

Governing disaster risks locally: Insights from COVID-19 responses by local governments in a federalising Nepal

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Abstract

Local risk governance is an underexplored topic in disaster risk management and decentralisation literature. Key knowledge gaps centre around whether and to what extent the devolution of authority leads to effective local responses to disaster risk. In this paper, we assess the local government's response to COVID-19 risk in Nepal as a contribution to filling this knowledge gap. The COVID-19 crisis hit Nepal soon after officials were elected for the newly created local governments (*Palikas*) as part of the new federal governance reform. Drawing on the evidence from eight *Palikas*, we identify key factors determining local risk governing capacity. We found some *Palikas* were better able to provide immediate local response to COVID-19 than others, and we discuss why. Most of the *Palikas* faced constraints to provide health services such as COVID tests and treatments to infected patients. Our analysis shows that the ability of *Palikas* to respond to the risk was shaped by two key factors: a) the functioning of institutional mechanisms and decision-making abilities and b) the ability to access and mobilise resources including financial and human resources, infrastructure, and knowledge. This analysis shows that devolution of power alone is not a main criterion of local risk governance capacity and suggests the need to consider other factors that shape local institutional capacity.

Keywords: COVID-19, decentralisation, disaster management, governing capacity, institutions, Nepal.

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1. Introduction

The COVID-19 pandemic hit Nepal just as a new local government system was implemented as per the recently introduced federal governance system endorsed by the Constitution of Nepal 2015. As the newly formed and yet institutionalising local governments encountered the risk of COVID-19 pandemic, it disrupted their normal business as they were required to respond to the crisis. They faced a significant challenge in providing local responses to the pandemic as it emerged as a major disaster. Such a circumstance, however, presented itself as an ideal case to examine the local risk governance capacity. In this paper, we interrogate how the decentralised but institutionalising local governments in Nepal organised COVID responses and what shaped their risk governance capacity for effective local responses to disaster.

Decentralisation, defined as the devolution of authority, appears to be an underexplored domain in disaster governance literature. The international policy instruments such as Hyogo Framework for Action 2005-2015 and Sendai Framework for Disaster Risk Reduction 2015-2030 emphasise decentralisation of power and empowering local authorities for effective disaster responses. However, confusion remains about whether devolution of authority leads to effective disaster response at the local level (Amhed and Iqbal, 2009). While some studies suggest institutional capacity (primarily technical capacity) and financial resources as a major challenge for local disaster response (Rumbach, 2016; Amaratunga et al., 2018; UNISDR, 2012; Malalgoda et al., 2016), others stress upon the broader institutional capacity including cross-scale collaboration and effective institutional mechanisms (Miller and Douglass, 2016; Manandhar et al., 2019). We are concerned about the overall governing capacity which can constitute the ability to make and implement decisions and access to and mobilisation of resources.

Drawing on the comparative case study of local responses to COVID pandemic by eight local government units (*Palikas*) in Nepal, we examined the overall risk governance capacity of decentralised bodies (local governments). Our inquiry is driven by questions such as: what institutional mechanisms existed and/or, were created and mobilised and how decisions were made to organise local responses to COVID; the extent to which and how a range of resources (such as financial and human resources, infrastructure, and knowledge) were accessed and mobilised for this. Analytically, we identified key factors shaping the risk governance capacity of decentralised bodies in terms of providing effective local level disaster responses. We argue that the analytical framework of risk governance capacity helps us to examine the local institutional capacity for disaster response in the context of fledgling local governance systems such as in Nepal.

Nepal presents a compelling case to study the risk governance capacity of the local governance system. The 2015 Constitution of Nepal has devolved high levels of authority and responsibilities to local governments, but the system is still in the process of institutionalising, particularly in terms of having clarity in decision-making authorities and developing institutional mechanisms. The local governance in the country was derailed over the last two decades, with no elected local governments in place under the political turmoil (Sharma, 2014; Chaudhary, 2019). Local response to disasters, including the devastating 2015 earthquake, was reported to have constrained, particularly due to lack of political leadership (Jones et al., 2016) and technical capacities (Sharma et al., 2018). The reorganisation of the local government system instituted by the 2015 constitution is being seen as an opportunity for better local level disaster management. However, the question about the

ability of these institutionalising local governance systems to provide a response to multi-hazard and recurring disasters still lingers. Some reports pointed to the challenges that the newly formed *Palikas* are facing in terms of delivering services in general (see Acharya and Zafarullah, 2020) and providing disaster response (Shrestha and Pathranarakul, 2018; Vij et al., 2020). However, these studies are more concerned about capacity in terms of technical expertise and human resources (Vij et al., 2020) rather than addressing the overall institutional and governance capacity. This involves the ability to make and implement decisions and access and mobilise resources needed for local level disaster responses.

After outlining a brief overview of conceptual discussion about the decentralisation and disaster management and the conceptualisation of risk governance capacity (Section 2), we provide a contextual overview of the decentralised disaster governance in Nepal (Section 3). We proceed with presenting our findings (Section 4) with a focus on a comparative analysis of local governments' responses to COVID pandemic (Section 4.1). The main part of our findings includes institutional mechanisms and decision making for COVID response (Section 4.2) and access and mobilisation of resources (Section 4.3). We then discuss our findings with a focus on the key analytical themes that have emerged as important aspects for shaping local risk governance capacity (Section 5). We conclude the paper by drawing some theoretical and policy implications of our analysis (Section 6).

2. Governing capacity for local disaster response

The existing literature on decentralisation, particularly the local governance system, stipulates that the devolution of authority (i.e. political authority to make decisions, fiscal authority for resources mobilisation and administrative power) from central to subnational or local levels can generally lead to more effective outcomes (Bardhan and Mookherjee, 2006; Faguet, 2012). Devolution of authority is argued to enhance governance by ensuring accountability and responsiveness of authorities to local needs (Cheema and Rondinelli, 2007). Disaster governance debate and practice also started to adopt decentralisation in terms of transfer of responsibilities and some level of decision-making power at subnational and local levels (Rumbach, 2016; Miller and Douglass, 2016). For instance, the local governments (municipalities) in many countries in the Global South including South Asia are increasingly made responsible for disaster response – for preparing plans, providing immediate relief, and taking approaches to make communities resilient (Rumbach, 2016). Global efforts spurred by the Sendai Framework for Disaster Risk Reduction 2015-2030 stress for strengthened capacity of local governments. However, these frameworks and other reports see local capacities through a technical lens, emphasising provisions such as technical expertise/human resources and financial constraints. The approach falls short of considering an overall institutional capacity of the local governance system which we conceptualise as local risk governance capacity.

Further, there is a growing realisation that decentralised institutions (including local governments) can have their own limitations to provide effective local responses to disaster (Ojha et al., 2021) and studies stress the need for cross-scale collaboration (Miller and Douglass, 2016; Ojha et al., 2021). The three tiers of Nepal's governance system- federal, provincial and local, have shared responsibilities for disaster response and align with the call for cross-scale collaborative mechanisms (Bhandari et al., 2020a). The multi-scalar approach to disaster governance has been argued to be beneficial in facilitating the integration of multiple voices, sharing of knowledge and material

resources across scales and contributes to generating policy and program innovations with an enhanced understanding of interlinkages (Miller and Douglass, 2016). In this paper, we propose a concept of risk governance capacity whereby local governments can act as well-functioning and capable institutions to organise local responses to disaster by leveraging resources and knowledge from higher levels (provincial and federal levels in case of Nepal) and outside of government system (i.e. private sector or external funding). Analytically, we are concerned about what factors shape such governing capacity in the context of institutionalising local governance systems such as in Nepal.

Our analytical approach is partly informed by the literature around environmental governance focusing on local responses to climate risks. A strand of literature on local institutions and environmental governance is concerned about how the authority is distributed and exercised for governing resources i.e. access to and mobilisation of material and other resources (Sikor and Lund, 2009; Lund and Boone, 2013). Similarly, studies have highlighted that local response to climate change (local adaptation) is shaped by how authorities are distributed and contested (Khatri et al., 2022; Nightingale, 2018) in relation to making decisions on the distribution of material resources (Nightingale 2017; Nightingale et al., 2019). Along this line, Eriksen et al. (2015) has proposed a framework to understand local climate governance and argues that the local responses to climate change is a political process involving exercise of authority and the mobilisation of material resources. In our conceptualisation of governing capacity for local disaster response, we focus on the institutional capacity to make and implement decisions involving exercise of authority. This also involves the ability to access and mobilise key resources integral to shape local institutional capacity for effective disaster responses.

Our recent studies have shown that the institutional capacity of recently formed decentralised local governments has been constrained by primary factors such as the ability to operationalise authority for decision-making (i.e. devising local policies and institutions) and the need to access and mobilise financial resources and knowledge (expertise) from higher scales (Khatri et al., 2022). Drawing on these insights, we propose that the institutionalisation process shaping the governing capacity involves the ability to make and implement decisions (exercise of authority and functional institutional mechanism) and ability to access and mobilise a wide range of resources.

3. Context and Methodology

3.1 The context of decentralised disaster governance in Nepal

The history of decentralisation and local governance in Nepal dates back to the 1960s when the government initiated an integrated approach of local development. However, despite such mechanisms, local levels (district and village panchayats) had limited responsibilities and central governments exercised greater decision-making authority until the 1990s. The decentralisation at that time is characterised as the devolution of limited political and fiscal authority (Sharma, 2014; Chaudhary, 2019). With the political change in 1990, decentralisation took a step forward. The Local Self Governance Act (LSGA 1999) provided some levels of political and administrative authority to the local bodies i.e. Village Development Committee (VDC) and District Development Committee (DDC). These local bodies involved in disaster governance as they were accorded the responsibility to prepare a local disaster management plan and provide responses at village and

district levels. Unfortunately, nearly two decades without local elections created an institutional vacuum⁶ that hindered the effective implementation of the local disaster plans and hence the local responses (see Ojha et al., 2021). These two decades were marked with the ten years of armed conflict between the State and the Maoist group and prolonged political transition which weakened the legislative and institutional infrastructure of the decentralised units straining the local disaster response (Williams, 2011).

The 2015 constitution adopted federal mechanisms with three levels of government: national, provincial, and local levels. The political restructuring afterward constituted seven provincial and 753 local governments. The local government comprises 460 Rural Municipalities (*Gaunpalikas*) and 293 Municipalities (*Nagarpalikas*), with 77 district coordination committees situated above them. The new local governments cover much larger territories than they previously did and are provided with greater levels of authority in terms of decision-making (formulating local policies and legislations), provision for sectoral institutional mechanisms and responsibilities including disaster response. The constitution has also identified disaster management as one of the key priorities of all tiers of government (federal, provincial and local) and the responsibility is shared across all three levels (see Section 8 of the constitution). Hence, there are high levels of expectations for development delivery including disaster risk management (Acharya and Zafarullah, 2020).

Following the 2015 constitution, the disaster-related policy and legislative frameworks have been updated in the federal context. The key policies and legislation include Disaster Risk Reduction and Management Act (DRRM Act 2017 that replaced Natural Calamity Relief Act 1982), Local Government Operation Act (2017 that replaced LGSA 1999), National Policy on Disaster Risk Reduction (2018), and Disaster Risk Reduction National Strategic Plan of Action (2018-2030). The DRRM Act 2017 and Local Government Operation Act (2017) have specified the authority to the local level (*Palikas*) for disaster response. The DRRM Act (2017) provides authority to the provincial and local levels to formulate disaster-related policies (strategies, legislation and plans), set up institutional mechanisms and carry out disaster-related activities. Following this mandate, *Palikas* have started to develop legislation and set up institutional mechanisms as well. However, most *Palikas* lack strategies, guidelines or plans to mainstream DRRM into development planning and implementation (Bhandari et al., 2020a). An assessment report notes that only two out of fourteen municipalities and rural municipalities have prepared their DRRM Act (IOM and MoFAGA, 2019). The institutionalisation process of these local governments faced challenges due to the COVID-19 pandemic, which can explain the delay in preparation of the DRRM act to some extent.

3.2 Study sites

In the context of comparative research, we selected eight *Palikas* from six districts across four provinces which varied in terms of population size, urban and rural areas, geographical location, access to health and transportation facilities, local government leadership and history of the establishment. The details of local government are given below as follows:

⁶ Though local elections were held in 1992 and 1998, the intensity of the Maoist conflict led the government to refrain from holding local elections again in 2002.

Table 1: Case study municipalities and key features

SN	<i>Palika</i> and district	Province	Altitude (metres)	Area (Sq. km)	Population	Access to health services	Accessibility (road access)	History of municipality establishment and municipal infrastructure
1	Dharan Sub Metropolitan City, Sunsari	Koshi	119-778	192.61	137705	Good health facility with three COVID level hospitals and many private hospitals	Located in the Tarai and close to East-West highway, intersected by the regional Koshi highway.	Declared a sub-metropolitan city in 2014 and the municipality was established in 1960. It has a good physical infrastructure with relatively capable staff.
2	Diktel Rupakot Majhuwagadi Municipality, Khotang	Koshi	700-250	246.51	46903	A district level and two community hospitals	District centre of a hilly district of Khotang and recently connected by mid-hills highway	Declared municipality from VDC in 2014. It has relatively poor infrastructure, but the municipal leadership has a good political connection.
3	Likhu Tamakhoshi Rural Municipality, Ramechhap	Bagmati	565.008-2780	124.51	23109	A primary health centre, and five health posts. The district hospital is located 28 km from <i>Palika</i> centre.	Connected by Manthali-Sirise gravel Road to district centre of Manthali (located at 28 km). Badly hit by the 2015 earthquake.	Formed in 2017 merging six earlier VDCs. Municipal leadership comes from outside of political background and conflicts between Chair and Vice-Chair (with a number of court cases) has jeopardised municipal functions. Relatively poor in terms of municipal infrastructure
4	Gokulganga Rural Municipality, Ramechhap	Bagmati	1186 - 2223	198.4	23859	<i>Palika</i> hospital with two MBBS doctors and health posts in all six wards.	Located at about 40 km from the district centre and connected by a gravel road which is being upgraded. Badly hit by the 2015 Earthquake.	Formed in 2017 merging six earlier VDCs. Relatively poor in terms of municipal infrastructure.

SN	Palika and district	Province	Altitude (metres)	Area (Sq. km)	Population	Access to health services	Accessibility (road access)	History of municipality establishment and municipal infrastructure
5	Dhulikhel Municipality, Kavre	Bagmati	1580	54.62	32026	Dhulikhel Hospital	District centre located 30 km east from Kathmandu. Intersected by two major regional highways and is a growing tourist town. Badly hit by the 2015 Earthquake.	Declared municipality in 1987 and expanded in 2017. Municipal leadership is politically influential and well-networked (Chairperson of Municipal Association of Nepal). Good municipal infrastructure with relatively capable staff.
6	Shankarapur Municipality, Kathmandu	Bagmati	1395	60.21	27202	Community hospital and health post, a big medical college is at a distance of 10 km	One of the municipalities in Kathmandu Valley but some remote areas as well. Badly hit by the 2015 Earthquake.	Declared municipality in 2014 and expanded in 2017 merging six more VDCs.
7	Bidur Municipality, Nuwakot	Bagmati	580	130.01	54351	14 hospital and health centres, six health post (five urban health clinics)	District centre of the hilly district of Nuwakot which is located at 60 km northwest of Kathmandu. Intersected by a major regional highway connecting China. Badly hit by the 2015 Earthquake.	Municipality was established in 1987 AD and expanded in 2017.
8	Budiganga Municipality, Bajura	Sudur Paschim	708-500	59.2	21677	NA	Located in a remote hilly district but connected with a blacktopped road, gateway to the district.	Formed in 2017 merging three VDCs. Municipal leadership is from a different party than provincial government (limited political access)

3.3 Data collection and analysis

Using a qualitative approach, we collected data from both primary and secondary sources. Primary data was collected through a total of 25 in-depth interviews with municipal leaders (Mayors or Deputy-Mayors) and/or key persons engaged in disaster management. Interviews were conducted virtually in October 2020, and some follow-up interviews were conducted in-person during March-May 2021.⁷ The checklist covered the issues related to the key challenges or hindrances to respond to COVID-19, coordination with the provincial and federal government and mobilisation of information and financial resources. We also used insights from a panel discussion organised by the Southasia Institute of Advanced Studies (SIAS) on 29 May 2020 entitled 'Challenges and Opportunities of Local Government during COVID Crisis'. The event included sharing of experiences and discussion by the Mayors and officials of five municipalities (of which three were outside of our case study municipalities) and other participants.

Secondary data were collected through a review of key documents, media archives and social media. We also reviewed the Constitution of Nepal (2015) and key disaster-related national legislation such as the Disaster Risk Reduction and Management Act (2017) and Local Governance Operation Act (2017) focusing on the authority provided to local governments and institutional mechanisms for local-level disaster governance. Further, we reviewed the local governments' program and budget of the fiscal year of 2019/20 and 2020/21.

To understand the local response to COVID-19 and other disasters, we documented social media posts and news coverage on matters such as COVID infection, local governments' efforts on relief, testing and measures to control the outbreak. We particularly focused on archiving Facebook posts from the official page of municipalities and profiles of municipal leaders. The preliminary observation and analysis of social media and media content on municipal responses helped us understand the context.

Using the comparative analysis approach, we drew common and contrasting patterns against the key aspects identified. Our analysis is also informed from continuous engagement with these *Palikas* through different means.

4. Findings and analysis

4.1 Local governments' response to COVID-19

The eight *Palikas* undertook a range of actions to manage the risk of COVID-19 pandemic. Before we present our comparative analysis of local responses to COVID in relation to the institutional capacity, we present the key activities carried out by the *Palikas* as part of local responses to the pandemic.

a. Management of quarantine and isolation facilities:

The Quarantine Management Guidelines prepared by the federal government (approved by the High-Level Coordination Committee for the Prevention and Control of COVID-19) made *Palikas* responsible to manage quarantine facilities for people travelling from outside of the village

⁷ We conducted a few (13) interviews virtually (zoom and phone interviews) during the COVID imposed lock down in 2020 and conducted field interviews when the lock down was lifted in 2021.

(particularly people travelling from abroad) and isolation facility for the COVID infected people. The *Palikas* used different approaches to manage quarantine and isolation with varying capacities. For example, Dhulikhel Municipality claimed that it managed a 70-bed quarantine centre with high standard facilities using a school building. As mentioned by the municipal authorities, the centre had facilities of hot water, washing machines, separate toilets for male and female and ensured the services were disabled-friendly. Similarly, Shankharapur Municipality also managed a hygienic quarantine facility in an abandoned childcare centre building which was equipped with attached bathrooms. However, quarantine facilities managed by other *Palikas* provided only basic facilities and there were complaints about maintenance of the hygiene and social distancing. Dharan Sub-Metropolitan City initially promoted home quarantine and isolation. With the growing number of infection cases, it later converted quarantine centres to isolation centres by adding facilities such as oxygen supply, improving beds and arranging medical staff. Some *Palikas* such as Gokulganga, Shankharapur and Dharan also managed ambulance services. Similarly, other *Palikas* established quarantine and isolation facilities in schools and other government buildings with the available resources.

b. Improving (augmentation of) health-related infrastructure/services:

Most of the *Palikas* made some improvements on health-related infrastructures during the pandemic by adding hospital beds and installing Polymerase Chain Reaction (PCR) tests⁸ facilities by mobilising the funding accessed from the provincial and federal governments. For example, Bidur Municipality provided necessary financial and other assistance to upgrade the Trishuli Hospital (50-bed Hospital was upgraded to 100 beds). The Deputy Mayor of Bidur Municipality reported that the Municipality coordinated with the provincial and federal governments and managed to fill the vacant positions of seven doctors and two specialist doctors in the district hospital. Dhulikhel Municipality also approached the provincial government and established a PCR lab in the town.

c. Revisiting program priorities:

Most of the *Palikas* revised the budget of fiscal year 2019/20 and 2020/21 and allocated an additional budget to the COVID pandemic and other related areas such as agriculture and youth employment. Resources on infrastructure projects and social capacity development were diverted to these areas. Such reallocation was made with the intent to engage people who returned from cities in local agriculture and other income generating activities. For example, Diktel Municipality prioritised agriculture and increased the budget of the sector to five percent. Gokulganga also prioritised agriculture with an increased budget and initiated a start-up grant for small industries. Similarly, Bidur Municipality developed the Agricultural Utilisation and Grants Procedure (2020), fixed agriculture market prices and provided relief to farmers. Most of the *Palikas* reduced allowances of local representatives and reduced expenses on training, meetings, and seminars.

d. Relief distribution:

During the lockdown period, most of the *Palikas* provided some sort of immediate food relief to the needy people, mainly the wage labourers and a few *Palikas* such as Bidur targeted additional relief distribution to pregnant women. The Deputy Mayor of Bidur Municipality shared that the municipality provided cash of NPR 3000 (USD 25) for needy people and additional support of nutritional food equivalent to NPR 2500 (USD 21) to families having pregnant women. In Dharan, a

⁸ Polymerase chain reaction (PCR) test for COVID testing

food bank was established, and food was collected at the local level. In Dhulikhel, different external and local organisations supported food items to the poor people and families who used to survive on daily wages.

e. Market monitoring:

Palikas also focused on regulating market price and quality of supplies during the period of lockdown or restricted mobility. There were instances of price hikes of vegetables and grocery items in Dharan, and the municipality conducted market monitoring in collaboration with local agriculture market centres to fix prices with a maximum 20% profit.

4.2 Institutional mechanisms and decision making for local disaster response

Well-functioning institutional mechanisms are key to effective local responses to disaster. In this section, we discuss what institutional mechanisms existed or were formed at the local level to provide disaster responses in general and how they were mobilised for COVID-19 responses by *Palikas*.

a. Institutional mechanisms and their functioning:

Various institutional mechanisms have been envisioned for disaster management at the local level by national policy and legal frameworks. One of these includes the District Disaster Management Committee (DDMC) (see DRRM Act 2017, section 7, Article 16.1) under the leadership of the Chief District Officer (CDO)⁹, with *Palika* Mayors/Chairpersons as members. The committee had a strong influence in COVID-related decision making, such as declaring travel restrictions, issuing permits and maintaining overall law and order in the district at all times, including the COVID-19 period. The Local Government Operationalization Act (2017) has provisioned a local-level mechanism of Local Disaster Management Committees (LDMC) with the authority to make disaster-related decisions at the *Palika* level. The committee is chaired by *Palika* Chair/Mayor and *Palikas* can define its internal structure (membership) and function in accordance with the local disaster management regulations to be prepared by *Palika* itself. The committee consists of security personnel, representatives from political parties, private sectors, NGOs, and the local chapter of the Nepal Red Cross Society. As we elaborate below, there remained some ambiguity regarding decision-making authority between the DDMC and LDMC, creating confusion about how COVID response-related decisions are made.

However, the local level mechanisms of LDMC at the *Palika* level were not fully functional in the *Palikas* selected for case study prior to COVID. While the committees were formed, the LDMC in only one *Palika* (Bidur) held regular meetings (i.e. two meetings per month) (see table 2). While in the other three *Palikas* (Gokulganga, Shankharapur and Dhulikhel), the meetings were not regular and the remaining four *Palikas* did not even hold a single meeting prior to COVID. The LDMC was made more functional in some *Palikas* such as during the pandemic, Dhulikhel and Bidur made multiple COVID response-related decisions. For instance, the LDMC in Bidur increased the frequency of meetings from monthly to five to six times per month and in Dhulikhel, from every three months to once a month. As presented in Table 2, three out of eight *Palikas* made major COVID-related decisions from the *Palika* executive body instead of the LDMC. This means, as we elaborate below, the *Palikas* could not fully benefit from the opportunity to institutionalise the local level decision-making mechanisms during the pandemic.

⁹ CDO is an administrative representative of the federal government in the district and works directly under the federal Ministry of Home Affairs.

The Disaster Risk Reduction and Management Act (2017) made provisions for a dedicated unit for disaster risk management at *Palika* level with the role of providing administrative support to the LDMC and maintaining documentation of disaster events and effects. However, such units were not fully functional in most of the *Palikas* and some were yet to establish such a unit. As we can see in Table 2, only four out of eight *Palikas* had established such units with varied structure and capacity. As the table shows, the municipalities established prior to the 2017 local governance reform already had such units and the new *Palikas* established after that were yet to establish the units or have not been able to make them operational. For example, Dharan has a separate division called Forest, Environment and Disaster Management Department established in 2017 which has three officer level staff. Similarly, Gokulganga Rural Municipality (RM) in Ramechhap has a unit established through NGO support and is run by only an assistant level staff. While, the number of staff and expertise of the disaster risk management unit will be based on the size of the *Palika* and the mandate they define, there is a broader expectation that such units will be functional with staff with expertise in disaster risk management.

Table 2: Local institutional mechanisms for disaster response at *Palika* level

Rural/ Municipalities	Functioning of Disaster Management Committee		Disaster Management section/ unit	Disaster Management/ COVID Fund		Local Level Policies (Regulations /Guidelines)
	Pre-COVID *	COVID**		Pre-COVID	COVID	
Dharan	+	+++	Yes	Yes	COVID 19 prevention and relief fund	Regulation
Diktel	+	+	No	Yes	Yes	Guidelines
Likhu Tamakhoshi	+ (thematic committee for disaster led by one of the ward chairs)	+	No	No	No	None
Gokulganga	++	+++	Yes	Yes	Yes	Both Regulations and Guidelines

Dhulikhel	++ (Provision of meeting once in three months)	+++	Yes	Yes	Yes	Both Regulations and Guidelines
Shankharapur	++	+++	No	Yes	Yes	Disaster Regulation and guidelines
Bidur	+++	+++	Yes	Yes	No	Guidelines
Budiganga	+	++	No but a focal person assigned	No	Yes (separate COVID fund)	Disaster Response Plans and Regulations

Note:

* Functioning of the disaster management committee:

- + Not even a single meeting held
- ++ Only a few meetings held but not regular meetings
- +++ Meeting regularly (up to 2 meetings per month)

The Disaster Risk Reduction and Management Act (2017) also made provisions for establishing Disaster Management Fund at the provincial and local levels. The fund can receive contributions from internal (government’s contribution) and external sources (i.e. grants or loans from international organisations, donations from individuals, or any sources) and it should be used for disaster-related activities. Most of the *Palikas* have established the fund but it varies in terms of the amount of money mobilised (see Table 4).

In relation to the COVID response, *Palikas* also created a separate fund called COVID fund (*Corona Kosh*) following the instructions from the federal Ministry of Finance (notice issued on March 29, 2020). For example, Diktel adapted the existing disaster management Fund as ‘*Corona Kosh*’ and *Palika* such as Gokulganga created a separate fund for COVID response. *Palikas* found the limitations of the existing disaster fund and hence established a separate COVID fund which helped them to generate and leverage funds for local responses to COVID. The Deputy Mayor of Bidur mentioned that if the disaster fund is named COVID Fund, then the amount from it cannot be used in other disasters such as floods, landslides, and fire. Further, there is also a rationale that a fund dedicated to COVID-19 has better prospects of receiving donations than a standard disaster management fund. The head of the disaster unit of Dharan reiterated this by sharing that although the existing Disaster Management Fund could be used for COVID-19 response, there is a greater willingness to contribute towards COVID-19 specific funds than general disaster funds.

To overcome the gap of the well-functioning institutional mechanisms for local risk management, *Palika* leadership (mainly the Chairperson/Mayors) played a crucial role by filling the institutional

gap. In most of the cases, they coordinated major actions such as establishing quarantine centres and ensuring PCR tests. For example, the Mayor of Budiganga himself made efforts in travelling to another province carrying the samples for PCR test.

Some *Palikas* appeared to have benefited from the earlier disaster-related initiatives and institutional mechanisms (under the old structure) but many have ignored or could not leverage them. For example, Gokulganga RM benefited from past NGO interventions. The Chairperson said:

One of the NGOs supported the *Palika* on disaster-related matters by establishing emergency centres equipped with resources to carry out search and rescue operations during flood, landslides, earthquake and fire. They handed these centres to the VDC under the old structure which are now taken care by the respective wards under the new governance mechanism. The NGO also helped establish disaster management units which are now responsible to manage disaster-related information in the *Palika*.

b. Decision-making ability:

Disaster response involves decision-making related to allocation and mobilisation of resources. In this section, we document how local decisions were made concerning COVID response and the extent to which the *Palikas* had the authority and resources to materialise the decisions.

As per the mandate provided by the federal disaster legislation (see above), *Palikas* can formulate needed policies and guidelines for local responses to disaster risks. However, only half of the *Palikas* had developed some form of disaster-related policies and a few *Palikas* made such policies during the pandemic. Of the eight case study *Palikas*, five had developed disaster regulations and two had developed only guidelines; and two had developed both regulations and guidelines. Budiganga Municipality drafted the regulation during the pandemic. Diktel and Bidur had only prepared Disaster Management Guidelines 2019 outlining the institutional structure of the municipal disaster management committee and ward level disaster management committee and their functions. In terms of the process of developing regulations, *Palikas* have a legal section that prepares a draft regulation based on the template provided by the federal ministry. The *Masyauda Samiti*¹⁰ reviews the draft and passes it to the Executive Council (*Karyapalika*) for approval. The regulation is then endorsed by the Municipal Council. The development of the guidelines also follows the same process, but it is approved by the Executive Council. This means that the newly formed *Palikas* were not able to develop local policies (rules) needed for local responses to disaster risks.

While the pandemic provided the *Palikas* with an opportunity to operationalise their decision-making authority, they also faced notable constraints. Despite the provision of making disaster-related decisions by the LDMC, in most of the case study *Palikas* (see section 4.1), COVID response related decisions were made by the *Karyapalika* (*Palika's* executive body). While the executive body of the *Palikas* has the legal mandate to make operational decisions, *Palikas* seemed to have missed the opportunities to operationalise the institutional structure and mandate of the LDMC.

The ability of the *Palikas'* to provide effective response to COVID pandemic was also constrained due to the ongoing struggle over authority i.e. confusion or overlapping of authority with higher levels of government (see also Khatri et al., 2022 in case of climate change responses). The *Palika* officials felt that DDMC, chaired by the Chief District Office (CDO) had overridden the LDMC, the

¹⁰ Called policy drafting committee (*masyauda tarjuma samiti*) under the leadership of Deputy Mayor with members including ward chairs, *karyapalika* members, Mayor, legal experts/advisors and others invitees.

Palika level decision making body. The Mayor of Gokulganga stated that the district level structure of the federal government such as DDMC intends to impose top-down decisions which has affected their independent planning. The issue of overlapping authority was also stressed by the representative of the Disaster Unit in Dharan that explains the Municipality's resistance or denial with district authorities (CDO). He said:

In our district, the disaster management committee is under the chairpersonship of the CDO and the disaster management committee at the municipal level is chaired by the Mayor. The municipal committee cannot be placed under the CDO since the Mayor is higher in authority than the CDO. Due to this existing hierarchy, there has been discomfort with the existing institutional mechanism.

Further, some contradictory decisions and directives from the federal and provincial authorities also undermined the *Palikas* authority to make independent decisions and take timely action for COVID response. *Palika* officials reported that the federal government kept changing its decision regarding the use of school infrastructure for quarantine management. For example, in the beginning, the guidelines issued by the federal Government (Quarantine Management Guidelines) declared that schools and public buildings will be used for quarantine. The official added:

We had a large inflow of people coming from India. School buildings were the only option for their quarantine management. However, on 31st July 2020¹¹, the federal government issued another notice urging *Palikas* to not use schools for quarantine. The decision was irrational or illogical that made COVID management difficult for us at the local level.

When asked regarding the support received from the federal and provincial government, the Mayor of Diktel shared that they mostly received directions. His statement implied there was no support in regards to resources but only interference in their decision-making through state- issued directives.

4.3 Access to and mobilisation of resources

The *Palikas* experienced that the response to COVID has been more challenging than other disasters such as floods and landslides. As the Mayor of Budiganga Municipality (which experienced floods and landslides during the pandemic) said:

The nature of the threat posed by COVID-19 is completely different compared to other disasters. Responding to the pandemic required us to remain isolated, contrary to other disasters such as floods and landslides which require collective effort for immediate rescue and relief.

He added that due to the need for social distancing during the pandemic, the response for other disasters such as flood and landslide also became challenging.

The head of the Disaster Management Unit in Dharan noted that the disaster caused by landslides and floods has effects on specific localities, while COVID-19 has a widespread effect which demands large-scale responses. He further added, 'COVID management also required human resources with different expertise.' Officials from other *Palikas* such as Budiganga and Bidur echoed views that COVID response had been more challenging in terms of mobilisation of resources.

Hence, the availability of, access to, and mobilisation of resources such as knowledge, financial and

¹¹ <https://risingnepaldaily.com/main-news/govt-bars-operation-of-quarantines-isolation-centres-in-schools>

material resources was very important for the *Palikas* to provide disaster responses. In this section, we present how *Palikas* mobilised these resources and the extent to which they could leverage resources from higher levels.

a. Financial resources:

The pandemic struck local governments as a new and unprecedented public health threat, adding a huge financial burden. Financial resources were needed simultaneously to create new risk mitigation facilities such as quarantine shelters, to provide immediate relief to labourers and low-paid workers who lost income, and more importantly to buy testing and monitoring equipment. At a time when more financial resources were needed, the *Palikas* faced a reduction in revenue collection due to the widespread lockdown. In the current financial system, the anticipated level of resources was way lower than the scale presented by the pandemic. A survey reports that about 80% of the budget that *Palikas* spent on COVID response came from the reallocation of budget and on average, *Palikas* spent about 1.9 percent of the total budget on COVID response-related activities (Bhandari et al., 2020b).¹²

An allocation of the immediate grant from the COVID-19 response fund of the federal and provincial governments was instrumental to the *Palikas*. The Vice-Chair of Likhu Tamakoshi reported that it received NPR 1000000 (equivalent to USD 9000) from the federal government for food relief and a similar amount from the provincial government for quarantine, isolation facility management, and food relief. However, the *Palikas* reported that these grants were far more limited than required. Under increasing financial burden, the federal government also curtailed some of the earmarked allocations to *Palikas*. For instance, Diktel Municipality did not receive NPR 6.5 crore (USD 548000) grant that was to be received from the federal and provincial governments allocated for the fiscal year ending July 2020.

Local disaster or COVID fund established by *Palika* as discussed above were instrumental to some extent to ensure local responses. In some *Palikas* such as Diktel and Dharan, the municipal staff including the Mayor and the Deputy Mayor contributed their own salaries to the COVID Fund. However, as we can see in table 4, the size of the COVID Fund in *Palikas* varied, with the amount of money mobilised roughly corresponding with the size of *Palika* i.e. rural municipalities and newly formed municipalities had smaller size funds compared to the sub-metropolitan city such as Dharan. For instance, the amount ranged from NPR 20 lakhs (USD 16,000) in Gokulganga to 45 million (USD 360,000) in Bidur and more than 4 crore in Dharan. The highest amount of fund in Bidur might be for the purchase of the fire brigade as mentioned in the program document.

¹² Bagmati provincial government decided to provide NPR 2000000 to each metropolitan city, NPR 1500000 to each sub-metropolis, NPR 1200000 to each municipality and NPR 1000000 to each rural municipality as immediate support. See <https://tkpo.st/3dGzUxa>.

Table 4: Financial status of Palikas for FY 2020/21

Municipalities /RM	Total Palika budget (million)	Internal revenue	Size of disaster fund (in millions)	COVID fund (if created)	Federal gov support for COVID response	Provincial government's contribution COVID response	Other external support (NGO/INGO)
Dharan Sub-Metropolitan City	1723.5 m		8 m	7 m	No	1 m	No support
Diktel Rupakot Majhuwagadi Municipality	769 m	10 m	5 m	13 m	No	1m	Red Cross and an NGO provided food relief
Likhu Tamakoshi Rural Municipality Tamakhoshi	65 m	5 m	2.5 m		1.3 m	1 m	No external support
Gokulganga Rural Municipality	65 m	69 m	1.5 m	2 m	1 m (For quarantine and food relief)	1 m	An NGO provided 4 m for food relief and quarantine
Dhulikhel Municipality	1111 m	22 m	Around 6.5 m (1 m from previous yr, 4 m by municipality, 1.2 m by provincial govt).	No separate COVID Fund	1 m	1.2 m (for food relief)	3-4 lakhs (0.3 m-0.4m) deposited for disaster management fund
Shankharapur Municipality	1025 m	31 m	4.5 m [contributed by donors, staff etc]		1 m (PCR test and sanitizing materials)	1.2 m	

Municipalities /RM	Total Paliika budget (million)	Internal revenue	Size of disaster fund (in millions)	COVID fund (if created)	Federal gov support for COVID response	Provincial government's contribution COVID response	Other external support (NGO/INGO)
Bidur Municipality	1260 m	34.5 m	44.5 m (part of it has also been allocated for COVID response but not called COVID Fund)	No	8 m for PCR machine	No	Food relief support
Budiganga Municipality	330 m	1.1 m	Spent about 24 m on COVID response	10 m	No	1.8 m	An INGO provided 1.4 m for quarantine facilities and 3, 50,000 provided by staff from a private bank.

One of the notable responses the *Palikas* provided to overcome the financial and institutional limitations was to mobilise existing infrastructure such as public schools and government buildings for quarantine and isolation facilities and local in-kind resources such as food donations by local businesspersons. In some *Palikas* such as Dhulikhel, the support provided by the local level private sector organisations such as the District Chamber of Commerce was notable and important, particularly for the distribution of relief materials.

However, not all *Palikas* had the same level or the nature of the financial constraint. Rural municipalities and newly constituted municipalities faced higher levels of financial burden, as they had limited internal revenue sources and the ability to access and mobilise the resources from other agencies including higher level governments. Some *Palikas* were better able to access financial support from international and national non-government organisations. For example, in Diktel, a local NGO called *Bal Sewa Samaj* supported relief distribution and bedding materials for quarantine and isolation. Some people including the businesspersons, political leaders and wealthier people of Khotang living in Kathmandu also contributed to Diktel's COVID-19 response fund. Budiganga Municipality approached UNICEF and INGOs for support but received only health-related equipment and other small-scale support as relief materials.

b. Physical assets/infrastructure:

Infrastructure management was crucial for the effective organisation and facilitation of day-to-day responses such as the provision of food relief and delivery of health services. The *Palikas* managed quarantine, isolation facilities and other health services using the limited available infrastructure at the local level. For example, they mobilised schools and other public buildings to manage quarantine facilities. Some *Palikas* augmented health infrastructure with financial support from the Provincial and Federal Governments. For example, Dhulikhel Municipality accessed a grant from the Provincial Government to establish PCR lab and Bidur upgraded its hospital with additional health staff. The Mayor of Bidur reported that it was successful in coordinating with the Federal and Provincial governments to fill the posts of doctors in hospitals and health centres that were vacant (the vacant positions for seven MBBS doctors and two specialist doctors were filled) .

The rural municipalities and newly formed municipalities faced challenges to manage infrastructures needed for COVID responses. Except in Dhulikhel and Shankharapur Municipalities, the quarantine facilities were reported to be of poor quality and people complained about the lack of proper toilets. These six *Palikas* had quarantine facilities well below the standard set by the federal Quarantine Operation Act, 2020. In this situation, the quarantine centres were critiqued for turning into possible COVID-19 breeding sites. The situation got even worse when municipalities had to deal with public protests while establishing quarantine at schools and settlements. For instance, Bidur Municipality faced difficulty in establishing quarantine facilities because of local resistance as locals stigmatised infected people and considered it best to keep them away from their settlements.

Besides the health-related infrastructure discussed above, *Palikas* also faced infrastructural constraints to store grain and agriculture inputs to facilitate smooth supply during the period of lockdown. For instance, Dharan faced a shortage of agricultural inputs (seeds, fertilisers) during lockdown. Budiganga Municipality experienced fertiliser shortage and it lacked warehouse

(godown) to store grain transported to the district under the federal government's subsidy scheme.¹³ Resultantly, people could not get adequate fertiliser and grain during the time they needed.

c. Knowledge and human resources:

The access to and mobilisation of knowledge and human resources had become crucial for institutionalising local governments to provide responses to the pandemic. It was also very important for developing policies and plans.

Most of the studied *Palikas* had to organise their responses to COVID with limited knowledge (information) and human resources. In most cases, the *Palika* officials mobilised their personal and political connections to access information. For example, the Deputy Mayor of Diktel noted:

We mobilised our political connection in Kathmandu to get PCR results and other information. When the PCR test could not be done at Federal level, we approached the Minister at the provincial level who requested to send the sample there and we did accordingly. So, it would be good to have an institutional structure/mechanism to enable the flow of information from the federal and provincial to local levels rather than utilise political connections for requesting support.

However, *Palikas'* responses to COVID were constrained by limitation of resources i.e. flow and management of information (knowledge). As officials reported, some experienced the gap of a clear line of authority through which information could flow from the federal and provincial levels to *Palikas* facilitating effective local response to COVID. More specifically, officials pointed to the lack of a dedicated institutional mechanism at the provincial level. There was also an instance where misinterpretation of the information provided by the hospital about PCR test results led to a wrong response. In May 2020, there were seven people quarantined in one of the *Palikas* and their swab was collated and sent to Kathmandu for the test. The *Palika* authority inquired over the phone to the hospital about the test result and they were told that the report was 'positive'. The *Palika* authorities interpreted the 'positive' as not having COVID infection. Eventually, they released the quarantined people by organising a small ceremony. However, a few hours later, they learned that they had misinterpreted the test result and the people quarantined were infected with the virus. The *Palika* had to search for these people and get them back to quarantine. They had easily located five people but could locate the remaining two hiding in their relative's house in the neighboring district.

The newly established *Palikas* and those from rural areas had to work with limited staff. Rural Municipalities such as Gokulganga and Likhu Tamakoshi experienced a shortage of capable staff to effectively mobilise the financial resources. For example, the Chairperson of Gokulganga RM mentioned the need of a senior finance officer who could improve budget expenditure and help in the overall financial management. According to him, the *Palika* currently has third class officers while it needs at least second class finance manager. Likhu Tamakoshi RM also experienced challenges to access funds from the federal government because of the lack of capable staff to develop financial plans.

¹³ Ministry of Agriculture and Development has been implementing fertiliser and seed subsidy program with special focus on small and marginal farmers. Through 2016/2017 budget speech, the country directed approximately 20% of its agricultural resources toward subsidies on fertilizer.

Table 5: Availability of human resources for COVID response in the studied *Palikas*

Rural/Municipalities	Total staff positions	Disaster unit (Yes/No)	Number of staff with expertise/knowledge on disaster management
Dharan Sub-Metropolitan City	> 400 total staff but environmental engineer position in the disaster unit is vacant.	Forest, Environment and Disaster Unit	Two officers and one Environmental Inspector
Diktel Rupakot Majhuwagadi Municipality	Around 225	No	An admin staff has been assigned to take care of disaster-related matters.
Likhu Tamakhoshi Rural Municipality	65 positions but only 30 fulfilled and many senior positions including the Chief Executive Officer were vacant	No	No staff to take care of disaster-related matters
Gokulganga Rural Municipality	36 staff	Yes	One assistant level staff
Dhulikhel Municipality	105 staff	Yes	Officer level staff
Shankharapur Municipality	130 staff	Yes (recently established)	Hired engineer recently and earlier responsibilities related to disaster related matters was assigned to the information officer
Bidur Municipality	150 staff	Yes	8 staff (mainly in fire brigade)
Budiganga Municipality	Total around 75-80 (including health staff)	No disaster unit established	Admin staff from basic science background is assigned for disaster-related matters

The RMs and municipalities in remote areas faced the problem because of limited trained health staff. For example, Gokulganga and Likhu Tamakoshi RMs lacked trained health staff even to take swabs for PCR tests and they needed to borrow expertise from the district hospital located at Ramechhap Bazaar at about three hours driving distance. It also added a financial burden to *Palikas* as they had to pay travel and daily allowances to the people travelling from Ramechhap. This is illustrated by the statement of the Chairperson of Gokulganga RM:

We do not have trained staff to collect swabs and we are investing huge money to get medical staff from the district centre for which we need to bear the cost for transport, accommodation, food and the daily subsistence allowance (DSA).

The lack of capable human resources has also limited the *Palikas* ability to develop disaster-related policies. The Deputy Chair of Likhu Tamakoshi said, 'We are not able to meet the public expectation

of service delivery primarily because of the lack of capable staff.' Similarly, the Mayor of Diktel reported:

At the federal level, parliament's work is to make the legislation, but the local government is burdened with drafting and implementing the legislation, carrying out development activities, and hearing peoples' grievances. The pandemic has now added responsibilities to the local government which also needs to ensure its effective response and management.

Further, the Deputy Mayor of Dharan Sub-Metropolitan City also pointed that the lack of expertise hindered the development of disaster-related acts, and policy and institutional mechanisms of the *Palika*.

The *Palika* officials pointed to the problem that local governments were bestowed with high levels of authority to undertake disaster response but their ability to effectively deliver services including the COVID response was constrained by the availability of and ability to access needed human resources. The Mayor of Diktel shared his frustration:

There are raging criticisms on the effectiveness of the service delivery of *Palikas* (*garena bhanne matra cha*), but there is very little to no attention on the challenges local governments face in regards to the lack of human and financial resources.

6. Discussion: Factors shaping local disaster risk governance capacity

For Nepal's institutionalising local governance system in the federal context, COVID was sudden and posed an unprecedented threat. Responding to the pandemic required resources and higher levels of capacity in terms of decision-making, and their implementation. All *Palikas*, no matter whether they are bigger or smaller and urban or rural, needed to rely on the federal government for technical expertise, financial resources and information to organise their responses. Too often, federal government agencies at the local level such as DDMC led and provided the needed directions to local governments although the latter felt that their decision-making power was being encroached. What is unique to the Nepal case is the ongoing negotiation and struggle of authority between *Palikas* and the higher-level governments which seemed to have shaped their ability to respond to climate change and disaster. For instance, the ambiguity and unsettled struggle over authority across three levels (Nightingale, 2018) appeared to have remarkably affected the *Palikas'* ability to make independent decisions and organise their responses as in the case of local climate response (see Khatri et al., 2022). Further, this finding reminds us that large-scale disasters can be beyond the capacity of local governments alone and it requires coordination across scales (Miller and Douglass, 2016; Ojha et al., 2021). We argue that developing overall risk governance capacity will not only help local institutional mechanisms to make and implement decisions but also enhance their ability to coordinate across scales (higher level governments) to access needed knowledge and material resources (also see Khatri et al., 2022).

Drawing on these findings and analysis, we identified two major factors important for shaping governing capacity for providing local responses to multi-hazard disasters. These factors include a) institutional mechanisms that facilitate the formulation and implementation of decisions and

b) the ability to access and mobilise resources. With this, we advanced the analytical framework developed by Khatri et al. (2022) for effective local climate responses where the authors stressed that the capacity of local institutions to provide climate responses is shaped by the ability to operationalise authorities in terms of making decisions and ability to access and mobilise resources (knowledge and material resources). In this paper, we advanced this framework and adopted it in the context of multi-hazard risks. We conceptualised the risk governance capacity of local governance systems for effective local responses to disaster. Our comparative case study of eight *Palikas* showed that institutional mechanisms envisioned for disaster response at the local level were still institutionalising and not well functional to be able to handle the unprecedented level of threats such as the COVID pandemic. This means that the ability of local governments to make timely decisions and provide day-to-day responses were constrained because of the lack of fully functional institutional mechanisms and the overlapping of authority with the higher-level governments, as in the case of providing responses to climate change (Khatri et al. 2022). The second important factor shaping local capacity for disaster response is the ability to access and mobilise resources. As we found, the *Palikas* struggled to access and mobilise resources and their responses were constrained by budget, human resources, and knowledge at the local level and some *Palikas* with relatively well-developed institutional mechanisms and leadership ability to mobilise political connections to access resources from higher-level government and external actors also see (Pokharel et al., 2023) could provide better responses.

Other studies have indicated the gap in capacity of local governments for effective disaster responses in terms of technical expertise (Acharya, 2018; Bhandari et al., 2020a; Malla et al., 2020), financial resources (Vij et al., 2020; Malalgoda et al., 2016) and knowledge and information (Malla et al., 2020). These studies are concerned about institutional capacity in a more technical sense. The idea of risk governance capacity conceptualised in this paper offers a more comprehensive view of local institutional capacity and it takes into account broader institutional factors outlined above. We argue that the establishment of well-functioning institutions is a crucial aspect of governing capacity especially necessary in the context of the complex process of negotiating rules and the mechanisms for their implementation (Nightingale, 2017; Khatri et al., 2022). In other words, the governing capacity is achieved when these rules and mechanisms are fully institutionalised and prepared/capable to provide responses to the disaster shock. Further, the governing capacity is also determined by the ability to access and mobilise resources needed for mitigating risks.

7. Conclusion

COVID-19 emerged as a novel risk and no institution worldwide has been capable of effectively responding to it. However, in Nepal's case, it is interesting that despite significant devolution of authority and allocation of resources to the local level, their capacities to respond to the pandemic were still constrained. The factors that challenged their risk governing capacity and response to the pandemic included: a) institutional mechanisms that are not fully functional and the overlapping of decision-making authorities, and b) for many *Palikas*, limited ability to access and mobilise a range of resources. Earlier studies also highlighted the capacity constraints of subnational governments, and the lack of financial, technical, and human resources, inadequate knowledge and insufficient experience of local governments as shortcomings in their responses to disaster risks. Our analysis takes a more comprehensive view of local disaster risk governance capacity in terms of well-

functioning and fully institutionalised local governance system and highlights the need for overall disaster risk governance capacity of local governments (i.e. *Palikas* in case of Nepal) which is beyond technical capacity in terms of budget and technical expertise. We maintained that such capacity is determined by the ability to make and implement decisions (institutional mechanisms) and the ability to access and mobilise needed resources.

Findings in this paper suggest that devolution of authority alone is not sufficient for the effectiveness of local responses to disaster-related risks, rather it would need well-functioning institutional mechanisms that are able to make and implement decisions and access and mobilise needed resources. We conceptualised this as a local risk governance capacity which contributes to the overall institutional capacity of the local governance system for more effective local responses to large-scale and multi-hazard disasters. Further, this analysis reinforces the argument that there is a need for more coordinated efforts across scales involving a clear line of authority for the flow of knowledge and other resources for the decentralised institutions to effectively handle disaster.

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