

RURAL ORIENTED YOUTH MOVEMENT NEPAL (ROYM-Nepal)

Initial GEDSI Need Assessment Report

Bhotekoshi-Trishuli Flash Flood-Affected Communities and Holding Centers

Location:

Rasuwa: Uttargaya Rural Municipality, Ward No. 5,

Nuwakot: Bidur municipality, ward no 1, Pandey gaun Nursery (Indrayani Basic School- as holding center)

Purpose: Initial assessment of flood-affected communities, displaced families and holding centres, with a focus on emergency needs, GEDSI, protection and the feasibility of community-based response.

Method: Bhotekoshi-Trishuli Flash Flood-Affected Community and Holding Centre Visits

1. Visit and Coordination

An initial field visit was conducted by ROYM-Nepal in Uttargaya Rural Municipality Ward No. 5, Rasuwa, and Bidur Municipality Ward No. 1, Pandey Gaun, where Indrayani Basic School is being used as a holding centre. The visit aimed to understand the current situation of flood-affected and displaced families and identify their most immediate needs. Meetings were held with the Ward Chairperson, ward representatives and community members to gather information on affected households, ongoing search and rescue efforts, and the support already being provided. Discussions also focused on the practical needs of families staying in the holding centres, including food, temporary shelter, drinking water, sanitation, health services and other essential items. Particular attention was given to the needs of women, children, older people, persons with disabilities and families who may require additional support or protection during the emergency.

2. Holding Centers and Key Observations

2.1 Sibalaya Aadharbhut School, Uttargaya-5

Sibalaya Aadharbhut School is currently being used as a holding centre for displaced and affected families. As of the current assessment, 210 people are reported to be staying at the centre, including 98 males and 112 females. Among them are 54 children, including 13 children below two years of age and 3 children below two years separately reported. There are also 3 persons above 60 years, 3 pregnant women and 4 lactating women. A particularly serious concern is that 49 children are reported to have lost their parents in the disaster. This situation requires immediate attention to the safety and care of children, including identifying who is currently looking after them, checking whether they are staying with relatives or other caregivers, and assessing their needs for food, nutrition, clothing, safe sleeping arrangements and emotional support. The situation of pregnant and lactating women and very young children should also be checked regularly, including access to health services, appropriate food, privacy and other essential items. The figures are based on information available at the time of the visit, and further data collection is ongoing.

2.2 Nilakantha Ma. Bi. School (Store and Relief Distribution Point)

Nilakantha Ma. Bi. School is currently being used as a storage and relief distribution point for affected families. During the visit, food and clothing collected for distribution were observed at the site. The relief supplies received so far are reported to be sufficient to support affected families for approximately one month. However, as families continue to stay in holding centres and their needs may change, the available stock and distribution system will need to be monitored regularly. It will also be important to check

whether the relief is reaching all affected families, particularly households with children, pregnant and lactating women, older persons, persons with disabilities and families who may have lost their main source of income or support.

2.3 Bhimsensthan Pra. Bi. School

Bhimsensthan Pra. Bi. School is being used as a holding centre where 55 persons are currently reported to be staying, including 36 females, 14 males and 10 children. The centre has a relatively high number of women and children, so their specific needs should be checked directly with the families. Particular attention is needed to the availability and condition of toilets, drinking water and bathing facilities, as well as privacy and safe sleeping arrangements. The assessment should also check whether women and children feel safe at the centre, whether anyone requires medical attention, and whether essential items such as menstrual hygiene materials, clothing, medicines and other basic supplies are available. Further data collection and assessment are required at this centre.

2.4 Nava Bijaya School

Nava Bijaya School is currently accommodating 25 persons, including 8 males, 17 females and 4 children. The centre is predominantly occupied by women, with children also present. Further assessment is needed to understand the household composition and whether any women or children are facing specific difficulties. Attention should be given to safe and private accommodation, access to toilets and water, menstrual hygiene materials, clothing and other basic necessities. The team should also check whether women have safe access to health services and whether any children require additional care or support. Further data collection is ongoing.

2.5 Dharapani Community

A total of 14 persons were reported from the Dharapani community, including 4 males and 10 females. As the group is predominantly female, further information is needed to understand their household situation and immediate needs. The assessment should look at the age of family members, presence of children, older persons or persons with disabilities, access to food, water, sanitation, health services and safe shelter, as well as any other difficulties faced by women following the disaster. Assistance can then be planned according to the actual needs identified in the community rather than providing the same support to everyone.

2.6 Pandey Gaun Nursery (Indrayani Aadharbhut School, Bidur-1, Nuwakot)

The team visited Bidur Municipality of Nuwakot District, which has been significantly affected by the disaster. Wards No. 1, 5 and 10 have reportedly experienced serious loss of people, settlements and property. In Dhunge of Ward No. 1, the team visited the local holding centre at Pandey Gaun Nursery – Indrayani Aadharbhut School. A total of 107 households have been reported as affected in the area, of which 11 households have been displaced and are currently staying at the holding centre. The reported population is 107 people, including 47 males, 52 females, 17 children and 6 older persons. Further assessment is required to understand the condition of the affected households, particularly the 11 displaced families staying at the holding centre. The assessment should cover their immediate needs for food, shelter, drinking water, sanitation, health care and other essential items, while also checking the specific needs of children, older persons, women and any persons with disabilities. Data collection in the holding centre and the surrounding affected community is still ongoing and should be continued to establish a more complete picture of the situation and priority needs.

3. Initial Overall Observations (Immediate Support Required)

WASH, Drinking Water, Toilets and Hygiene

The situation of water, sanitation and hygiene at the holding centres is a serious concern and requires immediate attention. There are limited difficulties for women, girls and children, especially in maintaining privacy, safety and personal hygiene. The pathways around the holding centres are muddy and slippery, and in some places there are no proper barriers or safety measures, increasing the risk of falls and accidents. The water currently available is also not suitable for drinking. Rainwater and runoff appear to be entering or mixing with the existing water sources, resulting in muddy and contaminated water. Immediate action is needed to provide safe drinking water, clean and usable toilets, bathing and washing facilities, menstrual hygiene materials, proper drainage and safer access around the holding centres. Women and children should be consulted directly about their safety concerns and the facilities they need. Access to clean and safe drinking water, and the toilets are poorly managed, dirty and in some places damaged or unsafe to use. This is creating particular

Kitchen and Food

The affected communities have been managing the kitchen themselves, which is helping to provide regular meals, but the food available is very limited. People reported that meals mainly consist of rice and thin lentils, with very little or no green vegetables or other nutritious food. Meals are not always available at a regular time, which is particularly concerning for young children, pregnant women and lactating mothers. There is also a concern about how food is being prepared and stored. The storage space at the holding centre is not adequate, and some food items have become wet because of water entering the storage area. There is very little variety in the diet, and nutritious food for children and people with specific health needs is not available. People with conditions such as high blood pressure and diabetes are also receiving the same general food as everyone else, which may further affect their health. Immediate support is needed to improve food storage, ensure regular meal times and provide a more balanced diet, including vegetables, pulses, nutritious food for children and appropriate food for pregnant and lactating women and people with specific health conditions.

Psychosocial Support

The emotional and psychological situation of many affected people is very difficult. Families have lost relatives, homes and livelihoods, while many people are still searching for missing family members. As noted in the assessment data, a large number of children are reported to have lost their parents or are currently without parental care. These children are experiencing fear, confusion and uncertainty and need immediate care, emotional support and safe adults they can rely on. Adults are also showing signs of distress and trauma following the loss of family members and the disaster. For many displaced families, there is still uncertainty about where they will sleep, what they will eat and what will happen to their homes and livelihoods. Family members who are missing have not yet been reunited in many cases. Immediate psychosocial support should therefore be made available at the holding centres, with particular attention to children who have lost parents or are separated from their families. Support should focus on listening to people, helping them feel safe, providing accurate information and supporting family tracing and reunification.

Pregnant (Health, Nutrition and Birthing Support)

Pregnant women at the affected locations are facing serious difficulties. Nutrition support is limited, regular health check-ups are not available, and women are experiencing illness, stress and anxiety. Some women are worried because they do not know whether their pregnancy is progressing safely or whether they will be able to receive proper care during delivery. There is also fear of complications because health facilities and birthing centres in some affected areas have been damaged or swept away by the flood, while

health workers and doctors are not readily available. Some FCHVs are also reported to be missing or unable to reach the affected communities. Immediate support is required to identify all pregnant women, assess their condition and ensure regular antenatal care, access to medicines and nutritious food. A clear referral and transport arrangement is also needed for women who require urgent medical attention or delivery care. Birthing equipment, trained health workers, emergency referral support and basic maternal and newborn supplies should be arranged as soon as possible.

Child Protection, Parenting and Family Care

Children are among those most seriously affected by the disaster. Some children have lost their parents, while others are separated from their families or do not know where their family members are. Many are living in an unfamiliar environment without the usual care and support they received at home. They are frightened and worried, particularly when they hear that their friends or relatives are still missing. There are also concerns about children being exposed to unsafe situations, including the risk of exploitation and trafficking during displacement. Immediate steps are needed to identify children who are separated from their parents, ensure that they are staying with safe and trusted caregivers, and support family tracing and reunification. Children should not be moved or handed over to unknown individuals without proper checks. Safe spaces, regular interaction with children, psychosocial support and appropriate adult supervision are also needed at the holding centres.

Child Learning and Education

Children's education has been severely disrupted by the disaster. Several schools are currently being used as holding centres, meaning that children cannot return to normal classes. Many children have also lost their school friends, books, uniforms, school bags and other learning materials because their homes and communities were affected by the flood. Some important personal documents and school records have also been lost or damaged. This is creating additional difficulties for children and families trying to establish their identity and continue their education. The situation is particularly difficult for children who are already experiencing trauma and loss, as being unable to study, play and interact with their friends removes an important part of their normal routine. Immediate support should include temporary learning spaces, learning materials, books, stationery, school bags and other essential education supplies, along with safe opportunities for children to play and interact. Coordination with schools and local authorities is also needed to restore children's education as soon as possible and help replace lost school records and documents.

Loss of Livelihoods and Household Income

The disaster has also seriously affected the livelihoods of the displaced and affected families. Many families have lost their homes, agricultural land, livestock, tools, shops, equipment and other sources of income. Some people who were working as daily wage labourers are currently unable to work because their workplaces and local markets have been affected or because they are staying in holding centres. Families who depended on agriculture may have lost crops, seeds, livestock and farming equipment, making it difficult for them to restart their livelihoods. As a result, many households are now completely dependent on relief assistance for food and other basic needs. Immediate assistance is needed for essential household items and food, but livelihood recovery should also be considered from the beginning. Families should be assessed to understand what they have lost and what support would help them restart such as replacement of tools and equipment, seeds and livestock support, small grants, temporary employment opportunities or other locally appropriate livelihood assistance. This will help families gradually move from depending on relief to rebuilding their lives and becoming self-reliant again.

4. Initial Impact on Women and Girls / Women's Groups

The initial visit indicates that women and girls are among the key affected groups.

The flood and displacement have likely increased women's responsibilities related to care of children, food preparation, water and sanitation, and household management, while simultaneously reducing their access to privacy, health services and livelihoods.

Specific concerns requiring further assessment include:

- Safe and private accommodation for women and adolescent girls.
- Access to menstrual hygiene materials and appropriate sanitation facilities.
- Access to maternal, reproductive and general health services.
- Safety and privacy in collective shelters, particularly at night.
- Risk of GBV, exploitation and harassment.
- Specific needs of women-headed households and women caring for children without adequate family support.
- Participation of women in relief distribution and emergency decision-making.
- Psychosocial support for women and girls affected by loss, displacement and trauma.
- Economic/livelihood support for women whose household income has been disrupted.

The reported presence of children who have lost their parents at Sibalaya Aadharbhat School requires urgent child protection attention, including verification of family status, safe care arrangements, psychosocial support and appropriate referral.

5. Road Accessibility and Coordination

Road access to the affected areas of Rasuwa is currently very difficult. The road condition is rough, and the journey from Kathmandu can take around 8 hours under normal circumstances. Following the disaster, several road sections have been damaged or completely cut off, and in some places the connection between communities on either side of the river has been disrupted. This has made it extremely difficult to transport food, relief materials, medicines and other essential supplies to the affected communities. Communication is another major challenge. Mobile phone services are not functioning properly in many areas, electricity has been cut off, and regular communication with communities and local authorities is difficult. As road access is limited, some essential supplies may need to be transported by helicopter. However, the number of available helicopter flights is limited, and supplies cannot always reach the affected communities on time. This is creating a very difficult situation for families who are already struggling to access basic food, drinking water, medicines, clothing and other essential items. Given the current access constraints, relief materials for Rasuwa should be planned and dispatched from Kathmandu in advance, with careful consideration of transportation time, available storage facilities and alternative delivery options. Close coordination with the local government, district authorities, security agencies and other response actors will be important to identify accessible routes and prioritize urgent supplies. Where road access remains impossible, air transportation should be prioritized for critical and life-saving items, particularly medicines, maternal and child health supplies, food for young children and pregnant and lactating women, water and sanitation materials, and other essential emergency supplies. The access situation should be monitored continuously, as conditions may change quickly and directly affect the timing and feasibility of the response.

6. Key Immediate Priorities

Based on the initial field visit and discussions with affected families and local representatives, the following immediate priorities are recommended:

Food and basic needs:

Continue food and essential relief support beyond the currently available one-month supply. Improve food variety and provide nutritious food, particularly for children, pregnant and lactating women, older people and people with specific health conditions.

WASH:

Provide safe drinking water, clean and gender-segregated toilets, bathing facilities, drainage and menstrual hygiene materials. Improve muddy and slippery access around holding centres and ensure basic privacy and safety for women and children.

Shelter and sleeping arrangements:

Provide temporary shelter support where families cannot safely return home. At holding centres, provide sleeping mats, raised beds/cots and blankets. Many people are currently sleeping directly on the floor, where insects and other crawling pests have been reported, making it particularly difficult and unsafe for families with young children.

Dignity and essential household items:

Provide dignity kits and basic household items, including sanitary pads, underwear, clothing, blankets, soap, towels, bathing materials, torches/solar lights and other essential items according to household needs. Particular attention should be given to women, adolescent girls, children and older people.

Protection:

Strengthen protection measures for children, women, older persons and persons with disabilities in all collective centres. Ensure safe spaces, privacy, adequate lighting and safe access to toilets and bathing areas, particularly at night.

Child protection:

Immediately verify the situation of the 49 children reported to have lost their parents and identify who is currently caring for them. Support family tracing and reunification, safe caregiving arrangements, psychosocial support and protection from exploitation, abuse and trafficking.

Health and maternal care:

Strengthen access to basic health services, medicines, maternal and child health services and psychosocial support. Give immediate attention to pregnant women, including antenatal check-ups, nutrition, referral, transport and safe delivery arrangements.

GEDSI-responsive relief:

Ensure that relief assessment and distribution identify the specific needs of women-headed households, persons with disabilities, older people, children, pregnant and lactating women and other households requiring additional support.

Women's participation:

Involve women and women's groups in relief planning, community kitchen management, food preparation, distribution and monitoring so that assistance reflects their practical needs and concerns.

Community kitchens:

The community kitchen approach appears feasible and immediately relevant for Sibalaya School, Bhimsensthan School and Pandey Gaun Nursery/Indrayani Aadharbhut School. Support should include

food supplies, cooking utensils, safe storage, fuel and water, while ensuring women's meaningful participation in management.

Coordination and access:

Maintain close coordination with the Rural Municipality, ward authorities, CDO/District Disaster Management Committee and other response actors. Given the damaged roads, disrupted communication and limited helicopter access, essential and life-saving supplies should be planned and transported from Kathmandu as early as possible.

7. Conclusion

The initial field visit to Uttargaya Rural Municipality Ward No. 5, Rasuwa, and Bidur Municipality Ward No. 1, Nuwakot, shows that flood-affected and displaced families continue to face serious challenges in meeting their basic needs and rebuilding a sense of safety and normal life. The situation is particularly difficult for families staying in holding centres, where access to safe drinking water, clean toilets, adequate food, health services, privacy and safe living conditions remains limited. The assessment also indicates that the needs are not the same for everyone. Women, children, pregnant and lactating women, older persons and persons with disabilities require additional attention and support based on their individual circumstances.

The situation of children is one of the most urgent concerns. At Sibalaya Aadharbhut School alone, 49 children are reported to have lost their parents, while many other children are separated from family members or are living with uncertainty about the whereabouts of relatives and friends. These children require immediate verification of their family situation, safe and appropriate care arrangements, family tracing and reunification, psychosocial support and continued protection from possible exploitation, abuse and trafficking. The closure or use of schools as holding centres has also disrupted children's education, social interaction and daily routine. Temporary learning opportunities, educational materials and safe spaces for children should therefore be considered alongside immediate protection support.

The assessment also highlights significant concerns around women's safety, dignity and health. Women and girls are facing difficulties with privacy, sanitation and menstrual hygiene, while pregnant women have limited access to regular check-ups, nutritious food, health workers and safe delivery services. The reported damage to health and birthing facilities and the limited availability or accessibility of health workers increase the risk for pregnant women and newborns. Immediate identification and follow-up of pregnant women, maternal and child health services, referral arrangements, transport and basic birthing and newborn supplies are therefore important priorities.

Food and nutrition also require immediate improvement. Although communities have taken the initiative to operate kitchens, the current diet is largely limited to rice and lentils, with inadequate vegetables and other nutritious food. Food storage is also not always safe, and some supplies have been affected by water. A community kitchen approach could provide a practical response in Sibalaya School, Bhimsensthan School and Pandey Gaun Nursery/Indrayani Aadharbhut School, provided that it is supported with adequate food supplies, safe storage, appropriate cooking facilities, community participation and consideration of the different nutritional needs of children, pregnant and lactating women, older people and people with health conditions.

The flood has also caused substantial loss of homes, property, employment and livelihoods. Many families are currently dependent on relief assistance and have limited ability to return to their previous sources of income. Therefore, while immediate relief remains essential, early livelihood recovery should be planned at the same time. Support may include replacement of agricultural inputs, tools and equipment, small

grants, temporary employment and other locally appropriate assistance based on the actual losses and capacities of affected households.

Overall, the assessment suggests that the response should move beyond the provision of general relief and focus on safe, practical and needs-based support. Immediate priorities should include safe water and sanitation, adequate and nutritious food, health and maternal care, child protection, psychosocial support, safe accommodation, protection of women and girls, education support and assistance for persons with disabilities and older people. At the same time, continued data collection is important to verify the current figures, identify households with the greatest needs and avoid people being missed from assistance. The response should be planned and implemented in close coordination with the Rural Municipality, ward authorities, district-level authorities and other response actors, while ensuring that affected women, community groups and other local representatives have a meaningful role in decisions about assistance. Given the difficult road conditions and the estimated travel time from Kathmandu to Rasuwa, relief planning should also take account of transportation time and storage requirements. Locally available items such as vegetables can be sourced from the community where possible, while items that are difficult to obtain locally, such as garlic and onions and other essential supplies, can be brought from Kathmandu. A community-based response combining immediate relief, protection, health, WASH, education and early livelihood recovery would provide a practical way to address the immediate crisis while helping affected families gradually recover and regain stability.

Voices from Uttargaya: Flood Survivors' Stories

The Domestic Crisis: Vulnerability of the Displaced Family

The collapse of physical infrastructure in the wake of a natural disaster is invariably followed by a more silent, domestic catastrophe. Displacement strips families of the controlled environments necessary for early childhood survival, placing an untenable burden on mothers who must navigate the intersection of physical displacement and maternal responsibility. In Uttargaya, the destruction of homes has forced nursing mothers into a state of transient vulnerability, where the absence of dedicated "holding centers" transforms the act of caregiving into a desperate struggle against environmental exposure and nutritional scarcity.

Synthesized accounts from survivors (reveal the harrowing reality of a mother struggling to care for four children of her own—including a 10-month-old infant and a 4-year-old-while also absorbing the burden of her sister's two children. This extended family unit, comprising six children, has been forced into a state of nomadic survival, moving between temporary school shelters and the "Jholarey" area. The primary stressors identified in these accounts include:

- **Absence of Stable "Holding Centers":** The lack of a fixed, safe environment has forced daily relocations, preventing any stability for the six children under the mother's care.
- **Breakdown of the Administrative Communication Chain:** A total absence of official information from the Ward or Municipality regarding relief schedules has left survivors in a state of perpetual uncertainty.

- **Nutritional Deprivation for Nursing Mothers:** The inability to access balanced nutrition has compromised the health of nursing women, directly impacting infant welfare.
- **Total Lack of Female-Led Support Groups:** There is no evidence of organized community circles or gender-specific protection mechanisms to address the unique needs of displaced women and children.

The nutritional crisis is most visceral in the feeding habits of the 10-month-old infant. The mother reports that while the child was exclusively breastfed for the first three months of life, the crisis has forced a total abandonment of nutritional standards. Regarding the infant's current diet, the raw dialogue is stark: **"Now, he eats whatever is available, whatever is given by others."** This transition from maternal milk to a "diet of whatever is given" signifies a critical failure in humanitarian nutritional support.

This individual domestic struggle reflects a broader collapse of local administrative support. The resulting chaos has left even those responsible for the community's welfare caught in a similar state of personal and professional paralysis.

Testimonial 1: Displaced Mother & Family

This testimonial details the daily struggle of a mother managing small children under constant threat of displacement, with blocked supply lines and a complete lack of official communications.

"We have a 10-month-old baby and a 4-year-old child. Right now, we have no proper food management; we just eat whatever is given to us. Sometimes we sleep at the school, and sometimes we stay on the suspension bridge. The flood swept our home away. The mother comes to breastfeed the baby, but we had to feed the baby bottle milk before. We are moving between temporary centers almost daily—we stayed four days in one place before trying to sleep back at the house. Our relatives have gone to China to find work.

We have received absolutely no information or notices from the ward office or supporting organizations. Because of this lack of communication, we just stay wherever we can find a spot—those who are able move ahead, and those who aren't lag behind. No phone networks are working. Our biggest struggle is that we have no fixed place to sleep or stay. We can only eat if someone brings food to us; we cannot go fetch it ourselves because the paths are completely washed away and the children are too small to leave. I have my two children and my sister's two children to protect—if another flood hits, we cannot run away quickly with four small children. No local women's groups or leaders have come to coordinate or help us."

Sacrifice in the Line of Duty: The Account of Ward Secretary Ram Hari Acharya

In the immediate aftermath of a catastrophe, the distinction between "responder" and "victim" often dissolves. Local officials, tasked with spearheading the recovery, frequently endure personal tragedies that mirror or exceed those of the citizens they serve. The experience of Ram Hari Acharya, Ward

Secretary of Uttargaya Ward No. 5, exemplifies the dual role of the official as both a grieving survivor and a functioning pillar of the local administration.

The timeline of Acharya's experience is marked by physical pain and administrative duty. On June 23 (Ashar 10, 2083 BS), Acharya suffered a fall that broke two bones in his hand and two in his back. After 58 days of bed rest, he returned to the office on August 25 (Bhadra 10) to prevent a further backlog of official duties. He arrived at 9:00 AM, accompanied by his wife, Saraswati Nepal Acharya. Upon receiving a flash flood warning from the District Administration Office, he immediately moved to warn residents in the river's path.

The "So What?" of Acharya's narrative lies in the moment his public duty intersected with his private life. As he shouted for the community to flee, the floodwaters surged. He witnessed the massive wave of the Trishuli River sweep his wife away as she attempted to cross the bridge near the school. To date, her body has not been recovered.

Despite his grief and his physical inability to walk properly due to his unhealed fractures, Acharya remains at the Ward Office. His presence is a strategic necessity; with the total loss of the Rural Municipality's physical records and employee files, Acharya serves as a "living record" for the Ward. He continues to manage relief logistics and document the needs of the displaced, choosing to embody administrative continuity while his own life remains in ruins.

This account of individual sacrifice highlights the urgent need for systemic humanitarian intervention to relieve traumatized local staff who are currently the only link between the state and the survivor.

Testimonial 2: Ram Hari Acharya (Ward Secretary, Uttargaya-5)

The local ward secretary recounts returning to work after a severe injury, receiving the disaster warning, attempting to evacuate residents, and tragically losing his wife in the torrent.

"My name is Ram Hari Acharya. I am a resident of Uttargaya Rural Municipality Ward No. 5, and I serve as the Ward Secretary. On Ashar 10, 2083, I met with a severe accident at my house, falling from a terrace and breaking my hand in two places and fracturing two bones in my back. I spent 58 days bedridden. To ensure my medical leave did not stretch too long, I returned to duty on Bhadra 10, 2083. I had brought my wife, Saraswoti Nepal Acharya, with me to register my attendance at the Uttargaya Rural Municipality office.

After registering, we received a warning from the District Administration Office that a catastrophic, massive flood was incoming. While I was actively informing and warning the public living along the riverbanks to flee and save their lives, I was suddenly caught in a 5-meter wave of water. I was rescued and brought to the hospital. However, while crossing the bridge to return to our residence, my wife was swept away by the massive Trishuli River flood near the school. To this day, neither her body nor any sign of her has been recovered.

Even in this painful hour, to fulfill the heavy responsibilities assigned to me by the Ward Office, I am staying at the office trying to assist all the victims and displaced people with relief efforts. Even though I cannot walk properly due to my ongoing treatment, being able to provide whatever help I can to the residents of Uttargaya brings me peace."

The Humanitarian Mandate: Resettlement and Child Welfare Appeals

Strategic recovery in Uttargaya requires a transition from short-term relief to long-term resettlement. For the most vulnerable survivors, particularly children who have lost their primary caregivers, the disaster represents a permanent alteration of their life trajectory. Preservation of the next generation depends on a mandate that prioritizes institutional "adoption" and the physical relocation of entire settlements.

Below is the scale of the humanitarian requirement across the Rasuwa district:

- **Orphanhood:** Approximately 40 children have been identified as having lost both parents to the floodwaters.
- **Displacement:** An estimated 2,000 families are currently homeless and require immediate permanent housing solutions.

The humanitarian response must be categorized into three distinct pillars:

1. **Immediate Relief Material:** Sustained supply of food, clothing, and medical supplies.
2. **Educational and Social Protection for Orphans:** Institutional sponsorship to ensure housing and educational continuity for children without parents.
3. **Strategic Resettlement:** Moving communities away from high-risk river zones to government-secured, permanent land.

While high-level policy appeals continue, the operational reality on the ground has been managed by the only institutions that remained functional when the waters rose: the local schools.

Testimonial 3: Appeal for Resettlement and Orphan Care

The Ward Secretary issues a direct plea to the federal, province government and aid organizations to address long-term shelter and care for orphans.

"In this tragic hour, I urge all the residents of Uttargaya Rural Municipality to remain patient. For the children who have tragically lost their parents—about 40 children in our area—I appeal to the Government of Nepal and relevant organizations to support their upbringing, care, and education.

I request all organizations coming to help Uttargaya to provide relief materials based on the actual immediate needs of our people. Lastly, I urgently request the Government of Nepal to resettle the nearly 2,000 displaced families of Rasuwa district to safer areas and arrange permanent housing for them as quickly as possible."

The Flash Flood in Naubise: Eyewitness Trauma and Survival

The psychological landscape of Uttargaya is defined by "psychosocial paralysis." For those who witnessed the peak of the flash flood in Naubise (Uttargaya-5), the trauma is sensory and persistent. Survivors describe the flood arriving with "storm-like" speed, a roaring (gar-gar) surge that erased the landscape in seconds.

Witnesses recount the visual of hundreds of people, vehicles, and motorcycles being swept away. In the immediate settlement (*basti*) where the witness was located, only an estimated 85% of residents managed to reach high ground; the remainder were lost to the torrent. This trauma has resulted in a loss of psychological control; one survivor noted that the community is so haunted that they "don't even know what they are saying" due to the terror of the water's sound at night.

The urgent requirements for the Naubise survivors include:

- **Mobile Health Camps:** To treat injuries, such as leg fractures sustained during the escape, for those unable to travel to distant hospitals.
- **Psychosocial Counselors:** To address the collective terror triggered by the "roaring" of the river, which prevents sleep and stable functioning.

The survivor's experience is defined by the **Three Pillars of Deprivation:**

- **Homelessness:** The total loss of shelter and the uncertainty of future residence.
- **Orphanhood:** The disintegration of the family unit, leaving children without protection.
- **Total Asset Loss:** The erasure of all property, wealth, and identity documents.

While immediate relief is now flowing, the long-term survival of the Uttargaya people depends on a structured, government-led resettlement plan and the institutional protection of the children left behind by the flood. Without permanent land and educational "adoption" programs, the community remains in a state of terminal vulnerability.

Testimonial 4: Survivor from Naubise Settlement

A survivor describes the terrifying moment the flood hit, the psychological trauma gripping the community, and the desperate need for medical camps.

"I live down in Naubise (Ward No. 5). When we heard the news that the flood was coming, we immediately rushed to warn everyone to run. We saved some people, but the flood came like a sudden hurricane. Those who realized it fled, but those who tried to gather their belongings couldn't escape in time. Right before my eyes, about 1,000 people in front of me and 1,000 behind were swept away, along with vehicles, motorcycles, and buildings. I only survived by swimming and scrambling up a steep, muddy slope. I am partially disabled now; my leg still won't straighten.

The survivors are currently sheltered across three schools: Shiwalaya, Nilkantha, and Bhimsensthan. There are parentless children, and parents who have lost their children. In some cases, parents sent their kids to school, and the kids were swept away; in others, the parents were swept away while the kids were at school. Only about 85% of the residents from our settlement survived.

The flood came so incredibly fast, sweeping down like it was flying. Only about one out of two people fleeing survived; my own relative was among those who died. Right in front of me, about 300 to 400 people were swept away in a line of cars, motorcycles, and people waiting to escape. Only two of us, alongside two police officers, managed to scramble up the slope.

Our immediate needs are food, clothing, shelter, and education. Children have no change of clothes; we are wearing the same clothes we fled in. But most importantly, we need psychosocial support. People are severely traumatized. During the day, they stay in the lower settlement, but as night falls and the river starts rumbling, they panic and flee. I myself sometimes lose control of my words due to the trauma. Some mothers saved their children by carrying them up the hills, but now those children and mothers are falling sick. We urgently need daily health camps, hygiene supplies like soap, and long-term planning for these children who have lost everything."

Testimonial 5: School Administrator & Emergency Coordinator

This interview outlines the complete destruction of local schools and explains how teachers have stepped in to run the entire disaster response in the absence of state civil servants.

"There are so many children left parentless... it is beyond words. While trying to save lives, I pulled out about 10 people who thanked me. A school driver pleaded with me from across the river, saying, 'Please take this child and save them'. We crossed using a rope, and that is how we survived. I saw thousands of people being swept away in the main torrent right before my eyes.

Schools like Ramchandra Basic School, and Uttargaya Boarding School School are completely destroyed-there is absolutely nothing left of them. This was the main educational hub for the students of Ward 5. There are no local women's groups or volunteers visible here because they are sheltering in other people's homes.

Everything is being run by the school teachers and management committees. We are coordinating the food, purchasing vegetables from Kathmandu, and managing the shelters. We estimate that around 100 children in this area have lost their parents. If we can establish a unified shelter, perhaps using the hostel infrastructure of Nilkantha School, we can manage their education, care, and overall upbringing. But right now, people are so terrified that they run away to higher ground the moment night falls."

Photos



Figure 1 Flood-Affected Community at Uttargaya-5 Holding Center: Shree Siwalaya Basic School, Uttargaya RM-5, LahareyPauwa, Rasuwa



Figure 2 Discussion with the School Administrator and Emergency Coordinator to assess the current situation and identify potential areas for further support



Figure 3 Flood affected Children at Holding Center: Shree Siwalaya Basic School, Uttargaya RM-5, LahareyPauwa, Rasuwa



Figure 4 Displaced mother & her Family



Figure 5 Flood-Affected Person Sharing Experiences and Support Needs



Figure 6 Briefing on the Situation at Siwalaya School Holding Center, Uttargay RM Ward 5, Rasuwa



Figure 7 Ward Secretary of Uttargaya-5, Rasuwa also affected by the flood, sharing the current situation and urgent support needs.

Thank You