Syndemics of COVID-19 and Human Relationship in Dilemma: A Case of Nepal

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Abstracts

Since its origin Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) in early December 2019 it reached Nepal after about one month. From that day onwards its expansion and transmission has got a rapid speed and caused more than 116 deaths and about 30,000 reported cases of COVID-19. Though the death rate is comparatively analyzed as low regarding European and American countries but it has become a cause of the evolution of other health problems like psychological disorder among large number of people, suicidal cases, declining condition of chronic patients, and not yet studied but rise in the cases of diabetics and so on with remarkable symptom on those who are in the access of medical services. Government preparedness, social response, and cultural as well religious belief have fused together to create a gap in the relationship of leading towards the new direction of dilemma in harmonious relationship. Cases of social, religious, and concerned authority behaviour are noticed as non-relevant and non-appreciable. Nepalese society, commonly known as warm and harmonious with cooperative nature has been slowly turning its steps towards individualistic behaviour and losing its ideals as the byproducts of the prevalence of COVID-19 in the present days. Complexities in health sectors are in the rise causing human relationship in the condition of dilemma.

Key words: Syndemics, Relationship, Lockdown, Pandemics, COVID-19, Terror

Background

The first case of COVID-19 was officially reported in central China city of Wuhan of Hubei province in November 17, 2019 but the official report from Chinese government to World Health Organization (WHO) was produced only on 8th December¹ and later on confirmed it as mutant form of corona virus already distinguished in 2003 as Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2)², when the world including Nepal was in the pace of its business with regular chords. By the end of 2019 Chinese authorities had so far identified at least 266

people who were infected from COVID-19³ showed a condition of threat to human existence. The mode of transmission and rapid effect on respiratory system was nearly out of control by general means of medical practices available till date. Available data of victims has shown that COVID-19 is affecting almost all the aspects of human individual as well as social life. In countries like Nepal effects of COVID-19 is observed from ground social units to the policy making level. Its influences are observed on human societies from biological perspectives to social, political, cultural, economic, and even to religious sectors so deeply that the world of human relationship after the problem is over may appear in different strata. One of such consequences assumed by a team of scholars (John et al, 2020) opines that like the fall of the Berlin Wall or the collapse of Lehman Brothers, the coronavirus pandemic is a world-shattering event whose far-ranging consequences we can only begin to imagine today⁴. The situation in present days does not give any picture of the future days that will appear to human beings after the COVID-19 pandemic is over. No one can easily predict the situation; will it open the window of opportunity for new world or leave the world in the condition of total destruction, however, similar situations in history had changed the existed way of human being towards another direction and dimension quite different from the stereotypic ways being progressed in that time. 1918 Influenza that claimed about 50 million lives affected the production of goods leaving remarkable impact in overall life ways of people⁵. When there are disturbances in other aspects of human life its effects certainly generate results in human relationships adversely in most of the conditions. Prevalence of such contamination in Nepal reveals impacts in diverse fields of human activities as like other countries of the globe.

Coronavirus is continuing its spread across the world, with more than 21 million confirmed cases in 188 countries. More than 770,000 people have lost their lives (BBC, 2020b). Beginning from China expanding throughout the globe it now has rapid adverse effects on developing countries like Pakistan, India, Chile, South Africa, Brazil, Ecuador, and Bangladesh⁶. In fact, Nepal is one of such countries where the graph is going upwards in spite of efforts and measures made applicable by the authorities. In Nepal death cases and infections cases are 114 and 28,257 respectively as per the data of 18th August 2020. In this study the efforts are put for the analysis focusing on the human relationship generated by COVID-19 as its Syndemics. From the beginning of first COVID-19 case in January 23, 2020 to till date a kind of terror and fear has

been evolved among general public including health personnel in various circumstances as there are rapid growth in case numbers in recent days. It has created a kind of uncertainty and terror in the society.

Figure 1: Trend of COVID-19 cases in Nepal

Source: Ministry of Health and Population, Nepal. Data as per the date of publication on 28th June 2020

Ever since the first case was reported on 23rd January in Nepal the number of victims has been increasing rapidly reaching to every level of social life spreading to cover the overall geographic locations. As compared to the initial data the increment of cases represents its expansion in community level resulting in the rise of insecurity and uncertainty of life as the consequences of the action performed by the authority in present days.

When the first case of infection was reported on 23rd January 2020 and the government announced the condition of lockdown in the country on 24th March 2020, during this period of two months Nepalese people were unaware of being infected and continued their daily chords but hospitals started becoming empty due to the decrease in the number of visitors. People suffering from other health problems than COVID-19 also could not get proper treatment in hospitals run by private and public sectors except government aided ones. Moreover, hospitals locked their gates for patients and patients from poor economic background became the most

sufferers of the times. Among many cases one case of minor leg injury caused by pedal thresher for red lentil in mid-Terai region of Bara district of Kalaiya sub-metropolitan city Nepal lost his life due to infection as he was thrown out from hospitals. Understandably,

fear among medical

Source: Ministry of Health and Population, Nepal. Data as per the date of publication on August 18, 2020

professionals erupted in such a way that they refuse to treat patients although there were minor symptoms of fever recorded (Dhakal, 2020) ⁷. Dhakal further elucidates the situations with mentioning two similar cases of fear among doctors, hospital administrators, and paramedics as,

A 52-year-old woman lost her life in Biratnagar yesterday after a number of hospitals declined to admit her on suspicion that she had contracted coronavirus infection. The woman suffering from high blood pressure had a fever of 102 degree Fahrenheit when she was rushed to BP Koirala Health Science Academy in Dharan. The academy said she had to be admitted to the intensive care unit and referred her to Neuro Hospital in Biratnagar, stating it did not have a vacant ICU bed. The Neuro Hospital then referred her to Birat Nursing Home, which, in turn, referred her to Nobel Hospital. She breathed her last within one-and-a-half hours after getting admitted to Nobel Hospital as she failed to receive medical care on time. This is not the first time a life has been lost because of mere suspicion that the patient might be suffering from coronavirus infection.

A 20-year-old man from Dhoda of Kalaiya sub-metropolitan city died on Monday after Birgunj-based hospitals refused to treat him, saying that he was suffering from coronavirus disease. The man, who had received injuries and cuts while he was threshing red lentils, was taken to Birgunj National Medical College Teaching Hospital (BNMCTH) on Saturday after he complained of fever. The hospital held him the next day that he was infected with COVID-19 and used police force to throw him out. He visited other hospitals in Birgunj, but they declined to treat him as BNMCTH had told them about his health condition. So he was rushed to Tribhuvan University Teaching Hospital (TUTH) in Kathmandu, but it was too late. A COVID-19 test performed by TUTH on the man later turned out to be negative (The Himalayan Times April 1, 2020 Kathmandu).

Many villages and municipalities have restricted outsiders to enter their territory due to fear of COVID-19. No guests are welcomed in homes, no meetings with circles and children are out of reach of their friends and schools. Each one is isolated from their normal social life. Such unexpected, unusual, solitary, and lonely life has created terror and insecurity among general public.

Cases of suicide are on the rise day by day. Individuals from different walks of life are compelled to kill themselves. Apparently, people failing in business, responsibility, fed up of life and losing hope to get support from their friends and relatives are committing suicide in city areas relatively in more numbers than village areas from low land Terai to high land Himalayan regions. Harmonious and warm relationship between individuals is in declining conditions. No light of hope towards future is noticed since none of the intellectual, social worker, or authority has dared to exchange the rays of hope with general public. In this situation relationship among human being in Nepalese society which used to be known as warm, harmonious, lively, caring, and helpful, in individual and group levels is degrading (although a faint ray of hope still exists) to self-centric, errant, inconsiderate, hopeless, and non-cooperative.

Such situations of non-social behaviours increased during the period of lockdown and the government had to impose its force to make hospitals to provide health service to patients suffering from other diseases than COVID-19. Only after that little bit of improvement in the situation has been observed in the sectors but again the service in its optimum level has not been revived at normal as in the past. Such conditions not only in health sectors but in other sectors of

social life have imposed a kind of social friction between different groups on the basis of geological setting, economic status, political accessibility, and sometimes even caste systems.

Objectives

This study basically focuses on the exploration of origin and expansion of other health problems arising due to COVID-19 in Nepalese society and its impact on relationship between individuals and groups. In general, this study puts efforts to identify the fundamental causes of arising dilemma in relationship due to presence of Syndemics, its spinoffs and consequences which are ultimately altering the micro-level social intimacy and cooperation but in particular it tries to expose different aspects of Nepalese life ways during the prevalence of such conditions and the rays of hope for future.

The different objectives of this study to be dealt are:

- To study the conditions for the rise of Syndemics of COVID-19
- To explore the general picture of Nepalese social relationship
- To point out the situations of declining health services
- To elucidate ideas about the prevalence of terror and uncertainty
- To gather the causes of declining conditions of harmonious human relationship
- To sightsee the ideas of hope through existing religious beliefs and practices
- To draw conclusion from prevailing situations
- To recommend possible rays of hope for future

The issues dealt in the research are guided by the following research questions.

- What other health problems are evolved due to the presence of COVID-19 in the society?
- How is it creating adverse impact on social relationship?
- What are the causes behind such situations?
- Is there any possibility to find hope for future guided by existing religions?
- What possible means are there for better future?

Scarcity of literature on the subject is common in the country since governmental bodies till the date have not carried out any research with overall aspects of human life from various perspectives. Neither other agencies have come in front to have such study nor academic

research has been made from any institutions. Though there are handful of studies being carried out in similar fields, most of the studies have been carried out on developed economies. With the availability of limited studies it is not sure whether the conclusions carried out in developed countries are valid for developing countries like Nepal too or different sets of factors influence the disaster. Hence this study aims to evaluate critically about the analysis of situations on the basis of existing social norms and values backed by cultural practices.

Introduction to Epidemic, Pandemic and Coronavirus

It is not very simple to define the term epidemic and pandemic as mentioned in many dictionaries ranging from medical ones to cultural encyclopedia but however the study should go forward, at least, with the meaning of the terms to understand its degree of infection, awareness, cure, effects, and perception of general public about the disease not in purely medical sense but in anthropological aspects. To proceed to the conclusion set forth by the objectives it should be started from defining the terms.

The term epidemic is derived from the Greek as well as Latin word *epidemia* which is composed of two expressions i.e. *epi* which means “upon,” “on,” “over,” “near,” “at,” “before,” “after” and *dêm(os)* that means “people of a district”. In Combination it gives a meaning as “staying in one place, among the people”⁸. In simple ways epidemic gives the meaning as disease frequently spread among population in any community. Hays (2005) mentions an *epidemic*, according to the *New Shorter Oxford English Dictionary*, is a disease “normally absent or infrequent in a population but liable to outbreaks of greatly increased frequency and severity,” or a “temporary but widespread outbreak of a particular disease.” No agreement exists, however, on *how* widespread or frequent qualifies a disease as an epidemic. Another standard dictionary, *Webster’s New Collegiate*, gives another and somewhat broader definition: “excessively prevalent.” In simple ways the Webster’s dictionary (1987) gives the meaning as affecting or tending to affect many individuals within a population, community, or region at the same time.

The word pandemic itself is a disaster. According to Medicine Net (2020), “Pandemic is an epidemic (a sudden outbreak) that becomes very widespread and affects a whole region, a

continent, or the world due to a susceptible population. By definition, a true pandemic causes a high degree of mortality (death)” It further states that the word "pandemic" comes from the Greek "pan-", "all" + "demos," "people or population" = "pandemos" = "all the people"⁹. Understanding the word itself gives the details about its huge impact throughout the world (Koirala et al, 2020).

A *pandemic* is simply an epidemic on a very wide geographical scale, perhaps worldwide or at least affecting a large area of the world. But again, no quantitative measure exists that establishes when an epidemic becomes a pandemic. Modern disease understandings and categories differ significantly from those of past ages and places (Hays, 2005). In general and simple ways it is mentioned as – ‘A pandemic is an epidemic occurring on a scale that crosses international boundaries, usually affecting people on a worldwide scale’ (Porta, 2008). A disease or condition is not a pandemic merely because it is widespread or kills many people; it must also be infectious. For instance, cancer is responsible for many deaths but is not considered a pandemic because the disease is neither infectious nor contagious (Dumar, 2009).

The outbreak of Novel Corona Virus (COVID-19) from Wuhan has isolated millions of population from regular activities. The spread is so much viral that it is almost impossible to stop (WHO, 2020). The condition of such pandemic is engulfing human lives and altering human behaviour towards non-appreciable direction. Psychological complexities, loss of job, declining economic conditions, and uncertainty of future path of life as the product of this pandemic have causing loss of life. Pandemics itself is not only the cause of loss of hundred thousands of lives but there are other means that are the causes responsible for more loss of lives of human beings.

The term coronavirus is composed of two terms viz. *corona* and *virus*. The word *corona* refers to the shape like crown due to its structure. It is derived from Latin word with the meaning as ‘wreath or crown’. It also gives the meaning as a usually colored circle often seen around and close to a luminous body (such as the sun or moon) caused by diffraction produced by suspended droplets or occasionally particles of dust¹⁰. The word *virus* is derived from the Latin neuter *vīrus* referring to poison and other noxious liquids. The meaning of virus is "venomous substance," Its meaning is obtained from L. *virus* meaning "poison, sap of plants, slimy liquid."

In case of human disease it means "agent that causes infectious disease". It was first recorded on 1728 (Harper, 2011). Virus is introduced in simple way as "A microorganism composed of a piece of genetic material (RNA or DNA) surrounded by a protein coat. To replicate, a virus must infect a living cell: viruses can reproduce only by entering a host cell and using the translational system of the cell to initiate the synthesis of viral proteins and to undergo replication" (Porta, 2008).

Hence the term coronavirus is etymologically a combination of two Latin terms with a clear meaning as a poisonous organism with crown shape. Morphologically it is well described as:

Coronaviruses are single-stranded RNA viruses, about 120 nanometers in diameter. They are susceptible to mutation and recombination and are therefore highly diverse. There are about 40 different varieties and they mainly infect human and non-human mammals and birds. They reside in bats and wild birds, and can spread to other animals and hence to humans. The virus that causes COVID-19 is thought to have originated in bats and then spread to snakes and pangolins and hence to humans, perhaps by contamination of meat from wild animals, as sold in China's meat markets. The corona-like appearance of coronaviruses is caused by so-called spike glycoproteins, or peplomers, which are necessary for the viruses to enter host cells. The spike has two subunits; one subunit, S1, binds to a receptor on the surface of the host's cell; the other subunit, S2, fuses with the cell membrane. The cell membrane receptor for both SARS-CoV-1 and SARS-CoV-2 is a form of angiotensin converting enzyme, ACE-2, different from the enzyme that is inhibited by conventional ACE-1 inhibitors, such as enalapril and ramipril¹¹.

Coronaviruses are believed to be transferred from animals especially from bats and rats to human beings through secondary hosts like pangolin, pig, camel, and cow (Jie et al, 2018). Present form of mutant coronavirus i.e. severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) is responsible for the disease COVID-19 which is a highly transmittable and pathogenic viral infection.

Situation of Lockdown, Nepalese Society and Origin of Repulsion

Practice of lockdown of certain areas to prevent the spread of virus was also started from the medical practice of Chinese city of Wuhan just after the identification of the nature of virus.

When the central government of China imposed a lockdown in Wuhan on 23rd January 2020, it was already more than one month of diagnosing COVID-19 and nearly quarantined more than 11 million people of the city and this situation is referred as "unprecedented in public health history" by WHO stating that it was beyond its own guidelines¹². Though the Chinese method to combat the spread of virus was not appreciated by the world in initial phase but it was later followed and practiced by other countries European and North American continents where the cases of COVID-19 were confirmed. Expansion soon was observed in many other Asian countries like Korea, Singapore, Malaysia, India, Pakistan, and Nepal. At the time when Nepal reported the first case of the infection on 24th January 2020 in a student returned from China there was no adequate preparation to fight against the disease from government side except to keep the returnees in isolation (Koirala et al, 2020). Only rumors, uncertainty, fear, terror, and in some sense Nepalese mentality to rely upon miracle to be happened became the subject matter of conversation and the ingredients for media both print and digital in between the duration of the first case, slow rise of cases only among returnees from outside and the impose of lockdown on 24th March 2020. Condition of lockdown was extended gradually in installments up to 14th June 2020 and after which total lockdown has been lifted partially leaving all the activities of economic and social life in the condition of partial coma. Domestic and international flights are halted, business houses are closed, park and cinema halls are padlocked, schools are shut down, and mobility is strictly restricted. Health services are limited only to emergency and chronic cases. Odd and even system of vehicular movement has confined large number of people in their residents. Kathmandu the capital city of Nepal is under non-accessibility of people from out of the valley except certain cases with entry passes. Before the partial opening of lockdown municipalities, villages, certain locality in the city including the smallest unit of local authority banned outsiders to enter their locality. Rise of tension among close relationship between communities and persons have been observed. Even people could not visit their relatives and return their homes even if they were let outside for small work. Many such consequences are reported throughout Nepal villages. One person had lost his life simply by falling down in the river from a suspension bridge that was fenced by spike wire while trying to return his home in midnight near Kathmandu (Adhikari, 2020)¹³. Events of these kinds have exposed fear of people and their ignorance and illiteracy about disease as well as the reduced degree of harmony and

warmth in social relationship. People fearing from hunger and infection in the city started moving to their home villages on foot walking continuously for up to 15 days.

While going through basic social characteristic features of Nepal it is appreciated by the world as a harmoniously mixed up varieties of cultural traits. Nepal is a multilingual, multiethnic, multicultural and multi-religious nation. The people with different faiths, cultures and ethnicities have been living harmoniously since ancient times. Unity in diversity is the defining characteristics of Nepali society. Mutual coexistence, tolerance and cooperation have guided the people in achieving social cohesion, peace and happiness. Ethnic diversity is an asset, not a liability for the Nepali society that has been able to maintain its integrity and sovereignty for centuries. It is owing to its internal resiliency that has buttressed the social and ethnic harmony in the face of political conflict, natural disasters and foreign invasions. There were also moments of crises when cultural, ethnic and religious antagonism was created to smash the demographic and topographic bond, but the nation's enlightened tradition, rooted in ancient philosophy and conduct, helped keep the deleterious discourses and effects at bay¹⁴. Nepal is a country with 126 caste/ethnic groups speaking 123 different languages ranging from Indo-European to Sino-Tibetan with little bit mix up of Austro-Asiatic (Santhali language) family among people surviving from Gangetic plain in south to high Himalayan mountain up to 5000m altitude (CBS, 2014). Terai plain is characterized as the home land of people from Indian origin whereas northern hill land is the home commonly for people from Mongoloid race. Basic economic nature of people relies upon traditional agricultural practice and recently it has been popular among youths to get remittance form international labour market expanding from Japan, Korea, Gulf countries, and European continent to American states. Working together in the agricultural fields to celebrating festivals different communities in Nepalese society share and exchange their cultural traits in most of the cases for thousands of years. This practice of cultural togetherness and sharing of happy moments with each other is the identity of Nepalese society. Either it is low land Terai or High land mountainous region people celebrate festivals of any community as their own. Even in the condition of caste systems prevailing in society people don't hesitate to share labour exchange in fields and exchange of goods and other materials in feast and festivals. Cooperating nature of people has made the society live and have generated we-feelings among individuals with the feeling of security. Though economic condition is not so sound but again

their behaviour to each other is exemplary. This practice of living together is in existence for thousands of years. Numerous literatures in local languages and in international languages are available that describes the friendly qualities of Nepalese social units.

Ascend of such unexpected situations that has affected all aspects of human social life in Nepalese society seems as a challenge to its social structure and community relationship that is a basic characteristic features of the society with diverse culture and ethnicity. Consequences that are reported nationwide due to the increasing cases of COVID-19 during total and partial lockdown are not the basic features of society. Various types of bitterness in social relationship are observed that indicate either the alterations in long time practice in intimate relationship or there are still the requirements to aware and educate people about the duties of individuals and community in such conditions of pandemics. Nepalese society also had faced such epidemics/pandemics (since there was no formal agency to define the prevalence of such diseases in Nepal) in history but again such behaviours were not observed though there were some ups and downs in taking care of the sufferers of the epidemics. Cholera was one of such epidemics and existed in Nepal for a long time. The first recorded cholera epidemic took place in 1823, followed by a series of epidemics occurring in the Kathmandu Valley in 1831, 1843, 1856, 1862, and 1887 (Pach and Bhattachan, 2014).

According to some historians at that time also system of isolation and quarantine was in existence in the name of culture. There were some public houses in Kathmandu for the returnees from Lhasa and other countries for security of local people from communicable diseases. It used to be observed culturally so that they could not touch other members of the society. They were even kept away from their family members for about two weeks. Such tradition was not only common for travellers from Newar community but also was followed by other communities like Brahmin/Chhetri in business travels. System of isolation and quarantine was performed in other rituals too and in present days also people who are present in cremation of the death body also keep themselves separated for one day and the close circle like primary kin keep isolated for about 12 days depending upon various castes and ethnic groups. The self-quarantine routine was an important part of Nepali Culture during the Malla Dynasty and followed quietly for some time. In the days before modern medicine, staying apart was the only way to prevent infection to spread to the society. Sometimes old rituals are good. A video report in the form of documentary has been produced by BBC to mention about a quarantine system in Nepal to prevent local people from the infection of such pandemics in which it mentions the traditions in relations to Newar community of Kathmandu valley,

Long before any recorded pandemic, an ancient civilization in Nepal used a little-known system of quarantine. It was standard cultural practice for people to self-isolate nearly a thousand years ago. The rule was used to contain and prevent the transmission of infectious diseases in crowded urban environments. The ancient civilization in Nepal, the Newars travelled long distances for trade. During travel, it is a high possibility for them to have been contaminated with diseases. And upon return, they would transmit the carried diseases to many people living in their urban settlement. So anybody returning from travel for trade or else purposes was isolated for at least 2 weeks. If they do not show any sign of infection, verified by the high priest of the city, they are then purified with a bath in some religious spout and approved for living back home¹⁵.

In death rituals other communities also follow such traditions of isolation for days varying according to their geographical locations and castes/ethnicity but for other travel history the travellers are kept separated from contact with their family members at least a day till next morning. They can touch their home members and tools as usual after worshipping nearby temple of deities or after getting purity from evil spirits encountered on the way of their travel by sprinkle of ‘gold water’ all over the body. Such phenomena are existed among the followers of both the Hinduism and Buddhism. For Newar Buddhism he who pursues the most sublime goal in life is the one who undergoes a special series of ceremonies of consecration and purification, who follows a special series of ritual observances, and who thereby gains knowledge of a mystic, magical nature (Stephen, 1974). A system of isolation and quarantine was in existence in Nepal from ancient times among various communities and at present it is found in similar ways in some reduced forms accordingly.

In this and that situations also after getting religious recognition the isolated persons would get assimilation in the society after the procession is over and during the isolation also they would get food and care from their relatives and neighbours in careful manners. In the present situation of isolation and modern quarantine system neither there they victims get proper care from government authorities nor from the members of their societies. Since the traditional social bond and the govern of religious belief are becoming weak and people seek help from authorities, people who need proper cure, care and attention are deprived of such service which are their fundamental rights according to the constitution of Federal Democratic Republic Nepal 2015 (2072 B.S.). Also the directives made by COVID-19 Crisis Management Centre (CCMC) following

the instructions of WHO ensure the availability of good health service environment in the place where people are kept in quarantine but victims in quarantine are dying in lack of basic health facilities like ambulance and normal rehydration service and scarcity of food. People who manage the quarantine and the volunteers who had to look after the sufferer were out of contact that they did not even appear closer to the victims of COVID-19 that was also confirmed after death (Gaunle, 2020). Vividly, cases of suicide are in rise. Persons reported COVID-19 positive have been committing suicide mostly in west Nepal. Similarly, case of Hunger death was seen in mid Terai region which is famous as the rich place for paddy production. However, the society and state in spite of sufficiency in availability of resources are ignoring people who need care in utmost level. Social harmony is found disturbed. Victims have fear of hunger and social negligence. Rural societies are found, in many cases, boycotting the sufferers. The condition of social support and cooperation is going towards the direction of ceasing degree of harmony in relationship. Beyond the expectation, people working in health sectors were told by house owners to reside out of their house since health personnel are thought to be more susceptible to COVID-19 and are exposed to the cases than general people. This condition of repulsion in relationship is noted in almost all aspects of social life. Social workers, sociologists, policy makers, and intellectuals in the country are worrying about the altering nature of Nepalese society. Instead of being cooperative people are suspecting each other as carrier of the virus and there were and still are the situations that people neither are willing to welcome guests nor are interested to be guests. The social practice of accepting guest equal to god has been turned into a society where people start ignoring each other. As well, people are not interested to have close conversation with others except family members and the cases of mental disorder are also in rise. Eventually, social attachment has been gradually transforming to the condition of social repulsion and fear from each other.

Condition of Syndemics

According to medicine net, syndemic is a set of linked health problems involving two or more afflictions, interacting synergistically, and contributing to excess burden of disease in a population. Syndemics occur when health-related problems cluster by person, place, or time. For example, the SAVA syndemic is comprised of substance abuse, violence, and AIDS, three

conditions that disproportionately afflict those living in poverty in US cities. To prevent a syndemic, one must prevent or control not only each affliction but also the forces that tie those afflictions together. From syn-, together + (epi)-demic¹⁶. In general sense, syndemic refers to the aggregation of two or more diseases or afflictions in a population where there is a synergistic relationship which enhances and exacerbates the negative health effects of any or all of the diseases. The notion of syndemics can be expanded further to situate the occurrence of multiple diseases within the context of poverty and other mitigating factors that support and perpetuate poor health. Syndemics tend to develop under conditions of health disparity, caused by poverty, stress, or structural violence, and contribute to a significant burden of disease in affected populations. Given that social conditions can contribute to the clustering, form and progression of disease at the individual and population level, it poses a great challenge in understanding the processes that generate these patterns of co-infection and syndemics¹⁷.

In a place or a country like Nepal among population where people are eager to have intimate and close relationship with each other and the concept of social as well as physical distancing is not in practice the rising condition of syndemic is common. Social intimacy, harmony, exchange of goods and the way of sociability among people in addition to prevailing poverty together with the rapid expansion of pandemics with the rise of syndemic features is inevitable. A synthesis of the belief on fatalism and on conservative practices has made the situation comparatively as a fusion of modernity and traditional perceptions about disease. Such combination of belief, practices, and misguide from socially governing bodies have generated a hybrid health condition throughout the nation.

The nature and way of social behaviour is the cause of origin of syndemic features. Together with the rise in the number of COVID-19 cases in Nepalese society rise in the cases of suicide, psychological disorder, hunger, and many other related diseases like diarrhea is evident. Unfortunately, poverty has generated and increased the hunger among people in their house without job and in quarantine compelling them to eat the available low quality and unhygienic food causing infection in their digestive system leading many other complexities. As previously diagnosed report on Syndemics it generates social problems too and vice versa. Syndemics develop under health disparity, caused by poverty, stress, or structural violence and are studied

by epidemiologists and medical anthropologists concerned with public health, community health and the effects of social conditions on health.

Social Effects and Future of Human Sociability

Human by nature and by needs is a social being. Various aspects of personal life are the products of social inputs and it depends upon different factors of society. Social dynamics and influence over the development of personality are important and the influence set by a person to the society also is a factor responsible to shape the society and for its progress. In fact, individual is the basic unit of any society. Behaviour in individual level reflects the picture of society in some degree. Social concepts, traditions, norms and values are the factors to shape personal behaviour and thinking pattern. However social character is the product of personal character and personal behaviour is the product of social structure (Hossain and Ali, 2014). Human life has become comfortable and convenient due to its social nature and journey forward to civilization is possible due to social efforts and cooperation and joint works with share of knowledge and experience. In one side socialization and sociability are essential ingredients for progress, achievements, development and prosperity but in other side prevalence of COVID-19 like pandemic is forcing human being to keep not only physical distancing but social distancing also. The Covid-19 pandemic has reshaped our personal relationships in unprecedented ways, forcing us to live closer together with some people and further apart from others. Life in lockdown has necessitated close, constant contact with our families and partners, but social distancing measures have isolated us from our friends and wider communities¹⁸.

Straight after the announcement of lockdown in the country its adverse impacts in social life have been observed and some of the results have been exposed through news media and through social network sites. Almost all the sectors of human life have been halted with the terror and newly imposed legal provision to restrict social life in which wage labourers have lost their job, students are confined to homes or in some cases to their single room, schools have turned into empty houses with deserted looks except those that are set up as quarantine spots overnight. The capital city in not more than one day changed itself into a cluster of empty streets, desolated buildings, and barren fields. Everywhere it seemed like a place filled with terror and fear that

from somewhere there appears a demon to engulf the existence of human beings. Friends are met in social network sites and can be heard in telephone but the number of calls decreases to nearly cent percent. Rumors were in the fingertips to make members of society being afraid of the conditions. Active relationships have been limited to family members. Cases of abuse, torture, seduction, exploitation, child labour, and suicide are in rise. Reports of rape and cybercrime have come into light. Likewise, psychological disturbances and stress among marital relationship, though reported in less degree is in expression in different forms. Economic down fall of every family has decreased the capacity to purchase things except food materials in the situations of partial lockdown since shop owners except with grocery items and medicines are in the condition of absurdity and increased degree of personal hopelessness. Even uncommon incidents occurred during the lockdown situation. A local lady who temporarily resides in semi-urban Kathmandu is arrested for her crime to cut off her husband's genitals has expressed that the 'punishment' was allocated to him for his demand and force to establish sexual relationship more than ten times a day. She could not tolerate and the accident occurred otherwise both the husband and wife are labourers in construction fields¹⁹. Rarely lockdown has become a time of benefits for those who are in the sectors of trade related with COVID-19 and associated health sectors and for those who are engaged with reading-writing professions but have no tensions from short period lockdown. However, the unexpected situation of lockdown and partial lockdown in the country has increased adverse effects more than positive radiation in the society.

In this situation of having low degree of assimilation in human behaviour and intimacy, close human relationship, sharing of knowledge directly from person to person has acquired a fear of facing another person. Members of society who are always eager to increase the circle of friends and acquaintances through asking and expressing their personal matters are now trying to escape away from each other as far as possible.

With the eruption of coronavirus causing COVID-19 and its identification features and expansion through countries the disturbance in swift human relationship in individual level and in social relationship in community level throughout the world into the basic units of human groups is in rise. Though the world is, in comparison to previous decade and centuries, more civilized and aware about such pandemics it is expected to deal with the victims and the

situations sensitively and carefully. The alteration of human relationship has become evident to limit harmony and close contact among individuals and human clusters.

Such alteration in social milieu due to presence of COVID-19 is not the fundamental features of Nepalese society where they do have very warm and harmonious relationship according to their status and level though the practice of caste system leading to untouchable rituals among castes is in existence. By nature and by religious beliefs Nepalese society is practicing a lifestyle that brings individuals closer to each other in physical level for even a minute function like sitting in a bench and standing in a queue either in a temple or in a cinema hall. Instead of greeting friends and relatives with joining hands for Namaste young generation is shaking hands that make physical contacts between individuals rather than being physically isolated. Due to the fear of transmission of coronavirus through physical contact and less social distancing between two individuals friends are again practicing the traditional methods of greetings. But again people who are not carefully aware gather and make crowd while simply having conversation in public places.

The questions arising from the synthesis of social nature, Nepalese people and the necessity of keeping distance do lead social behaviour to another direction or brood another definition of social relationship among individuals for social behaviour. Do the practice of long time isolation from each other and the expansion of knowledge about the need of social distancing alter Nepalese way of social life? Does it generate more degree of individualism among people? Do people start generating their perspective to look other as the carrier of virus? Do we lose the social warmth and harmony in coming days? Do teachers and students keep themselves distant from each other? Does the burden arising due to pandemics increase the frequency of crimes in society? Many other such questions are being generated among intellectuals, policy makers, politicians, and the social workers.

Sociability is the quality, the act, or an instance or state of being sociable. The term sociable is derived from Latin word *sociabilis* from *socius* which means to join, to associate. It is defined as to companionship with others of the same species inclined by nature. It is a nature conducive to friendliness or pleasant social relationship (Webster, 1987). From the definition it has become

clear that human being is by nature a social animal as already told by Aristotle and later on elaborated by other scholars accordingly with time and space. All kinds of study about human being involving sociability and social relationship focus on intense association to support each other, to share feelings and knowledge, to work together for better achievement, and to develop paths towards civilization.

Biologically human being is like other animals with desire, sense of thinking and fear of their surrounding risks. According to Vannelli (2015) human being is controlled by his brain which due course of its formation in fetus stage gets such bioelectric impulses to shape in later phase of life. Desires and fears represent a surfacing of both the unconscious and conscious bioelectric activities (neural processes) during the gestation and growth of our brains. Just as brain bioelectrics can be seen to act as an interface between genetic processes and emotional-cognitive processes (including the formation of desires and fears), desires and fears act as an interface between emotional-cognitive processing and human social behaviour. Desires and fears thus act as the major motivators of human behaviour and, as a result, there is a noticeable degree of what might be called 'order-in-process' in our existence (Vannelli, 2015). In present situation of COVID-19 throughout the world, human existence is being feared from the disease itself and other individuals as the carrier of the virus and host to spread the disease. Their desire to survive has generated fears among themselves and keep every individuals isolated from each other. No one is going to any others' home even in the invitation of tea, snacks, and food. In the case of emergency to meet each other also people are, just to finish their work, standing outside the house preventing them to enter the door. It has created a condition to separate human relationship keeping it into distances that are socially interconnected. Harmonious relationship is gradually turning into the formal addressing and a kind of cold exchange of necessary set of work. The prevalence of COVID-19 in Nepalese society has been affecting in its basic nature of socialization, sociability and social behaviours. The root of social life of Nepalese society is basically derived from the religion and culture diversely present in different geographical settings with various castes and ethnic groups that all types of religious and cultural practices emphasizes on social existence, cooperation, harmony, togetherness, and division of labour. Interestingly, though people are the followers of Buddhism, Hinduism, or any other religions found in the territory of Nepal all the individuals come together to help each other in cluster,

enjoy feast, and go to temples to worship with their family members and relatives. But such togetherness is hampered by COVID-19 compelling the closure of doors of temples not allowing devotees to worship. Decreasing degree of social life and sociability in Nepal is indicating changed life ways altering the future of social activities. As it is common to every society that economic fluctuations affect existing social picture and other aspects of related social life, it is gripping Nepal. People are getting away from each other as far as possible and have been setting the way of life towards isolation and maximum to subsistence level. No other kinds of activities are as common as in previous days, to name a few; visiting temples, outings, organizing parties, marriage ceremonies, and other religious functions.

Future Relationship

The social impacts of pandemics were severe resulting in travel limitation, and closure of schools and markets and sporting events were restricted. All these are a likely reality should a pandemic with true potential for high morbidity and mortality emerges (Qiu, Rutherford, Mao, Chu, 2017). Every time in the history origin of such pandemics and its transmission has left certain effects on society and social system. Effects of pandemics have been ranged from health sectors to academic sectors and other social as well political and economic sectors. Beyond the debilitating, sometimes fatal, consequences for those directly affected, pandemics have a range of negative social, economic and political consequences (Davies, 2013a). As an example, “The impact of pandemic influenza i.e. H1N1 in 2009 was not just on mortality, but also on health-care systems, animal health, agriculture, education, transport, tourism and the financial sector. In short, a pandemic event threatens all aspects of the economic and social fabric” (Drake, Chalabi, & Coker, 2012). For another example, the SARS in 2003 and the Ebola pandemics, in 2013 and 2015 respectively, disrupted the economies and social order in China and West Africa as well as causing death and illness. Ebola and other pandemics have reduced the life quality of families and communities, and Ebola has disrupted essential services such as education, transport, and tourism, reduced the West African economies and isolated populations, which had impacts beyond Africa too due to the global effort of containing the outbreak (Nabarro & Wannous, 2016). In addition, it has randomly affected sports activities and organizing of mega events in sports like Olympics and world cup as in the past it was disturbed due to the outbreak of SARS,

MERS, Ebola, and other pandemics. Effects of such pandemics to life causing death in the history indicates dreadful picture that affected all the aspects of social and other aspects of life. It is difficult to predict the number of human being that is going to be victims of death due to COVID-19. Looking back to the number of victims in history it indicates a long way to go to battle this pandemic.

Regarding the historical view Qiu et al (2017) mentions the effects of pandemics in the past as - there have been a number of significant pandemics recorded in human history, including smallpox, cholera, plague, dengue, AIDS, influenza, severe acute respiratory syndrome (SARS), West Nile disease and tuberculosis. Influenza pandemics are unpredictable but recurring events that can have severe consequences on societies worldwide. Influenza pandemics have struck about three times every century since the 1500s, or roughly every 10-50 years. In the 20th century, there were 3 influenza pandemics which were named "Spanish flu" in 1918-1919, "Asian flu" in 1957-1958, and "Hong Kong flu" in 1968-1969. Each pandemic harmed human life and economic development. For example, the influenza pandemic of 1918-1919, which killed more than 20 million people in the world and has been cited as the most devastating epidemic in recorded world history (WHO, 2011).

Recent years have seen at least six large-scale outbreaks—hantavirus pulmonary syndrome, severe acute respiratory syndrome, H5N1 influenza, H1N1 influenza, Middle East respiratory syndrome, and Ebola virus disease epidemic (Gostin et al., 2016). The influenza H1N1 2009 virus (A/2009/H1N1) was the first pandemic influenza of the 21st century. It has affected the whole world and caused more than 18,000 deaths (Rewar et al., 2015). Ebola killed more than 11 000 people and cost the world more than USD \$2 billion, according to World Bank calculations (Maurice, 2016). In 2016 Zika virus continued to spread and consequently threatened the health of people in 34 countries (Troncoso, 2016). These outbreaks make scientists and governments worry about a repeat of the devastation of the Spanish flu of 1918 (Lin, McCloud, Bigman, & Viswanath, 2016). In the similar and in some extent COVID-19 has affected human life in all aspects so densely that it leaves a deep scar in human journey towards civilization.

It takes long duration to come back to normal situation sometimes the situations become normal after passing through many years. But in china though it is they claimed that the condition of

daily chords is gradually becoming normal but it cannot naturally become as normal as it was before the evolution of COVID-19. As reported by BBC (2020) the situation is getting normal. Both in China, which was the first country in the world to go into full lockdown when the virus emerged there, and in Hong Kong – where schools closed, shops were shuttered, and employees sent home – the virus has been brought under control and life has returned to some semblance of normality. But the pandemic has left some cracks in family relationships (BBC, 2020).

Many sports events that have to be organized are postponed. Industries are not fully open. Share markets have a picture of fluctuation in its graph of transaction. Tourism has been halted for time unknown to come. Schools and all academia are closed and students are passing their time without or with negligible educational activities in their homes. In such conditions Lockdown after passing through partial resume has turned into condition of shout down- relatively a soft form of lockdown, in Kathmandu valley-the capital city of Nepal. Crowds are seen in the streets and other public places. Expansions of COVID-19 cases are in increase. People are being comparatively more afraid from the situation appeared just after complete lockdown in the market areas.

Ultimately whatever the conditions arise in human behaviour it is human interaction that establishes relationship in various forms as the forms of giver and receiver of goods, services, or knowledge. In every form of activity a kind of relationship is established between people. This normal situation of human being is disturbed and in the age of being defined differently. The traditional definition and practice of human relationship may be insufficient or exaggeration of human relationship. People are not even coming closer to each other. Every person is suspecting another person as the susceptible host or messenger of COVID-19 and try to keep distance from the person and maintain a cold and essential relationship only on the conditions of compulsion of work. COVID-19 pandemic is transforming human relationships with nature at multiple levels and across a wide range of contexts.

Presence of COVID-19 in every stratum of social life and its rapid expansion from all possible means ranging a wide circle of relationship has developed a new kind of links between individuals and it probably gets the altered definition of human relationship and the way of

behaviour. Though it is difficult to change human nature to behave differently but habit developed from the fear of coronavirus in long run may lead to a kind of relationship possibly to rely upon virtual and technical means rather than physical closeness and intimacy. Incidents of family dispute due to the presence of disease in individuals and personal psychological disorder cause the rise in a space for gap in relationship. Loss of job creating economic crisis has generated repulsion among relatives and kin. In spite of contribution made by private sectors and other funds expenses to COVID-19 cases are insufficient according to government claim. This situation has garnered fear among people that poverty in the country will rise causing many people suffering from starvation in coming days. Existence of such kind of terror in the society has minimized and risked the condition of give and take of amount and food grains. People are not willing to share their part with other people and the victims will be increasing in their degree of pain and psychological disorder. A kind of mistrust and non-cooperative behaviour among even a small group of circle is affecting their relationship leading towards the situation of being unknown to each other and this is not the basic nature of Nepalese society. So in future the impact of COVID-19 in Nepalese society will generate a gap in harmony and warmth of relationship.

Social Harmony and Human Relationship in Dilemma

The post COVID-19 world certainly will have different kind of social behaviour to greet individuals in gathering of persons. Hundred years of practices are in the situation to be changed as like shaking hands when two individuals meet each other. Around the world, humans are struggling to ignore thousands of years of bio-social convention and avoid touching another. Shaking hands might be one of the hardest customs to lose in the post-pandemic world but there are alternatives, writes James Jeffrey (BBC, 2020). It is well known that presence of such pandemics in the society due course of time brings changes in many aspects of human behaviour and it was noted in the past affecting human culture and nature with the rise of a field to be studied as behavioural epidemic. It is an epidemic attributable to the power of suggestion or to culturally determined behavioral patterns (as opposed to invading microorganisms or physical agents). Examples include the dancing manias of the Middle Ages, episodes of mass fainting or convulsions (“hysterical epidemics”), crowd panic, and waves of fashion or enthusiasm. The

communicable nature of the behavior is dependent not only on person-to-person transmission of the behavioral pattern but also on group reinforcement (as with smoking, alcohol, and drug use). Behavioral epidemics may be difficult to differentiate from outbreaks of organic disease (e.g., due to contamination of the environment by a toxic substance) or may complicate them (Porta 2008).

In society like Nepal people even in a queue stand in such a way that they make a crowd of unsystematic arrangements so as to make a line starts where and ends where becomes unclear. In temple also pushing each other is common and such behaviours are also common in marriage and other gatherings. Spitting elsewhere, sneezing and coughing in public place without following even a small protective measures are common. Common group activities are not only common among people but also are popular among religious functions. COVID-19 has seriously challenged human being not only in their behaviours but also in their existence.

It has generated a condition that is responsible for declining social harmony and putting pressure on people not to meet each other in Nepal where meeting relatives in every group function is popular. Notices to inform relatives and circles not to meet their home are published in social network sites. Life has become confined to a limited arena that has cut every individual off from their work and circles causing many complexities in their mental as well as in their physical and social expression. Whenever the post COVID-19 condition be a part of human life till then it may create a new definition of social relationship and erupt new kind of social behaviour. At present all the social relationship in pure sense of social and societal level are in dilemma that how it be developed in future days. Human relationship in Nepalese contexts seems uncertain that it needs to search answer for a question that does it revive in the same level as it used to be found before COVID-19? The alterations arise due to the origin and expansion of COVID-19 in

such society has weakened the bond of social relationship that the degree of belief on each other has become not trustworthy as in previous days.

Religion and Hope for Future

Nepal is a multi-religious country where a confluence of many religions is in existence with harmony between each other. Hinduism being one of the oldest religions is a dominant religion in Nepal. No incidents of religious dispute are in record till present days though the data of census 2011 shows the numbers of Hindu people are at the top. Hindus in the country makes 81.34% followed by Buddhist 9.04%, Muslim 4.38%, Kirant 3.04%, and Christianity 1.41% with other religions in small number like Prakriti, Bon, Jaimism and Shikhism leaving others to make 0.23% (CBS, 2012). According to these religions all the problems and sufferings that human beings have to face in their daily life have their remedy and solution. God has gifted humans the gift of karma to get rid of pain they get in their life. It is basically emphasized in Hindu epic “Mahabharata” in which a section named “Gita” full with philosophical essence of Hinduism emphasizes the devotion to god for every problem to be solved and do work for the god. The god certainly rewards you with good result though you do not seek the result after karma (Ganguli, 2006). Similarly, in Buddhism also there many verses, incidents, stories, and sermons that assures human beings to believe on god and faith doing their karma. Every suffering has its reason and its remedy as Buddha tells his disciples that there are sorrows in the world, there are reasons for every sorrow and there is solution for each one suffering (Mahathera, 1998). People who are the followers of Christianity in Nepal do have their religious background as either Hindus or as Buddhists. They also do have their deep-rooted belief set on their subconscious mind to believe on god for the solution of their problems like the prevalence of COVID-19 in the present situation. And other reasons that they do have faith on Jesus Christ about the remedy of such problems. The biblical response suggests that people cannot understand why God allows evil and suffering to exist. Suffering is a part of human existence and enables Christians to demonstrate their commitment to God (BBC, 2020). . The practical response is to show compassion to people who are suffering, offer those people help and trust that God will deliver an answer to the problem. An example of this is inter-cessionary prayers, which are prayers asking for God’s help for people in need²⁰. In this way people do have religious belief and

confidence on god to get out of this problem. That is why they in some manners, neglect the common practices to be followed in the situations of presence of such pandemics. But again those people who are aware of the sensitivity of its risk and though they do believe on gods they practise of the common rules as far as possible and such conditions are more or less responsible to separate people from physical intimacy. This belief has become strong since a pastor of local church in Pokhara, the mid-western city about 200 Km. away from Kathmandu died due to COVID-19 that he used to claim his followers to cure from the disease²¹. People are following both the belief system rooted by religions and health directives as much they can depending upon their degree of awareness and surroundings. Pashupatinath temple – one of the greatest temples in the region are always surrounded by devotees ignoring the common human behaviours to be followed though the temple has remained closed by directives from concerned administrative body- the ministry of Home Affairs.

Religions and beliefs only are not saving human life except health measures but religious beliefs and faith on god have given confidence and mental strength to people who believe on such existence. Local people, socially on the basis of religion are governed by such religious beliefs are in high level of risk.

Conclusion

As it is familiar that Nepal is a country with diverse religious practice, multiethnic community, and variety of geographic and socio-cultural diversity the effects of COVID-19 in different strata of society has given different results and the situation has been accepted in their own ways in spite of its biological and medical sense. Dealing with the pandemics in lower to higher level of social structure also has been noticed different with the generation of numerous kinds of other health and social problems related to the pandemics. Though the effects of pandemics to any health individuals are different depending upon other physiological conditions of the individual, the effects over the social mentality and behaviour seem remarkably different except some common psychological matters to treat with the pandemics and its victims.

Sufferers are being ignored by those organizations that are responsible to provide health services like hospitals run by private sectors and the infected persons have been getting maltreated and ill-mannered behaviours in their society like even not attending the funeral rituals of the victims. Death cases of pregnant mothers due to lack of basic health services even in city areas are in rise. Regular checkups of pregnancy are being halted since no medical personnel and institutions are showing their responsible behaviours to do duties and these situations have generated disrespect to the professions and evolved a condition of mistrust and uncertainty in relationships among different professional groups and individuals forcing it into the level of dilemma in warm, harmonious, and cooperative human relationship.

Trust over any profession by common people is in declining state since business related with pandemics or daily essentials like medicine traders and grocery owners are less reliable that price-hike, and quack practice caused ramified troubles in the society. Authority's govern has been perceived as efforts not sufficient and not properly implemented in right time and space. Common people who are compelled to lose their job and their hope are suffering from not only economic troubles but also from psychological disorder. Dispute, exploitation, seduction, separation, irritation, and unbalanced expression have become common as the byproducts of COVID-19. Cases of suicide are in rise, expressions of hopelessness in media and in communication are in acceleration, and cases of COVID-19 are in rise all have become common features these days. Since each and every individual has become a identity of terror to each other, it has been creating the condition of declining harmonious and cooperative relationship nature of Nepalese people. Rise in the complexities caused in biological as well as in mental health due to the pandemics has adversely affected the social network and relationship.

These factors have resulted in different levels of psychological pressure, which may trigger feelings of loneliness and helplessness, or a series of dysphoric emotional states, such as stress, irritability, physical and mental fatigue, and despair. Since patients suffering from chronic disease are not getting treatment in any hospital it has generated a kind of revolt in the mentality of the patients, their relatives and those who are aware about the situation of the patients. Not only the situation is creating chaos among common people but also it has created fear and insecurity among health professionals and they are also found suffering from mental disorder.

All religious practices are halted but some so called pundits from existing religions are spreading rumors that they can heal this disease with their energy they got from god. In a country where the literacy rate is just 67.91% such claim can make more and more people fool and their leaders use this conditions as an opportunity to earn property. Though the rate of increment of COVID-19 cases in Nepal is in gradual order in present days, death caused by the pandemic is relatively not higher than the death due to other, in some cases non-fatal, diseases is engulfing the hymn being and their life. Such situation of Syndemics caused by pandemics is more harmful to people of Nepal and other like countries.

Further Readings

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