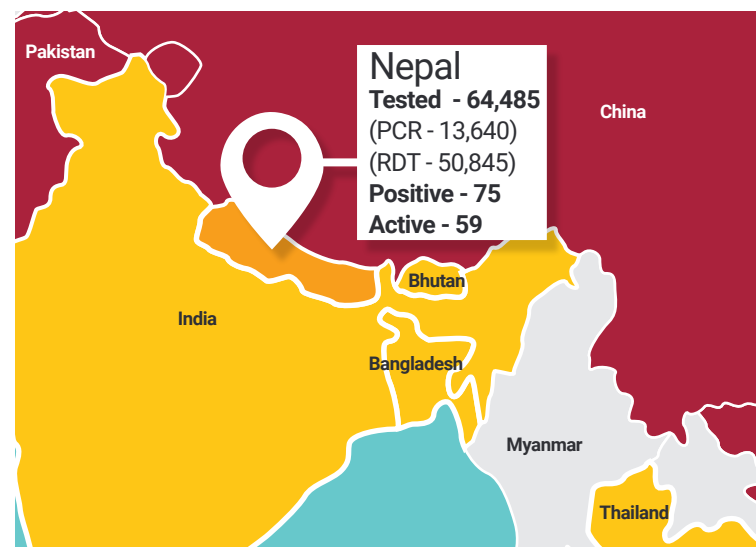


Situations like the coronavirus pandemic quickly lead to misinformation, rumors and fake news, as we saw after the earthquakes in Nepal. We can all play a role in beating the virus by making sure that we are sharing validated information and using trusted sources to inform our decision-making.

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.



Are there senior citizens in your family? How do you prepare beforehand?

- 1 Stay informed about individuals, organizations, service providers, and their networks who can provide support during the time of crisis.
- 2 Keep the numbers of the nearest health institution or ward chairperson safely.
- 3 Stay informed about the nearest ambulance service.
- 4 Remember the hotline numbers **1133** and **1115**.
- 5 Decide the roles to be carried out if someone in the family shows symptoms or gets infected.



[Reflect on the important information mentioned above. Making these preparations will allow your family members to act without confusion during illness.]

Rumors & Facts



We have heard that the government has banned private and non-governmental organizations from creating mobile apps for information dissemination?

The “Disaster Management Information System” is being implemented at the local level by collecting the details related to COVID -19 with the objective of facilitating the district, state, and federal government. Since most of the non-governmental organizations have developed similar software, the government has instructed the concerned bodies to not use such apps and software as it would lead to duplication of resources, variability, and unreliability of information.



It was said that the government would deliver food to houses during the lockdown. Is it real?

Taking into consideration the current dire situation, Salt Trading Corporation Limited is distributing essential food items through mobile service shops also considering the requests from municipalities. In case of necessity in any locality, Salt Trading Corporation Limited can be requested for service.



Is it true that all the hotels will be closed now? How will they manage the employees working there?

Hotel Association Nepal has decided to close big hotels for six months. In the case of employee wages, the government had directed that the hotels could borrow 50% immediately during the lockdown period and the remaining 50% at low-interest loans from banks. However, the Hotel Association has decided to pay only 12.5% of the basic salary to the employees for six months. The Association has decided to terminate those employees who disagree with its decision by informing them as per the Labor Act.



We have heard that the government has decided to loosen lockdown in some places. Is it true?

Although the government has done its homework to formulate the criteria for the current lockdown, it has not yet taken a firm decision. The government has already stated that it will formulate a strategy by determining the area on the basis of health-related data and scientific analysis.

SOURCES OF INFORMATION

[World Health Organization](#) [Ministry of Health and Population](#)

[Do's and dont's](#) [Johns Hopkins Coronavirus Resource Center](#)




[Coronavirus \(COVID-19\) Update, Ministry of Health and Population, Government of Nepal](#)

[Nepal Labour Force Survey Report](#) [COVID-19 Situation](#)



Migrant workers in major destination countries

Saudi Arabia	Kuwait	Bahrain	Qatar	UAE	OMAN	Malaysia	South Korea
352,667 Nepalis	82,630 Nepalis	28,276 Nepalis	437,009 Nepalis	231,088 Nepalis	8,250 Nepalis	469,131 Nepalis	53,691 Nepalis
27,011 Infected	4,983 Infected	3,356 Infected	15,551 Infected	14,163 Infected	2,568 Infected	6,298 Infected	10,801 Infected
4 Infected Nepalis	84 Infected Nepalis	49 Infected Nepalis	2 Infected Nepalis	71 Infected Nepalis		1 Infected Nepalis	

-  Nepali people infected in destination country
-  Nepali population in destination country
-  Infected population in destination country



ShramikSanjal

Launch of #ghar_jana_pau “Lets us go home” campaign by waste workers

Thousands of workers abroad have not been able to return to their home country due to lockdown. Especially to those going through this pain, food and accommodation have become a bigger problem than coronavirus.

- Those who are terminated by the company.
- Those who resigned from their job to return home.
- Those who lost their job due to company closure.
- Those who are asked by their company to return to their home country on unpaid leave and suggested that they will call when work resumes.
- Those who are living on visit visas but their visa has expired and they are facing difficulty in managing food and accommodation due to shortage of money.
- Those who want to return their families to Nepal after the company has deducted their salaries.
- Those who do not have a medical card and can't afford to treat diseases other than coronavirus in the country.

Workers facing such predicament want to return to their home at the moment. Keeping this in view, Shramik Sanjal initiated a campaign with four other organizations (CMIR, LAPSOJ, Equidem Research, Samata Foundation) to pressure the government, and create a conducive environment for the workers to return to their home “Let us go home” #ghar_jana_pau.



\$ Follow the Money

Federal Government

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 2.16B NRS

The total expenditure of Nepal government's activities against Coronavirus

Around 1.5B NRS



Total

Spent

Donors

ADB

60M USD

World Bank

28.7M USD

IMF

130.9M USD

EU

82M USD

Province	Total Amount	Spent Amount	Remaining Amount
Province 1	Around 288M NRS	Around 120M NRS	Around 168M NRS
Province 2	610M NRS	177M NRS	433M NRS
Bagmati	400M NRS	123M NRS	177M NRS
Gandaki	Around 150M NRS	92M NRS	58M NRS
Province 5	236M NRS	126M NRS	100M NRS
Karnali	500M NRS	132M NRS	368M NRS
Sudurpaschim	Around 402M NRS	202M NRS	200M NRS

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.

Waste management in health care settings for infection prevention and control

The Government of Nepal is incorporating the **Healthcare Waste Management Guidelines 2014** published by the Ministry of Health and Population Department of Health Sciences to manage waste produced during the care of suspected or confirmed COVID-19 patients. All the waste during their treatment should be treated as potentially infectious waste.



Some important guidelines for infectious waste management:



- ▶ The person handling the waste should wear appropriate PPE which includes (goggles, face shields, surgical mask, thick gloves, long-sleeved gown, water-resistant apron, and boots)

- ▶ Infectious waste must never be mixed with non-infectious waste to keep the volume of infectious waste as low as possible.



- ▶ Bags and containers for infectious waste should be marked with the internationally approved symbol for infectious waste.

- ▶ Infectious waste should be transported in separate trolleys.



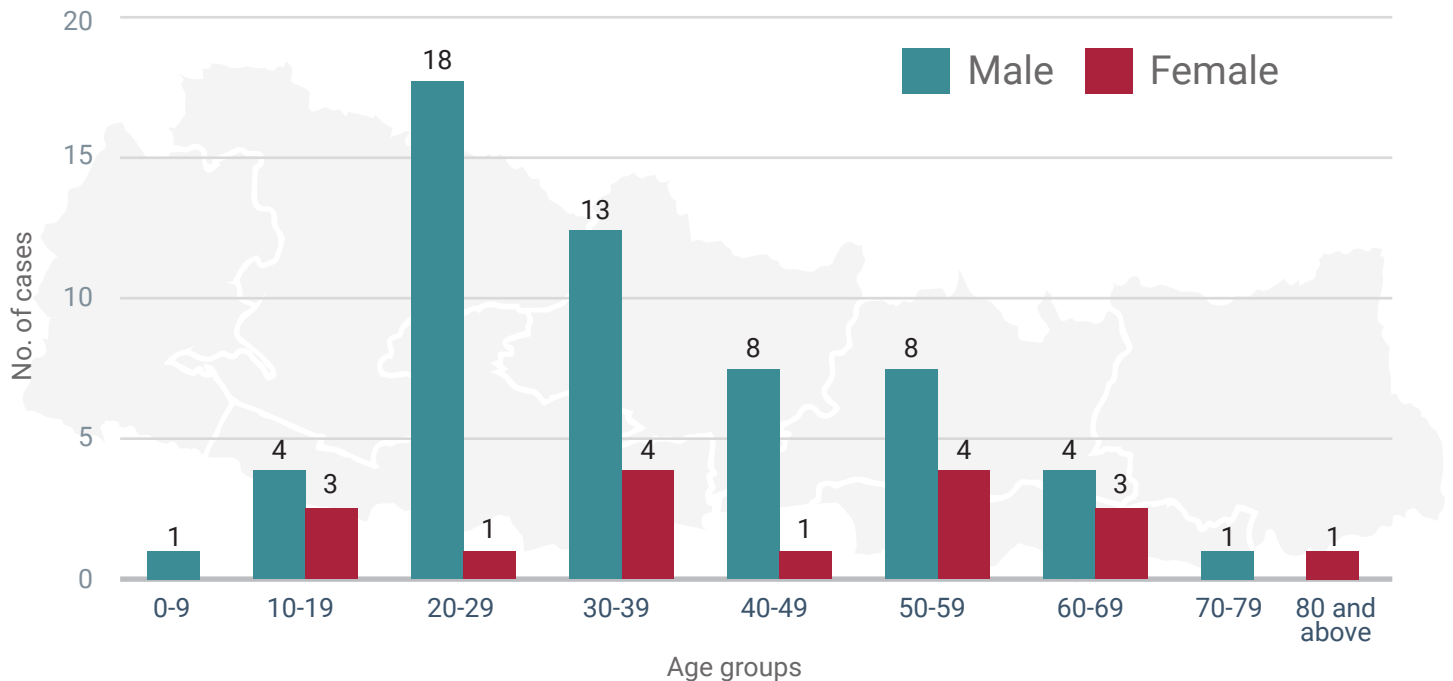
- ▶ The health care waste producer is responsible for safe packaging and appropriate labeling to the waste to be transported off-site and for authorization of its destination i.e. at the landfill site.

- ▶ Infectious waste must be managed by approved treatment methods. Once treated, the waste may be re-classified accordingly for disposal.



- ▶ Autoclaves, chemical disinfection, sanitary landfill, and burial are commonly used for the treatment and disposal of infectious waste.

Age group and genders of COVID-19 confirmed casest



The above graph shows the confirmed cases of COVID 19 in Nepal in different age groups. It is important to note here, that far more males are confirmed (almost three times) than females across all age groups. There are major implications: 1) may be fewer tests are carried out among females in clusters like Udayapur or Banke (Nepalgunj) or 2) since more males are migrant workers community transmission in general, and to females in specific, is less prevalent in Nepal. Either way, looking into the gender domain of testing and confirmed cases is worth looking into. Another important implication to this discussion is, the effort of quarantine might have helped us to limit the spread of the virus as people directly went into quarantine without getting into their homes and community.

Note: This graph includes 74 (out of 75) confirmed cases of COVID-19 in Nepal. The age of one female case from Udayapur district confirmed on 21st April was not available.

The sources of rumors, information and issues presented here are collected from a variety of organizations and individuals including the Ministry of Health and Population, the World Health Organization (WHO), social media and the CivActs team based on their conversations with over 2000 people in April 2020. The issues highlighted are chosen based on prevalence, relevance and potential impact. The information presented here is correct at the time of issue.

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

