



## The Performance of Local Governments to Fight against the COVID-19: The Case of Makwanpur and Chitwan Districts of Bagmati Province of Nepal

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**Abstract:** The Novel Corona Virus (SARS-CoV-19) outbreak devastates the world between 2019-2020 affects all sectors including the governance and service delivery. Nepal federalism with three tiers of government established in 2016, among which Rural Municipality or Local Government-LG played an effective role in the COVID management because of local elected bodies. This study highlighting the role of LG during COVID applying a mixed method approach with exoplanetary sequential methods with data from epidemiology. A vital interview has taken for verification of the fact. The data highlights that the safety campaign, relief distribution helped people in the lockdown period supported by LG. People from wage labour, old age people, with disabilities, returnees from India and third-country were more prioritized, some 1-3 % outsider benefited through relief distribution. Municipalities and district have managed quarantine, isolation set up and encouragement for the PCR testing, logistic supports to the migrants help to manage people on time. The study concluded as the LG have played a magnificent role in the COVID management and people have realized the presence of government in the grass root levels.

**Keywords:** Corona Virus Disease (COVID-19); Local Government; Service Delivery; Relief distribution; COVID Management

## 1. Introduction

Over the past two decades, coronaviruses (CoVs) is a significant disease outbreak in East Asia and the Middle East. The Severe Acute Respiratory Syndrome (SARS) and the Middle East respiratory syndromes (MERS) began to emerge in 2002 and 2012, respectively. The severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), causing the Coronavirus Disease 2019 (COVID-19), has emerged in late 2019, declared a global health threat (Rodriguez-Morales et al.,<sup>[1]</sup> 2020). The novel CoV (Originally named 2019-nCoV) identified first time in China. The World Health Organization (WHO) announced the official designation to be "COVID-19" (Gralinski & Menachery, 2020).<sup>[2]</sup> According to the CDC (2020),<sup>[3]</sup> Coronavirus (COVID-19) is an illness caused by a virus that can spread from person to person spread throughout the world. WHO in 2020 highlighted the China's first report on the COVID-19, the disease on human cases with onset of symptoms in early December 2019 (WHO, 2020).<sup>[4]</sup> Acharya (2018)<sup>[5]</sup> reviews that the three-level of government are distinctive, independent and interrelated. Needless, to say, local governments are the third layer of government that is much closer to the local people with certain key well-functioning at local levels (Acharya, 2014).<sup>[6]</sup> Acharya (2018)<sup>[5]</sup> illustrated that a weak capacity of local

government at all level in terms of providing quality service, planning, monitoring and the implementation of rule of law, proper use of financial resources, executing development interventions (Acharya, 2018).<sup>[5]</sup>

## 2. Literature Review

In Nepal, local governments were instituted during the Panchayatera in 1960, in 1990, the democracy was reinstated and a more liberal approach was implemented in the political system. In 2002, the tenure of the local bodies was run out and these were handed over to central government bureaucrats until 2017 to run the overall administrative and development activities at the grassroots level (Acharya, 2014).<sup>[5]</sup> In 2015, the federal Constitution was promulgated, which provisions three-tier governing structure incorporating the centre, federal provinces, and local governments (Acharya, 2018). Kelly (2016) found that in Nepal's new federal constitution, there are three-level of governments, namely federal, province, and local consisting of Rural and Urban Municipalities (Kelly, 2016).<sup>[7]</sup>

A report by UN (2020)[8] highlights that on 24 March 2020, the Government imposed a complete 'lock-down' of the country

including business closures. However, food and medical supplies were allowed (UN, 2020). The Government of Nepal has formed a committee to coordinate the preparedness and response efforts, including the Ministry of Health, Ministry of Home Affairs, and other ministries to look after and provide the support to the Provincial and local level governments (UN, 2020).<sup>[8]</sup>

According to MoFAGA (2020)<sup>[9]</sup> circulation to each Municipalities of Nepal mentioning to prepare a name list of people with severely affected due to the COVID lockdown could beneficiary (Daily wage labour, marginal people, old age, disable, single women, poor and landless etc.) for the relief support (MoFAGA, 2020)<sup>[9]</sup> (Chhetri et al., 2020).<sup>[10]</sup>

DCMC (2020)<sup>[11]</sup> bulletin reviews that Makwanpur and Chitwan have prioritized, old age people, in-migrant's from India/ Third country, labour from-formal/ informal sector, people with disabling, indigeneous are adversely affect due to COVID-19 lockdown(DCMC, 2020).

### 2.1. COVID Management

After Federalism, Nepal divided into seven provinces and further sub-divided into 293 urban municipalities and 460 rural municipalities. Public expectations have been raised from the representation of Municipalities, service from the doorsteps expected (Asia Foundation, 2017).<sup>[12]</sup> UN (2020)<sup>[8]</sup> bulletin captured that due to COVID, the Government of Nepal imposed a complete 'lock-down' (March 24) of the country including business closures and restrictions on movement within the country and flight access in an out, however the very essential services were allowed such as medical, grocery shops, vegetables shops, milk, input supply etc. allowed for limited time (UN, 2020).<sup>[8]</sup> A review by Chhetri et al (2020) enlighten that most of Nepal's food, fuel and other essential imports are from India, or from third countries via India were allowed. Fuel and food trucks have been allowed to cross the border; the lockdown extension could lead to a worsening of food shortages (Nepali Times, 2020)<sup>[13]</sup> (Chhetri et al., 2020).<sup>[10]</sup>

WFP (2020)<sup>[14]</sup> analyses that due to the COVID-19 crisis, demand for commodities in the markets across Nepal is low and declining, as reported by the traders. Food availability in markets was considered insufficient by 53 % of traders (WFP, 2020)<sup>[14]</sup> (Chhetri et al., 2020).<sup>[10]</sup> Bhandari (2014)<sup>[15]</sup> review that municipality is essentially an urban administrative unit Nepal. It is a local self-government unit. In simple words, 'municipalitization' connotes to a more administrative process. Bagmati Province divided into 13 district, 3 metro Politian cities, 1 sub-metro Politian city, 41 municipalities and 74 rural municipalities. Mayor-Deputy mayor designated the head-deputy in urban level; on other hand chairman-vice Chairman designated for the Rural level (PPPC, 2019).<sup>[16]</sup>

GoN (2016)<sup>[17]</sup> report highlights that the municipality made to provide support and mange to the deputed employee or the local registrar in the course of the functions required to be performed pursuant to this act by the law commission of Nepal. A scoping study by ADRA (2018)<sup>[18]</sup> highlights that the constitution of Nepal created District Coordination Committees and district courts operating at a level between Provincial and Local Government, local governments must abide by Federal and Provincial laws(ADRA, 2018).

PPPC (2019)<sup>[16]</sup> stated that the metro city holds a larger budgets structured in urban area, Municipality and sub metro considered to the urban-semi area, whereas RM represent the rural areas with village consideration, administrating posting considering as per the status of LG (PPPC, 2019).<sup>[16]</sup> A review by Chhetri et al (2020)<sup>[10]</sup> explains that RM provided the relief support at the initial lockdown to the needful people to the formal/ informal wage labours, marginal, disadvantage families and relevant peoples given for 12 days following the Government norms (MoFAGA, 2020).<sup>[9]</sup>

MoHP (2020)<sup>[19]</sup> illustrated that washing hands frequently and social distancing are the best precaution for COVID, and prepared operative guidelines for all working in the frontlines system, home quarantine and many more decision handover to the Municipalities/ district for the execution(MoHP, 2020).<sup>[19]</sup> A command post was established at the district level led by the Chief District Officer-CDO, District Coordination Committee-DCC, Nepal Police, Armed Police, Chamber of Commerce and Industries-CCI, and Municipalities were the member for the COVID crisis management.<sup>[20,21]</sup> All major decisions for COVID management made (DAO-Chitwan, 2020)<sup>[22-24]</sup> (DAO-Makwanpur, 2020).<sup>[25,26]</sup> The command post usually listed each notification in official website for the wider access, Municipalities proposed and prepared quarantine centers for the management of COVID patients, likewise for the isolation, Bharatpur location proposed for safety(DAO-Chitwan, 2020).<sup>[24-26]</sup>

The literature summarised as COVID-19 is sudden outbreaks diseases that adversely affects the movements, market functioning, economy, service delivery and many other sectors in Nepal. However, the district and Municipalities played a leading role on the crisis situation due to well management, and still facing the situation in the current situation. All three-tiers of government had provided there inputs in the COVID management. Since, Municipalities is the doorsteps service provider to the citizens of Nepal, it has a unique role in the development, and hence this study was planned to analysis the role and responsibilities of Municipalities for the COVID management.

### 3. Methodology

This study is based on the mixed method (Qualitative and Quantitative) as well as explanatory sequential approach of data collected from the epidemiology section of health service as well as various organizations between April to mid-August 2020. Considering geographic representation, two consecutive district Chitwan and Makwanpur (17 Municipalities's, sample survey, Fig. 1) have chosen as a study area which comprises of Local Government (RM to Metro city) representing inner Terai and mountain district of Bagmati district.

Key Informant Interview-KII with the Municipalities through telephone was conducted to analyze the narrative information of the area. A "narrative theory" was applied according to which descriptive information through agencies (I/ NGO, UN, ETC.) will be going through, individual interviews, group interaction within LG and much literature was review. The finding of the study may not reflect the same in the else because Municipalities has different situations, locations and circumstances.

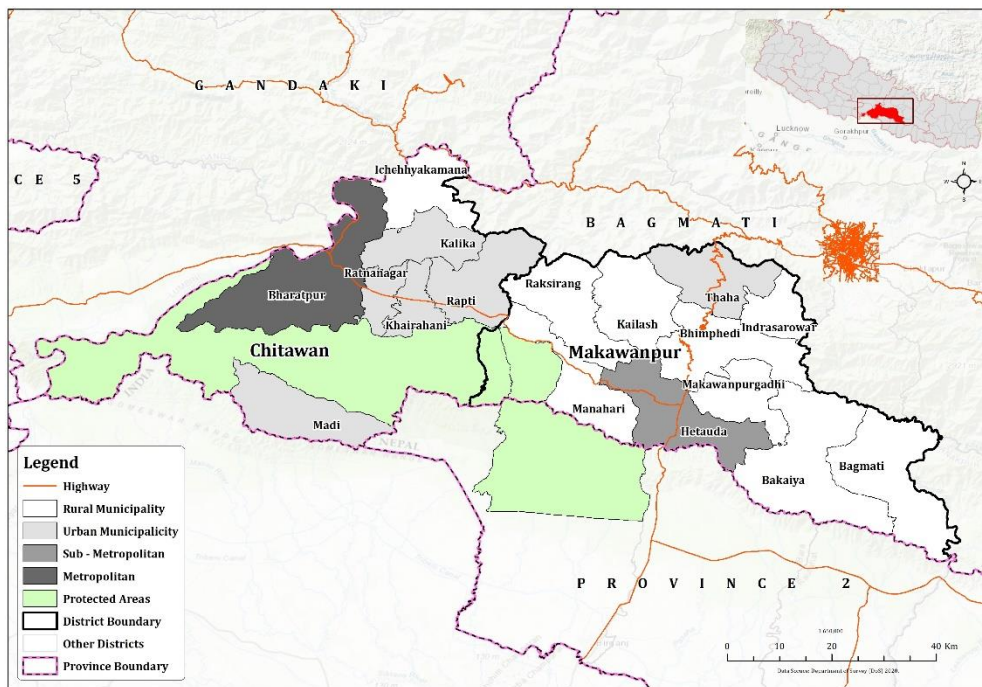


Fig. 1. Map of Study area (Source: - GIS self-Prepared map, 2020, August)

A null hypothesis was set to check the statistical relationship in between the data as -

Ho-1) Relief distribution and surveyed districts are dependents.

Ho-2) There is no significant association in between the total households and the beneficiaries.

The secondary data of distribution further analyze through SPSS, Vol-20 and through cross tab way the two-tail statistics t-test perform.

## 4. Results and Discussions

### 4.1. Local Governments with their strengths and weakness

Makwanpur district (Fig. 1) administrate 10 local government (1 sub metro, 1 municipality and 8 rural municipality) whereas Chitwan district covering 7 local Government (1 metro city, 5 municipality and 1 Rural Municipality). The Mayor-Deputy Mayor are leading post of the urban set up, whereas Chairman and Vice Chairman are the designations for Rural set up (DCC, 2017).<sup>[27]</sup> The administrative area and resources in Metro is higher than sub metro and municipality-RM. Similarly, the budgets, and administrative powers, stands higher for the urban sectors than rural due to administration and area (facilities, populations, access and so on) (BMP, 2019).<sup>[28]</sup> On the other hand Rural Municipality is remotely access, isolated, away from the district headquarter, weak physical structure and geographically challenging for the location. Development is challenging, rural development and management is more challenging than Urban (LG, 2019).<sup>[29]</sup>

**Strength:-** The elected bodies are belongs to the local areas, knows the opportunity and challenges of the area. Local bodies is planned with gender based elected bodies so women participation is also

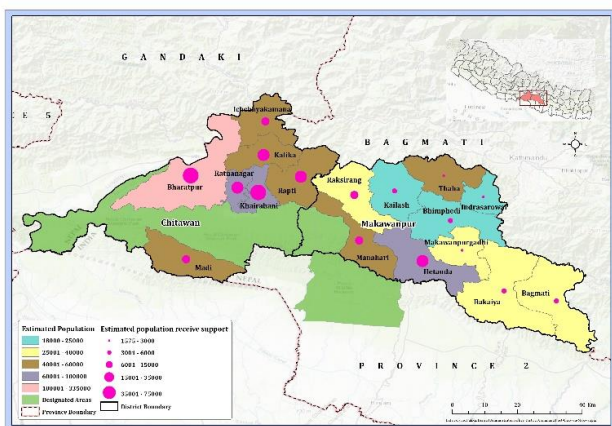
encouraging and representative inclusively. Local bodies do own decision and do coordinate for the execution for any concern arouses. Municipalities is flexible with budget and local policy and act as per the situation can amend after coordinating with district coordination-Provincial and federal system (Based on the discussion with many Municipalities officials, Chairman, Mayor, ETC.).

**Weakness:-** Most of the LGs are belongs to the different socio-political and educational backgrounds, multi-sectoral knowledge may not be same for all. However the similar administrative and reporting structure has been made for the execution. Lack of guidelines, budgets, infrastructure, logistic support, human resources is the major weakness of the Municipalities (Based on the discussion with many Municipalities officials, Chairman, Mayor, ETC.)

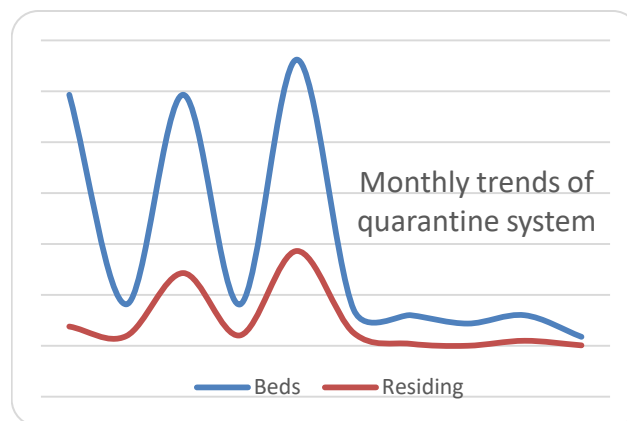
### 4.2. Local Governments with their strengths and weakness

Nepal recorded first COVID case on April, 2020, just after as precaution federal government imposed lockdown across the country with functioning of essential services such as medical services, foods supply (Cereal, vegetables, Fruits, meats and vegetables) shops and agriculture based services (Inputs) for the limited time. Medical services, government services were operational (Nepali Times, 2020).<sup>[13]</sup> The front-liners (Medical personnel's, government servants, etc.) and other service providers instructed to take high precautions. Advisory circulated for social distancing, washing hand, wearing mask and use of sanitizations, etc. across the country (The Economist, 2020).<sup>[30]</sup>

LGs circulated advisory to its all wards and community through letter, leaflet, and banners as well as through digital mode for social distancing and wearing of mask, and uses of alcohol based sanitizer. The advisory followed and started using sanitizer and mask in the public. Some distribution of masks and sanitizer in public was initial stage for the LG COVID management (Discussion with Municipalities



**Fig. 2.** Distribution figure and population situation of the study area (Source: -Self prepared GIS, August, 2020, information collected from DAO-Chitwan and Makwanpur districts)



**Fig. 3.** The monthly trend analysis of quarantine system in Chitwan and Makwanpur district. (Source: -MoSD, Bagmati)

Officials, Bharatpur-Chitwan). Educational sectors were encourage to conduct through the digital mode instead of class gathering, local markets were advised to keep the social distance and wearing mask and sanitization was must (DAO-Makwanpur, 2020).<sup>[25,26]</sup> With the increase in number of COVID-19 cases, Nepal imposed extension of lockdown because safety-security was on the top priority. Municipalities restricted vehicle movements and recommends pass for the movement for the essential movements only. During prohibitory order all needful decision and monitoring were made through Municipalities and District Command Post analyzed that the vegetables importing from COVID affected area and outsider wage labours were restricted due to fear of COVID-19 (DAO-Chitwan, 2020).<sup>[23-26]</sup>

#### 4.3. Relief distribution in the Municipalities

After the federalism, the Rural Municipality is more powerful and capable (Publically elected from the same area) to perform the task at the local level (Ward leaders, members and Municipalities committee) performed a leading role in the local level (MoFAGA, 2020).<sup>[9]</sup> After the lockdown, the sudden stop of economic activity stopover the life of wage labours and economically poor and depends on daily wage. Municipalities have planned, and prepared a list for the distribution followed by the government norms for 12 days through Municipalities own funding. The distribution figure (Annex-1 & 2) shows that the people who received the relief supports were following criteria as-Old age people, disable, single women, disadvantage groups, landless people, wage labour, and in cases indigenous groups such as Chepang, Tamang, Tharu, and Majhi, who are food insecure and do wage mostly. Due to increase in number of COVID cases, in-migrants from India and third country have reverse migration to the native places and Municipalities prioritized those on the list who required support.

The distribution took place from the houses and ward level scheduled involving elected peoples, procured from local-district and other location. The uniqueness of Municipalities comes in action when the people of outsider residing in the Municipalities since long also benefited through the support because they were also affected. A data revealed from the interview that nearly, 1-3 % people of

outsiders also benefited through distribution by Municipalities. A review by Chhetri et al (2020)<sup>[10]</sup> explains that RM provided the relief support Government norms set through (Rice-4 kg for per people, Pulses-1 kg for 3 people, 2 kg for 4 people, 3 kg for 7 people and above, Veg oil-1/2 ltr for 3 people, 1 ltr for 4 people, salt-1 kg to the family and soap 1 piece to each family) (MoFAGA, 2020)<sup>[9]</sup> (Chhetri et al., 2020).<sup>[10]</sup>

KII summary with different agencies here with:-

- Distribution was a challenge during lock-down, the ward members and officials were helpful during the listing and distribution to the beneficiaries (Municipality Officials).
- This relief-distribution was helpful for wage labour to feed their family during the lockdown (Chamber of commerce and Industries-Makwanpur and Chitwan).
- One door system policy was more useful, grant and relief support through individuals and agencies have diverted to the needful Municipalities, DCC-Municipalities coordination was much useful (DCC-Makwanpur and Chitwan)
- Financial support from the Provincial level was helpful due to inadequate fund with Municipalities for COVID management, this funds utilized for the procurement of food and medical items (Sectoral office, Municipalities).

#### 4.4. Quarantine, Isolation and PCR testing management

Municipalities have established a quarantine system for the management of people infected or suspicious managed in safe locations (Collages, Schools, hotels, health posts, etc.). Cases within in-migrants people from India and abroad moved to the quarantine for treatment.

Trend (Fig. 3) indicating that the number of beds increases comparatively people residing rate is lower due to a few cases of COVID. Gradually, the COVID cases increased from June onwards due to the arrival of migrants from India (Fig. 6) as India counted nearly 0.9 million cases in June, therefore government took interest to rescue from across the world. For returnee's migrants PCR and quarantine/ holding centers (For third country migrants only) were essentials for 7-14 days.

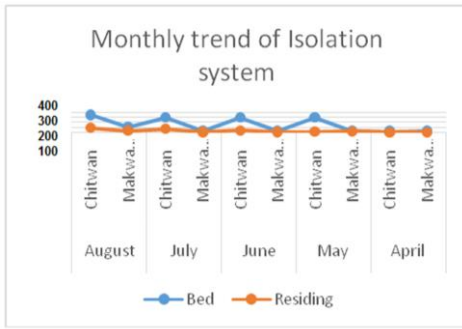


Fig. 4. Trend analysis of isolation system (Source: - MoSD, Bagmati, 2020).

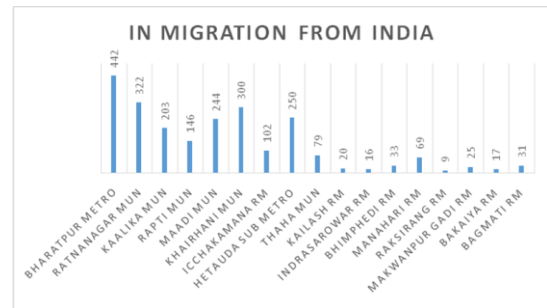


Fig. 6. Analysis on in-migration from India (Source: - Province Police, Holding Centers-Makwanpur and Chitwan).

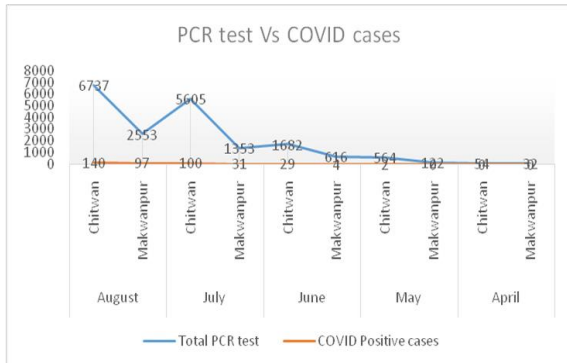


Fig. 5. Trend of PCR test of COVID cases (Source: - MoSD, Bagmati).

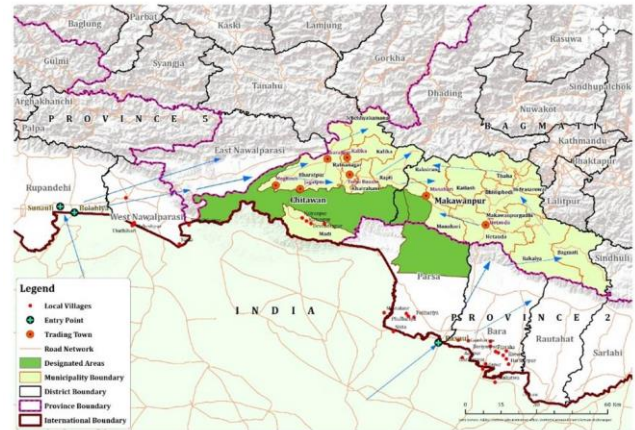


Fig. 7. In-migration flow trend from India border to concern Municipalities in the study area (Source: -Municipalities information compiled and prepared through GIS Arch View).

The Municipalities and district command post extended the quarantine beds and decided to reside migrants in self-home-quarantine for better care after the COVID cases increases (DAO, 2020).<sup>[20,21]</sup>

For the abroad returnees paid holding centers were established. Makwanpur established holding centers in Agriculture and Forestry University-AFU premises with a capacity of some 30 beds for the migrants. Whereas Chitwan managed some 3 tourist hotels with a capacity of above 200 beds for the people (DAO, 2020).<sup>[20,21]</sup>

Some KII summary is illustrative here-

- a) Municipalities quarantine is safer to stay, facilities were limited but in terms of safety and support it was fine (Municipalities Quarantine resident).
- b) Home quarantine fit best to boost confidence, caring by the family members is high, panic get away at home (Home Quarantine people).
- c) Now realising the service of Municipalities in the doorsteps (Holding centre people, Municipalities Quarantine resident).

4.5. Isolation Management and PCR testing

Isolation system was successful management set by the Municipalities and district authority for the critical cases. Makwanpur manage some 53 beds set up in Hetauda and Chitwan set up some 355 beds capacity in 4 hospitals of Bharatpur metro cities. A COVID hospital was established in Bharatpur for the COVID treatment purpose. The isolation trend (Fig. 4) indicate that the COVID patients were rapidly increased from the mid of June months during pick season globally, because government lock-down was release partially

and movement and markets was operation to some extent. Isolation set up helpful people to provide medical treatments. In some extent some extreme cases immediately moved to the Kathmandu city for advance support.

PCR (Polymerase Chain Reaction) was more reliable than the RDT (Rapid Diagnostic Test), PCR was more reliable and clinically proven due to the strong testing methodology compare to the RDT caused many errors on results (Some time positive some time negative result of the same sample). For PCR testing, both study area were equipped with laboratory (Set in Hetauda-Vector borne disease center and in Bharatpur-Vetnery laboratory and some in private hospitals) for the PCR testing. Suspicious and confirmed cases were further referring to the quarantine and isolation center as per the situation. Trend (Fig. 5) indicates that the PCR test tremendously inclined due to the number of cases accumulative in Nepal. The PCR was the only way out to identified the positive case of COVID hence this was more encouraged.

4.6. LOGISTIC supports to the in migrants from India and third Country

The trend of in-migrations is higher (Fig. 6) for Bharatpur and Hetauda due to the high urban area and populations, usually the majority of people migrating India for the earning purpose compare to the Municipalities. The quarantine centers and the number of beds are also higher in the Hetauda and Bharatpur city due the major city access with facilities (road, markets, government/ non-

**ANNEX-1** Relief distribution summary of the study area

| District  | Municipalities                    | Total households | Estimated Populations | Relief distribution | Population who receive the support |
|-----------|-----------------------------------|------------------|-----------------------|---------------------|------------------------------------|
| Chitwan   | Bharatpur Metro                   | 81,834           | 332,491               | 16,392              | 73,764                             |
| Chitwan   | Ratnanagar Municipality           | 17,401           | 82,771                | 5,747               | 25,861                             |
| Chitwan   | Kaalika Municipality              | 11,120           | 54,092                | 3,550               | 15,975                             |
| Chitwan   | Rapti Municipality                | 12,055           | 58,107                | 6,592               | 29,664                             |
| Chitwan   | Maadi Municipality                | 8699             | 43,652                | 2,650               | 11,925                             |
| Chitwan   | Khairhani Municipality            | 12,982           | 66,629                | 8,101               | 36,455                             |
| Chitwan   | Ichhakamana RM                    | 11,717           | 49,914                | 2,901               | 13,055                             |
| Makwanpur | Hetauda Sub metro                 | 42,659           | 71,685                | 6246                | 28,107                             |
| Makwanpur | Thaha Municipality                | 11,509           | 49,030                | 448                 | 2,016                              |
| Makwanpur | Kailash Rural Municipality        | 5615             | 23,922                | 1024                | 4,608                              |
| Makwanpur | Indrasarowar Rural Municipality   | 3059             | 18,056                | 350                 | 1,575                              |
| Makwanpur | Bhimphedi Rural Municipality      | 4500             | 24960                 | 1154                | 5,193                              |
| Makwanpur | Manahari Rural Municipality       | 10,685           | 45,518                | 3327                | 14,972                             |
| Makwanpur | Raksirang Rural Municipality      | 6,431            | 32,155                | 2604                | 11,718                             |
| Makwanpur | Makwanpur Gadi Rural Municipality | 5905             | 29981                 | 478                 | 2,151                              |
| Makwanpur | Bakaiya Rural Municipality        | 7541             | 39642                 | 1275                | 5,738                              |
| Makwanpur | Bagmati Rural Municipality        | 6058             | 39,779                | 690                 | 3,105                              |

(Source: - Municipalities of Makwanpur and Chitwan district, Ministry of Social Development-Bagmati Province, Data collected as of 12<sup>th</sup> August, 2020)

**ANNEX -2** Isolation and Quarantine summary of the study area

| District  | Municipalities                    | Quarantine centres (Nos) | Capacity (Bed) | Isolation (Nos) | Capacity (Bed) | COVID Patients |
|-----------|-----------------------------------|--------------------------|----------------|-----------------|----------------|----------------|
| Chitwan   | Bharatpur Metro                   | 26                       | 325            | 7               | 355            |                |
| Chitwan   | Ratnanagar Municipality           | 7                        | 212            | 0               | 0              |                |
| Chitwan   | Kaalika Municipality              | 2                        | 40             | 0               | 0              |                |
| Chitwan   | Rapti Municipality                | 13                       | 810            | 0               | 0              | 140            |
| Chitwan   | Maadi Municipality                | 12                       | 1,610          | 0               | 0              |                |
| Chitwan   | Khairhani Municipality            | 7                        | 102            | 0               | 0              |                |
| Chitwan   | Ichhakamana RM                    | 4                        | 34             | 0               | 0              |                |
| Makwanpur | Hetauda Sub metro                 | 8                        | 280            | 1               | 45             |                |
| Makwanpur | Thaha Municipality                | 2                        | 20             | 0               | 4              |                |
| Makwanpur | Kailash Rural Municipality        | 1                        | 10             | 0               | 0              |                |
| Makwanpur | Indrasarowar Rural Municipality   | 1                        | 15             | 0               | 0              |                |
| Makwanpur | Bhimphedi Rural Municipality      | 1                        | 14             | 0               | 0              |                |
| Makwanpur | Manahari Rural Municipality       | 1                        | 30             | 0               | 4              | 97             |
| Makwanpur | Raksirang Rural Municipality      | 2                        | 18             | 0               | 0              |                |
| Makwanpur | Makwanpur Gadi Rural Municipality | 1                        | 28             | 0               | 0              |                |
| Makwanpur | Bakaiya Rural Municipality        | 1                        | 30             | 0               | 0              |                |
| Makwanpur | Bagmati Rural Municipality        | 2                        | 10             | 0               | 0              |                |

(Source: -Municipalities of Makwanpur and Chitwan district, Ministry of Social Development-Bagmati Province, Data collected as of 12<sup>th</sup> August, 2020)

**Table 1.** Relief distribution statistics between Chitwan and Makwanpur

|                              | Variable 1   | Variable 2  |
|------------------------------|--------------|-------------|
| Mean                         | 15280.58824  | 16816.47059 |
| Variance                     | 373623469.6  | 333283087.7 |
| Observations                 | 17           | 17          |
| Pooled Variance              | 353453278.7  |             |
| Hypothesized Mean Difference | 0            |             |
| Df                           | 32           |             |
| t Stat                       | -0.238177869 |             |
| P(T<=t) one-tail             | 0.406630866  |             |
| t Critical one-tail          | 1.693888748  |             |
| P(T<=t) two-tail             | 0.813261733  |             |
| t Critical two-tail          | 2.036933343  |             |

(Source: -MoSD, Bagmati, 2020, prepared through SPSS, Volume-20)

government offices, etc.). On the other hand, "Maadi municipality" managed a high number of beds because many migrants are working and earning in India and abroad belongs to the area.

Another challenging and innovative management of Municipalities was to rescue the migrants from India, who quarantined into Indo-Nepal border, coordinating with the authorities (Nepal-Rupandehi district-Bhairhawa municipality; Parsa district-Birgunj Metro city, Fig. 7. The migrants have safely back with a vehicle (Taxi, Ambulance, Buses, etc.) provided through Municipalities and self/ Municipalities-quarantined after reaching. In some cases the migrants belong to another district/ area have facilitated with the concerned Municipalities and dropped to the location accordingly.

In the case of migrants from the third country, Municipalities and District command post have arranged a holding center/ station to stay at least 7-14 days and the PCR test is performed. In both the study area, the paid holding centers were established by Municipalities/ command post, and migrants reside safely and followed accordingly. The holding centers were far well equipped with all the latest facilities including Wi-Fi connectivity, food system, and so on.

**Table 2.** Statistics between the estimated population and relief distribution)

|                              | Variable 1   | Variable 2  |
|------------------------------|--------------|-------------|
| Mean                         | 15280.58824  | 16816.47059 |
| Variance                     | 373623469.6  | 333283087.7 |
| Observations                 | 17           | 17          |
| Pooled Variance              | 353453278.7  |             |
| Hypothesized Mean Difference | 0            |             |
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| P(T<=t) two-tail             | 0.813261733  |             |
| t Critical two-tail          | 2.036933343  |             |

(Source: -MoSD, Bagmati, 2020, prepared through SPSS, Volume-20)

#### 4.7. Regular Monitoring

There are many activities captured through secondary data and interview taken from the LGs about the COVID management. Monitoring was the best tools for the LG, Market stock and price monitoring, lock-down management, quality control, different price monitoring, boarder area management, quarantine, PCR testing and many COVID related activity were regularly monitored by the LGs. Some KII summarized as: The LGs also visited the COVID affected houses and confirm the citizen's health's that was the best part (*Local citizens of Hetauda metro politan city*). Social grant distribution, Grant management and coordination with different actors and ministries were the active steps (*Province Policy and Planning, Bagmati Province*). LG's have played a vital role during the Fiscal year (2077/ 2078 Bikram Samwat Calender-2020/ 2021 Christian Era Calendar) budget preparation and ending of the previous fiscal year (2076/ 2077 BS-2019/ 2010 CE) plan) work, who monitored the activity related to the COVID and regular development (*Member of Legislative Assembly, Bagmati Province*).

#### 4.8. Hypothesis Testing

Ho-1) Relief distribution and surveyed districts are dependents.

The value to the t-Critical two-tail statistic (Table 1), the absolute value of the t-Statistic (-0.238) would be observed that is larger in absolute value than the Critical t value (1.693). Since the p –value is less than our alpha, 0.05; hence the null hypothesis is accepted. Hence the relationship in between the relief distribution is dependent- proved.

Ho-2) There is no significant association in between the total households and the beneficiaries

The value to the t-Critical two-tail statistic (Table 2), the absolute value of the t-Statistic (3.370) would be observed that is larger in absolute value than the Critical t value (1.693). Since, the p – value is less than our alpha, 0.05, hence the null hypothesis is **rejected**. Hence, the statistical value indicating that the null hypothesis is rejected means there is a strong relation of total population with distributed population of the study area.

## 5. Conclusions

After the establishment of Municipalities, people realized that the Municipalities are the only government that provide service at doorsteps. COVID outbreaks devastated all sector beside that the relief distribution was superbly managed by the Municipalities. Quarantine isolation, and PCR test was encouraged at the local levels, and in-migrants from India and third country was well-coordinated, facilitate and rescued. Not only that Municipalities always became positive for the people, and provided all sort of supports within their hands, still stood at the front line of COVID management at the grass root level. Municipalities played a significant role on the COVID management and people felt the presence of local government.

## Conflicts of Interest

The authors declare no conflict of interest.

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