**Nepal COVID-19**

**Cluster Update #14**



3 July 2020

**Overview**

The Government of Nepal (GoN) has extended the lockdown to 22 July. As the lockdown has been eased, authorities are urging people to adhere to recommended health safety measures such as wearing masks in public places and workspaces. The suspension of domestic and international commercial passenger flights has been extended to 21 July. Special permission from the Civil Aviation Authority of Nepal is required for rescue flights, freight flights and flights carrying medical and other essential supplies.

The number of confirmed COVID-19 cases is 14,519, with 31 deaths and 5,320 recoveries. 38,109 people are staying in quarantine centres and 9,168 in isolation centres as of 2 July. The number of persons in quarantine centres has significantly decreased, as alternatives measures such as home/hotel quarantine have been introduced. As of 2 July, around 42,644 persons are staying in quarantine sites, down from 78,639 on 24 June. The COVID-19 Crisis Management Committee (CCMC) has recommended provincial governments to upgrade quarantine centres according to needs and ensure necessary monitoring and facilitation. People arriving in the Kathmandu Valley via air or land who have space to quarantine in their own house can request home quarantine. Local police and ward committee members are tasked with monitoring, and if the conditions are found be appropriate the District COVID-19 Crisis Management Centre (DCCMC) can grant permission for home quarantine.

With the surge in positive COVID-19 cases the focus has shifted to the management of isolation centres, which have come under increasing pressure over the past few weeks. The capacity of the health institutions has not been strengthened to meet the increasing number of COVID-19 patients. MoHP and provincial governments are gearing up for case investigation and contact tracing. Humanitarian partners continue to provide the necessary support.

Repatriation of Nepali migrant workers from Gulf and other countries continues. More than 15,052 people have been repatriated between 5-30 June. Most of the returnees are from Bagmati, Province One and Province Five. On 29 June, the procedure relating to the repatriation of migrant workers using the Foreign Employment Welfare Fund was adopted by the Cabinet of Ministers. This will provide relief to those migrant workers who are unable cover the cost of their travel expenses to return to Nepal. However, concerns regarding the relief and repatriation of undocumented migrant workers who have not contributed to the fund remains.

The monsoon preparedness and response plan has been finalized. The Humanitarian Country Team (HCT) operational group held a consultation with the National Disaster Risk Reduction and Management Authority (NDRRMA) and the Ministry of Home Affairs (MoHA) has organized a discussion among cluster leads and co-leads on monsoon preparedness. According to MoHA, over the past 15 days (since the onset of monsoon) 71 families have been affected, with 22 people killed by landslides and 10 killed by lightning. Local governments have been responding to the needs of people affected by landslides.

**Health Cluster**

As of this week, 14,519 cases have tested positive by RT-PCR for COVID-19, with 31 deaths reported and 5,320 discharged patients. All 77 districts are affected by COVID-19. The testing capacity remains at 23 testing sites this week,

with at least one PCR testing site in each province. There are plans to ramp up testing capacity with 10 additional laboratories in the coming weeks.

Logistic and supply chain management division provided an update at the 13th heath cluster meeting on the estimated available tests based on a 6,000 tests

/day assumption. The available stock of

VTM will last 13.2 days, PCR reagent

32 days and RNA extraction kit 30.4 days. However, if the items in the pipeline arrive on time stocks will be available for 39 days, 88 days and 170 days respectively.

Supplies of PPE and other items are

*As of 2 July 2020*

Total districts affected: 77

Total sites: 23

Total PCR tests done: 233,227 (An average of 5,719 per day in past week)

Total PCR positive: 14,046 (an increase of 3,318 in past week) Total active cases: 10,360

Total discharged: 3,656

Deaths: 30 (6 additional deaths in past week) Isolation beds: 8,598

People in isolation: 10,360

Quarantine beds: 24,2161

People in quarantine: 48,362

forecasted until mid-October (Ashwin), yet there are some clear gaps where partners can support. The e-Logistics Management Information System (eLMIS), while functional at the hospital level, is not fully operationalized and currently does not reflect all logistics received and used at the local levels. Hence, all partners are requested to follow the one door support mechanism that will enable proper reflection in the eLMIS at the central level.

Medicines for 1,000 severe and critical cases were planned and some have already arrived in the country. PPE distributions are completed for the current month, with all highly affected districts directly supplied from the central level. Next month’s supply is also being planned and should be distributed on time. There is significant improvement in the supply chain for logistics, however, gaps in supplies remain due to the nature of the disease and evolving epidemiology.

WHO is supporting National Public Health Laboratories (NPHL) in developing and finalizing 'Interim guidelines for SARS-CoV-2 PCR laboratories in the National Public Health Laboratory Network Nepal'. The guidelines are in the process of receiving approval from MoHP. Technical support has been provided to NPHL in developing an SOP for 'Disinfection of Cold Box/Icebox for carrying COVID-19 sample' and provided support to NPHL in the assessment of a molecular laboratory to perform RT-PCR tests at Nepal Police Hospital, Kathmandu. WHO also provided technical assistance to the Ministry of Health and Population to disseminate “Actions taken by MoHP on suicide prevention in the context of COVID-19” to the National Human Right Commission. Videos and Infographics were released on “Returning to work in ‘The New Normal’”, “Who should wear a medical mask and who should wear a fabric mask?”, and “Stigma and discrimination and COVID-

19” on the WHO Country Office website.

The first batch of mobile phone-based training on COVID-19 for female community health volunteers

(FCHV) was completed with 562 participants. Similar training on COVID-19 for health workers is

ongoing with 515 participants. Support has been provided to the National Health Training Centre (NHTC) to develop training packages on case investigation and contract tracing of COVID-19. Support has been extended to federal and provincial governments to ensure that vaccines and commodities are in place to continue the ongoing National Measles Rubella Campaign without disruption. Over the reporting period the campaign completed in two districts (Dolpa and Humla) of Karnali and ten districts of Gandaki, targeting 158,793 children between 0-59 months (49% boys and

51% girls). The campaign continues in Kanchanpur, Mustang and Kathmandu. Mental health support has been provided to frontline health workers (HWs) deputed in quarantine and isolation centres. This closed group session reached 60 HWs in Province Two. The child and adolescent mental health clinic at Kanti Children Hospital provided clinical and psychosocial management support to 136 children (88 boys and 48 girls aged below 18 years) and 83 parents.  Issues addressed via teleconsultation include therapeutic treatment with medication on psychiatric services and follow-up services to patients.

The Mental Health sub-cluster is facilitating the provincial response to advance mental health support during COVID-19, and currently MHPSS services are available in all seven provinces and more than

50 districts through many major partners in the field. Risk communication and community awareness on mental health are being broadcast through more than 300 radio stations. Tele mental health services were provided to 1,057 people over the past two weeks and psychological first aid was provided to more than 7,000 people. Education, counselling and psychological first aid were provided to 952 community members. In addition, clinical care was provided to 66 people and more than 400 people were trained on psychological first aid and routine mental health care. 42 teachers were oriented on MHPSS and 144 health workers, security personnel and NGO staff were trained on stress management.

Reproductive Health (RH) Sub-Cluster

The preliminary findings of maternal death investigations of the 39 deaths that occurred from mid- March to mid-June, undertaken by the RH cluster, show that the most common causes of death to be obstetric haemorrhage (33%), non-obstetric complications (26%), hypertension (15%), other obstetric causes (13%), unknown causes (10%) and pregnancy-related infections (3%). A small task team is working on recommendations around modifiable factors and notes the need to strengthen maternal and perinatal death surveillance and response (MPDSR) reporting, awareness-raising on pregnancy danger signs, timely referrals and case management, including the availability of essential maternal health medicines for haemorrhage. It is also important to note that risks are exacerbated by the COVID-19 pandemic, lack of transportation, inadequate essential service providers, possible increases in home deliveries and high stock-out of essential maternal health drugs at service delivery points. The roll-out of the interim guidelines on reproductive maternal, neonatal, and child Health (RMNCH) is ongoing – 50 facilitators were trained at the federal level, and the orientation is to cascade to the health facility level. Shortages in the health the workforce have been reported by many provinces, which is having a significant effect on the continuity and quality of RMNCAH services. The RH sub-cluster is working on gathering information on human resource gaps and requirements from provinces, updating the health workforce roster and collaboration with partners, including leveraging private sector partnerships as an interim measure. Regarding helpline services, a total of

904 calls were received this week, predominantly for counselling services (663), followed by referral services (150), and information (91). A survey done in selected communities noted that people are unaware of the available helpline for RMNCAH services, therefore, the need for promotion is deemed important.

**Protection Cluster**

Psychosocial support

Psychosocial support continued to be provided through remote counselling, online platforms, one-on- one counselling, group orientation sessions and deployment of community-based psychosocial community workers (CPSWs). Through these approaches, cluster members reached a total of 7,849 persons (2,894 males, 4,950 females and 5 other gender), 577 in the last week, with one-on-one psychosocial support including psychological first aid and counselling services. Questions about relief assistance, concerns over health and increasing feelings of fear, anxiety and stress from various causes, including exposure to violence, are the main issues raised by callers. Among the total supported, 2,333 were referred for various services (274 for psychiatric consultations, 366 for health services, 351 for legal services, 475 for security services and 867 for other services). Cluster members reached a total of 42,297 persons, 4,827 new participants, including humanitarian actors, community members and those in quarantine sites (19,800 males, 22,415 females and 82 other gender) through group orientation sessions (virtual and face-to-face) and awareness raising activities on stress management and psychosocial well-being in all seven provinces.

Child Protection

A total of 3,865 unaccompanied, separated or other vulnerable children (1,580 boys, 1,702 girls), 874 new cases, were supported with appropriate care arrangements (family reintegration, placement in interim/transit care) and/or other emergency support and relief. Among these, a total of 125 children,

81 new cases, were referred to different services such as health, security and justice. A total of 330 children (7 girls), 19 newly released, who were deprived of liberty in eight child correction homes all over the country have been handed over to their guardians following court orders. The children released were held in pre-trial detention or had been serving correction orders of less than one year.

The cluster provided protection gears (214 Kn95 masks, 63 pairs of gloves, 283 hand sanitizers, 31 litres hand wash, 1,573 pieces of soap, seven sets of PPE and two infrared thermometers) to eight juvenile correction homes with the aim of protecting the children residing there from being infected by COVID-19 and support service continuity by staff members. Cluster members reached a total of

12.3 million young people and parents through messages on online safety (822,000 this week). GBV

The GBV sub-cluster has provided essential life-saving support to GBV survivors and those at risk of GBV through the humanitarian COVID-19 response. A total of 1,963 GBV survivors, including

317 adolescent girls (12 new cases) and 34 older persons (2 new cases) received multi-sectoral support through peripheral health facilities, safe houses/shelters, one stop crisis management centres (OCMCs), legal and psychosocial counsellors and police in Provinces One, Two, Bagmati, 5, Karnali and Sudurpaschim. Rape treatment kits were provided to two OCMCs in Kapilvastu hospital and Provincial Hospital of Butwal (Province 5) respectively to manage the immediate consequences of GBV related cases. 3,564 females (328 girls in quarantine centres) have received dignity, kishori, and hygiene kits in Provinces One, Two, Bagmati, 5, Karnali and Sudurpaschim. 787 service providers and stakeholders (523 females, 264 males) have been trained on providing survivor sensitive GBV prevention and response services. Furthermore, 9,337 persons (6,951 females, 2,386 males; 1,301 adolescent girls, 515 were adolescent boys), were oriented on GBV prevention and response interventions in all provinces. 215,888 persons (95,351 females, 97,367 males) were reached through

messaging on harmful practices including GBV, domestic violence care burden and early/forced marriage. In coordination with the National Women Commission, ‘Shelter Operation Standards during COVID-19’ has been developed and endorsed by the Ministry of Women, Children and Senior Citizens.

Migrants/PoEs

40 frontline workers running shelter homes currently accommodating vulnerable women migrants returned from Gulf countries were provided with capacity building training. The training focused on COVID-19 prevention, home quarantine standards, stigma and fear associated with COVID-19 and migrants, and psychosocial and GBV services. In addition, screening interviews were conducted with

55 vulnerable migrant women returnees from Gulf countries currently residing in designated NGO shelter homes in the Kathmandu Valley. The purpose of the screening interview is to assess needs and risks, make necessary referrals and provide support through immediate cash assistance to meet basic necessities including travel cost to home districts. In total, 287 (49 new cases) vulnerable people (134 females, 153 males which includes 37 girls, 35 boys,10 persons with disabilities and two elderly persons) were supported with transportation services to reach their respective municipalities.

**Challenges**

Limited protective equipment continues to pose a challenge for frontline workers, including in safe houses and health clinics. Efforts are being made by humanitarian agencies to provide protective gear to frontline workers to enable them to safely continue service delivery. Many quarantine, isolation and transit centres are still not maintained as per the standard prescribed in the government’s guidelines, which not only increases the risk of COVID-19 transmission but also increases psychosocial distress. To address these issues, psychosocial support interventions, including stress management, psychosocial first aid and awareness raising, are being provided in such facilities, though service provision remains limited.

**Food Security Cluster**

Food Security cluster partners have distributed food assistance to approximately 256,000 people in over 50 districts in coordination with respective local governments. In addition, UN agencies, sub- national governments, NGOs and volunteer organizations jointly provided cooked meals and water to some 32,000 returnees from India in transit/holding centres in Sudurpaschim and Karnali provinces, as the government stopped unconditional food relief support to daily wage workers in the informal sector and vulnerable people.

More than 1.9 million households were identified by local governments as vulnerable to the secondary impacts of COVID-19. Now, with the easing of the lockdown and resumption of development work, construction, manufacturing and other service sector industries, people are gradually gaining employment in the informal sector. However, seasonal food shortages are common in many parts of Nepal. In addition to daily wage workers in the informal sector, around 500,000 seasonal migrant workers from highly food insecure and poor communities have returned from India and are in urgent need of immediate employment and income to support their livelihoods. June-August is traditionally the agricultural lean season, leading to increased risk of food insecurity. Hence, conditional food assistance in the form of cash for work is a pressing need during this period.

The 2019-2020 school year ended in March and schools all over the country have been closed ever since due to the ongoing health crises. Although schools remain closed, people’s mobility has improved since the lockdown eased in mid-June. Preparations are ongoing to implement take home ration distributions in lieu of on-site school meals from July, in close coordination with the Ministry of Education, Science and Technology by using some 1,469 MT of food (rice, lentil and veg oil) in WFP stock. This one-time take home ration will support both nutrition and home-based education of

173,114 students and their family members (approximately 150,000 households) in Karnali and Sudurpachim provinces, both of which are relatively food insecure and more vulnerable according to a MoALD and WFP published report on the Impact of COVID-19 on Households Livelihoods, Food Security and Vulnerability in Nepal.

WFP has seconded a staff member to the Food Management and Trading Company (FMTC), a government-owned public enterprise and grain reserve, to provide technical assistance to scale-up and expand “Fair Price Shops” in food insecure and geographically remote areas to allow low-income people to access essential food commodities at discounted prices. The FMTC sells rice and other commodities at subsidized prices, as a social safety net for people in food insecure and remote areas. This technical assistance for FMTC is ongoing.

The harvest of maize has been completed in most areas; overall production in Province One is expected to decrease by 3.14% compared to last year due to infestation of fall armyworm (FAW) according to agricultural officials. Paddy plantation for the monsoon season has been progressing well across the country due to adequate rainfall and availability of seeds.

Locust swarms have been observed in various areas across the country over the past few days. The level of infestation and damage is yet to be quantified, but MoALD, FAO and other relevant government authorities are closely monitoring the situation. In various provinces, Ministry of Land Management, Agriculture and Cooperative (MoLMAC) have alerted Agricultural Knowledge Centres (AKCs) and formed a rapid response team to provide information about locusts and control measures for farmers.

**WASH Cluster**

To date, 48 WASH cluster members, including their implementing partners, provided WASH support to a total of 186 health care facilities (including 49 hospitals and 137 health posts, primary health care centres, urban health clinics and community health units), 252 quarantine centres, nine isolation centres, and a number of communities covering 444 municipalities in 71 districts across all seven provinces.

Cluster members continued to provide WASH supplies to health care facilities. An estimated 21,132 people in quarantine centres received support as well as 1,750 people in isolation centres. 49 new toilets have been constructed and nine repaired in quarantine centres as well as four constructed in isolation centres. Further, 130 hand washing facilities have been installed in quarantine centres and one in an isolation centre. Cluster members provided critical hygiene supplies to 46,372 families. These supplies included buckets/water purification tablets to 14,400 families, masks to 6,951 families and hygiene kits to 6,654 families as well as 74,096 soap bars. A total of 634 handwashing stations have been installed at the community level.

**Challenges**

People are increasingly being quarantined at home, meaning WASH behaviours and services need to be assured at the community level which presents a huge challenge for the sector in this context. With limited budget allocations from federal and provincial governments for WASH response to the COVID-19 pandemic, there is a growing challenge for the provincial governments to prioritize WASH related COVID-19 response and support works. Though the monsoon has begun, cluster members and local governments are fully engaged with the ongoing COVID-19 response. They also need to be fully prepared for flood and landslide responses, especially for situations in which available resources have already been exhausted for COVID-19 response.

**Nutrition Cluster**

20 new admissions to outpatient therapeutic care centres (OTCs) of children with severe acute malnutrition (SAM) brings the total children aged 6-59 months with SAM over the past four months to 2,678. The government will resume the National Vitamin A campaign, scheduled for 6 and 7 July, targeting 2.7 million children age 6-59 months across the country. 17 Multi-Sector Nutrition Plan (MSNP) coordinators and 308 MSNP volunteers are supporting 30 districts (308 local governments) to monitor and report on essential nutrition service provision and utilization. With support from cluster members, 47,000 children age 6-23 months and 27,772 pregnant and lactating women received super-cereal in the five districts of Karnali Province. As of last week, 808,501 households were reached with radio messages on nutrition through 165 FM stations, 1,520,989 reached with Infant and Young Child Feeding (IYCF) messages through text message.

**Challenges**

Screening of children for acute malnutrition continues to be a challenge in the COVID-19 context, making it difficult to identify children in need of treatment. Unmet need for masks (50,000) for female community health volunteers grow as the number of COVID-19 positive cases increases across the country. Unmet needs for blanket supplementary food programme for 93,790 beneficiaries (PLW and children 6-23months of age) in 22 priority districts of the Teri that are food insecure, flood prone and worst affected by COVID-19 require 867.29 MT of super-cereal, valued at $1,370,553.00. There exists a current supply gap of therapeutic food for 8,000 children with severe acute malnutrition (8,000 cartons RUTF).

**Shelter Cluster**

Custer partner continue to support frontline workers in Bagmati Province providing support to returnee migrants in shelter homes on issues such as COVID-19 preventive measures, quarantine standards of the Government of Nepal and migrants stigmatization and discrimination, among others. The monsoon response DTM (Displacement Tracking Matrix) questionnaire in the context of COVID-19 has been updated and circulated to all clusters for their input. DTM is a system comprised of a variety of tools and processes designed and developed to track and monitor population displacement during disasters. Integration of open spaces identified in the Bagmati, Gandaki and Province Five into the BIPAD (disaster information management system) platform is ongoing. A mapping of community structures across various provinces that are being used as evacuation centres in the time of disasters is ongoing.

**Early Recovery Cluster**



ER cluster, under the leadership of MoFAGA, is currently gathering inputs on the 4W tracker on costed ER activities and priorities by agency. Inputs will be consolidated into a comprehensive picture to inform coordination going forward. ER activities so far are focused on livelihood recovery and employment generation through off-farm enterprise support, such as vocational trainings and start-up financial support, micro-enterprise development support, provision for a revolving fund through cooperatives, facilitation of agricultural inputs and supporting market linkages for local products. An assessment tracker has been circulated and cluster members are requested to provide details of relevant assessments and surveys that might inform a way forward for the cluster.

**Education Cluster**

Radio learning programs have reached an additional 108,000 children this week, for a grand total of

222,000 children nationwide. Radio programs include grade wise lessons and creative/recreational activities. Education Cluster members distributed 1,112 self-learning materials for pre-primary to grade 3 classes this week, for a grand total of 30,222 in Provinces One, Two, Bagmati, Gandaki, and Karnali. Self-learning materials for grades 4-8 have been finalized for printing and distribution (available [HERE). 42](https://www.doe.gov.np/article/1101/test.html) head-teachers were provided training of trainers on stress management in Gandaki, Karnali, and Sudurpaschim provinces. The trained teachers will run sessions with children to help manage stress in their respective schools. Cluster members reached an estimated 5.3 million people, including persons with disabilities, with awareness messages about education. The Centre for Education and Human Resource Development (CEHRD) has started audio educational programs on Radio Nepal for grades 9 and 10 (schedule [HERE)](https://www.doe.gov.np/article/1087/%E0%A4%B0%E0%A5%87%E0%A4%A1%E0%A4%BF%E0%A4%AF%E0%A5%8B-%E0%A4%A8%E0%A5%87%E0%A4%AA%E0%A4%BE%E0%A4%B2%E0%A4%AC%E0%A4%BE%E0%A4%9F-%E0%A4%AA%E0%A5%8D%E0%A4%B0%E0%A4%B8%E0%A4%BE%E0%A4%B0%E0%A4%A3-%E0%A4%B9%E0%A5%81%E0%A4%A8%E0%A5%87-%E0%A4%B6%E0%A5%8D%E0%A4%B0%E0%A4%B5%E0%A5%8D%E0%A4%AF-%E0%A4%AA%E0%A4%BE%E0%A4%A0-%E0%A4%AA%E0%A5%8D%E0%A4%B0%E0%A4%B8%E0%A4%BE%E0%A4%B0%E0%A4%A3-%E0%A4%B8%E0%A4%AE%E0%A4%AF-%E0%A4%A4%E0%A4%BE%E0%A4%B2%E0%A4%BF%E0%A4%95%E0%A4%BE.html) and virtual classes on TV stations nationwide for grades 1-10 (schedule [HERE)](https://www.doe.gov.np/article/1086/%E0%A4%B6%E0%A5%8D%E0%A4%B0%E0%A4%B5%E0%A5%8D%E0%A4%AF%E0%A4%A6%E0%A5%83%E0%A4%B6%E0%A5%8D%E0%A4%AF-%E0%A4%AA%E0%A4%BE%E0%A4%A0-%E0%A4%AA%E0%A5%8D%E0%A4%B0%E0%A4%B8%E0%A4%BE%E0%A4%B0%E0%A4%A3-%E0%A4%B8%E0%A4%AE%E0%A4%AF-%E0%A4%A4%E0%A4%BE%E0%A4%B2%E0%A4%BF%E0%A4%95%E0%A4%BE.html) targeting an estimated 3.2 million children. CEHRD has also developed an online learning portal to facilitate learning at home for children in pre-primary to grade 10 (link [HERE).](https://learning.cehrd.edu.np/) The online learning portal has more than 18,000 users. The Ministry of Education, Science and Technology (MoEST) released “Distance Learning Guidelines for school children” (link [HERE](https://moe.gov.np/assets/uploads/files/%E0%A4%B5%E0%A5%88%E0%A4%95%E0%A4%B2%E0%A5%8D%E0%A4%AA%E0%A4%BF%E0%A4%95_%E0%A4%AA%E0%A5%8D%E0%A4%B0%E0%A4%A3%E0%A4%BE%E0%A4%B2%E0%A5%80%E0%A4%AC%E0%A4%BE%E0%A4%9F_%E0%A4%B8%E0%A4%BF%E0%A4%95%E0%A4%BE%E0%A4%87_%E0%A4%B8%E0%A4%B9%E0%A4%9C%E0%A5%80%E0%A4%95%E0%A4%B0%E0%A4%A3_%E0%A4%A8%E0%A4%BF%E0%A4%B0%E0%A5%8D%E0%A4%A6%E0%A5%87%E0%A4%B6%E0%A4%BF%E0%A4%95%E0%A4%BE_%E0%A5%A8%E0%A5%A6%E0%A5%AD%E0%A5%AD.pdf)). This includes a guide on continuing teaching and learning through alternative means – radio, TV, internet and self-learning materials as well as roles of different stakeholders. With support from cluster members, MoEST has drafted the school reopening framework. CEHRD, supported by Education Cluster, is drafting a guideline on Early Childhood Development (ECD) facilitators and teachers’ training to facilitate learning in line with “Distance Learning Guidelines for school children”. A total of 600 teachers are trained on ICT to facilitate distance learning from Provinces One, Five, Bagmati, and Gandaki. To ensure learning continuity of the children in quarantine sites, Education cluster is drafting a guideline on education response in quarantine sites. A total of 4,522 schools have been used as quarantine sites across the country. Radio programs for parents on early stimulation and positive parenting are being broadcast on 85 radio stations nationwide.

**Challenges**

Schools being used as quarantine centres creates a risk that schools will have to remain closed beyond the official reopening date to complete quarantine periods and allow disinfection. There is also a lack of disaggregated data on children who require education support in quarantine sites.

**Logistics Cluster**



The fourth WFP air passenger flight landed in TIA, Kathmandu on 1 July. The next flights are scheduled for 15 and 29 July. Two mobile storage units (MSU) were loaned to CCMC on 27 June for six months to be utilised as waiting areas for incoming passengers at TIA. This week the cluster transported two trucks, 3.5 MT each (70 cbm in total) of medical supplies of MD, MoHP to Province One (Biratnagar) and Sudhurpaschim Province (Dhangadi) on 25 June. It transported two trucks, 4.1

MT each (41 cbm) of medical supplies of INGOs to Province Two (Janakpur) and Karnali Province (Surkhet) on 25 of June. The transport service has been expanded from provincial capitals to all district headquarters effective 30 June. To date the cluster has transported approximately 122.4 MT (1224 cbm) of medical cargo. The Department of Health Services (DHS) has procured 250,000 test kits. Lack of international availability of PPE and COVID-19 supplies, potential transport gap of medical supplies (family planning and MCH) from district health stores to health facilities, and a lack of cold chain facilities for storage of vaccines at the central and provincial levels remain gaps.

**Risk Communication and Community Engagement**

Over the past week, RCCE cluster partners reached more than 13 million people with messages on: a) mental wellbeing focusing on depression and suicide, b) handwashing, c) COVID-19 symptoms and preventive measures and d) respect and care for returnees through dedicated radio programmes: “Corona Capsule”, COVID Kura”, “Hello Banchin Amaa” and television programme “Corona Care”.

#SpreadLove Campaign, the joint campaign of United Nations Country Team in Nepal and over thirty national and international organizations reached more than 11 million people through key messages calling for an end to stigma and discrimination against COVID-19 positive people. The campaign recorded over 12 million impressions and over three million engagements on social media. These messages include online and offline messages, social media frames and videos by influencers, among others. The collective press release was picked up by top tier national news agencies.

Community Engagement

RCCE cluster members reached more than 89,657 households (7,514 pregnant women and 25,682 with children below two years) with COVID-19 preventive and emergency nutrition messages through telephone counselling, videos and explainer interviews. 33 community support groups were formed with a total of 165 members (52 females and 113 males) in Sudurpaschim and Karnali Provinces where there is a large influx of returnees from India and abroad.

Community Feedback

RCCE cluster members responded to around 4,500 concerns and questions through radio and television programmes, daily MoHP press briefings and hotlines. Altogether 159,153 individuals and communities’ concerns and questions have been addressed to date. Most questions and concerns are related to the COVID-19 status/numbers in Nepal, testing facilities and symptoms of COVID-19. The majority of concerns and questions have come from Sudurpaschim and Bagmati Provinces.

**Challenges**

Aside from the need to renew the call to physically distance and maintain hygiene, mental health issues are burgeoning within the country, especially among young people. Awareness of COVID-19

symptoms and prevention is high among the general population; however, translating that knowledge into practice has been a challenge due to fatigue and frustration among the general public.

**Inter-Agency Gender in Humanitarian Action Working Group**

The Gender in Humanitarian Action Task Team organised a meeting on Prevention of Sexual Exploitation and Abuse (PSEA) on 25 June. Women staying in quarantine centres in Dang (Province Five) expressed feeling unsafe after the gang rape of a woman in a quarantine centre in Lamkichuha Municipality, Kailali district (June 2020). Women’s groups raised the urgent need to address the absence of monitoring and security mechanisms in quarantine facilities to ensure the safety of women and girls. Women’s groups also report that women are being asked to cook food and clean the quarantine facilities they reside in, a role that men are not being asked to take on. Civil society organisations monitoring quarantine sites in Bardiya district also report that women are feeling unsafe due to the unavailability of proper locks, lack of security personnel (male and female), separate toilets for women and boundary walls around quarantine facilities. Psychosocial counselling services were not provided in quarantine sites. Additionally, no accessibility measures were available in the quarantine centres to address the specific needs of pregnant women and lactating mothers, senior citizens, children, single women or persons with disabilities.

INGO and NGOs report that due to the lockdown they have been unable to ensure the necessary levels of monitoring and assistance to victims/survivors of sexual exploitation and abuse (SEA). A key challenge for victims/survivors is the limited access to support services and law enforcement. It is critical to make available the means of communication on where and how to report cases of SEA as well as measure to handling grievances, investigation and victim support services.

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

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