Technical proposal including budget estimate

**Supporting Stakeholders in Fighting**

**Against Corona Virus (Covid-19)**

**in Rural Areas of Nuwakot District**

**Submitted electronically to**

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**May 20, 2020**

**Context and the specific gap/ problem /need**

As of now (May 27, 2020), Corona virus (Covid-19) has infected 886 peoples) out of 58,277 PCR tested) in Nepal from 44 districts including Nuwakot and claimed four deaths. As many as 100,,287 people have undergone RDT, 30,305 are in quarantine, 699 in isolation. Out of infected people, 183 have been cured and have gone home. The situation is expected to become worse in the future if flow of migrant workers from India and third countries is not properly managed. The flow of migrant workers from abroad and other districts of the country is on increase. The proposed intervention is designed to manage properly the increasing inflow of people from outside to the districts by providing RDT, PCR facilities, sanitizers, masks as well as making them aware of social distancing and other measures to refrain from getting infected from Corona virus. The wage earners, in both formal and informal sectors, landless, marginal farmers, are found to have been severely hit by the lock down. A recent study on impact of lock down conducted by the Institute for Integrated Development Studies conducted in 23 districts including Nuwakot has revealed that 41% of women and 28% of men have lost jobs in cottage, small and medium industries. The people in Nuwakot district are severely hit by lockdown; they have lost jobs and their life is becoming miserable.

**Intended target population**

The proposed intervention will be implemented in selected four rural municipalities of Nuwakot district in *Bagmati Pradesh* of Nepal as outlined in the table below: The people in selected Rural Municipalities are severely hit by lockdown and need economic recovery.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Rural Municipality | Population | Ethnicity | Age Group | Sex |
| Dupcheswor | 22106 | Mixed ethnicity | Focus on productive age group | Both male and female  |
| Kakani | 26509 | Largely *Balami janajaties* |
| Shivapuri | 20783 | Tamang, Gurung, Dalit |
| Panchakanya  | 15845 |  |
| Tadi | 17942 |  |
| **Total** | **103185** | **All** |

**Engagement of youths-driving force**

The CSN has been mobilizing local youth in its community development programs in the past. In this context, it has organized a series of leadership enhancement and skills development training for the local youths. Those youth are transformed into homogenous groups in many areas including those three proposed in the selected rural municipalities. Altogether 15 members (5 from each selected ward/rural municipality) were consulted to discuss youth some youth initiatives to address the problems caused and to be caused by Corona virus (Covid-19). This proposal is the outcome of their expressed interest in getting involved and their suggestions on the types of activities to be undertaken in the future. In each of three wards selected from three rural municipalities there are other “youth clubs”

/groups these 15 youths have linkages with. They will also be mobilized for the project activities as per the needs.

**Key activities**

The key activities mentioned below and budget are designed firstly to enhance community peoples’ level of knowledge on Corona virus (Covid-19) especially on how to protect from getting infected and loss of employment, income, production etc. caused by lockdown. Key activities will focus on preventive measures curative/supportive measures including distribution of 3300 RTD kits, 5000 sanitizers and 5,000 masks to facilitate the potential victims of lock down and corona virus infection to have increased access to economic recovery and immediate relief packages and quality health facilities/services. The proposed intervention will cover both social sector (education, health, drinking water) and formal and informal economic sector (agriculture, industry, and trade/commerce) focused on employment and production. In addition to reports (Inception, technical progress, financial), the key activities include (i) consultation meetings, (ii) orientations to youth motivators, (iii) baseline information on peoples’ awareness corona virus and impact of lock down, (iv) formulation of economic recovery and relief packages and (v) development and dissemination of IEC materials.

**Key stakeholders**

In the course of implementing proposed intervention cooperation and coordination will be established with a number of local stakeholders. Some of them include:

* Peoples’ elected representatives at three rural municipalities targeted wards to have required supports to implement proposed intervention and relief package supports
* Employment Information Centers at rural municipalities to register youths seeking jobs and know potential employers looking for job seekers
* Health personnel at health facilities and front line health workers: to get involved as resource persons in awareness program provide health services recommended under project intervention
* Security personnel (police and army) for information and security supports during project intervention
* Civil Society Organizations including associations of electronic and print media, small and middle level entrepreneurs, farmers, various ethnic groups, women, teachers, students, students’ guardians, consumers for sharing of information and resources
* Local level political parties for community/social mobilization and advocacy supports

**Potential challenges and measures to minimize**

Some of the challenges envisaged at present and possible measures to mitigate them are briefly indicted below:

* Prolonged lock down will severely obstruct mobility of youth motivators and stakeholders (service providers) and target groups (service recipients). This will be resolved by getting permits from the security forces, using online communication services and rescheduling planned activities to suit lock down termination.
* Community people highly sensitive towards corona virus may impose restrictions for outsiders; again restricting the mobility. This will be resolved by convincing them on precaution measures (use of masks, sanitizers, social distancing etc.) to be adopted by the youth motivators and other project personnel.
* The stakeholders as well as the targeted community people may expect delivery of relief packages (food grains, oils, other consumption-commodities) which the project cannot deliver. This will be mitigated by making the project activities and budgetary allocation transparent so that they understand the budgetary constraints under which project intervention is being implemented.
* Challenge related to increasing expectation of target groups can also be mitigated by assuring them that the project management convince rural municipalities allocated adequate budget for relief packages in the budget to be prepared for the coming fiscal year (2077/78).

**Resource mobilization and budget for commodity purchase**

The CSN will mobilize financial, human and commodity supports of its own and from the federal, provincial and local governments to bear administrative and management expenses, remuneration and allowances for personnel, transportation costs and other activity expenses. External financial supports worth US $ 44,842 is required to buy 3,000 RDT kits (@ US $ 12.0/kit), 5,000 sanitizers ((@ US $ 1.25/piece) and 5,000 masks ((@ US $ 0.5/per piece).Visibility US $ 45 and awareness US $ 47 through radio for 30 days.