

IMPACT OF COVID 19 IN SOCIAL LIFE

(A Case study of Ward No.7 Itahari, Sunsari)

A Thesis

Submitted to

Tribhuvan University

Faculty of Humanities and Social Science

Padmakanya Multiple Campus

Department of Sociology

In partial fulfillment of the requirements for the Degree of

Masters in Sociology

By:

Shreejana Ghimire

Campus Roll No.075/88

T.U. Registration No: 6-2-478-301-2012

Symbol No

June, 2023

VIVA-VOCE SHEET

We have conducted the viva –voce of the thesis presented

By:

SHREEJANA GHIMIRE

Entitled:

IMPACT OF COVID 19 ON SOCIAL LIFE OF PEOPLE

(A case Study of Ward No. 7 Itahari Sunsari)

And found the thesis to be the original work of the student and written according to the prescribed format. We recommend the thesis to be accepted as partial fulfillment of the requirement for the degree of

Master of Arts (M.A)

Viva-Voce Committee

Head, Research Department

Member (Thesis Supervisor)

Member (External Expert)

DECLARATION

I hereby declare that the work reported in this thesis entitled **Impact of Covid 19 on social life of the people (A Case Study of Ward No. 7 Itahari 7 Sunsari)** submitted to Office of the Dean, Faculty of Humanities and Social Science, Tribhuvan University is my original work conducted in the form of partial fulfillment of the requirement for the degree of Master of Arts (M.A.) under the supervision of **Tanka Mani Poudel** of Padma Kanya Campus.

.....

Shreejana Ghimire

Padma Kanya Multiple Campus

Campus Roll No.

T.U. Regd. No. 6-2-478-301-2012

ACKNOWLEDGEMENT

This thesis entitled “Impact of Covid 19 on social life of the people (A case Study of Itahari 7 Sunsari) has been prepared in the partial fulfillment for the degree of Master in Arts (MA) under the supervision of Tanka Mani Poudel, Padma Kanya Multiple Campus

I would like thank to my supervisor Tanka Mani Poudel for his patience and guidance from the beginning till the completion of the research work. This thesis couldn't be completed without his valuable comments and kind support.

At this moment I cannot forget my all Teachers of Padma Kanya Campus who inspired me showing extreme interest in my study and work.

Also I would like to Thank my Husband Lomash Khatiwada who guided me in this entire thesis work.

At last, I am thankful to my parents and my friends who have always been my great source of inspiration.

Shreejana Ghimire

Contents

CHAPTER I	1
INTRODUCTION	1
Background	1
Statement of Problem:	4
Objective of the study:	5
Importance of the study:	5
Limitation of the study:	6
CHAPTER II	8
REVIEW OF LITERATURE	8
Theoretical review	8
Ethnomethodology Theory	8
BJ Fogg Behavioral Model	10
Policy Review	18
Research Gap	19
CHAPTER III	20
RESEARCH METHODS	20
Research Design:	20
Selection of Study Area	20
Population and Sample	21
Data collection procedure	23
Data Analysis:	23
CHAPTER IV	24
PRESENTATION AND ANALYSIS OF DATA	24
4.2 Household Survey:	24
4.2.1 Awareness on Covid 19	24
4.2.2 Fatality	25
4.2.3 Views on Social Distancing and wearing Mask	26
4.2.4 Participation in social gathering:	26
4.2.5 Leisure time:	27
4.3 Hotels and restaurant Survey:	27

4.3.1 Flow of customer:	27
4.3.2 Change in Demand and Preference of Customer	28
4.3.3 Organization of Function and parties:	29
4.4 School and college:	29
4.4.1 Changes in rules and regulation of School	29
4.4.2 Additional demand from Parents and Students	30
4.5 For hospital	30
4.5.1 No. of covid patient per week:	30
4.5.2 Any Insignificant behavior shown by Covid patients:	30
4.5.3 Precautionary measure adopted to minimize risk of infection to you and your family	31
4.6 Business House	31
4.6.1 Flow of customers	31
4.6.2 No. of covid Infected and recovered:	31
4.6.3 Any Noticeable changes in Customer behavior	32
5.1 Summary of Major Findings	33
5.2 Conclusion:	35
<i>References</i>	36
Checklist/ Schedule Questions.	39

CHAPTER I

INTRODUCTION

Background

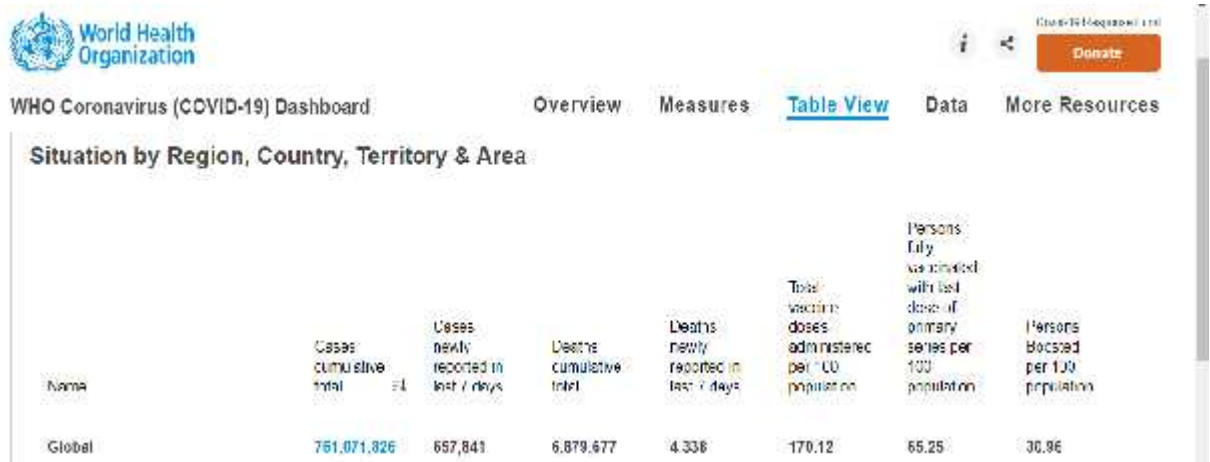
A virus is a smallest infectious agent that multiplies inside the cells of living organism. When a virus infects the host cell, it forces the host to generate identical copies of original virus quickly at a large amount. In a contrast to most other living beings, viruses do not have cells that divide but the new viruses assemble in the infected host cell. However, their origin is unclear. It is believed that some viruses have evolved from plasmids pieces of DNA while others viruses are believed to be evolved from bacteria. Various viruses that are deadly are found in the earth. Some of them are HIV virus, smallpox, Ebola, Hanta virus, Influenza, SARS, Rabies etc. Thousands of people are reported to be dead each year due to viral infection. As per the report published by WHO, about 75 million people have been infected by HIV virus and about 35 million people have died till 2019. Similarly thousands of people have died from Ebola Virus in Africa from 2014 to 2019. In the current period a new virus has been evolved and it was named Novel Corona Virus (COVID-19) (WHO, 2019).

A pandemic is defined as an epidemic that occurs worldwide or over a broad area, crosses international boundaries and usually affects a large mass of people. The traditional definition includes nothing about immunity of population, virology or disease severity. By this definition of pandemic it can be said to occur every year in each of the temperate southern and northern hemispheres, given that seasonal epidemics crosses international boundaries and affect a large mass of people. However, seasonal epidemics are not considered as pandemics. Communicable diseases got presented during humankind's hunter-gatherer days but the shift to agrarian life 10,000 years ago created communities that made epidemics more possible. Malaria, smallpox, tuberculosis, leprosy, influenza and others first appeared during this period. The earliest pandemic was recorded to happen during the Peloponnesian War around 430B.C. After this the disease transmitted through Libya, Ethiopia and Egypt, it crossed the Athenian walls as the

Spartans laid siege. Due to this two-thirds of the population died. Many severe pandemic have hit the world till this time. Some of them are antonine plague 165 AD, Cyprian Plague 265 AD, The Black Death 1350 AD, The Great Plague of London 1665 A.D, First Cholera Pandemic 1817 A.D., Spanish Flu 1918 A.D., SARS 2003 A.D, COVID 19 2019 A.D. etc.

Coronavirus disease (COVID-19) is an infectious disease caused by a newly discovered coronavirus (WHO, 2020). In the short period of its discovery it has become biggest threat to the world. The virus is contagious and can be easily get transmitted if the infected people came in close contact with others. Due to its rapid transmission WHO has declared its outbreak as Global Pandemic on 11 March 2020. Covid 19 is a respiratory disease and affects the lungs of the host. The major symptoms after Covid 19 infection are fever, cough, shortness of breath, disappearance of taste etc.

Novel corona Virus was first reported in Wuhan China in December 2019. In the short period of its discovery it has become a global pandemic. As per the report of WHO and worldometer Novel corona Virus cases has been reported in 218 countries and territories with 761,071,826 confirmed cases and 68,779,677 deaths till date (**WHO 2023**).



The image shows a screenshot of the WHO Coronavirus (COVID-19) Dashboard. The dashboard includes the WHO logo, navigation tabs for Overview, Measures, Table View (selected), Data, and More Resources, and a 'Donate' button. The main section is titled 'Situation by Region, Country, Territory & Area' and contains a table with the following data:

Name	Cases cumulative total	Cases newly reported in last 7 days	Deaths cumulative total	Deaths newly reported in last 7 days	Total vaccine doses administered per 100 population	Persons fully vaccinated with last dose of primary series per 100 population	Persons blocked per 100 population
Global	761,071,826	657,841	6,879,677	4,336	170.12	65.25	30.96

First case of Novel corona Virus was seen in the Nepali student returning from China. Till 3 April 2020 6 individuals are found positive of coronal virus infection. Moreover, almost all the countries have announced lockdown in their countries for the prevention of further infection. Nepal has also announced lockdown from Chaitra 11 2076 to Chaitra 25

2076, which was extended later. In this period Nepal government has implemented Social Distancing and people are ordered to stay at their home. However at present lockdown has been removed but still the chances of infection is high. Due to this people have experienced drastic change in the social life. Record of 28 February 2023 shows 11,53,378 people got infected by Covid 19 in Nepal and 12,020 have died (Ministry of Health and Population Nepal, 2023)



For this research Itahari ward no 7 of Sunsari district has been taken into consideration. Sunsari District is second in infection rate in Province 1. Till 6 January 2021, 8955 people of sunsari District got infected 144 people died in sunsari district due to Covid 19 (Office of Chief minister and council of ministers, Province 1). Sunsari District consists 2 sub metropolitan cities, four urban municipalities and six rural municipalities. In this research, the researcher has done case study of ward no 7 of Itahari Municipality. Till 6 January 2021 132 people got infected by Covid 19 virus and 2 of them have died in this ward.

Social life is defined as the part of people life spent by interacting with others. Social life involves communication between the subject and his peers. The relationship between people is governed by diverse codes and norms that minimize the conflict and make possible that there is harmony in this social life. Human beings are considered social being. Apart from their personal life they are looking for friends, love and people to express their views and ideas and they can achieve it through the active involvement in the society. In addition to this social life encompasses the interconnected web of relationships, interactions, and activities that individuals engage in within a social

context. It is a fundamental aspect of human existence, shaping our identities, experiences, and well-being. Social life extends across various domains, including family, friendships, communities, work environments, and broader societal interactions. Social life is not limited to face-to-face interactions only but has also expanded with the beginning of technology. Online platforms and social media have transformed the way people connect and interact, enabling virtual communities and extending social networks beyond geographical boundaries. These digital spaces provide opportunities for information-sharing, collaboration, and the formation of new social connections. Social life is highly influenced by social norms, cultural values, and societal structures. It includes the roles individuals play within their communities and the expectations and responsibilities associated with those roles. Social life is also shaped by factors such as age, gender, ethnicity, socioeconomic status, and personal interests, which influence the dynamics of social interactions and the formation of social groups.

Hence this thesis is conducted to find the changes experienced by people in their social life after Covid 19 outbreak. For this 25 samples of Itahari 7 Sunsari are selected at random and the response obtained from them are analyzed, tabulated and summarized to obtain the final conclusion. These samples are taken from the households, restaurants and hotels, school/colleges, hospital/clinic and business house.

Statement of Problem:

Humans are social beings and for them the social life is very important. However due to outbreak of covid 19 virus, social life of the people has been limited. The virus is very contagious and can spread rapidly. The current state of the world has already proved its effects. From the first discovery of virus to till this time people have gone through different mental and psychological stages. They have seen and felt the severity of infection. Due to this, social life of people has changed to some extent. This research has tried to figure out the changes brought in the social life of people after the outbreak.

In Nepal, Covid 19 has severely affected economic and social aspects. Many business houses are closed for more than six months due to ongoing lockdowns. Due to this many lost their jobs. Similarly people stayed at their home due to fear of infection. Due to

various myths and fake news in social media many people have developed mental and psychological issues. They feared to meet and interact with people. Despite this, most of researches have been focused only on economic and technological aspects but social aspects of people have been ignored. Few researches have been conducted in global level that depicts social changes in people. Since human behavior is different, research conducted in global level may not fully illustrate clear pictures of locality. These reports are crucial to find the changes that people have implemented in their social life after the outbreak.

In our initial interview with local people they stated that they have now limited face to face interaction with people. Similarly they have restricted outdoor activities like jogging, hiking, picnic, social gathering etc these days. Some of them informed that frequency of interaction with their family members has now increased. In some case people stated that they have feeling of loneliness, insecurity or uncertainty, hopelessness and over thinking after the pandemic. Hence this research tries to figure out following research questions:

- 1) Are local people aware of COVID 19 and its current situation?
- 2) What are the changes observed in people social behavior after COVID 19 outbreak?

Objective of the study:

The main objective of this thesis has been illustrated hereunder:

- 1) To check the awareness level of local people regarding COVID 19
- 2) To find out the changes in the people social life after COVID 19 outbreak.

Importance of the study:

There are still considerable gaps in understanding impact of Covid 19 in social life of people and in their behavior. Many people have been taking it lightly and this has worsened the scenario. Here in this research researcher has tried to find out current damage made by Covid 19 in social life of people and awareness level of local people regarding corona virus. Similarly this research helps us to find out new practice adopted

by society and in their way of living after the outbreak of COVID 19 virus. Further this research are helpful to the readers and other stakeholder to know the current status of infection in Nepal and in local region and also preventive measures adopted by Nepal Government for breaking infection chain. Moreover, researcher believed that the findings made from this research are supportive to other researchers for validation of their research works.

Limitation of the study:

Since the study is being carried out in a partial fulfillment of the requirement for the degree; Master of Arts (sociology), it possesses some limitations, which are indicated below:

- i) 25 samples from Itahari ward no. 7 are taken into consideration through quota sampling method. Hence the study is a sample representation of entire ward.
- ii) This research is based on Qualitative data and descriptive method will be used.
- iii) One member from each survey area are interviewed as per checklist and their responses have been further processed. Hence the accuracy of the study depends on the answer of respondents.
- iv) For this research 5 people each from hotels area, hospital area, school/college, households and business house are considered as respondents.

Organization of the Study

The study is organized into five chapters. The first chapter is Introduction. It contains general background of the study including statement of the problem, research question, and objectives of the study, significance of the study and limitation of the study and organization of the study. The second Chapter Literature Review contains review of literature related to studies which contain theoretical review, review of previous study, research gap, conceptual framework of this study and specification of variables. Third chapter Research Methodology covers the research design and methodology which includes, the planes methods used while conducting the research

which has helped to guide the research towards its main finding and conclusion. It includes selection of the study area, research design, universe and sampling, nature and sources of data collection, tools and techniques of data collection and data analysis and presentation. Fourth Chapter presentation and analysis of data contains analysis and discussion of data. It contains the demographic information, and descriptive analysis of the study. Finally the last chapter Conclusion.

CHAPTER II

REVIEW OF LITERATURE

A review of literature is a survey of books, scholarly articles, and any other sources relevant to a particular issue, area of research, or theories. It helps to provide a description, summary, and critical evaluation of these works in relation to the research problem being investigated. Literature reviews are designed to provide an overview of sources you have explored while researching a particular topic and to demonstrate to your readers how your research fits within a larger field of study. It is classified in three subgroups which are as follows:

Theoretical review

A theoretical framework is a foundational review of existing theories that act as a direction for developing the arguments that is used in the research. In a theoretical framework, researcher explains the existing theories that support the research, showing that the paper or dissertation topic is relevant and grounded in established ideas. Here in this thesis researcher had reviewed two sociological theories; Ethnomethodology theory, and BJ Fogg Behavioral model.

Ethnomethodology Theory

Ethnomethodology theory is a concept under social interaction theory. This concept was developed by Harold Garfinkel in 1960s. The ethnomethodological approach focuses on the capacities of people as members of a collective rather than their individuating traits as distinct persons. In Garfinkel's own words, "Ethnomethodological studies analyze everyday activities as members' methods for making those same activities visibly-rational-and-reportable-for-all-practical purposes, i.e., 'accountable,' as organizations of commonplace everyday activities. Here are key aspects of ethnomethodology:

1. **Practical Reasoning:** Ethnomethodology emphasizes the practical reasoning that individuals use to navigate social interactions. It looks at how people make sense of and interpret their experiences in the ongoing flow of everyday life. This includes the methods individuals use to categorize, interpret, and respond to social situations.
2. **Indexicality:** Ethnomethodology emphasizes the indexical nature of social interaction. Indexicality refers to how individuals use contextual cues and references to interpret and produce meaning in specific situations. Indexical expressions can include gestures, facial expressions, tone of voice, or specific language choices that carry meaning within a particular context.
3. **Social Order and Norms:** Ethnomethodology examines how individuals create and maintain social order through their interactions. It focuses on the production of social norms and rules that guide behavior in specific social contexts. Ethnomethodologists are interested in understanding how individuals produce and enforce these norms, often through tacit understandings and implicit rules.
4. **Breaching Experiments:** One notable aspect of ethnomethodology is the use of "breaching experiments." These experiments involve deliberately breaking or violating social norms in order to reveal the underlying assumptions and expectations that people have in a particular social situation. By intentionally disrupting the taken-for-granted order, ethnomethodologists seek to uncover the background knowledge and methods individuals use to maintain social order.
5. **Reflexivity:** Ethnomethodology encourages reflexivity and self-awareness in research. It emphasizes the need for researchers to reflect on their own role in shaping and interpreting social phenomena. Researchers engage in reflexive analysis, examining their own assumptions and biases in the study of social interaction.

Source: Crossman, Ashley. (2020). Garfinkel, H. (1967).

BJ Fogg Behavioral Model

The research titled “The Fogg Behaviour Model” done by BJ Fogg at Stanford University, suggests that “Behavior (B) happens when motivation (M), ability (A) and a prompt (P) come together at the same moment.” The model can be illustrated in the equation **B=MAP**.

BJ Fogg has defined three pillars for behavioral change which are provided below:

a) Motivation

As defined by BJ Fogg, Motivation is a large and complex subject and for purpose Fogg breaks it down motivation into three core factors; sensation, anticipation and belonging. Sensation is physical drivers of motivation. Anticipation is emotional drivers whereas belonging is social drivers.

b) Ability

In defining ability Fogg is not simply saying about the capabilities that an individual possesses to do things. In the contrast he is thinking about their capability and their opportunity both. This includes a sequence of environmental forces that influence how easy it is for someone to do things. Persons may have large amounts of personal capability, but if their environment makes it hard for them to execute that activity, then they can be said to have low levels of ability. In this model Fogg has considered six factors that comprise ability. They are money, time, physical effort, thought, social deviance and “non-routine” nature


c) Prompts:


When Fogg refers to prompts, he’s speaking about outside influencing factors that can initiate a behavior in a person. These prompts can happen from people, they can be from environment or objects, or in the digital world they can be stuff like icons and notifications. In this model, Fogg has recognized three categories of prompts that influence individuals with different levels of motivation and ability.

Fogg theory of Behavioral model is very useful to know various behavioral changes people have undergone in their personal and social life in this pandemic situation. Due to

this social life of people have been changed. For instance change in social life in the current situation using Fogg Behavioral model has been presented below:

Fogg Model for Behavioral Change (B) = MAP

Motivation  **Fear of Infection, Fear to get punished from Government**

Ability  **Social Deviance**

Prompt  **External Influencing factors (Education, awareness program)**

(Behavior Model. (2023,))

Empirical Review

Human are social beings and they love to spend their lives in a company. However, rapid spread of covid 19 viruses have forced people to isolate themselves and shrinked their social life. Since the chances of infection are very high people have started social distancing and adopted some changes in social behavior. Many articles and research has been published related to importance of social life and impact of covid 19 viruses. Some of them are highlighted below:

In the article Impact of COVID-19 on socioeconomic and mental health aspects in Nepal focused on impact of lockdown imposed by Government of Nepal for breaking chain of covid 19 outbreak. Their article has mainly focused impact on trade and tourism, education, media, health and life of vulnerable people. Similarly their article has also described impact of Covid 19 lockdown. The article concluded that curfews, lockdowns self-isolation, quarantine, social distancing have affected the overall physical, mental,

spiritual and social wellbeing of the Nepalese. With the start of lockdown, the government decided to shut down all restaurants, malls, cinema halls, gyms, health clubs and museums. The government also banned the gathering of people for cultural, social or religious activities,. In the case of death, the pandemic has disrupted the regular mourning processes of families. Although these practices were done for the protection of people from COVID-19, but that had created anxiety, fear, and uncertainty among the Nepalese, which needs to be attended immediately. The economic recessions have put noteworthy financial pressure on many families, which might increase unhealthy conflict, family breakdown, depression abuse, and domestic violence. The psychological impacts of the COVID-19 lockdown might be a challenge for an uncertain time. Hence it is necessary to focus and address coping strategies, mental health interventions and awareness using the accessible resources. To deal with the current pandemic and potential health emergencies of future, the government should be equipped with sufficient health logistics, technologies and skilled manpower. The government also needs to develop its capability in health financing to predict possible opportunities and challenges of future. By amplification the health care workforce, conducting mandatory health education and training in schools, sensibly utilizing presented health manpower, investing and expanding the scope of health research and establishing well-equipped laboratories, Nepal needs to be prepared for re-emergence probably another outbreak. The long-standing battle with corona virus may help people to succeed against it by developing vaccines and medicines, however, in the long run, the country must be ready for numerous mental health threats linked with the pandemic and actions should be established and implemented (Poudel, & Subedi, 2020)

Journal Covid-19 and its impact on society has tried to analyze the impact of the COVID-19 in the life of the individual as a whole. For this journal the data is collected from secondary information which is available on the internet. The author further declared that this research journal is written at the very initial stage of the problem. Hence, it is quite possible that the data and findings might have opposition and there may be a deficiency of the data, research and much information related to the research topic. This journal concluded that the Pandemic is harshly impacting the life of the people on the whole. Everyone in the worlds are directly or indirectly facing the harsh consequences of this

disease. Many countries have declared exceptional emergency alert and lockdowns. The Schools, universities, colleges, malls, pubs, Market, Shopping Complex etc. are shut down by the Governments. It has created a situation of fear, stress and anxiety among the developed and developing societies. All the member nations of WHO have issued advisories regarding the impact of the Novel Corona Virus. But this disease due to its extreme isolation and lockdown measures generates various other issues including social anxiety, panic states, economic recessions and extreme mental stress. To contain this virus, coordinated efforts are required and individuals need to make uncomfortable yet necessary modifications in their daily routine in accordance to the advisories and suggestions made by the Government and WHO. This will provide maximum opportunities for the medical staff to intrude effectively with the limited resources at their disposal and buy considerable time to deploy additional resources for controlled management of this Pandemic. (Singh, 2020).

Article The Psychological and Social Impact of Covid-19: New Perspectives of Well-Being has focused on risk of Covid 19 in population, Training and Promotion of Psychological Well-Being and Advantages of online psychotherapy and Psychological Support. The researcher has mentioned that The Covid-19 pandemic had affected the way individuals live interpersonal relationships. The lockdown was characterized of a unusual organization of daily life, with an increase of time at home and a decrease of personal distance through digital services. As reported in a recent survey administered during the Covid-19 pandemic, young adults and children are particularly at threat of rising anxious symptoms. Researcher of the article further list out that current period was also seen as a progress in the concept of empathy, producing new ideas and views in the study of the phenomenon according to neurological and sociological points of view. Indeed, empathy is defined as the capability to recognize and share the feelings of another. It involves several elements, such as (a) social context and historical era of humans, (b) neurological mechanisms, and (c) psychological and behavioral answer to feelings of others. The neuro-sociological perspective examines the mechanisms involved in the empathic process, focusing on people communication and interpersonal relationships (Singer and Lamm, 2009; Decety and Ickes, 2009). Specifically, in the historical era characterized by growth in the man-machine relationship, neurosociology could become one of the

principal sciences for the study of technology and its human relation. “We live increasingly in a human–machine world. Anyone who doesn’t understand this, and who is not struggling to adapt to the new environment—whether they like that environment or not—is already being left behind. Adapting to the new, fast-changing, technologically enhanced context is one of the major challenges of our times. And that certainly goes for education” (Prensky, 2012, p. 64).As per above mentioned considerations, researcher has provided following suggestions:

Primary prevention: Studying and learning the impact of the pandemic towards an at-risk population to decrease symptoms associated to stress and providing precise online psychological counseling based on the target (students, medical staff, parents, and teachers).

Secondary prevention: Surmounting the boundaries of the human communication based on digital devices: (1) developing innovative spaces of inter and intra-social communication and novel tools of support and psychological treatment, reproducing the multisensory experienced during the face-to-face communication (Virtual Reality, holograms, serious game etc.); (2) training the next generation of psychotherapists in organizing online devices and in applying their adaptive and personal skills; and (3) sensitizing the general population on telepsychology and its pros. (Saladino, Algeri, & Auriemma, 2020))

Research article Impact of COVID-19 on health services utilization in Province-2 of Nepal: a qualitative study among community members and stakeholders aimed to look at community insight of COVID-19 and their familiarity towards health services utilization during the pandemic in Province-2 of Nepal. For this research semi-structured qualitative interviews were organized among selected participants from a mix of urban and rural settings in all districts of the Province 2 of Nepal. Virtual interviews were organized between July and August 2020 in local languages. The data were processed using thematic network analysis in N Vivo 12 Pro. The findings of this research are categorized into four universal themes: i) Community and stakeholders’ insight towards COVID-19; ii) Impact of COVID-19 and lockdown on health service iii) Community perceptions and

experiences of health services during COVID-19; and iv) COVID-19: testing, isolation, and quarantine services. Most of the participants shared their experience of being worried and anxious about COVID-19 and testify lack of awareness, stigma and misinformation, as main factors that contributed to the spread of COVID-19. Maternity services, immunization, and supply of essential medicine were found to be the most affected areas of health care delivery during the lockdown. Participants reported that the interruptions in health services were mostly due to the closure of health services at local health care facilities, limited affordability, and involvement of private health sectors during the pandemic, fears of COVID-19 transmission between health care workers and within health centers, and disruption of transportation services. Besides, the participants also expressed frustrations on poor testing, quarantine service and isolation related to COVID-19, and poor responsibility from the government at all levels towards health services management during the COVID-19 pandemic.

The study concludes that anxiety and public fear of COVID-19, unavailability of medicine, transportation disturbance and unavailability of health services at local health facilities, stigma related to COVID-19, underprivileged management and supervision of quarantine, isolation and testing facilities of COVID-19, dissatisfaction and frustration among health care providers, and thin participation and contribution of private health care sectors were major barricade in health services utilization during COVID-19 pandemic in Province-2 of Nepal. Besides this, vital health services like maternal and child health services, chronic diseases treatment services were harshly affected in both rural and urban settings. In addition to COVID-dedicated health service the researcher suggested that vital health services should receive a nonstop concern to optimize the uptake of health care utilization between the local population. (Singh, et al. 2021))

Impact assessment of the COVID-19 outbreak on wellbeing of children and families in Albania found out that about 35% of contestants report elevated level anxiety symptoms experiences during the COVID-19 pandemic. Study shows that gender differences are present, with females are reporting higher levels of anxiety symptoms than male participants. Besides this, the participants of age-groups over 60 years olds experiences more anxiety than the other age-groups. The connection between positive parenting

practices and anxiety symptoms was noteworthy and stated that parents that used less positive parenting practices, were in the range of experiencing senior level of anxiety (51% reporting high anxiety symptoms, versus 48.1% reporting ordinary anxiety symptoms). This relationship is established by a slight but significant downbeat correlation that exists between worry and anxiety experience and positive parenting practices. Moreover, anxiety and worry has a affirmative correlation with pessimistic parenting practices ($r = .226$, $p < .000$). When the study is carried out only for the feminine population of this study, the relationship becomes high and strong (respectively $r = -.232$ between worry and anxiety and positive parenting practices and $r = .254$ between worry and anxiety and negative parenting practices).

Research article "COVID-19 and employees' mental health: stressors, moderators and agenda for organizational actions" stated that there are no precise studies which examine this moderating role of these forces in the relationship between COVID-19 outbreak and employees' mental health. However, it is likely to make some forecast on the basis of workplace mental health's literature. In fact, study showed that female are more prone to depression than male (Bonde, 2008; Read & Gorman, 2011) and they have superior psychological vulnerability to stress, which imply that they may react more strongly to stress compared to male, in the case of a pandemic (Brug et al., 2004; Zhu et al., 2020). Besides this, the study of Braunack-Mayer et al. (2013) revealed that pregnant women and those with young children are more worried about becoming infected or transmitting the virus to other people, which may imply that they might be more stressed than male and other female population who are not in the same situation. On the other hand, one research explained that being a man was a predictive factor for the onset of psychological disorders during SARS (Mihashi et al., 2009). In addition, it shows that older adults are more expected to be at great risk of mental health issues and that is mainly because of the soaring rate of mortality among them during COVID-19 (Yang et al., 2020), which make them weak physically and psychologically. Generally, they are lonesome with little social support (no children or their children have left home) (Yang et al., 2020), and due to lack of technological skills they have limited contact to the online mental health services. This might significantly weaken their mental health (Yang et al., 2020). Furthermore, education is supposed to have a cushion effect because high educated people have good

cognitive skills which may help them to deal with the result of any disability (Brug et al., 2004; Drapeau et al., 2011; Mihashi et al., 2009) Besides this, the past of mental illness is a risk issue during pandemics (Brooks et al., 2020). An individual's insight of their physical health, if poor, is also linked with high stress and psychological morbidity (Tam et al., 2004) It is also the issue if the people have a history of chronic illnesses (Hamouche, 2020).

Research article "How covid 19 will permanently change consumer behavior" stated that Covid-19 outbreak has dropped down the speed and changed the daily life of many consumers. This is having a deep effect on the way we view personal hygiene and health and how we connect with our family friends and communities.. People are adapting technology more than ever to sustain all aspects and impact of isolation. There is also optimistic evidence to recommend that this emergency situation will build communities rather than separate them. The media is uncontrolled with advice from the government and healthcare advisors on "washing your hands," and people are following it on high note. Before the virus, people in general washed their hands about six times a day. During the pandemic, they are washing around 12 times a day—a 90% increase. Overall, consumers are shifting personal habits such as cleaning surface and more than 85% of consumers plan to carry on these habits on post outbreak as well. Such transformation may present new opportunities for personal hygiene aiding within a company's portfolio. People are also caring for themselves using virtual tools. Half of those we surveyed are spending more of their time on self-care and mental wellbeing. In a global scenario downloads of the top 10 health and fitness apps amplified by 60% between December 2019 and late March 2020. 8 of these were fitness apps that included "at home" or "home workouts" in their names or descriptions as of April 6, 2020. Beside this, the last week of March 2020 users that completed calming exercise on meditation app Headspace increased 19-fold, while those who completing an anxiety reframe session grew 14-fold. (Accenture, 2023).

Policy Review

In this section researcher has reviewed laws and acts regarding infectious disease and various circulars and notice issued by Nepal Government regarding COVID 19.

Constitution of Nepal 2073 has provided right to every people to live freely, freedom of opinion and expression, free to form union and association.

The government of Nepal has provisions and rules regarding any infectious disease, pandemic. Nepal government still implements Infectious Disease Act, 1963 (2020 vs.) which went through some amendments in history, the most recent amendment being amendment of 2009 (2066 B.S).

The Act has provision that government of Nepal can take needed action to wipe out or prevent the disease if any infectious disease develops or spreads on human throughout Nepal or any part thereof and issue required orders appropriate to general public or group or any persons. Government of Nepal may designate any official and delegate powers to officials to make required arrangements to wipe out or prevent the disease that are likely to spread-section 2(Infectious Disease Act, 1963).

The law has provision that Government of Nepal may issue necessary orders to examine any animals, birds being transported and the holding passenger in quarantine, hospitals or other places by designated officials if it is uncertain that passengers have developed any infectious and communicable disease. Such passenger can be inspected and their movement and transportation can be controlled by government officials (Infectious Disease Act, 1963).

The law issues punishment of imprisonment up to one month or fine up to One Hundred Rupees or both for violating and disregarding the Act. A person who obstructs a person authorized under the act with performance of their duties can be imprisoned for 6 months and liable for fine up to NPR.600 or both. The law has provision of power to Chief District Officer settlement of case under this Act_(Infectious Disease Act, 1963)

Similarly Ministry and Health and population have launched various programmes for educating people regarding corona Virus and its impact. Nepal Government has formed Health Emergency operation Centre (HEOC) that update current scenario of pandemic to Nepal Government and as per prevailing scenario Government takes necessary actions accordingly.

Research Gap

This research has focused on the changes observed in social life of people after the Covid 19 outbreak. People are social being but outbreak of virus has contracted social life of people. In Nepal researches have been conducted illustrating economic and technological impact of Covid 19 but social aspects of people have been ignored. Few researches have been conducted in global level that depicts social changes in people. Since human behavior is different, research conducted in global level may not fully illustrate clear pictures of locality. This report is crucial to find the changes that people have implemented in their social life after the outbreak.

CHAPTER III

RESEARCH METHODS

Research method is the process that determines the technique used throughout the research. The processes used are systematic and the researchers are guided by logical reasoning behind the method used. The methods used by the researchers differ from problem to problem. The method can be qualitative, quantitative or both. Qualitative methods aim to answer the question like what, how or when phenomenon whereas the questions like how many or how much are answered by quantitative methods.

Research methodology is a way to systematically solve the research problem (Kothari, 2004). Research method is the vital part of the study. Hence this chapter focuses on the following methods.

Research Design:

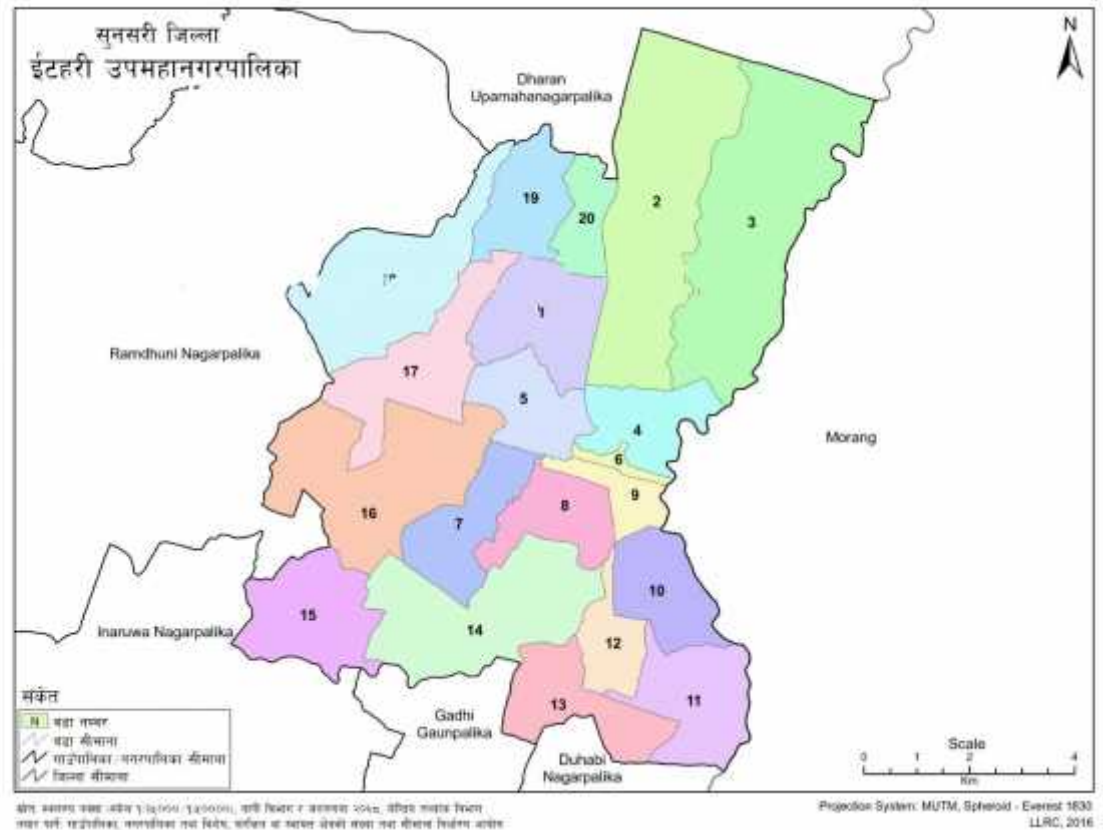
Research design is the overall plan for conducting a research. In addition, it is the plan, structure and the strategy of the investigation considered so as to answer the research questions and control variances. The main purpose of this study is to find changes in social life of people after the outbreak of covid 19.

This research is a case study research and uses explanatory method of analysis. Since this research analyzes changes in social behavior of people it uses qualitative forms of data.

Selection of Study Area

For this study I have chosen ward no. 7 of Itahari. It is located in Itahari Sunsari and surrounded by ward no. 5, 8, 14 and 16. The ward has total population 3687 (Three Thousand six Hundred and Eighty Seven) and Dev Narayan Chaudhary is current ward chairperson of the ward. Itahari Municipality consists of 20 wards and the sample of research has been taken from 7 no. ward. This ward is heterogeneous in terms of gender, caste, class, age, education and profession which facilitate the representation of the varied opinions and experiences of people. Similarly this ward has been severely affected by

Covid 19. Hence people of this tole have seen and felt severity of infection. Moreover this area is convenient for me in terms of access, money, time and acquaintance with respondents that save my time and resources for relationship building with respondents.



Population and Sample

For this research quota sampling method is used to select the 25 respondents in total. Quota sampling is defined as a non-probability sampling method, This type of sampling depends on the non-random selection of a prearranged number or proportion of units. This is called a quota. First of all the participants is divided into mutually exclusive subgroups (called strata) and then identify sample units till the quota limiy is reached.. These units share specific characteristics, determined by you prior to forming strata 5 people each from household, hospitals, schools/colleges, hotels and business house are taken for this study. They are asked questions as per checklist and their response are analyzed to derive final conclusion. Checklist questions focus mainly on their knowledge on Covid 19 and its effect in their social lives.

Reason for choosing quota sampling

Quota sampling is a non-probability sampling technique commonly used in research and survey studies. It involves selecting participants based on pre-defined quotas to ensure that the sample reflects specific characteristics of the population being studied. Reasons for choosing quota sampling for this research are:

-) Cost-effectiveness: Quota sampling can be a cost-effective alternative to probability sampling methods like simple random sampling or stratified random sampling
-) Time efficiency: Quota sampling can be quicker to implement than random sampling methods
-) Practical constraints: In some cases, it may be difficult or impractical to use random sampling methods due to logistical, geographical, or other constraints. Quota sampling provides a practical solution in such situations, allowing researchers to obtain a sample that reasonably represents the population
-) Prior knowledge of population distribution: Quota sampling can be useful when researchers have prior knowledge about the distribution of certain characteristics or variables in the population.
-) Specific subgroup representation: Quota sampling ensures that different subgroups within a population are represented in the sample in proportions that reflect their presence in the overall population

Details of participants:

Strata Name	No. of participants	Age Group	Gender
Household	5	20-46 years	4 female 1 male
Hospital/clinic	5	19-49 years	2 male 3 female
School/College	5	18 -40 years	4 male 1 female
Hotels	5	18-47 years	3 male 2 female
Business House	5	21- 35 years	3 male 2 female

Participants were sought via personal contacts of the researcher. As highlighted, the participants covered different occupations and presented diverse perspectives and feelings on the study topic.

Data collection procedure

Data can be collected from two sources; primary source and secondary source. Data collected through primary sources like questionnaire, observation, interview etc are primary data. These data are in raw form and require further processing. Data which are collected from secondary sources like journals, articles, bulletins, reports etc are secondary data. These data can be either published or unpublished but they are already processed by other individuals.

Here for this research, both primary and secondary data have been collected. For the collection of primary data following data collection techniques are used.

i) Case Study

A case study is a detailed study of a specific subject, such as a person, group, place, event, organization, or phenomenon. Case studies are commonly used in social, educational, clinical, and business research. The case study in this research will not be used as a method of study but are chosen for comprehensive description of an individual case and its in-depth analysis. Case study can be helpful as it will represent what is common among the respondents. It will also be helpful to give the detail account of phenomena.

In this research, researcher has used case study research technique. Informant has been asked questions as per checklist prepared and their responses are further processed to reach final conclusion.

Data Analysis:

The collected data were edited and tabulated using MS Office application. Since the research is based in descriptive method, the collected data are described, explained and interpreted to derive final conclusion.

CHAPTER IV

PRESENTATION AND ANALYSIS OF DATA

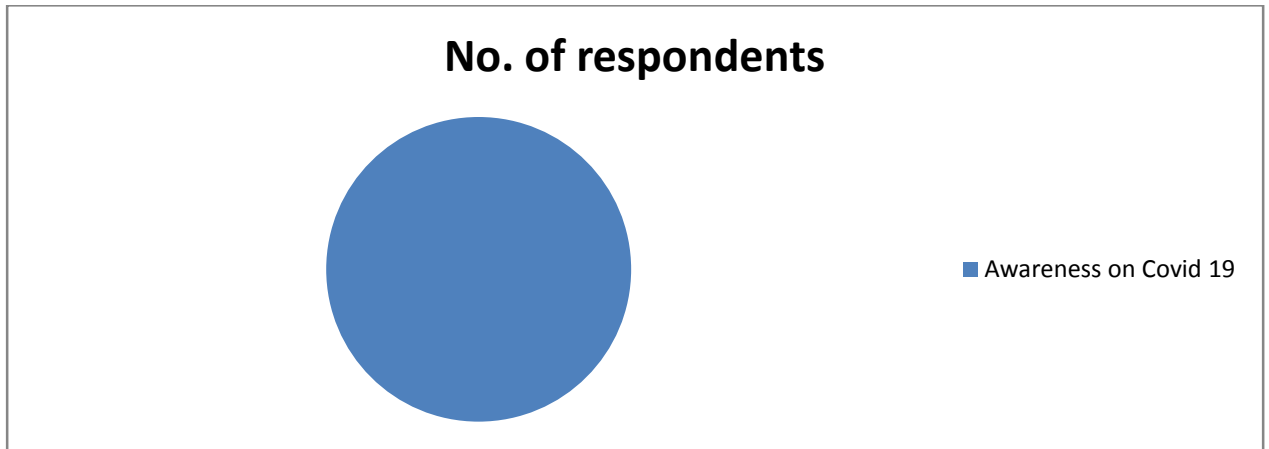
Presentation and analysis of data is the body of study. It helps in determining the finding of research for the fulfillment of research objective. Here in this chapter the data are presented, analyzed and interpreted using the research methodology described in chapter III. This chapter contains detail presentation, analysis, interpretation and discussion of finding. Primary data was collected from questionnaire. This chapter contains detailed demographic profile of the respondent. And analyzes and interpretation of the collected data through descriptive analysis.

4.2 Household Survey:

5 random persons of Household located in Ward no. 7 were taken into consideration for this research. Checklist of 8 general questions related to covid 19 were prepared by researchers and their respond were noted down to reach final conclusion. The questions include their awareness on Covid 19, social distancing pros, their frequency of Face to face interaction with neighbor/relatives and frequency of social gathering. Their responses are illustrated below:

4.2.1 Awareness on Covid 19

All the Five respondents were well aware of covid 19. They all were aware that the disease is communicable, attack lungs and could cause death if it is not properly cared. They informed that they got the information of covid 19 form friends and family, neighbor, television, newspaper and internet.



4.2.2 Fatality

Among 5 respondents 3 of them considered the virus fatal due to number of deaths in last 2 years. Other two didn't consider it fatal. They believe most of the dead people were suffered from other illness. Responses obtained from the respondents are provided below:

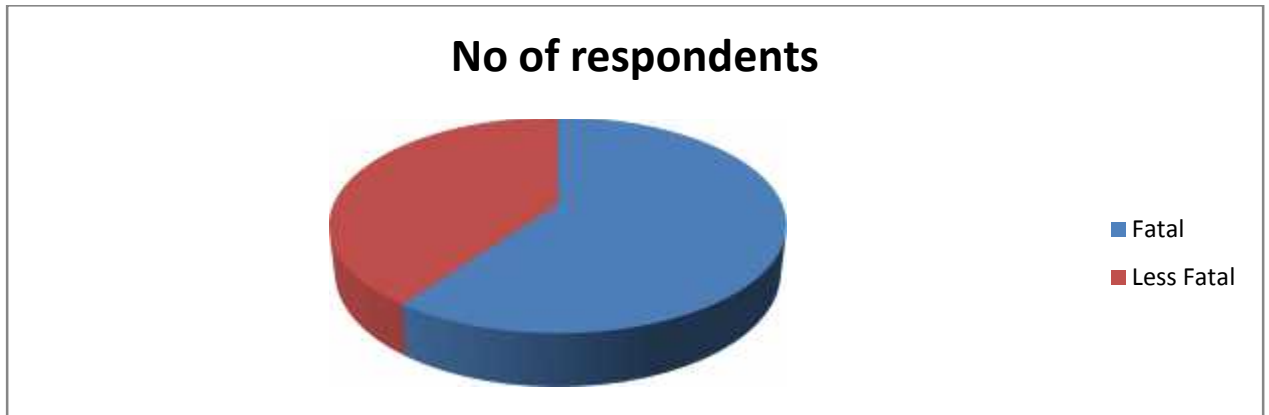
Yes I consider Covid 19 Fatal. I have heard in news that many people in the world died due to infection (Respondent 1)

No I donot consider it Fatal. Death rate is low in comparison to other pandemic (Respondent 2)

Yes I consider it fatal. I have seen and heard healthy people dying due to covid 19 (Respondent 3)

Yes I consider it fatal. Most of those people who died were suffered from other disease. (Respondent 4)

No I do not consider it fatal. I have seen people recovered from the illness. Among those people some were old and weak. (Respondent 5)



4.2.3 Views on Social Distancing and wearing Mask

All of the respondents believe social distancing and wearing mask helps in minimizing the transmission of virus. They also agreed that both these practice are globally followed to reduce virus outbreak

4.2.4 Participation in social gathering:

All the Five respondents informed during the initial Pandemic stage and prevailing lockdowns they had not been to any social gathering. But with the ease of lockdown they are participating in parties and gatherings. All the respondents believe the severity of virus is almost reduced and they are freely participating in such events. Responses obtained from the participants are provided below:

I had stopped social gathering during pandemic but I had now started meeting people and friends. (Respondent 1)

I have started participating in social gathering as before (Respondent 2)

I am participating in social gathering but I am conscious in maintaining social distancing and sanitization (Respondent 3)

Severity of infection is reduced and I am participating in social gathering as before (Respondent 4)

I am participating in social gathering. I am vaccinated and pandemic phase is already passed. (Respondent 5)

4.2.5 Leisure time:

Before pandemic the respondent's liked to spend the leisure time in outing meeting friends. During the initial pandemic stage respondents spent their leisure time on their residence watching TV, using social media, interacting with family members and reading books. At current time they would like to interact with friends and family and all of them prefer outing during leisure time.

I like to spend my leisure time watching TV and meeting with friends. (Respondent 1)

I spend my free time mostly in social media. In the pandemic I have registered in different social media groups and I have continued my participation after the pandemic as well (Respondent 2)

I like o spend leisure time reading books and interacting with family. (Respondent 3)

I mostly viit friends and engage in social media during my free time (Respondent 4)

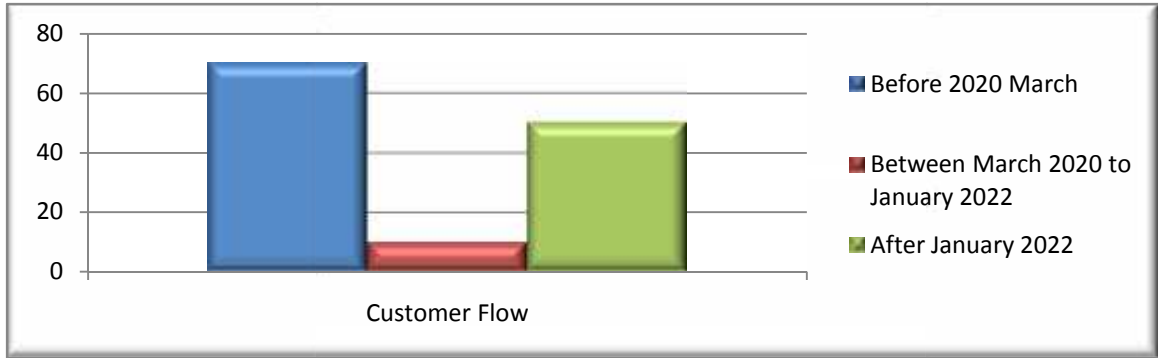
I like to watch TV, use social media and Visit friends and relative during leisure time (Respondent 5)

4.3 Hotels and restaurant Survey:

5 different hotels and restaurant located in Itahari 7 sunsari were taken into consideration by the researcher. Checklists of 3 specific questions were made for hotels and restaurant and their respond were noted to find out changes in social life of people before and after the outbreak of covid 19.

4.3.1 Flow of customer:

Respondents of 5 different hotels/restaurant informed that the flow of customer is now gaining momentum after virus outbreak Respondents further informed that before March 2020 customers flow was 70 persons per day on an average. Between March 2020 to January 2022 average customer flow was 10 people per day on an average. After January 2022 customer flow was 50 persons per day on an average.

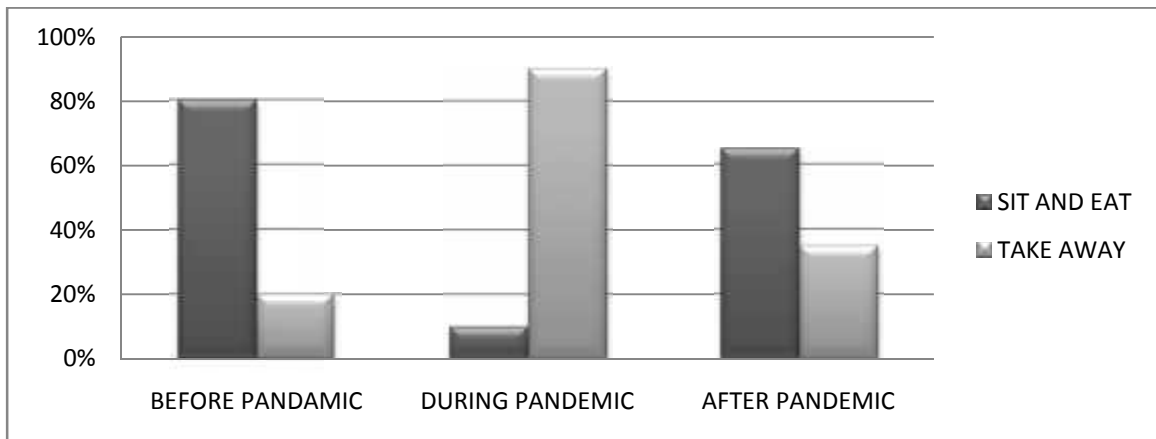


4.3.2 Change in Demand and Preference of Customer

As per the respondents three major changes were noticed in customer after the virus outbreak.

-) Number of Takeaways Customer is significantly increased during pandemic and after pandemic.
-) Most of Customer preferred sanitizer before eating
-) Most of customer preferred social distancing between tables.

As per the respondents, during the Pandemic period of March 2020 to January 2022, 90% of the customers were takeaway and online delivery customers. However after the pandemic 65 customer prefer meal on restaurant and 35% prefer takeway.



4.3.3 Organization of Function and parties:

As per the respondents before 2020 March they were organizing around 7-8 functions in a month but the functions were dropped to 0-1 per month from March 2020 to January 2022. After January 2022 they are organizing 5-6 functions per month on an average.

Period of time	No of Event organized (Per month)
Before March 2020	7-8
During March 2020 to January 2022	0-1
After January 2022	5-6

4.4 School and college:

For this study researcher visited 5 different school and colleges located in the Itahari 7. General questions were designed for school/colleges that include change in rules/regulation of schools after the virus outbreak and additional demand from parents.

4.4.1 Changes in rules and regulation of School

As per the answer of respondents following changes were made by the schools college during and after the pandemic:

-) All of the schools have invested for technological update like high speed internet, Desktop, laptop etc during and after pandemic
-) All the schools have made strict health and safety protocol for minimizing covid transmission
-) All the schools have conducted presentation and programmes on COVID 19 and some of them have added Study of Covid 19 in the curriculum to enhance awareness of covid 19 among students

-) During the pandemic all the schools were shifted to online teaching module. After the pandemic they are teaching in school premises as well as online teaching module.

4.4.2 Additional demand from Parents and Students

As per the response of researcher 2 major additional demands are made by the children parents with school

-) Parents are concerned with the physical and mental health of their children. They have demanded adequate sanitization and social distancing for the minimization of risk of infection. They have also demanded that the school prioritize mental health support service
-) Pandemic have disturbed the education of students more than a year. They have requested schools /college to invest on additional resources to make up for the lost learning opportunities

4.5 For hospital

For this research researchers have prepared 3 questions related to hospitals clinic. The questions were asked to hospital personnel of 5 different hospital/clinic of ward no. 7.

4.5.1 No. of covid patient per week:

As per the respondents, number of Covid patients per week after the pandemic have significantly decreased. During the pandemic number of Covid patients number of covid patients have reached to 30-40 per week but after the pandemic the number of patients have decreased to 0-1 per week.

4.5.2 Any Insignificant behavior shown by Covid patients:

As per the respondents some of the common behavior shown by the covid patients that is different from other regular patients. Respondents have observed nervousness and mental disturbance in covid patients. They have also observed increased awareness on hygiene and sanitization. They are concerned about hospital hygiene and also preferred social

distancing. Most of them have preference for private room to minimize the exposure with other patients.

4.5.3 Precautionary measure adopted to minimize risk of infection to you and your family

Researcher had asked the respondents about the practice they have been following to minimize the risk of infection.

-) All the respondents stated that they have focused on Personal hygiene and sanitization. They wash their face, hands and other exposed body parts before entering into home.
-) They have practice of changing work cloth before entering into house.
-) They have maintained social distancing with the other people in their home if they faced any symptoms of Covid 19.

4.6 Business House

Three General questions were prepared by respondents and asked to the business house located in Itahari 7 sunsari and the responses obtained are presented below. The business house include shops, Banks and

4.6.1 Flow of customers

As per the respondents during the pandemic flow of customers was decreased by 80%. However after January 2022 the flow of customer was restored to normal.

4.6.2 No. of covid Infected and recovered:

All of the sample business household had covid infected patients and recovered the data is presented below:

Business House	No. of staffs during Pandemic	Covid Infected	Recovered	Death
Business House 1	6	6	6	0

Business House 2	4	4	4	0
Business House 3	5	2	1	0
Business House 3	10	6	6	0
Business House 4	6	3	2	1
Business House 5	4	2	1	1

4.6.3 Any Noticeable changes in Customer behavior

As per the respondents following changes were noticed by them after the pandemic.

-) As per the respondents they have noticed customer preference on online shopping
-) Respondents have noticed those customers are more concerned on the health safety while purchasing goods/services.
-) Cases of customer preference for Home delivery increased in high number than before pandemic
-) Customers are also aware of the importance of local product. Hence the demand and market of local products have increased.

CHAPTER V

SUMMARY AND CONCLUSION

The main objective of this research is to find changes in social life of the people due to covid 19. For this researchers had divided the respondents into five clusters; Households, Hoels/restaurant, Schools/college, hospital and Business House. Five respondents were selected from each group and their responses are presented in the chapter IV of this research. This chapter will provide interpretation of the finding obtained. The result of this study are based on the analysis and interpretation of the data obtained via the process of interviews of 25 respondents, 5 respondents from each group.

5.1 Summary of Major Findings

-) Total 25 respondents were selected for this research, 5 respondents from each group. Proportion of respondents of each group is equal i.e. 20%. Similarly among the respondents 52% were female and 48% were male. Most of those respondents are age group 26-30 years.
-) All the respondents are aware of Covid 19 disease. They got the information from friends, family, television and internet. Most of the respondents agreed that Covid 19 can be severe if the people didn't care for his/her health.
-) Most of the respondents consider Covid 19 Fatal disease. Some of the considered it not fatal in comparison to other pandemic. They believe that if the person is vaccinated and work on proper sanitization and hygiene it could be easily cured.
-) All of the respondents agreed that social distancing and wearing masks help to prevent virus transmission.
-) Almost all the respondents they are participating in social gathering and like to spend leisure time outing. But they are still conscious in wearing mask and hand shaking while meeting people.
-) Habit of using social media in increased in the respondents. They were registered in many social groups during pandemic period and they are still continued their participation in it.

-) The number of customers flow in hotels and restaurant is now backing to normal. But along will flow of customers' number of takeaways are also increased. Customers who prefer dine-in are also conscious on sanitization of restaurant and social distancing between other customers.
-) After the pandemic schools/ colleges have invested in technological updates like high speed internet, desktop laptop etc so that they can continue teaching via online platform and the education will not be disturbed.
-) All the schools and colleges had already conducted programme/ seminar to aware their students and guardians about covid 19. Some of them have even included covid 19 in the curriculum.
-) Most of the schools have continued their online teaching module and they have considered this as the future of the education system.
-) Parents are extra conscious on the health of children after covid 19 pandemic. They have requested school/college to focus on sanitization and hygiene further requested to prioritize health support service in their schools/college.
-) Number of Covid infected patients is now decreased in hospital/clinic. Most of the people are aware of covid 19 and they prefer medication in home instead.
-) Most of the covid patients admitted in hospitals/clinic have shown common behavior like nervousness, anxiety etc. But they are aware on sanitization and hygiene.
-) Hospital staffs are extra careful regarding their health and health of their family members. All of them stated that they change clothes and wash exposed body parts before entering their home. They further stated that they maintain social distancing with family members if they experienced any symptoms related to covid 19.
-) Flow of customers in business house is gaining momentum after the pandemic phase. However customer demand of customer for online shopping and home delivery has increased than before.
-) Customers are aware of the importance of local products. During the pandemic supply of international brand products were halted. Hence the customer switched

to local products to fulfill their demand. Now they prefer local products over other brands to help and support their local economy.

5.2 Conclusion:

The aim of this research is to determine whether the covid 19 has made impact in the social life of the people. For this research question were prepared by the research through a qualitative approach and in the form of semi structured interviews. The use of semi-structured interviews allowed for more in-depth perspective into the personal experiences of participants and it helped the researcher to know the views of the respondents in detail.

The findings of this research help us to conclude that Covid 19 has made impact on the social life of people. These impacts can be both categorized into positive and negative aspect. On the positive aspect we can conclude that people are more conscious in their personal hygiene and sanitization of the surrounding after the pandemic. They had strong belief that those things could help in fighting in other pandemic if happened in future. In addition to this technological advancement is noticed in the life of people. They are using the technology more after the pandemic. Moreover, people dependencies on the local products are increased. They felt that use of local products will uplift the economy of their country and will help them sustain in the future pandemic as well, if any. Use of social media is increased and people from all around the world get connected with each other. This has helped the people understand culture, values and emotions of the people of other region and country.

On the contrary, Social gathering and meeting is decreased than before. People like to do online shopping and prefer home delivery. Similarly takeaways in the restaurant is also increased than before. In addition to this anxiety and other mental issue is seen in some patient of Covid 19 due to isolation for long period.

References

- World Vision. (2020). Impact assessment of the COVID-19 outbreak on wellbeing of children and families in Albania. World Vision Albania
- UN. (2020). Policy Brief: The Impact of COVID-19 on children. United Nations. Retrieved from <https://unsdg.un.org/resources/policy-brief-impact-covid-19-children>
- UN OHCHR. (2020). Covid-19 and the rights of persons with disabilities: guidance. United Nations Human Rights Office of the High Commissioner. Retrieved from [https://www.ohchr.org/Documents/Issues/Disability/COVID-19 and The Rights of Persons with Disabilities.pdf](https://www.ohchr.org/Documents/Issues/Disability/COVID-19_and_The_Rights_of_Persons_with_Disabilities.pdf)
- Chakraborty, I. & Maity, P. (2020). COVID-19 outbreak: Migration, effects on society, global environment and prevention. *Science of The Total Environment*, 728: 138-882. <https://doi.org/10.1016/j.scitotenv.2020.138882>
- MOF. (2020). Budget Speech: Fiscal Year 2020/2021. Ministry of Finance, Nepal https://drive.google.com/file/d/1siJ4sviMo9_Scd3iDrW3LjS_10Gv390/view.
- Yin, R.K. (2014). *Case study research: Design and methods*. Newbury Park. Sage publications
- Adler, P. A., Adler, P. (1994). Observational techniques. In Denzin, N. K., Lincoln, Y. S. (Eds.), *Handbook of qualitative research*. Sage Publications
- Ministry of Health and Populations Nepal.(Jan 29,2020). Government of Nepal Ministry of Health and Population Health Sector Response to Novel Coronavirus (2019-nCoV). Retrived from <https://mohp.gov.np/attachments/article/543/Health>

World Health Organization (Jan 5, 2020).Disease outbreak News: Pneumonia of unknown cause-China. Retrieved from.<https://www.who.int/csr/don/05-january-2020-pneumonia-of-unkown-cause-china/en/>

Bhandari. Bishnu. (1990). The past and future of" sociology in Nepal. Occasional Papers in Sociology and Anthropology. vol. 2. Department of Sociology and Anthropology. Tribhuvan University

Thapa. T.S. (1971). The development of sociology in Nepal. In Prayag Raj Sharma (cd.). Social Science in Nepal. Kathmandu: Institute of Nepal and Asian Studies, Tribhuvan University.

Singh, Jaspreet & Singh, Jagandeep & Hasan, Ali. (2020). COVID - 19's Impact on the Society. Electronic Research Journal of Social Sciences and Humanities, Vol 2: Issue I, 2020 , Available at SSRN: <https://ssrn.com/abstract=3567837>

Saladino V, Algeri D and Auriemma V (2020) The Psychological and Social Impact of Covid-19: New Perspectives of Well-Being. Front. Psychol. 11:577684. doi: 10.3389/fpsyg.2020.577684

Mamun, M. A., and Griffiths, M. D. (2020). First COVID-19 suicide case in Bangladesh due to fear of COVID-19 and xenophobia: Possible suicide prevention strategies. Asian J. Psych. 51:102073. doi: 10.1016/j.ajp.2020.102073

Brooks, S., Webster, R. S., Woodland, L., Wessely, S., Greenberg, N., et al. (2020). The psychological impact of quarantine and how to reduce it: rapid review of the evidence. Lancet 395:10227. doi: 10.1016/S0140-6736(20)30460-8

Fogg B.J (2009). A Behavior Model for Persuasive Design, Stanford University, California

Hamouche S. (2020).COVID-19 and employees' mental health: stressors, moderators and agenda for organizational actions [version 1; peer review: 2 approved]. Emerald Open Res 2020, 2:15 (<https://doi.org/10.35241/eme>

BBC. Coronavirus: The world in lockdown in maps and charts. British Broadcasting Corporation. 2020. <https://www.bbc.com/news/world-52103747>. Accessed 8 Aug 2020.

Singh, D.R., Sunuwar, D.R., Shah, S.K. et al. Impact of COVID-19 on health services utilization in Province-2 of Nepal: a qualitative study among community members and stakeholders. *BMC Health Serv Res* 21, 174 (2021). <https://doi.org/10.1186/s12913-021-06176-y>

Singh DR, Sunuwar DR, Karki K, Ghimire S, Shrestha N. Knowledge and perception towards universal safety precautions during early phase of the COVID-19 outbreak in Nepal. *J Community Health*. 2020:1–7. <https://doi.org/10.1007/s10900-020-00839-3>.

Ministry of Communication and Information Technology. Notice. Government of Nepal. 2020. <https://mocit.gov.np/notice>. Accessed 8 Aug 2020.

MoHP and WHO. Nepal-WHO Country Cooperation Strategy (CCS) 2018–2022 Nepal Nepal Government of Nepal Ministry of Health and Population. Kathmandu: Government of Nepal and World Health Organization; 2018. <http://apps.who.int/bookorders>. Accessed 6 Jun 2020

Ghimire U, Shrestha N, Adhikari B, Mehata S, Pokharel Y, Mishra SR. Health system's readiness to provide cardiovascular, diabetes and chronic respiratory disease related services in Nepal: analysis using 2015 health facility survey. *BMC Public Health*. 2020;20. <https://doi.org/10.1186/s12889-020-09279-z>.

Poudel K, Subedi P. Impact of COVID-19 pandemic on socioeconomic and mental health aspects in Nepal. *Int J Soc Psychiatry*. 2020: 002076402094224. <https://doi.org/10.1177/0020764020942247>.

Checklist/ Schedule Questions.

A) General Questions

1) What do you know about Covid 19?

.....

2) Do you consider Covid 19 a fatal disease? Why?

.....

3) Is social distancing crucial in this pandemic situation? Why?

.....

4) Do you think wearing mask will help breaking chain of virus transmission?

.....

5) How often have you attended social gatherings and parties before and after virus outbreak?

.....

6) Frequency of face to face interaction with your neighbor and relatives in this period?

.....

7) **How would you like to spend your holidays and leisure time in current situation?**

.....

8) **How did you celebrated festivals in this pandemic situation?**

.....

B) For Hotels and Restaurant

1) **Difference in flow of customers before and after virus outbreak ?**

.....

2) **Any changes in demands and preference of customers after virus outbreak?**

.....

3) **Numbers of function and parties organized per month before and after virus outbreak?**

.....

C) For School and colleges

1) **Any changes in school/college rules and regulation due to covid 19?**

.....

2) Any additional demands from parents and students in the current period?

.....

D) For hospitals

1) No. of Covid 19 patients per week.

.....

2) Any insignificant behavior shown by covid 19 patients?

.....

3) Precautionary measures adopted to minimize risk of infection to you and your family.

.....

.....

E) For Business House

1) Flow of customers per day before and after outbreak?

.....

2) No. of covid infected staffs and recovered.

.....

3) Any noticeable change in customer behavior in the current time?

.....