



# NATIONAL WOMEN COMMISSION'S INITIATIVES

IN RESPONDING TO AND REDUCING  
GENDER-BASED VIOLENCE DURING LOCKDOWN



INTEGRATED PLATFORM FOR GENDER-BASED VIOLENCE  
PREVENTION AND RESPONSE (SAMBODHAN)

MARCH 24, 2020 - JULY 21, 2020

AUGUST 2020

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## LIST OF ACRONYMS

CDOs	Chief District Officers
CeLRRd	Center for Legal Research and Resource Development
CEDAW	Committee on the Elimination of Discrimination against Women
CMC-Nepal	Centre for Mental Health and Counseling Nepal
COVID-19	Coronavirus Disease
CWIN	Child Workers in Nepal
FEDO	Feminist Dalit Organization
FWLD	Forum for Women, Law and Development
GBV	Gender-Based Violence
IPGBVPR	Integrated Platform for Gender Based Violence Prevention and Response (Sambodhan)
IT	Information Technology
LACC	Legal Aid & Consultancy Center
MoFAGA	Ministry of Federal Affairs and General Administration
MoHP	Ministry of Health & Population
MoWCSC	Ministry of Women, Children and Senior Citizens
NBA	Nepal Bar Association
NDHS	Nepal Demographic and Health Survey
NGOs	Non-Government Organizations
NWC	National Women Commission
OCCM	One-stop Crisis Management Center
PCR	Polymerase Chain Reaction
PSAs	Public Service Announcements
RDT	Rapid Diagnostic Tests
SARS-CoV-2	Severe Acute Respiratory Syndrome Coronavirus 2
SGBV	Sexual and gender-based violence
TPO	Transcultural Psychosocial Organization Nepal
UN	United Nations
UNICEF	United Nations Children's Fund
VAW	Violence Against Women
WCSC	Women, Children and Senior Citizens Service Centers
WHO	World Health Organization
WOREC	Women's Rehabilitation Centre

## Executive Summary

The helpline received a total of 1545 information calls, where 387 of those calls were registered as cases. The helpline also received 1566 follow up calls<sup>1</sup> and 232 linked referrals throughout the lockdown period. The number of information calls was in sharp increase and it could be attributed to the rising panic of the COVID-19 and growing incidents of violence. The lockdown also affected previous survivors already in contact with the helpline, giving rise to the number of follow up calls.

NWC and partner organizations like TPO Nepal, LACC, CWIN, SAATHI, and others provided 778 sessions of psychosocial counseling and 361 sessions of legal counseling. Other services like shelter, psychiatric consultation, rescue, emergency relief, etc. were also provided.

The typology of violence demonstrates that 44 percent of the survivors experienced emotional violence during the lockdown period whereas 27 percent of the survivors reported physical violence. 23 percent of the survivors suffered from economic violence and 6 percent reported suffering from sexual violence. The helpline registered a total of 1267 calls of domestic violence and 306 calls of violence against women during the lockdown period. The calls reporting domestic violence were the highest in Month 4 and Month 3 recorded the highest calls of violence against women.

The helpline noted that Bagmati province had the highest number of calls of domestic violence and violence against women of all the provinces, followed by Province 5 with the second-highest number of calls of domestic violence and Province 2 with the second-highest number of calls of violence against women. Karnali and Gandaki provinces had the lowest number of calls. Bagmati province also had the highest number of cases registered.

The most frequently reported violence is psychological torture (1105), followed by physical assault (819), and economic torture (358). Bagmati province had the most number of calls of psychological torture, physical assault, economic torture, legal document issues, character assassination, etc. recorded among all provinces.

Among the survivors, the highest number of survivors was between the ages of 26 and 40 (47 percent). The highest number of survivors who called the helpline had basic literacy (28 percent), followed by secondary school (19 percent), and SLC (17 percent). 3 percent had an education level above the Bachelor's degree and 6 percent of the survivors had passed the Bachelor's degree. 45 percent of the survivors were from the Brahmin/Chhetri caste group. 71 percent of the perpetrators were the intimate partner or spouse of the survivor.

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<sup>1</sup> During this period the helpline also received calls from survivors with already registered cases and these calls are categorized as follow up calls.

## 1. Background

The National Women Commission (NWC) has been operating 24-hours toll-free helpline “Khabar Garau 1145” since December 10, 2017. Though the helpline was initially planned for four districts – Kathmandu, Lalitpur, Bhaktapur, and Nuwakot – it has become a national helpline and receives calls from all over the country.

The helpline not only provides services to the survivors of the helpline as a response after the incident happens as a part of the Response Mechanism, but it has also aided in preventing the incident of violence. Hence, the helpline can be considered both a Prevention as well as a Response Mechanism. It has also aided in the prevention of suicide through psychosocial counseling and also helped in the rescue. NWC, in partnership with Child Workers in Nepal (CWIN), Legal Aid & Consultancy Center (LACC), SAATHI, Transcultural Psychosocial Organization (TPO) Nepal, and Nepal Bar Association (NBA), has been providing shelter, legal, psychosocial counseling, and children related services.

The coronavirus disease (COVID-19) pandemic is the worldwide pandemic caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)<sup>2</sup>. The World Health Organization (WHO) characterized COVID-19 as a global pandemic on March 11, 2020<sup>3</sup>. A countrywide lockdown came into effect on March 24, 2020<sup>4</sup> and ended on July 21, 2020<sup>5</sup>. The outbreak of COVID-19 severely affected the lives of people around the globe. Worldwide, women and girls were most affected due to the imposed lockdown as most of the essential services required for the survivors were also closed during this time, giving rise to the shadow pandemic<sup>6</sup>.

In Nepal, due to restricted mobility, closed courts, and lack of access to the judicial committees or the police, women at risk of violence had nowhere to turn to report cases. At this point, NWC Helpline 1145 was functional and essential services such as psychosocial counseling and legal counseling were provided through the phone. The helpline was operationalized 24-hours as before the COVID-19 and acted as a medium to connect the survivors to essential services besides facilitating rescue and linking them to relief packages as well, making the helpline an important agency for the at-risk women and girls of gender-based violence<sup>7</sup> and violence against women<sup>8</sup>. NWC continued providing services via phone and also collaborated with partner organizations in providing extended services, mostly counseling, shelter services, emergency relief, and rescue. During this time, the number of calls into the helpline saw a sharp increase as survivors had limited or no access to other agencies receiving the complaints.

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<sup>2</sup> [https://www.who.int/emergencies/diseases/novel-coronavirus-2019/technical-guidance/naming-the-coronavirus-disease-\(covid-2019\)-and-the-virus-that-causes-it](https://www.who.int/emergencies/diseases/novel-coronavirus-2019/technical-guidance/naming-the-coronavirus-disease-(covid-2019)-and-the-virus-that-causes-it)

<sup>3</sup> <https://www.who.int/dg/speeches/detail/who-director-general-s-opening-remarks-at-the-media-briefing-on-covid-19---11-march-2020>

<sup>4</sup> <https://kathmandupost.com/national/2020/03/23/nepal-goes-under-lockdown-for-a-week-starting-6am-tuesday>

<sup>5</sup> <https://www.nepalitimes.com/latest/nepal-ends-covid-19-lockdown/>

<sup>6</sup> <https://www.unwomen.org/en/news/stories/2020/4/statement-ed-phumzile-violence-against-women-during-pandemic>

<sup>7</sup> Sexual and gender-based violence (SGBV) refers to any act that is perpetrated against a person’s will and is based on gender norms and unequal power relationships.

<sup>8</sup> Violence against women is any act of gender-based violence that results in, or is likely to result in, physical, sexual or mental harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life, as defined by the United Nations (UN).

The situation induced by the COVID-19 lockdown was new to all, including NWC, and in the initial days, there were some challenges and technical glitches. However, in the following weeks, NWC enabled for the helpline officers and counselors to carry out their work via phone. To ensure quality services, NWC successfully drafted a protocol<sup>9</sup> on shelter management during COVID-19 approved by the Ministry of Women, Children and Senior Citizens (MoWCSC) on June 19, 2020. NWC played its part in facilitating relief to the survivors and pledges to fulfill its responsibilities in helping women and girls who experienced violence.

The Committee on the Elimination of Discrimination against Women (CEDAW) expressed deep concern about the exacerbated inequalities and heightened risks of gender-based violence and discrimination faced by women due to the COVID-19 crisis and called on State parties to uphold the rights of women and girls and issued a Guidance Note<sup>10</sup> on women's human rights and COVID-19.

CEDAW requested State parties to protect women and girls from gender-based violence, provide sexual and reproductive health as an essential service, and informing survivors about the available alternative accommodation and services, among others.

NWC also prepared Helpline Management Guidance<sup>11</sup> to manage the helpline and the services it provides effectively and safely during the COVID-19 addressing the safety of survivors as well as the service providers on June 10, 2020. Document states that NWC will prioritize case services through calls and focus on providing the psychosocial or legal counseling through phone maximizing the use of remote services.

The Government's directives to the chief district officers (CDOs) to re-impose a prohibitory orders/ week-long lockdown<sup>12</sup> from the midnight of August 19, 2020, until August 26, 2020, due to the alarming rise in the number of COVID-19 cases indicates that it is essential for service providers to closely study the situation during the first four months of lockdown. It has been further extended to September 2, 2020. NWC hopes that this report will contribute and aid the service providers in analyzing the situation for smoother operation in the COVID-19 days. These will also help different stakeholders to plan their programs in the future.

**NOTE:** For convenience, the four months of lockdown period has been categorized into:

**Month 1:** March 24, 2020 – April 23, 2020

**Month 2:** April 24, 2020 – May 23, 2020

**Month 3:** May 24, 2020 – June 23, 2020

**Month 4:** June 24, 2020 – July 21, 2020

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<sup>9</sup> [http://www.nwc.gov.np/Publication\\_file/5ef75a9fd1b3f\\_Protocol\\_on\\_Shelter\\_Management\\_during\\_COVID-19.pdf](http://www.nwc.gov.np/Publication_file/5ef75a9fd1b3f_Protocol_on_Shelter_Management_during_COVID-19.pdf)

<sup>10</sup> [https://www.ohchr.org/Documents/Issues/Women/COVID-19\\_and\\_Womens\\_Human\\_Rights.pdf](https://www.ohchr.org/Documents/Issues/Women/COVID-19_and_Womens_Human_Rights.pdf)

<sup>11</sup> [http://www.nwc.gov.np/Publication\\_file/5eef7a0c54baf\\_Guideline.pdf](http://www.nwc.gov.np/Publication_file/5eef7a0c54baf_Guideline.pdf)

<sup>12</sup> <https://www.recordnepal.com/covid19/kathmandu-to-enforce-prohibitory-orders-from-midnight-wednesday-to-contain-covid-19/>

## 2. Services provided during the lockdown and Findings

### 3.1 Types of Assistance Provided/ Call Details:

The above figure shows the number of information calls, follow up calls, and linked referrals during the lockdown period. The helpline received a total of 1545 information calls, 1566 follow up calls, and 232 linked referrals throughout this period. Month 2 saw a sharp increase in information call, follow up call, and linked referral compared to the Month 1.

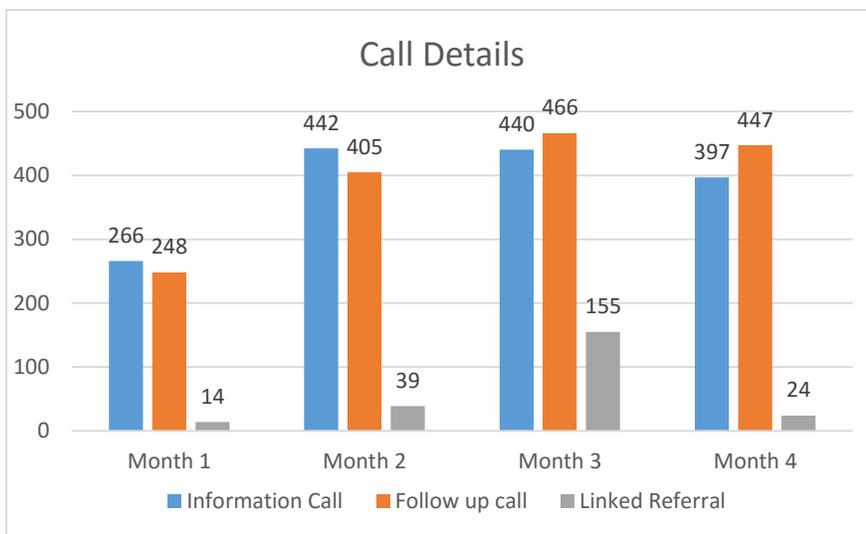


Figure 1: Details of information call, follow up call, and linked referral during the lockdown

The growth in the number of information calls can be attributed to the growing concern and stress regarding the pandemic and its impact on the daily livelihood. The helpline officers reported that aside from inquiry about domestic violence, gender-based violence, and violence against women the callers also inquired about the COVID-19. As a four-digit helpline number, 1145 could have been mistaken for Ministry of Health and Population (MoHP) operated COVID-19 helpline number 1115<sup>13</sup> operated between 6 am and 10 pm.

This period also recorded an increase in follow up calls. It was noted that because of being stuck in the same house (with their abusers), previous survivors, who had already used the services of 1145 helpline before the lockdown, reported repeated abuse. The occurrence of such cases in many numbers could have increased the follow up calls. The number of follow up calls was the largest during Month 3.

The restriction in mobility also compromised the services of the helpline. NWC believes in multi-sectoral approach and has been coordinating with various agencies for providing support and services to the survivors of the helpline. Hence, NWC referred 232 cases to police and other women-related organizations to ensure better treatment of the survivors. This was highest during Month 3.

<sup>13</sup> <https://covid19.moHP.gov.np/#/>

### 3.1.1 Linked Referral

The helpline coordinated and collaborated with various women-related organizations and the police during the lockdown period. These organizations are Manav Sewa Ashram, Women’s Rehabilitation Centre (WOREC), Women, Children and Senior Citizens Service Centers (WCSC), Maiti Nepal, and Center for Legal Research and Resource

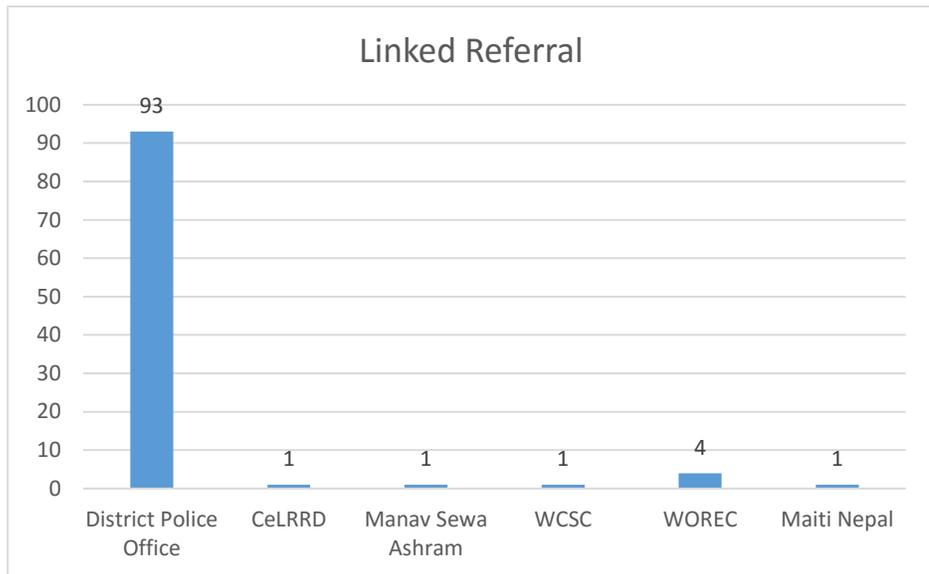


Figure 2: Linked referred organizations

Development (CeLRRd), which are GBV service providing organizations who provide support in different districts for survivors and regularly collaborate with NWC as necessary. NWC is also working with different service provider organizations.

NWC believes in multi-sectoral approach. NWC has been referring cases to different organizations. 93 incidents of violence were referred to the District Police Office for their support and four cases were referred to WOREC for shelter support in different districts. During the referral system, the survivors who were being abused by their spouse or other family members called the helpline, who then informed the local police or the related organizations about their situation for immediate intervention.

### 3.2 Support and Services Provided by NWC and Partner Organizations

During the lockdown period, NWC, in collaboration with partner organizations like LACC, CWIN, SAATHI, and TPO Nepal, along with other organizations provided various services to the survivors. Figure 3 shows the number of partner referrals. TPO Nepal provided 465 case services, the highest number. CWIN and Saathi each provided 157 and 148 case services respectively. LACC provided 20 case services.

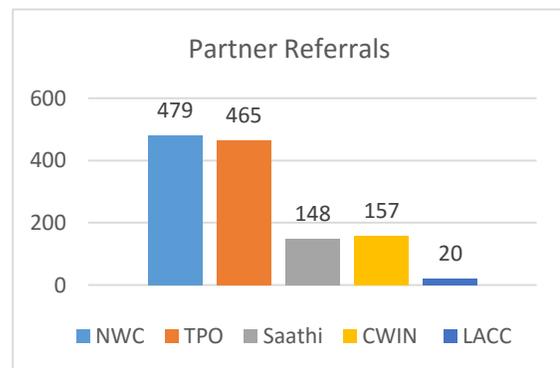


Figure 3: Number of partner referrals

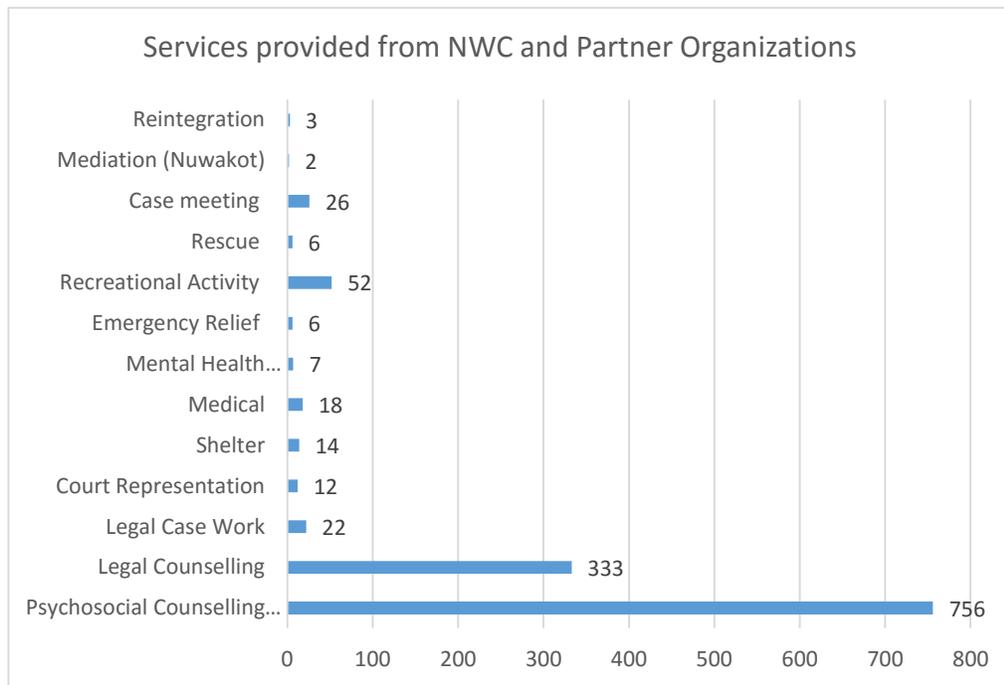


Figure 4: Services provided by NWC and partner organizations during the lockdown

Figure 4 shows that 756 sessions of psychosocial counseling were provided to the survivors, the highest number. This period saw an increase in psychosocial counseling via phone as a lack of transportation services and the need for physical distancing meant that callers had to resort to the available services. Legal counseling,

with 333 sessions, follows psychosocial counseling. Other services provided by NWC and partner organizations are shelter, emergency relief, rescue, mediation, psychiatric consultation or mental health, etc. With a few survivors complaining of lack of food and basic amenities during the lockdown, NWC, in collaboration with organizations or local bodies, also provided emergency relief to six survivors. During this period, some survivors had to be rehabilitated due to extreme abuse at their homes for which, shelter services were also provided. However, shelter services had to be enabled with extreme caution and planning because of the virus. Initially, shelter-providing organization like Saathi sought to have new survivors take polymerase chain reaction (PCR) test, but as the PCR test was extremely difficult to get done, they had to arrange for a separate quarantine facility in available spaces. To ensure best practices amongst the survivors, the shelter also availed of masks, gloves, sanitizers, and non-contact temperature assessment devices like an infrared thermometer and also encouraged physical distancing and regular washing of hands.

### 3. Reported Violence and Its Types

#### 3.1 Typology of Violence

The typology of violence denotes the type of violence experienced by the survivor in a case. NWC registers four types of violence, which are emotional violence<sup>14</sup>, economic violence<sup>15</sup>, physical violence<sup>16</sup>, and sexual violence<sup>17</sup>. Figure 5 shows that throughout the lockdown period, the highest percentage of violence reported by the survivors was emotional violence.

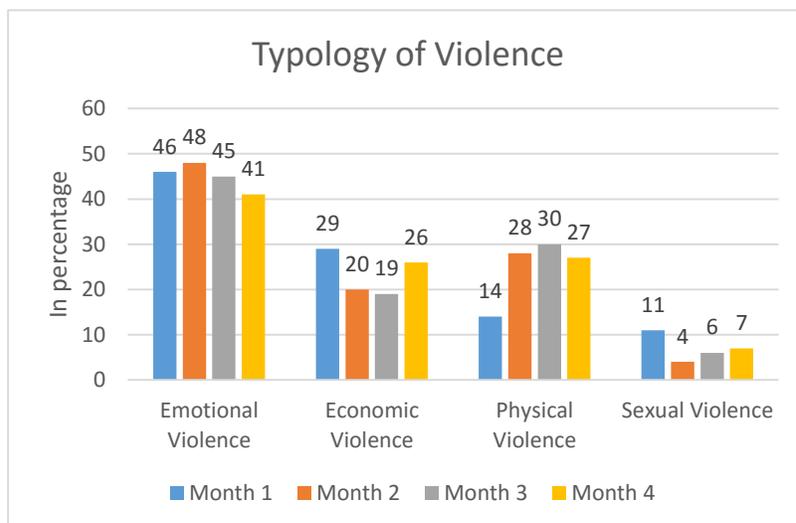


Figure 5: Typology of violence recorded in the lockdown period

In one case received by the helpline during the lockdown, Kiran's<sup>18</sup> husband and mother-in-law

verbally abused her because they wanted her to get involved in domestic work rather than teach at a school. The husband and mother-in-law repeatedly pressured her to give up her teaching job to take care of the house and during the lockdown, things got worse for her as they were physically abusing her as well. After running to the jungle with her five-year-old daughter for safety, she called the 1145 helpline, who then informed the police on her behalf, and provided her with psychosocial support. Often, a survivor might experience a combination of violence, leaving a lasting negative impact on a woman.

In another case, Suman\* had to take refuge at her sister's house despite the lockdown as her husband had been physically and verbally abusing her. But the woman was scared that her husband would start squabbling and beating her at her parents' house, which meant that her family and friends there would know of her husband's abusive behavior, making her feel shame and embarrassment. The fear and shame at the possibility of social stigma troubled her emotionally. Many survivors might not report any kind of violence at all due to the stigma associated with it. Survivors might also not want to file complaints for other reasons. In a report published by WOREC<sup>19</sup> about gender-based violence from the first two months

<sup>14</sup> Emotional abuse or violence includes undermining a person's sense of self-worth through constant criticism; belittling one's abilities; name-calling or other verbal abuse; damaging a partner's relationship with the children; or not letting a partner see friends and family, as stated by the UN.

<sup>15</sup> Economic abuse or violence involves making or attempting to make a person financially dependent by maintaining total control over financial resources, withholding access to money, and/or forbidding attendance at school or employment.

<sup>16</sup> Physical abuse or violence involves hurting or trying to hurt a partner by hitting, kicking, burning, grabbing, pinching, shoving, slapping, hair-pulling, biting, denying medical care or forcing alcohol and/or drug use, or using other physical force.

<sup>17</sup> Sexual abuse or violence also involves forcing a partner to take part in a sex act when the partner does not consent.

<sup>18</sup> Name changed for confidentiality

<sup>19</sup> <https://worecnepal.org/publications/83/2020-06-12>

of lockdown, 30 percent of respondents shared that if others found out about the complaints, it will put them at risk.

During the second month, 48 percent of the callers reported that they experienced emotional violence, the highest number. Being forced to live in closed quarters with the abusers might have led to an increase in the reporting of emotional violence. Besides, it is important to consider that emotional violence could also be the result of other types of violence, like physical and economic. An abused woman might feel a decrease in self-esteem or self-worth, which imperils her mental health. For example, Suman faced emotional torture because she was worried that her husband might do something to compromise her family's honor. However, as the helpline's psychosocial counseling via phone was the most accessible service during the lockdown period, it might have also encouraged the survivors to contact the 1145 helpline. NWC in collaboration with TPO also provided extended psychosocial counseling and psychiatric services and information regarding the same was also disseminated through various radio stations and in different languages.

Throughout the lockdown period, sexual violence made up the lowest number of reportings. Only 6 percent of the total callers throughout the lockdown period reported sexual violence. But this could be due to a number of factors, including lack of reporting mechanism and difficulty in reporting because of being stuck with the abuser. A Jhpiego article<sup>20</sup> writes how the lockdown "promoted and perpetuated an environment of violence", with three rape cases recorded in one week in June at Achham district. The extreme form of sexual violence such as marital rape was also reported during this period.

27 percent of the total callers throughout the lockdown period reported physical violence. The highest number of physical violence was recorded during the third month of the lockdown period, with 30 percent of callers sharing they experienced physical violence. Nepal Demographic and Health Survey (NDHS) 2016 reports that women are more likely to seek help or talk to someone about their experiences of violence when they have experienced both physical and sexual violence and much less likely to do so if they have experienced only physical or only sexual violence<sup>21</sup>.

23 percent of the total callers throughout the lockdown period reported experiencing economic violence. A number of callers shared that they were denied access to food and basic requirements. Economic opportunities ceased for many, especially for people from the marginalized communities, who relied on daily labor to make their living, putting them in a serious financial crisis. At a webinar<sup>22</sup> conducted by Feminist Dalit Organization (FEDO) which discussed the impact of COVID-19 on Dalit women on July 27, 2020, it shared that over 60 percent of its respondents lost their employment due to the pandemic, over 9 percent didn't get salaries from employers, and 6 percent were fired from the job. In Kiran's case, her husband had denied her daily expenditure to teach her a lesson for a year before the lockdown began as she was supposed to earn from teaching. But even as her income was uncertain during the lockdown, her husband and mother-in-law refused to help her out. This shows how abusers withhold resources or necessary amenities to punish or teach a lesson to the survivors, which adds to the trauma a survivor might feel, making them feel more helpless. When a survivor is dependent on the abuser for her survival, it gives the abuser an extraordinary amount of power over her, which can be misused, exploited, and leveraged against the survivor, especially during the pandemic, when access to services enabling a

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<sup>20</sup> <https://www.jhpiego.org/story/nepal-tackles-gender-based-violence-amplified-by-pandemic/>

<sup>21</sup> <https://www.dhsprogram.com/pubs/pdf/fr336/fr336.pdf>

<sup>22</sup> [https://www.facebook.com/FEDONepal/videos/227977415001101/?\\_tn\\_=%2CO-R](https://www.facebook.com/FEDONepal/videos/227977415001101/?_tn_=%2CO-R)

survivor to leave an abusive situation is already restricted. WOREC’s report noted that almost 34 percent of the respondents said that they didn’t know how to file complaints about violence from home whereas 42 percent said that it was difficult for them to register complaints from home. Only 19 percent of respondents shared that they could file complaints about violence.

### 3.2 Forms of Violence

The forms of violence have been generally categorized into violence against women and domestic violence<sup>23</sup> for NWC because it is one of the institutions where a survivor of domestic violence can directly report to besides the Nepal Police, judicial committees and the court. This data helps NWC to see the total number of cases related to domestic violence and violence against women and its impact on the survivors and also to plan the way forward accordingly.

The number of calls of domestic violence and violence against women has been shown province-wise. Cases registered of domestic violence and violence against women are also included below.

#### 4.2.1 Calls related to Domestic Violence during Lockdown

The helpline received a total of 1267 calls related to the domestic violence between the lockdown period of March 24, 2020, and July 21, 2020. The first month of lockdown recorded 119 calls related to domestic violence. The second month received 345 calls, which is almost three times that of the first month, an exponential rise. The rise in the number of calls continued in the following months, with the third month recording 391 calls and the fourth month receiving 412 calls related to domestic violence.

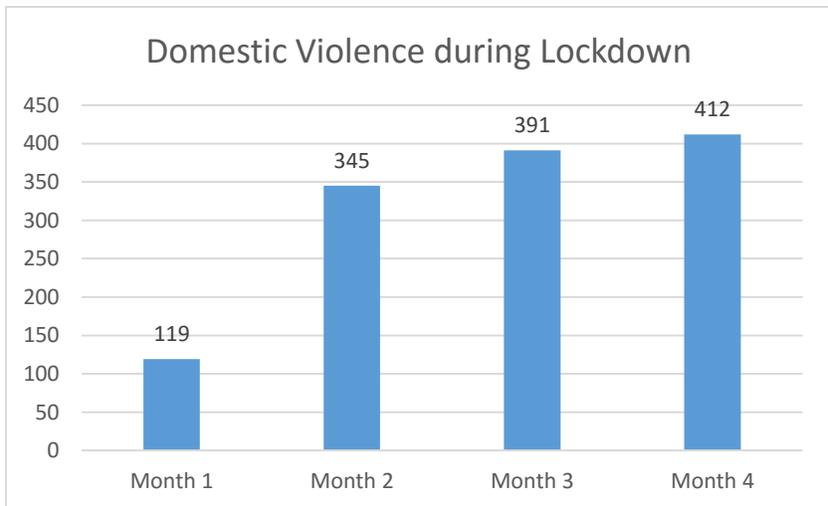


Figure 6: Number of domestic violence calls during lockdown

This rise can be attributed to a few things.

- First, with the rise in COVID-19 cases and continued lockdown, the survivors might have been increasingly in need of psychosocial and related services.

<sup>23</sup> The Domestic Violence (Crime and Punishment) Act 2008 defines domestic violence as any form of physical, mental and sexual and economic harms perpetuated by persons with whom he/she has a family relationship and this would also include any acts of reprimand or emotional harm. Violence against women (VAW) is collectively, violent acts that are primarily or exclusively committed against women and girls. This includes all the cases outside Domestic Violence.

- Second, as media attention was drawn to the shadow pandemic and the potential violence, more survivors might have been aware of the existence of the helpline and been encouraged to report the situation. It can be said that the lockdown opened an avenue for the women to break the silence about the violence they were facing, as previously, with the risk of stigma, many survivors felt forced to put up with their abusers and situations. With no other relief system available, it might have resulted in the rise in the number of calls to the helpline.
- Information about the helpline 1145, as the only national-level toll-free GBV helpline, was widely disseminated by various government and non-government organizations (NGOs) during this period in different medium (radio and online).
- The lockdown left many women, especially pregnant women, helpless with no means to survive. With no one to support with the basic needs and relief package not sufficient to last the duration, many women reached out to 1145 helpline asking to have their basic needs, such as food, fulfilled. Some women even called asking for NWC’s help in managing some kind of relief package, where NWC then contacted the respective ward offices to help the women. The situation was especially dire for those pregnant women who had to fend for themselves after their husbands left them with no clue about their whereabouts.
- Some women had to resort to fleeing from their homes with their children to their parental house after being raped by their husband, which again shows how vulnerable women are during pandemics. As they are forced to stay in the same house with abusive partners due to restrictions in the mobility, it can be assumed that seeking help by reporting to the helpline was one way (or the only way) for them to seek support and cope with such atrocities. Besides shedding light on the vulnerability of these women, it also speaks volumes about the amount of cruelty they must have faced to finally seek support.

#### 4.2.2 Calls related to Violence Against Women during Lockdown

The helpline received a total of 306 calls of violence against women during the lockdown period of four months between March 24, 2020, and July 21, 2020. The first month received 55 calls, followed by 84 calls in the second month, 97 calls in the third month, and 70 calls in the fourth month. The steady rise in the number of calls can be attributed to the same reasons as that of the rise in the number of calls of domestic violence.

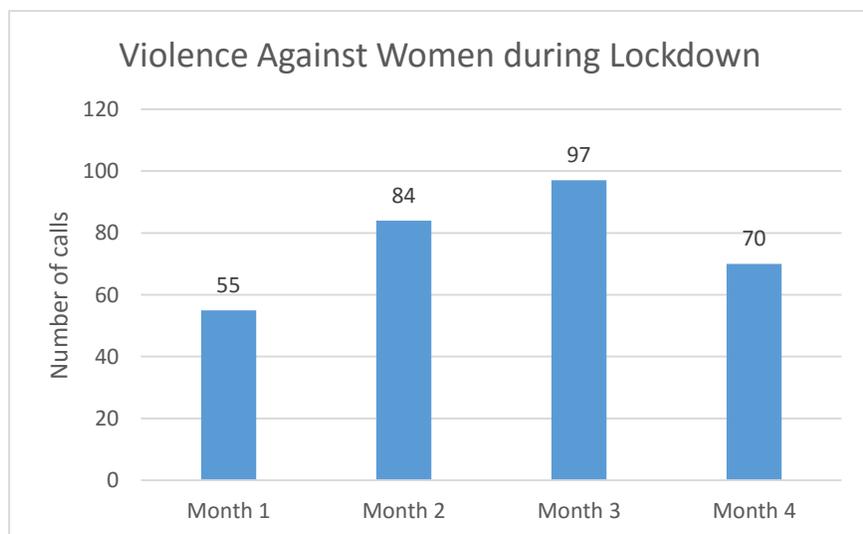


Figure 7: Number of calls of violence against women during the lockdown

### 3.3 Forms of Violence: Province-wise

Figure 8 depicts the number of calls received by the helpline related to violence against women and domestic violence during the lockdown period according to the provinces. The helpline received the highest number of calls of domestic violence and violence against women from Bagmati province, with 101 calls of violence against women and 448 calls of domestic violence. Karnali and

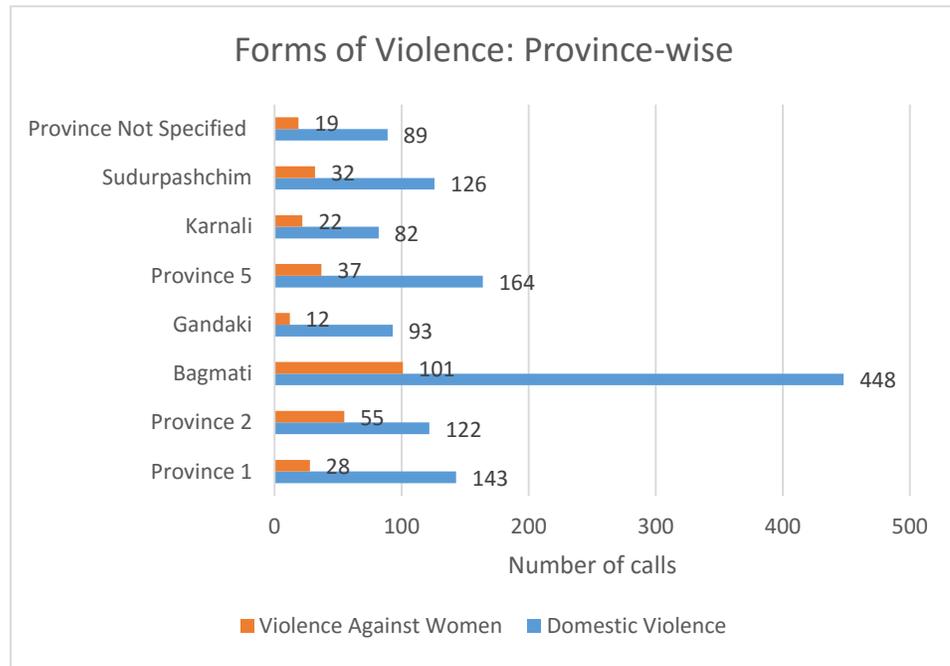


Figure 8: The number of violence against women and domestic violence calls recorded according to provinces during the lockdown period

Gandaki provinces reported the lowest numbers. The helpline recorded 22 calls of violence against women and 82 calls of domestic violence from Karnali province and 12 calls of violence against women and 93 calls of domestic violence from Gandaki province. As the helpline was initially focused on the four districts of Bagmati province, it has the highest number of calls. Throughout the lockdown, various government and non-government organizations along with radio PSAs informed the mass about the helpline and its services, which might have encouraged people from other provinces to report incidents of violence. Before COVID-19, the helpline's service model involved walk-in counseling and face-to-face mediation with the victims and their families, for which, focusing it on four project districts was essential. But as the service model changed to phone counseling, it became much more inclusive, though poor network connection was a disadvantage.

It should also be noted that the category 'Province not Specified' has been included and for the following reasons. First, some callers or survivors are hesitant to disclose their location. Others don't want to give full information and the helpline is careful to accommodate such requests while providing services. Another reason why the number of calls in that category is high is as some calls are made in an emergency, the focus is mostly on solving the problem or managing and providing immediate relief, which leaves little time to get full information. Lastly, some calls get disconnected because of the network issues, before full information can be shared. As far as network issues are concerned, NWC works effortlessly to deal with any issues at the soonest but is aware of the limitations during such situations.

### 3.4 Forms of Violence: Case Registered Province-wise

NWC has classified forms of violence into calls and cases because not all calls convert into cases. Some of the calls might not need direct service from NWC but are referred to other service providers. Other calls are linked with related organizations for effective services. Hence, cases registered according to provinces are shown below:

The figure shows the number of cases registered from each province. A total of 387 cases, including 313 cases of domestic violence and

74 cases of violence against women were registered. The highest number of cases were registered from Bagmati province, with 152 cases of domestic violence and 40 cases of violence against women. Meanwhile, Gandaki and Karnali provinces registered the lowest number of cases. The helpline registered 27 cases of violence against women and 3 cases of domestic violence from Gandaki province. There were 18 cases of domestic violence and 3 cases of violence against women registered from Karnali province.

Overall, NWC registered 12 cases of domestic violence and 8 cases of violence against women in the first month of lockdown. Similarly, the helpline registered 70 cases of domestic violence and 7 cases of violence against women in the second month. In the third month, 93 cases of domestic violence and 32 cases of violence against women were registered. The fourth month saw the highest number of cases registered, with 138 cases of domestic violence and 27 cases of violence against women.

This shows that the number of cases of domestic violence registered at NWC has been steady. While there were challenges regarding case registration in the initial days of the lockdown, it got sorted eventually, which might be the reason why the case registration increased.

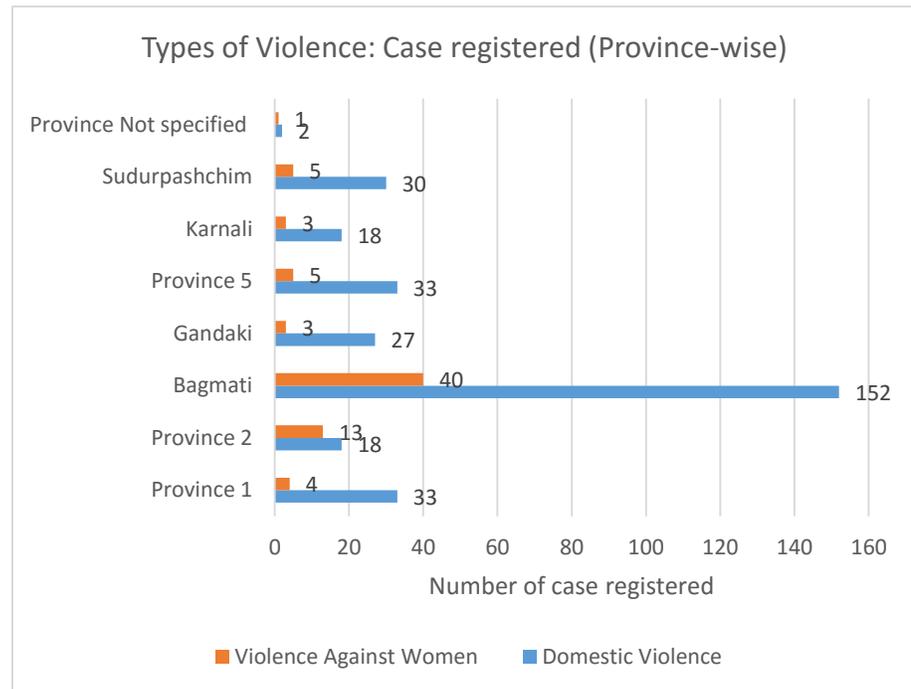


Figure 9: The number of case registered province-wise

### 3.5 Most Frequently Reported Violence

During the lockdown period, the highest number of nature of violence reported by the callers were psychological torture (1105) and physical assault (819), followed by economic torture (358). The number of callers reporting psychological torture almost tripled in the second month compared to the first, a pattern denoted by the overall increasing number. Many of the survivors reported verbal and physical abuse from their spouses and family members. As the lockdown dissuaded the survivors to visit friends and family members who would have provided emotional and psychological support, it made things more difficult for them.

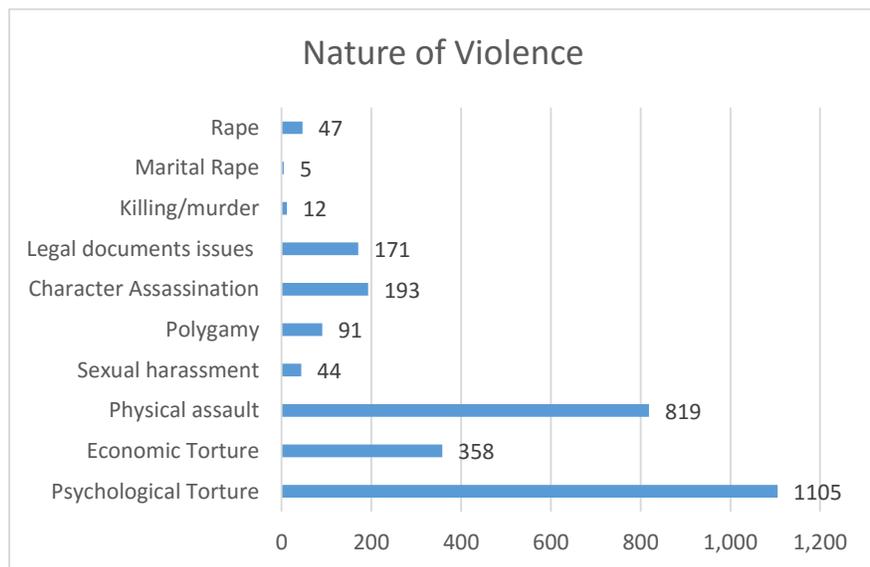


Figure 10: Nature of violence reported during the lockdown period

As the lockdown dissuaded the survivors to visit friends and family members who would have provided emotional and psychological support, it made things more difficult for them.

The lockdown made women with disabilities even more vulnerable. In a case from Sindhupalchowk, Alina's\* husband beat her badly due to which she suffered a temporary disability. NWC coordinated for legal support as she filed for a case against her husband in the police station. As the beating didn't stop, NWC collaborated with the local women's group to have her husband arrested and helped her get safety support from the police. Alina wants to separate from her husband and NWC is providing her with the necessary support for so, as well as psychosocial counseling to help her cope with the trauma brought by the physical violence. The situation proved direr for women like Sapana\* who is a Dalit woman with disability. She came to her parents' during the lockdown after experiencing psychological torture from her husband and in-laws, who wanted a daughter-in-law from a more affluent family. Even after several mediation sessions, as the husband refused to accept Sapana, she eventually decided to get a divorce.

Besides that, other kinds of violence reported are character assassination, polygamy, sexual harassment, and rape. The 1145 helpline also recorded five instances of marital rape during the lockdown period. Furthermore, 171 responses were regarding legal document issues, which means issues regarding marriage registration, birth certificates, citizenship, and property ownership. The breakdown of the instances of nature of violence province-wise can be found in Appendix A.

The table in Appendix A shows that Bagmati province has the highest number of cases recorded out of all the provinces. As mentioned earlier, long-standing outreach and awareness programs could have contributed to the increase in reporting from this province. However, it is important to note that calls have been recorded from all provinces. A comparative understanding of the nature of violence in each province can be found in Appendix B.

## 4. Survivor Demographics

### 5.1 Survivor's Age

NWC has been analyzing the data from various angles. Survivors, who are in the age group between 26 and 40, reported 47 percent of violence, the highest of all age groups. However, this is at least 8 percent less than before the lockdown, as prior to the COVID-19, 55 percent of the survivors between the age group of 26 and 40 reported violence.

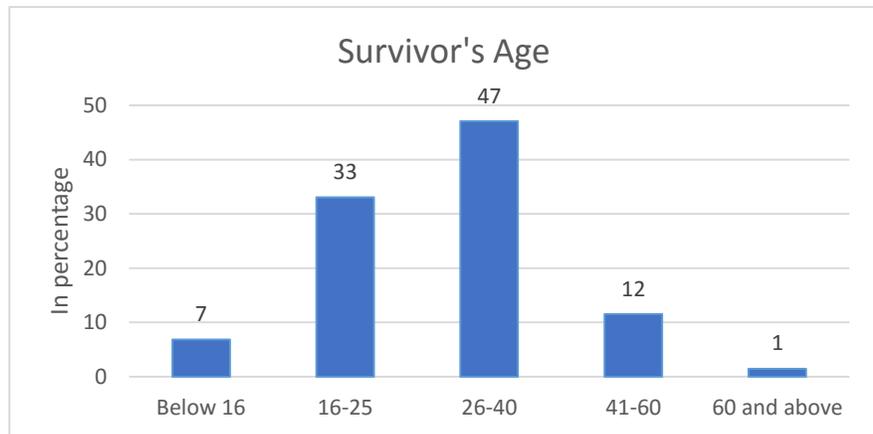


Figure 11: The age group of survivors who reported violence during the lockdown period

Meanwhile, 33 percent of the survivors who reported violence were in the age group of 16 and 25. This is an increase of 10 percent. During January, February, and March 2020, only 23 percent of those who reported violence were in the age group of 16 and 25. This significant increase is concerning. Though the age group between 26 and 40 are considered healthy and strong compared to the rest, the fact that the violence is reported the highest in them is concerning.

The reasons can be as follows:

- As the most active group seeking employment, the survivors of 26 to 40 age group can be considered as the group with maximum mobility, which might mean they are away from home, making them vulnerable and susceptible to more violence.
- It can be assumed that this age group might have the greatest knowledge about the availability of gender-based violence services and service providers, encouraging them to report in case of incidents of violence. Besides, younger survivors might give priority to reporting violence rather than maintaining silence for the sake of the family's name and social honor. If this is the case, then more campaigns encouraging them to speak out against any kind of violence needs to be carried out. Campaigns to dissuade any kind of violence and to prioritize safety and reporting over silence should also be considered.
- Women of this age group might also be tech-friendly or aware of how to reach out to the gender-based violence service providers when they are in need, thus increasing their numbers.

## 5.2 Survivor's Education Level

The figure shows that 28 percent of the survivors who reported violence had basic literacy. 19 percent had finished secondary school and 17 percent of the survivors who reported violence in the helpline had passed SLC. Of all the survivors who reported violence in the helpline, 3 percent had an education level above the Bachelor's degree and 6 percent of the survivors had passed the Bachelor's degree. Most of the time survivors calling the helpline has been referred by a friend or neighbor who has already taken the service from the helpline.

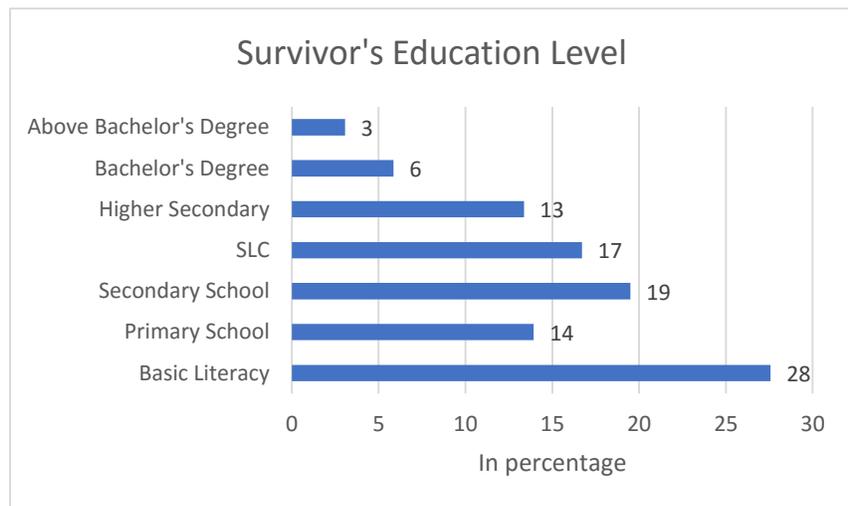


Figure 12: The education level of the survivors who reported violence during the lockdown period

## 5.3 Survivor's Ethnicity:

45 percent of the survivors were from the Brahmin/Chhetri caste group. The reason behind the high reporting of this caste group might be the higher availability of information and access to gender-based violence service and service providers. Ethnic groups like Terai Dalits and disadvantaged non-Dalit Terai caste groups make only 4

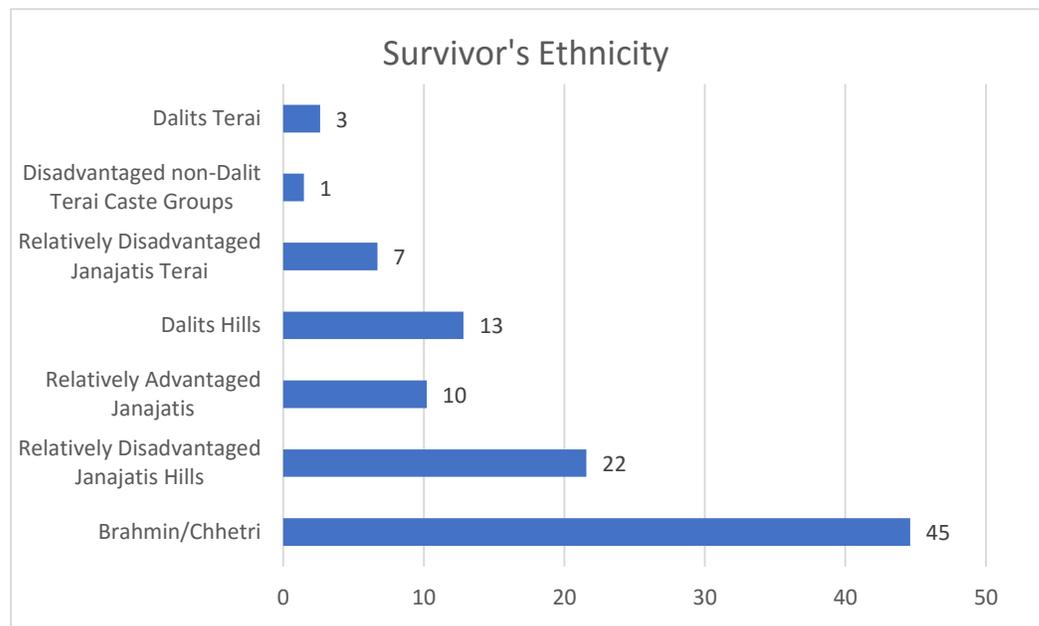


Figure 13: The ethnicity of survivors who reported violence during the lockdown period

percent combined. NDHS 2016 states that abused women in Terai are much less likely than women in hill and mountain zones to seek help. Whether these women live in rural or urban areas might also contribute to whether or not they will seek help, as the NDHS 2016 report says that more urban women have sought

help. Nepal's hilly terrain also affects the connection quality of the calls. The telecom service also plays a huge role in who can contact the helpline service in Kathmandu based on where they live. The data also clearly shows that the dissemination of helpline and decentralization of resources to accommodate the survivors' needs is equally important.

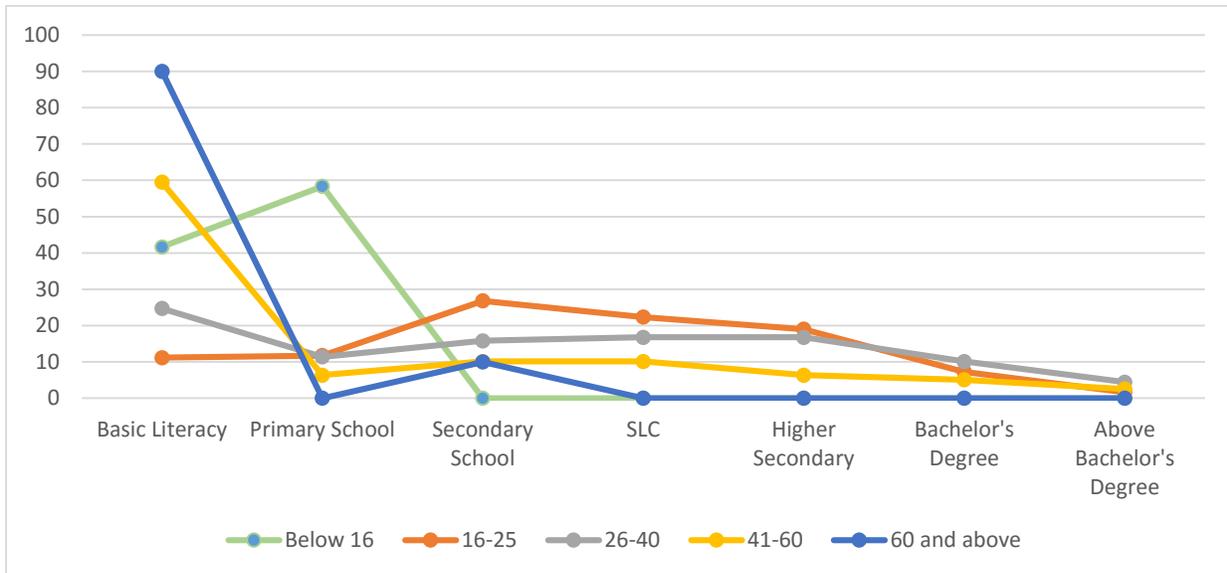


Figure 14: Education-level of survivors

On further analysis, we can see that the education of most of the survivors who have been reaching the helpline from the age group 26-40 is of basic literacy, which is around 25 percent. Hence as stated earlier clients reaching the helpline has been receiving information from their friends, neighbors, or radio stations.

## 5. Perpetrator's Information:

### Perpetrator's Relation to Survivor:

During the lockdown period, 71 percent of the perpetrators were the survivor's intimate partner or spouse. Even before the lockdown period, from December 2019 to March 2020, the helpline recorded that 66 percent of perpetrators were the survivor's intimate partner or spouse. The lockdown has only increased this number.

11 percent of the perpetrators were the survivor's family members other than the primary caregiver and 9 percent of

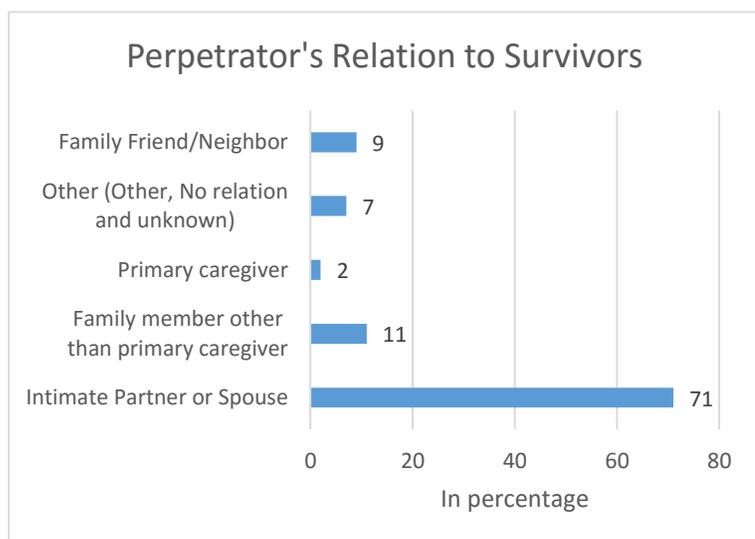


Figure 15: Percentage of perpetrator's relation to survivors

the perpetrators were family friend or neighbor of the survivor. When the perpetrator is the survivor's own family, it becomes even more necessary to address their call at the earliest. In Kiran's case, as she contacted NWC while escaping from her husband and mother-in-law to the jungle with her five-year-old child, NWC's psychosocial counselor encouraged her to find a safe space to stay put. Meanwhile, NWC contacted the police inspector and deputy mayor for intervention and to oversee Kiran's safe shelter. Immediately, the husband was brought to the police station and given a fair warning. The coordination with the local body and police by NWC ensured the safe refuge of Kiran and her child, who didn't have to spend another day at the abusive household.

Soma\* was a street vendor who was physically and verbally abused, which propelled her to attempt suicide. Soma's daughter frantically called the 1145 helpline, who informed the police immediately. This timely intervention saved Soma's life. Once she was out of ICU, her room was checked for any other harmful substance and was given regular psychosocial counseling, along with NWC ensuring an emotional support group for her so that she has someone to fall back on when needed.

In some cases, the survivor's self-actualization can enable her to take control of the situation. When Suman contacted NWC, as she was already in her sister's home, she was provided with psychosocial counseling over several sessions after which she felt confident. She managed to work through stress and the threat of social stigma with the help of the counselor. This gave her a sense of power to face her situation.

However, there are women whose strong resolve and astute understanding of the situation still doesn't change the fact that their partners are abusive. Kiara\* is a Dalit woman whose husband with mental health issues got violent with her frequently. When she contacted 1145, the counselor helped devise a safety plan for her to help deal with the situation at the time being. The counselor advised her on steps to take when the husband tries to harm her and how to reach out to neighbors, while also discussing the long-term plan to get her out of her situation. Kiara was aware of how her husband's mental health issues added another layer of complexity to her situation. As a care-giver, Kiara was also compelled to consider that aspect. So, she shared that if possible, she intended on treating her husband in the near future. If not, she shared, she would separate and no longer put up with the abuse.

Even before lockdown, violence by intimate partners were high but there have been some changes in the mode of the violence. During Before the COVID-19, survivors could move out of the house, go to friends or family easily, but due to restrictions in the mobility, they are trapped inside the house and cannot seek help easily.

One of the survivors shared that before the COVID-19, her husband used to abuse her verbally and physically after the children went to school but since the schools are closed now, she is being abused in front of the children. This humiliates the survivor and might create a harmful understanding of family life, which might have lifelong psychological and other negative impacts on the children. Also, it is essential to note that those women with children who do eventually leave the homes or have to leave because of extreme violence, will also leave the children stranded, as in the case of Kiran. CWIN reports<sup>24</sup> that children of survivors who experienced domestic violence are unable to meet an adequate standard of living. The organization also reported that in the past year, the right to protection of 170 children survivors of domestic or gender-based violence has been addressed.

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<sup>24</sup> CWIN annual report for IPGBVPR project

## 6. Effect of Lockdown on Women and Girls:

The pandemic impacted the lives of people around the globe. But its impact on women across all sectors seem deeper, for example, women health workers run a higher risk of virus exposure as they constitute of most health facility service-staff<sup>25</sup>. Women have lesser job security and overrepresentation in the informal job sector, making them more vulnerable when it comes to job loss. The pandemic also worsened<sup>26</sup> the state of gender inequality, by adding more burdens such as unpaid housework and limiting women to stereotype the role of taking care of children and sick family members. FEDO<sup>27</sup> shared that 64.7 percent of its respondents reported of the burden of household chores. If they are working women, juggling housework along with maintaining work performance can be equally challenging and stressful. Survivors of domestic violence were not able to escape their homes or have access to safe-home shelters or report incidents of violence physically, resulting in a higher number of calls in the helpline. It was worse for women who were already suffering from violence before the lockdown, deepening their trauma.

The management of shelter homes during the lockdown itself was a challenge as there was a problem in the management of medical tests for the survivors. A shelter-providing organization like Saathi sought to have new survivors take PCR tests, but as only those with suspected symptoms got to do the test, they had to arrange for a separate quarantine facility in available spaces. The old and new survivors at the shelter were given counseling for their well-being. Shelter homes had to follow a guideline and at the same time in order to take new survivors, they had to convince the old members that enough precautions would be taken by the shelter home so that they are not affected. Medical treatment for the pregnant was also a challenge because of the restriction in the mobility as all the shelter homes did not have their own vehicles.

During this period, around 500 people committed suicide<sup>28</sup> all over Nepal in the first 50 days of lockdown. In the Sudurpaschim province, 86 people committed suicide, among which, 44 were women. This clearly depicts that emotional violence on women and girls was high during this period. This is further supported

### Fears of a rise in cases of domestic violence due to the lockdown may have come to pass

Although official data says otherwise, anecdotal evidence from helplines and rights organisations report a significant increase in cases of gender-based violence amidst the restrictions.

ADITI ARYAL  
KATHMANDU, APRIL 26

Ever since the lockdown was implemented, 1145, the national helpline to report gender-based violence, has been ringing off the hook, at a rate of around 20 calls every day. So far, in the 30-or-so days since the lockdown began, the helpline has received 521 calls, of which 119 have been specifically about domestic violence.

"On some days, I take up to 15 calls about domestic violence," one helpline operator told the Post on condition of anonymity as she was not authorised to speak to the media. "Just this morning, I attended to a survivor who had to



lock herself in the bathroom of her two-roomed flat in Kathmandu to make the call. The husband, after an unsuccessful attempt to rape her, had dragged her by the hair while verbally abusing her."

The helpline operator counselled both the woman and her husband but since the former did not wish to pursue legal recourse, the operator let the husband off with a warning.

On other days, she counsels women who are terrified making these calls because their perpetrators are in the vicinity.

"After I hang up, I am still apprehensive about

the perpetrators repeating the abuse. Usually, survivors call us when their abusers are not around but now the abusers are around them all the time," she said, reporting that the frequency of calls had increased since the lockdown.

When the lockdown was first instituted on March 24, there were already fears that cases of domestic and gender-based violence would rise, given similar experiences around the world. Now, more than a month into the lockdown, it appears those fears have been realised.

According to Renu Adhikari, founder of the Women's Rehabilitation Centre (WOREC), the frequency of gender-based violence has increased since the lockdown began, drawing on testimonies from survivors and reports from local organisations. WOREC, an organisation working to combat violence against women and children, recorded 83 cases of violence against women in the last three weeks from 13 districts of Nepal.

While organisations working for women's rights like WOREC report an increase in cases of gender-based violence, police reports suggest otherwise.

According to Nepal Police data, the number of reported cases of gender-based violence has decreased drastically nationwide since the lockdown was implemented.

>> Continued on page 5



Figure 16: A still of The Kathmandu Post news article penned by Ms Aditi Aryal published on April 27, 2020

<sup>25</sup> United Nations 2020

<sup>26</sup> <https://thediplomat.com/2020/06/how-covid-19-worsens-gender-inequality-in-nepal/>

<sup>27</sup> [https://www.facebook.com/FEDONepal/videos/227977415001101/?\\_tn=%2CO-R](https://www.facebook.com/FEDONepal/videos/227977415001101/?_tn=%2CO-R)

<sup>28</sup> Factsheet by Forum for Women, Law and Development (FWLD)

by NWC's data as emotional violence or psychological torture was the highest among other types of violence.

The suicide was also high at the quarantine center with the Nepali workers returning from abroad because of the stigma associated with the COVID-19 exposure, says Jagannath Lamichhane, a mental health activist<sup>29</sup>. The Nepalis returning had left with huge loans to pay back. The premature return because of the virus and being stuck at a substandard quarantine center with extremely compromised basic amenities, along with the pressure of being a COVID-19 patient affected their mental health.

TPO records of a case in the Kathmandu valley where a woman attempted suicide by taking rat poison as she was without any support and had to fend for a minor daughter as well. A swift police intervention saved her life and she was supported by the organization along with the police until her health got better. It is to be noted that her helplessness at the situation drove her to make such a drastic decision, which is somewhat similar to Soma's case, who was already worried about her poor finances worsened by the pandemic. Any opportunities these women could have to earn income were put on indefinite hold due to the virus.

Marital rape was reported during this period, which again depicts how unsafe are women in their own homes and from their partners. NWC provided legal support and psychosocial counseling to the survivor.

The Girls' Education Risk Survey<sup>30</sup> conducted between April and June in four districts – Banke, Bardia, Nuwakot, and Tanahun – among 3,992 girls reported that over half of the respondents might not go back to school after they are opened. The survey states that a dramatic loss in income or losing a job in the household and girls not studying at home during the lockdown are some of the reasons. Many of the girls had to help pick up the income loss by participating in work themselves, which might make them vulnerable to trafficking or problems like drug addiction.

Another report<sup>31</sup> by UNICEF Nepal and Sharecast Initiative released on May 2020 shares that 52 percent of the students were not studying at home, only 29 percent had access to distance learning, and 12 percent of the students were involved in online classes. The girls-only figure could be less. It is important to keep students, especially females, at school as the hope of getting an education for a better life was keeping them from getting married young. Child marriage<sup>32</sup> increased during the lockdown, which creates life-long repercussions in a girl's life.

During the lockdown, the number of births in health institutions reduced by half and the number of stillbirths increased to 21<sup>33</sup> per 1,000 births from 14 previously, with experts fearing that the progress achieved in maternal health could be undone because of the pandemic. In an article titled 'The pandemic is intensifying postpartum depression' published on August 5, 2020, Ms Karuna Kunwar, senior psychologist at the Centre for Mental Health and Counseling Nepal (CMC-Nepal), shared that uncertainties caused by the pandemic will further worsen the mental health of pregnant women and new mothers as people follow physical distancing and necessary steps to avoid the virus.

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<sup>29</sup> <https://www.recordnepal.com/covid19/stress-and-suicide-in-nepals-quarantines/>

<sup>30</sup> <https://www.nepalitimes.com/latest/half-of-nepals-girls-may-drop-out-of-school/>

<sup>31</sup> <https://www.nepalitimes.com/latest/covid-19-impact-on-food-and-school-in-nepali-children/>

<sup>32</sup> <https://kathmandupost.com/province-no-2/2020/06/30/child-marriage-goes-unchecked-in-rural-areas-of-the-country>

<sup>33</sup> <https://kathmandupost.com/health/2020/08/13/covid-19-taking-away-nepal-s-achievement-in-maternal-health>

The condition of pregnant women and new mothers were downright poor at the quarantine centers<sup>34</sup>. Though the government made Coronavirus Quarantines Operation and Management Guideline, 2076 (2020)<sup>35</sup> to ensure effective management, lack of human resources and other essentials made things depressing. Also the rising number of cases and deaths had an adverse effect on the mental health of women, and though counseling the stressed-out migrant workers, including the pregnant women, were essential, it was lacking. FEDO<sup>36</sup> also reports that 22.6 percent of Dalit women faced caste and gender-based discrimination in quarantine sites and relief distribution.

Reports of online gender-based violence also surfaced, with women being threatened<sup>37</sup> by intimate partners or strangers to non-consensual sharing of private images on a public platform. Nepal's mild cybercrime laws don't make sure that women and girls are ensured cyber safety, which only makes them vulnerable to virtual attacks.

Thus, the impact of COVID-19 on all aspects is severe for the women. As the COVID-19 cases are increasing, we need to come up with stringent rules and guidelines to make sure that the rights of women are ensured.

## **7. Coordination and Collaboration:**

NWC coordinated and collaborated with various Government agencies such as MoWCSC, and NGOs for providing effective and efficient services to survivors of violence during this period. NWC also advocated for the protection and security of women and girls in different forums and raised awareness. In collaboration with the Nepal Police and the local-level authorities, NWC facilitated survivors in rescue and receiving relief packages. As the fear of COVID-19 infection was high among the new survivors and those in the shelter, with the support of Nepal Police, the new survivors were taken to the hospitals for rapid diagnostic tests (RDT) as well as shelter for shelter-related services.

NWC coordinated and collaborated with the MoWCSC on policy issues. NWC also coordinated with the local governments for facilitating the mobility of survivors in different districts. Along with this, NWC participated in various programs conducted by the government and non-government organizations.

## **8. Drafting of Guidelines:**

The COVID-19 pandemic and ensuing lockdown presented a new situation for all and put women and girls at risk of gender-based violence in a vulnerable position. Because of this, continuity of services like the helpline is important so that women and girls at risk are provided with necessary services. However, it is also essential to ensure that other survivors remain unaffected, which might not be the case because of the highly contagious nature of the COVID-19.

With this in mind, NWC drafted a protocol<sup>38</sup> for the management of shelter homes during COVID-19 – 2077 and conducted meetings with the representatives of organizations operating the shelter homes in

<sup>34</sup> <https://www.recordnepal.com/covid19/stress-and-suicide-in-nepals-quarantines/>

<sup>35</sup> [https://drive.google.com/file/d/1igGRp3ZHY9tOEMakob4nZL\\_DbFY09n2N/view](https://drive.google.com/file/d/1igGRp3ZHY9tOEMakob4nZL_DbFY09n2N/view)

<sup>36</sup> [https://www.facebook.com/FEDONepal/videos/227977415001101/?\\_tn\\_=%2CO-R](https://www.facebook.com/FEDONepal/videos/227977415001101/?_tn_=%2CO-R)

<sup>37</sup> <https://www.hrw.org/news/2020/05/18/nepal-failing-protect-women-online-abuse>

<sup>38</sup> [http://www.nwc.gov.np/Publication\\_file/5ef75a9fd1b3f\\_Protocol\\_on\\_Shelter\\_Management\\_during\\_COVID-19.pdf](http://www.nwc.gov.np/Publication_file/5ef75a9fd1b3f_Protocol_on_Shelter_Management_during_COVID-19.pdf)

order to get their feedback and improvement. Timely endorsement of the protocol by the MoWCSC on June 19, 2020, is a huge achievement for NWC and all the GBV service providers.

NWC also drafted protocols for the health workers and one-stop crisis management center (OCMC) for the protection of survivors of GBV during lockdown and COVID-19 pandemic in collaboration with MoHP. MoHP is currently working on the endorsement of the protocol.

## 9. Information Dissemination:

NWC ran a five-month-long radio campaign between February 13, 2020 (Falgun 1, 2076) and July 15, 2020 (Asar 31, 2076), spreading awareness about various issues such as child marriage, polygamy, gender-based violence, sexual harassment, and violence against women through public service announcements (PSAs) and jingles in three languages – Nepali, Maithili, and Bhojpuri – from Nepali Radio Network, a radio network with 153 community radio stations from seven provinces. 32.8 percent of the respondents in the IPGBVPR endline survey report<sup>39</sup> said that radio was their main source of information about the helpline.

Besides that NWC has been producing a bi-weekly 15-minute long radio program called 'Abaka Mahila' (Today's Women) occurring every second and fourth Thursday of Nepali month on Radio Nepal. The radio program deals with topics like men and women sharing equal household responsibilities and informing about what constitutes sexual harassment and what to do when it happens, in the form of radio drama. It is being aired from Radio Nepal, one of the oldest radio networks in Nepal with countrywide reach.

During the lockdown, NWC also published various informative posts regarding ways to be saved from violence in languages such as Doteli, Nepalbhasa, Maithili, Bhojpuri, Nepali, and English at the initiative of an organization called Counter Culture Nepal<sup>40</sup>.

**लकडाउनमण मौ परिवारमा महिला हिंसा घटौनाकि लेखा**

**तमु मथि हिंसा होइय्या:**

- घरेलु वा महिला हिंसा विरुद्धका हमरा सेवा सब खुलाइछन् बस एक कल फनका भरमा तमरा पाँचमा छु भणिबठि बुझ्या
- ११४५ हेल्पलाइनमा १०० नम्बरमाइ तु फन गरया
- घर भितर हात हतियार वा हात हतियारौनका रूपमा प्रयोग होइसक्या चिजविजनबठे टाढा हुन्यागरि सुरक्षित ठौरको पैचान गरया

**घरेलु तथा महिला हिंसा कम गर्दाकि तम कि गरि सकौन्छौ ?**

- अच्यल त फेसबुक, टवीटर जसा समाजिक सन्जाल वा फोन बठे आफना साथि सिंगि घरपरिवार र छर छिमेकमाइ पहुच बनाया
- आफना घर वरपर गौमण काइ कते यिसा हिंसाका कुरडि था हुन्याज्या तु ११४५ हेल्पलाइन वा १००मा खबर गरदिया

**हमरा घर परिवार र समाजबठे कल झगडा हिंसा जसा काम कुरडिनको अन्त गर्दी**

**मदतकि लेखा सम्पर्क:**

खबर गरया ११४५      आशा क्राइसिस सेन्टर - ९९०११९३०८८

Figure 17: A social media post prepared by NWC in collaboration with Counter Culture Nepal in Doteli language

<sup>39</sup> IPGBVPR Endline Survey Report July 2020

<sup>40</sup> <https://www.photocircle.com.np/initiatives/counter-culture-nepal/>

NWC's digital platforms, consisting of social media like [Facebook](#), [Instagram](#), and [Twitter](#), along with its [website](#), published relevant helpline numbers in collaboration with various governmental and non-governmental organizations. Furthermore, the platforms also shared relevant information, news, and links from MoHP, MoWCSC, and Ministry of Federal Affairs and General Administration (MoFAGA) for quicker and wider dissemination (see Appendix C for more posts sharing important COVID-19 related information and helpline numbers).



Figure 18: A still from an NTV interview of Ms Shanta Adhikari Bhattarai, Secretary of NWC

incumbent Secretary, Ms Shanta Adhikari Bhattarai, gave several interviews in national television, and through the virtual medium (see Appendix D for more news coverage of NWC).

NWC also shared a GBV Service Mapping directory consisting of a list of GBV service providers across the country to enable speedy connection of those in need with the respective organizations. During emergency situations, such a directory could prove extremely useful.



Figure 19: A MoWCSC post sharing 1145 helpline number

With the alarming rise in the number of cases of gender-based violence, the media took a keen interest in the activity of women-related organizations like NWC. Hence, NWC's

## 10. Way Forward

In order to reduce and respond to violence during the time of COVID-19, some of the following measures can be adopted:

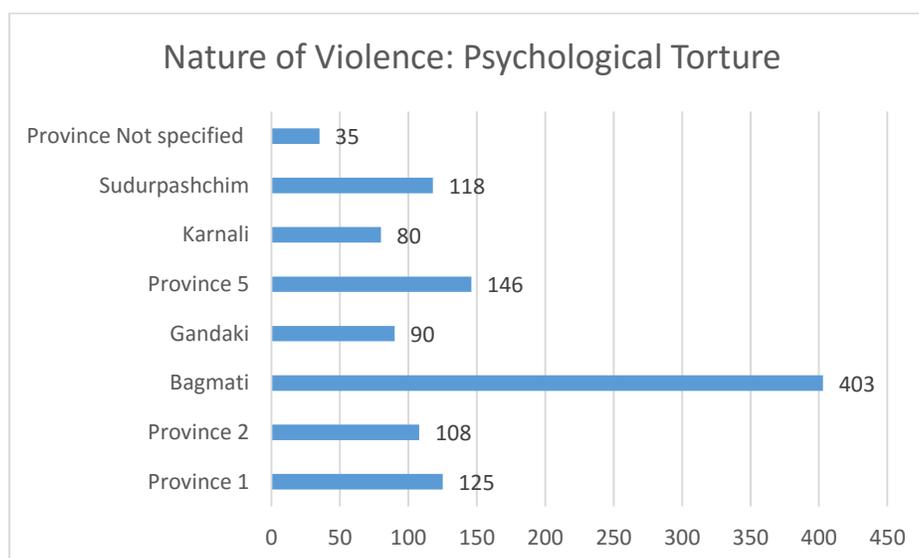
- ❖ Increased collaboration and coordination among the service providers for creating strong referrals (government/ donors/ non-government)
- ❖ Build partnership among essential service providers such as Nepal Police, OCMC, and other government and non-government agencies
- ❖ Mapping of service providers and avoid duplication
- ❖ Wider dissemination of information related to COVID-19 and its impact
- ❖ Facilitate access of survivors to essential services such as health, psychosocial counseling, security, and justice
- ❖ Impact of pandemics on women need to be analyzed from different perspectives, including online education, health, security, etc.
- ❖ Wider dissemination of shelter protocol and other important initiatives by different government and non-government agencies
- ❖ Decentralization of the helpline and other services in the local and provincial-level
- ❖ Encourage service providers to provide remote services such as psychosocial counseling through phone and online medium, where possible.

## Appendix A: Breakdown of the Instances of Nature of Violence Province-wise

	Nature of Violence	Province 1	Province 2	Bagmati	Gandaki	Province 5	Karnali	Sudur-pashchim	Province Not specified	Total
1	Psychological Torture	125	108	403	90	146	80	118	35	1105
2	Economic Torture	41	25	144	26	49	26	35	12	358
3	Physical assault	95	108	275	52	104	50	95	40	819
4	Sexual harassment	7	5	17	3	4	0	7	1	44
5	Legal Document Issues	14	6	72	24	31	11	9	4	171
6	Polygamy	8	2	31	3	22	12	8	5	91
7	Character Assassination	20	19	62	14	33	9	29	7	193
8	Killing/murder	2	3	2	0	0	2	2	1	12
9	Marital Rape	1	1	3	0	0	0	0	0	5
10	Rape	2	4	21	1	5	4	8	2	47

*Table 1: Nature of violence shown province-wise*

## Appendix B: Nature of Violence in Each Province



*Figure 20: Comparison of the number of callers reporting psychological torture in each province*

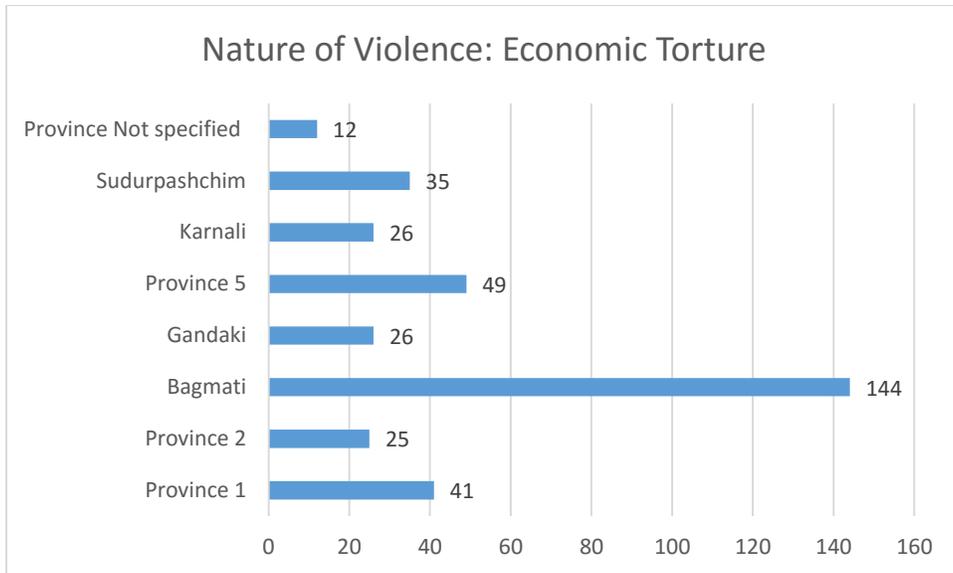


Figure 21: Comparison of the number of callers reporting economic torture in each province

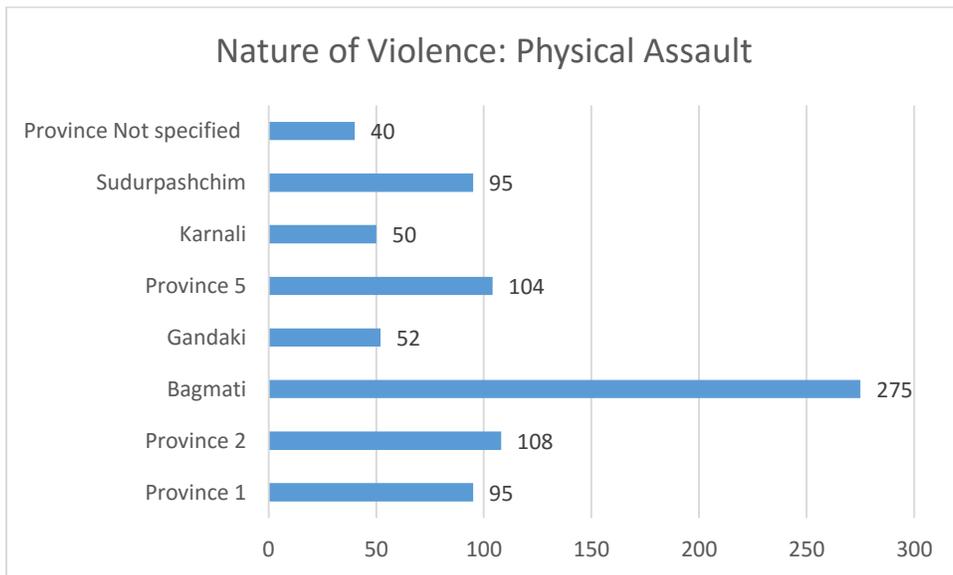


Figure 22: Comparison of the number of callers reporting physical assault in each province

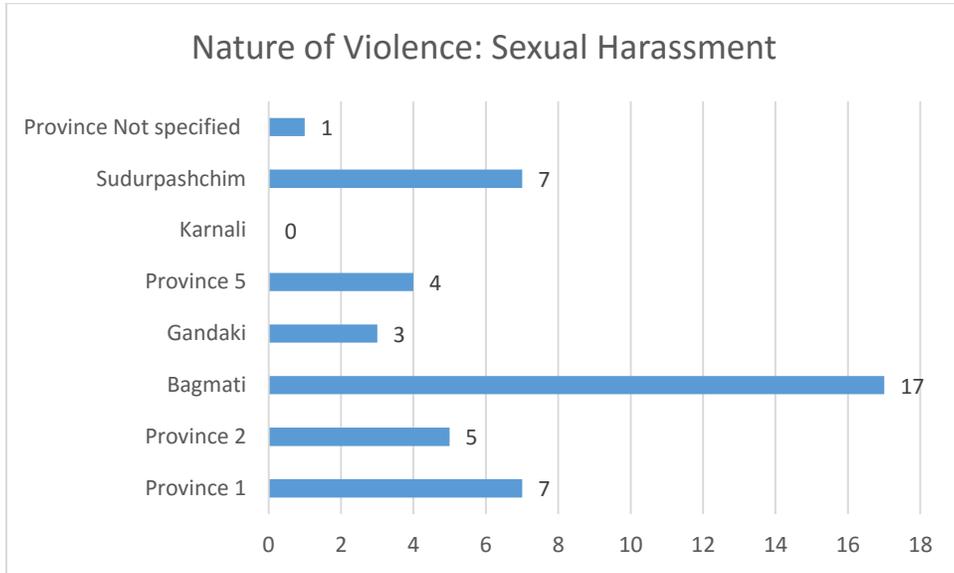


Figure 23: Comparison of the number of callers reporting sexual harassment in each province

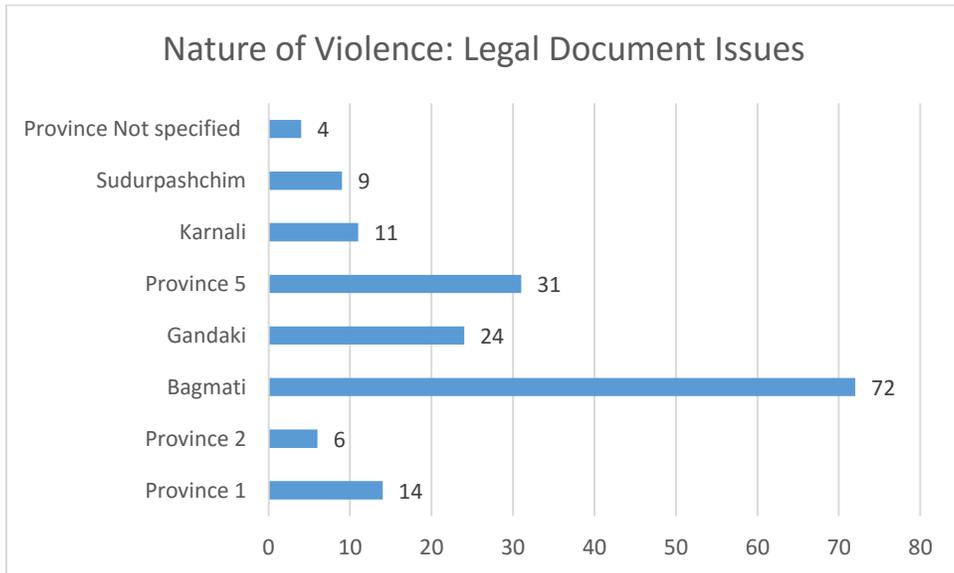


Figure 24: Comparison of the number of callers reporting legal document issues in each province

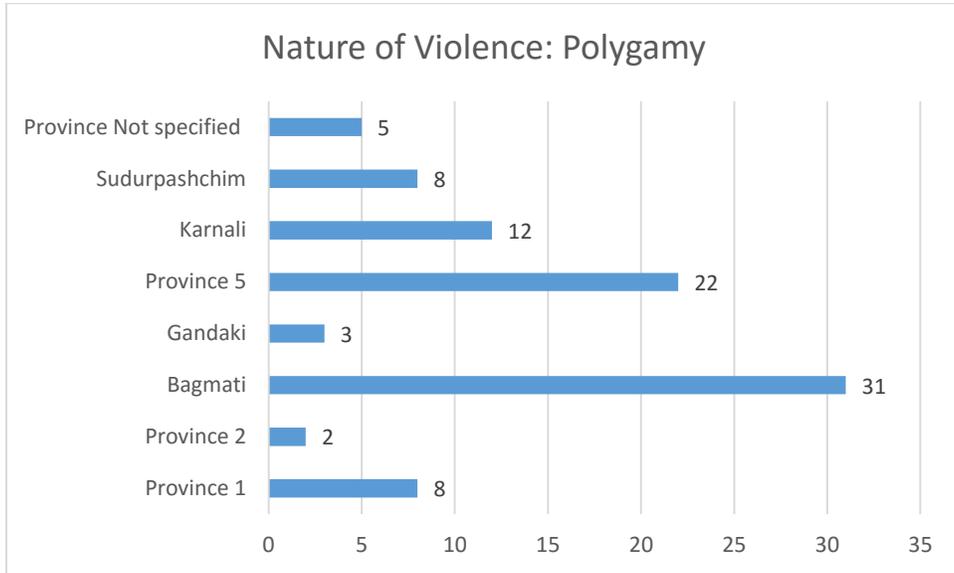


Figure 25: Comparison of the number of callers reporting polygamy in each province

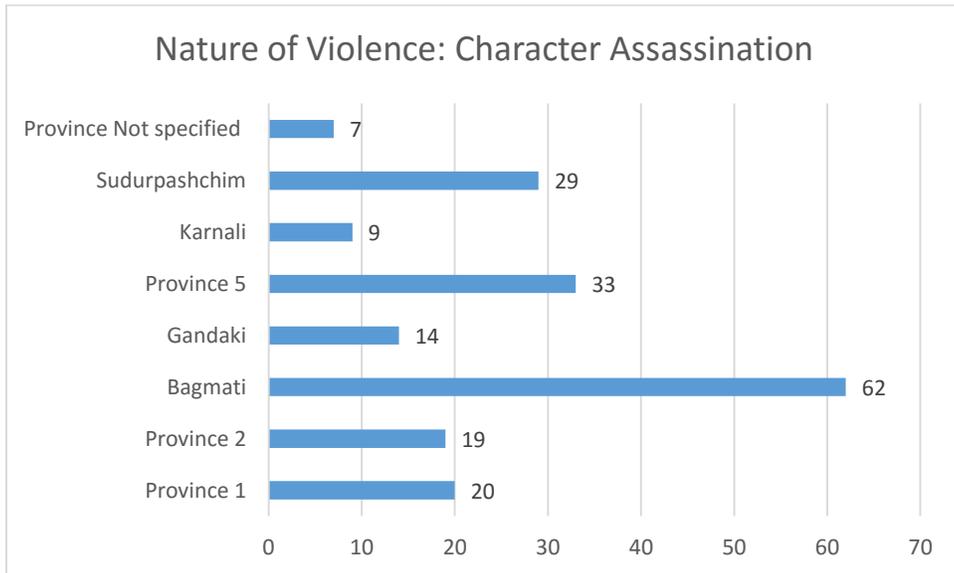
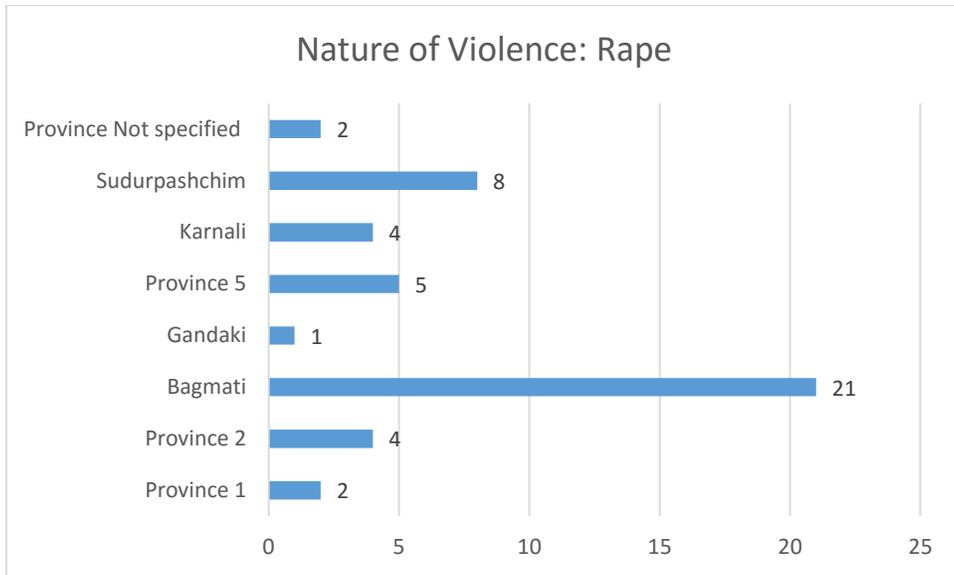


Figure 26: Comparison of the number of callers reporting character assassination in each province



*Figure 27: Comparison of the number of callers reporting incidents of rape in each province*

## Appendix C: Posts Sharing COVID-19 Information and Helpline Numbers

कोभिड-१९ सम्बन्धी प्रश्नहरू भएमा स्वास्थ्य तथा जनसंख्या मन्त्रालयको हटलाइन **१११५ र ११३३**

बालबालिकालाई मनोसामाजिक परामर्श चाहिएमा कान्ति बाल अस्पतालको हटलाइन **९८०८५ २२४१०**

मनोसामाजिक सहयोग चाहिएमा टिपीओ नेपालको टोल-फ्री नम्बर **१६६० ०१ ०२००५**

कुनै धरेलु हिंसा भएमा राष्ट्रिय महिला आयोगको हटलाइन **११४५**

Figure 30: Image Credit - UNICEF Nepal

आफ्नो छरछिमेक वा कहीं हिंसाको शङ्का भए ११४५ वा १००मा तुरुन्त खबर गर्नुहोस्।

**११४५**

**१००**

Figure 28: A still from video produced by CARE Nepal.

### लैङ्गिक हिंसा हुन नदिऔं

कसैलाई शारीरिक, मानसिक, यौनजन्य वा आर्थिक हिंसा गर्नु वा यातना दिनु दण्डनीय अपराध हो। कोरोना भाइरस लगायतका महामारी वा विपदको अवस्थामा कूटपिट, त्रासपूर्ण व्यवहार, गालीगलोज जस्ता विभिन्न खाले लैङ्गिक हिंसा बढ्न सक्छन्।

त्यस्तो हिंसाबाट पीडित हुनु भएको छ वा अरु पीडित भएको थाहा पाउनु भएको छ भने नेपाल प्रहरीको पैसा नलाग्ने **१००** अथवा राष्ट्रिय महिला आयोगको **११४५** मा फोन गरी सहयोग लिनुहोस्।

Protection Cluster Nepal  
संरक्षण समूह नेपाल

नेपाल सरकार  
मौलिक, मानवसिद्धा तथा श्रेष्ठ नागरिक मन्त्रालय

Figure 31: Image Credit - UNFPA Nepal

### आजको सतर्कता भोलिको सुरक्षा

- गर्भवती, सुक्केरी, जेष्ठ नागरिक र अपांगता भएका व्यक्तिका लागि विशेष ध्यान पुर्याउनुहोस्।
- महिलाका लागि अत्यावश्यक रेखाबिंदी प्याड किन्नुभयो? साधानसँगै प्याड पनि किनेर राख्नुस है।

महिला हिंसासम्बन्धी रिपोर्ट गर्नु परेमा महिला आयोगको टोल फ्री नम्बर **११४५** मा सम्पर्क गर्नुहोला।

सुरक्षा खोपी लागेमा, उबरो आइमा र सास फेर्न गाह्रो भएमा तपाईंलाई कोरोना भाइरसको शंका लाग्न सक्छ। टोल फ्री नम्बर ११४५, ११३३ मा सम्पर्क गरिहाल्नुस्।

Figure 29: Image Credit - MoWCSC

### लकडाउनको समयमा गालीगलोज, कूटपिट एवं यौन हिंसाका घटना बढेका छन्।

तपाईं आफै यस्ता घटनाको पीडित हुनुहुन्छ वा अरु पीडित भएको थाहा पाउनुभएको छ भने-

- बोल्नुस्**  
नजिकका साथी, परिवार, आफन्त वा फिन्कीसँग खुलेर आफूमाथिको हिंसाबारे कुरा गर्नुस्।
- उजुरी गर्नुस्**  
नेपाल प्रहरीको **१००** र महिला आयोगको टोलफ्री नम्बर **११४५** मा फोन गरेर घटनाबारे उजुरी गर्नुस्।
- सहायता खोज्नुस्**  
सामाजिक क्षेत्रमा काम गरिरहेका सरकारी वा गैरसरकारी संस्थाले सहायता माग्नुस्।

संघारिकासमेठी  
UNFPA  
Norwegian Embassy

Figure 32: Image Credit - UNFPA Nepal



## मनोसामाजिक सेवा

कोरोना भाइरस लगायतका महामारी वा विपदको समयमा चिन्ता लाग्ने, उदास हुने, डर लाग्ने, भर्को लाग्ने, निन्द्रामा समस्या, खाना खान मन नलाग्ने जस्ता समस्याहरु देखिन सक्छन् । यस कारणले दैनिक जीवनमा कठिनाई भै समस्या भएमा मनोसामाजिक मनोविमर्शकर्तासँग सहयोग लिन सक्नुहुन्छ ।

मनोसामाजिक सहयोगको आवश्यकता भएमा टिपिओ नेपालको पैसा नलाग्ने नम्बर **९६६००१०२००५** वा राष्ट्रिय महिला आयोगको निःशुल्क हटलाइन नम्बर **११४५** वा अन्य सेवा प्रदायकलाई सम्पर्क गरी मद्दत लिन सक्नुहुन्छ ।

Protection Cluster Nepal  
संरक्षण समूह नेपाल

नेपाल सरकार  
महिला, बालबालिका तथा श्रम, शान्ति, नागरिक प्रज्वालना

Figure 35: Image Credit - UNFPA Nepal

## EMERGENCY CONTACTS

 Nepal Ambulance Service 102 Red Cross Ambulance 01-4228094	 Fire Brigade 101	 Police Emergency Call Centre 100 or 1113	 Tourist Police 1144
 Psychosocial Counselling 1660-01-02005 TPO Nepal (Toll Free)	 Suicide Prevention Hotline 1660-01-2223 (PSS) Clinical MH Service	 TUTH Psychiatry Hotline 9849630430 (PSS) Clinical MH Service	 Child Psychosocial Support 9808522410 Kanti Children Hospital
 Central Blood Transfusion Service 01-4288485 01-4288486	 Questions regarding COVID-19 1115 or 1113 MoHP Hotline 1148 Sudurpaschim Province	 Report Incidents of Violence Against Women 1145 National Women Commission Hotline	 Legal Aid Service 9841318201 Advocate Meera Dhungana Forum for Women, Law & Development

Stay Home.  
Stay Safe.  
#StopTheSpread

UNDP  
Development  
Partner of choice

Figure 34: Image Credit - UNDP Nepal



## कोभिड-१९ र लैङ्गिक हिंसा विरुद्ध जनहितमा जारी सूचना

कोभिड-१९ को महामारीको यस स्थितिमा घर बाट बाहिर निस्कन नपाएको अवस्थामा कतै हाम्रो परिवार तथा समुदायमा महिला तथा बालबालिकामाथि हिंसा भइरहेको त छैन ? कतै तपाईंले हिंसा सहि रहनु परेको त छैन ?

सचेत रहनुहोस् !  
यस्तो विषम परिस्थितिमा तपाईं वा तपाईंको परिवार, छरछिमेकमा कसैलाई हिंसा भइरहेको छ भने जतिसक्दो छिट्टै नजिकैको प्रहरी कार्यालय वा १०० मा फोन गर्नुहोस् ।

अथवा खबर गरौं ११४५ मा  
वा नजिकैको एकद्वार संकट व्यवस्थापन केन्द्र भएका अस्पतालमा सम्पर्क गर्नुहोस् ।

यदि तपाईंलाई हिंसाका कारण मनोवैज्ञानिक, मनोसामाजिक वा मानसिक स्वास्थ्य समस्या उत्पन्न गराएको जस्तो लाग्छ भने र सहयोग आवश्यकताको महसुस भएमा टि.पि.ओ. नेपालले सञ्चालन गरेको हेल्थ लाइन अन्तर्गत टोल फ्री नं. **९६६० ०१ ० २००५** मार्फत विहान ८ बजे देखि साँझ ६ बजे सम्म सम्पर्क गरी मनोसामाजिक सेवा लिन सक्नुहुनेछ । यसमा नेपाल टेलिकमको नेटवर्कबाट फोन गर्दा पैसा लाग्दैन । साथै तपाईंका सम्पूर्ण विवरणहरु गोप्य राखी आवश्यक सहयोग पुऱ्याइनेछ ।

हामी तपाईंलाई सहयोग गर्न सधैं तयार छौं ।  
हिंसा सहेर नबसौं ! हिंसाका विरुद्ध आवाज उठाऔं !!

Figure 33: Image Credit - TPO Nepal

## Appendix D: News Coverage of NWC



Figure 36: Coverage by GAN Nepal



Figure 38: Coverage by Radio Mukti 95.5



Figure 37: Coverage by Development Forum

# हिंसापीडितलाई भन्नु पीडा

■ **शिरा राई र फातिमा बानु** (काठमाडौं)

उनी भक्तपुरस्थित डेरामा एकै बनेकी छन्। लकडाउनले गर्दा माइती आन सकिन्न। भान्सामा खानेकुरा सकिदिएकै। राम्रैरी पानीको हेरचाह गर्नुले बेसा पनि बिचार छन्। उनले फोन मार्फत होइन तर सम्पर्कमा आउने चाहिन्छ। पालिने पनि दुःख दिइरहन्थे।

गर्भमा अन्न पनि अक्कसा हुँदैनम भनिने वाला मारोकि उनीले सोचमा मिलाए। आयोगको हेरचाहमा फोन गरिन्। शैक्षानुले हेरे, खाने पाइए भनेपछि हामीले बहाउप्रशस्य समझ राखेर राहत उपलब्ध पारौं। आयोगको हेरचाहमा कार्यकम व्यवस्थापक पलिसा बापले बताइन्।

लकडाउनकै बेसा पनिने तराईमा बटुटाएट गरेको भन्ने गोर्खाचरकी एक महिलाले आयोगमा फोन गरिन्। अतिने उनी नौकै माथीको घरायसी चर्की छन्। लकडाउनपछि पीडित महिलाले आयोगको हेरचाहमा नभए १५४२ मा फोन गरे उनी हिनै भन्न थाले। उनी ११ दिन २३ समय घोरुसिंहका ५२ र महिलासिंहको ३६ लिहाका ११ उजुरी गरेका छन्। चर्कीले हामी प्रधान कार्यालयका

प्रबन्धना दुनियागान कोशीका अनुसार वीरका १४ दिवसा प्रदर्शन ४४ उजुरी परेका छन्। प्रबन्धना प्रदेश १ मा ४, २ मा ७, बागमतीमा १३, गण्डकीमा २, प्रदेश ४ मा ७, कर्णालीमा एक र सुदूरपश्चिममा १० उजुरी छन्।

हेरचाहमा व्यवस्थापक बापका अनुसार लकडाउनले महिला भने हिंसाको परेका छन्। गुनासो आउनेमितिदेखि आयोग कर्मचारी र प्रहरी घटनास्थलमा पुग्न सकिदैनन्। पीडितलाई राख्न उपयुक्त आधारभूत पनि छैनन्। मेडरमा अर्की महिलासहित त मितेरा, बरौट्यादन भएको सेक्टर चाडिबन्ध पुर्या सुविधा भएको सेक्टर छैनन्, उनले भनिन्।

यसले बेसा अयोगमा घोसाएर छलकल गर्न नसकिने भएकाले महिलाहरू पीडा खेपिरहेका बाछ छन्। अहिलेका बन्ध भएकाले मुलाहक अघि बढ्न सकेका छैनन्। नुवाकोटमा पोखरी अयोग लगाएकी महिलाले प्रहरीमा उजुरी गरे पनि अनुमत्यान प्रहरीका अघि बढ्न नसकेको बताउने बताइन्। हिंसाको मानसिक चिकित्सका सुधार आवश्यकतामा पुग्नउने नैसिय रोकाले अयोगले फोनबाट प्रारम्भ गरिने पनि चार जना परामर्शदाताको



समेत व्यवस्था गरेको छ। बागमतीको एक महिलाको हिंसा गम्भीरबन्धु मुद्रा दवाँ गरेकी छन्। लकडाउनमा पीडितका सँगै सन्धय पनि छन्। कसैला उलासई बेचरले मुद्रा फिर्ता लिएर बासत दिन बाँचे। यसले मानसिक पीडा बढेको भन्ने उनले आयोगमा फोन गरिन्। अयोगले उनलाई स्थानीय स्थानिक मनोविज्ञान समन्वय गरिदियो। १३ दिवसा अघिको २२ जनालाई फोनवाटै मनोसामाजिक प्रारम्भ गरिएको छ। हेरचाहमा बेसा चौकीले घण्टा बुझ्न गरिएको छ। मनोसामाजिक

प्रारम्भ विधान ८ देबि केवली ६ बनेसम्म र कानुनी प्रारम्भ विधान १० देबि केवली ४ बनेसम्म दिइन्छ। लकडाउनमा उजुरी लेने, छलकल र अनुसन्धान अघि बढाउन नसकिने भएकाले आयोगले लकडाउनको जोडिम स्थानीयकरण गर्न प्रहरी र स्थानीय सरकारसँग समन्वय गरे आएको छ।

घरेलुहिंसा र मानसिक स्वास्थ्यसँग जोडिएको विषय भएकाले आयोगले बहामाजकी तथा सामाजिक सेवा (टीवीसी नेपाल) सँग समन्वय गरेर हिंसापीडित महिलासँग मनोपारामर्श गर्ने गरेको छ। मनोचिकित्सक तथा टीवीसी नेपालका कार्यकर्ता निर्देशक डा.कमल गौतमका अनुसार लकडाउनले परिपक्वी हरकतमा हरेर टाउटोमा हुँदा नासा कुनसा बिचार र केकमहा हुने गरेको घटना पाइएका छन्। दिवहू हुने किचलोले महिलामा मानसिक समस्या सिनिने उनले बताए। मानसिक र माथै नभएर महिलासँग शारीरिक हिंसा पनि भएको छ। उनले भने, 'कसैले पीडितदेखि मानसिक राका विरामीको समस्या अर्को बढाएको छ।' लकडाउनका कारण उजुरी लेने र स्थानिक हिंसा नबुझ्न महिला शिरका धेरै घटना घटिने सुनेको हुन सक्ने उनले बताए। 'घरेलुहिंसाको घरायसी

महिला घरमा नभनी हामीसँग परामर्शका लागि आउनुभन्थो, १८ बनेको जैबि नै सेवक गरिहनु भएको थियो।' उनले भने, 'घरायसी उपचार र मनोपारामर्श लिने महिला पढेको पनि जान्न समस्यामा पर्नाभएको छ।'

लकडाउनका कारण अन्य मुद्दाका ४० प्रतिशतले महिलासिमा बढेको अन्तराष्ट्रिय मान्छे माछामले भनिइएका छन्। लकडाउनमा घर बन्ने, मरुपान गर्ने परिचयमा महिलासँग हिंसा बढ्ने हुने मनोचिकित्सक डा. निर्मा बाबु बताइए। 'पालिने मान्छेका आधारमा हिंसा, बेचका सँगै घर आउने।' उनले भने, 'बिचार गर्ने फुन्दै हुने, अतिने फुन्दै हुँदा नासा कुनसा बिचार हुने सक्ने गर्दा महिला र घरेलु कामदार मानसिक लडाइमा छन्।' हिंसाको पनि बाहिर गएर भन्न नसक्ने बातावरण नहुनु, मुद्रा माने सन्धय गहुनेले समस्या बढाउने उनले बताए। लकडाउनको समस्या बिशेषमा बसावटो केही महिलाको बन्दाएको देखिन्छ। उनले भने, 'हिंसाको पनि महिलाले भूखानेबाहिर नैसो कस गरेको बन्दा पा बला बाहिर निगालेने पनिन्छ, तरा बुझ्ने सक्नाना अन्तराष्ट्रको छैन, घटना बाहिर आउन सकेका छैनन्।'

Figure 40: A still of news written by Ms Bidhya Rai and Ms Fatima Banu published on April 10, 2020

# Pandemic putting sexual and reproductive health in Nepal at risk

Lockdown has been an effective intervention against Covid-19 the world over. But in this time women's Sexual and Reproductive Health (SRH) rights are also greatly hindered.

The government of Nepal prioritized pregnant women for health assistance during the lockdown. But women in labor pain were reportedly being ferried by risky means of transport like motorbikes. Women in post-partum period, whose need and care depend on daily wage of



their husbands, were bound to compromise on daily nutritional diet required during such periods. In such situations, pregnant women feel more vulnerable and anxious and thus their mental health is more affected. Access to reproductive healthcare for pregnant women and postpartum women is limited in such periods.

Marie Stopes International has already warned that travel restrictions and lockdowns could have a devastating effect on women, as

they struggle to collect contraceptives and access other reproductive health care services, such as safe abortions, in many of the 37 countries in which it works, including Nepal. In Nepal, there was limited access to contraceptive devices particularly condoms, oral pills, emergency contraceptive pills due to close down/limited opening hours of pharmacy and service centers. Organizations such as Marie Stopes Nepal, Family Planning Association Nepal (FPAN), and Midwifery Association Nepal are doing a commendable job, constantly updating and providing information through their social media, hotline numbers, and online platforms.

The effect of lockdown has also been felt by people living with disabilities, with inadequate availability of urine bags, condom catheters, diapers and tissue papers, increasing the risk of infection. Though organizations working for the HIV-infected populations are trying their best to provide door to door service, lockdown has made it hard to reach the HIV infected to give them antiretroviral therapy (ART). As per a report, the stock of ART is available only for the next two months and the government has to intervene to fulfill the growing demand. Transgender

## The current situation can be used as an opportunity to develop robust local level mechanisms to address such critical needs

people in particular need access to gender affirmative services such as endocrinology and laser therapy. This situation is likely to persist in a situation when the lockdown is relaxed.

Most health workers are being mobilized to combat Covid-19. But many LGBT people continue with their sex work, putting the mat high risk. Thus the LGBT population faces stigma, discriminatory behavior, violence, economic burden, limited access to health information and services during such periods. Little has been done, either by the government or the civil society organizations, to track the SRH needs of women, young people and vulnerable populations. Thus, vital issues like the availability of menstrual hygiene products, the situation of commercial sex worker, privacy, and consent, has been less discussed and prioritized.

To tackle gender-based violence during the pandemic, the government of Nepal together with the National Women Commission (NWC) and other community-based organizations have set up legal counseling, psycho-social counselling, and shelter support, and urged people to report such violence against women through their toll-free number. In response, the government has established a hotline and a call center to make it easier for citizens to access information related to Covid-19. It has also released Covid-19 and non-Covid-19 Health Service Guideline 2020 prioritizing services for emergency, acute and chronic conditions, essential health, and ambulance.

Even though the UN's preparedness and response plan for Nepal highlights primary health care and reproductive service as a key pillar and urges uninterrupted access to sexual and reproductive health, the new guideline fails to explicitly mention maternal care, access to gender affirmative health service, contraceptive service, safe abortion, and sanitary product as essential health services.

The Covid-19 crisis management centers at local and provincial levels have been established as coordi-

nation bodies. The center has an important role in providing information and services to assess, track, monitor and address SRH and other needs. Social security is vital during such a pandemic and vulnerable and marginalized populations in particular need to feel safe and respected through adequate information, service and proper counseling. Social protections for the LGBT population and women with low economic status are also needed.

The current situation can be used as an opportunity to develop robust local level mechanisms to address such critical needs. As prioritized by the government, the Female Community Health Volunteers (FCHVs) and public health professionals can be a part of the local response system that collects disaggregated data, provides information, tracks sexual and reproductive health needs of women, and links them with services and service providers. Further, civil society organizations need to continue evidence-based advocacy and help the government address SRH needs of vulnerable groups amid this humanitarian crisis.

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Figure 39: A still of an article written by Mr Amit Timilsina in June 2020