but have not been identified in time.

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 different people, directly and indirectly, over the past week. 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.