CWIN-NEPAL EMERGENCY RESPONSE

Bhotekoshi Flash Flood and Landslides

Board Status Report

REPORTING PERIOD	DATA CUT-OFF	PREPARED FOR
29 August - 10 September 2026	10 September 2026	CWIN-Nepal Board

Child-centred protection, mental health and psychosocial support, humanitarian assistance and recovery

1. Executive Summary

The Bhotekoshi flash flood and landslides triggered a major humanitarian and child-rights emergency across the Bhote Koshi-Trishuli river corridor and downstream communities. CWIN-Nepal activated a child-centred response combining child protection, mental health and psychosocial support (MHPSS), Psychological First Aid (PFA), specialist clinical support, humanitarian assistance, referral and coordination. The response initially focused on rapid assessment and immediate safety and psychosocial needs, and then expanded to a wider operational footprint as access improved.

By 10 September 2026, CWIN reported reaching 2,838 children and adolescents across five districts and 27 holding centres. The organisation had mobilised a multidisciplinary mental-health workforce, including 35 psychosocial counsellors, and distributed 40 recreational kits and 655 dignity kits. The response has been supported by Child Helpline Nepal 1098 and by coordination with government, health, protection and humanitarian actors. These figures replace the earlier response totals in the 3 September status report. *Source: CWIN 10 September response update and original emergency status report.*

CWIN response at a glance

2,838 CHILDREN & ADOLESCENTS REACHED	**5** DISTRICTS REACHED	**27** HOLDING CENTRES REACHED
35 PSYCHOSOCIAL COUNSELLORS MOBILISED	**40** RECREATIONAL KITS DISTRIBUTED	**655** DIGNITY KITS DISTRIBUTED

Board reporting note

The figures above are cumulative reported response figures as of 10 September 2026. The source graphic does not state whether the reach figure is fully deduplicated; this report therefore describes it as cumulative reported reach rather than unique beneficiaries. Workforce categories are presented as reported and are not summed, because specialist roles may overlap.

Key management message

CWIN has moved rapidly from immediate emergency response to a broader recovery posture while maintaining a clear child-protection and mental-health focus. The next phase requires sustained psychosocial follow-up, continuity of child-protection case management and referrals, education recovery support, disability inclusion, replenishment of child-sensitive relief materials, and stronger disaggregated outcome tracking for Board and donor accountability.

2. Situation Overview and Response Evolution

The disaster disrupted families, public services, schools, transport links and community networks, creating risks of displacement, family separation, psychological distress, interrupted learning, neglect, exploitation and barriers to health and protection services. The most immediate child-specific needs identified in CWIN field work included safe child-friendly environments, psychosocial support, recreational opportunities, protection monitoring and referral services. Children with disabilities require particular attention because evacuation, mobility, communication, access to healthcare and assistive support can be disrupted during emergencies.

Response timeline

26 Aug 2026	Flash flood and landslides affect the Bhote Koshi-Trishuli corridor, causing extensive loss, displacement and infrastructure disruption.
29 Aug onward	CWIN emergency reporting period begins, with rapid assessment, field coordination, PFA, psychosocial support, mental-health screening and referral.
1 Sep 2026	Public reporting notes expansion of the government mental-health response in Rasuwa and Nuwakot and identifies CWIN among partner organisations supporting the response.
2 Sep 2026	FORUT reports CWIN psychosocial teams deploying into flood-affected areas and participating in emergency coordination with government and humanitarian partners.
10 Sep 2026	CWIN public response update records 2,838 children/adolescents reached, 27 holding centres, 35 psychosocial counsellors, 40 recreational kits and 655 dignity kits across five districts.

Operational footprint

By 10 September, CWIN reported operational reach in Rasuwa, Nuwakot, Dhading, Chitwan and Tanahun. The current response footprint should be distinguished from the wider geography affected by the disaster; the five-district list reflects CWIN's reported reach, not a complete map of disaster impact.

3. Rapid Assessment of Holding Centres

CWIN's early rapid assessment covered six temporary holding centres and documented approximately 1,090 residents, including 228 children and adolescents. The assessment identified priority needs for safe child-friendly environments, psychosocial support, recreational opportunities, protection monitoring and referral. By 10 September, CWIN's cumulative operational reach had expanded to 27 holding centres.

Holding centre	Total population	Children & adolescents
Chandrajyoti School	300	35
Ayurvedic Hospital	105	7
Tamang Party Palace	150	62
Shree Bidur Piteamolshya Dham	143	55
Community Cooperative Building	200	43
Covered Hall	192	26
Total	**1,090**	**228**

Priority concerns identified

- Children and adolescents needing immediate emotional support, PFA and age-appropriate psychosocial activities.
- Protection risks linked to displacement, family separation, neglect, exploitation, trafficking and unsafe coping mechanisms.
- Interrupted education and the need for temporary/flexible learning support and essential learning materials.
- Need for safe WASH, dignity supplies and child-sensitive assistance in temporary settlements.
- Need for disability-inclusive evacuation, communication, rehabilitation, assistive support and referral.

4. Mental Health and Psychosocial Support

The MHPSS response is a core component of CWIN's emergency action. Sudden loss, displacement, uncertainty and exposure to traumatic events can generate acute distress among children, adolescents, caregivers and responders. CWIN has provided PFA, emotional support, psychosocial counselling, mental-health screening, referral and specialist support, while Child Helpline Nepal 1098 continues to provide information, counselling, referral and protection services.

Specialist workforce mobilised

Professional category	Reported number
Consultant psychiatrists mobilised	**6**
Child & adolescent psychiatrists	**2**
Clinical psychologists	**3**
Psychiatric nurses	**4**
Psychosocial counsellors mobilised	**35**

In addition, the earlier response report records that 30 counsellors received orientation on PFA, psychosocial support, emotional support and child-sensitive emergency approaches through collaboration with the National Federation of Psychosocial Counsellors Nepal and SAMMAN. This orientation figure and the later mobilisation figure should be treated as related but distinct indicators.

Clinical and referral focus

The response combines community-level PFA and psychosocial support with referral pathways for children and adolescents requiring specialised assessment, psychiatric care or continued follow-up. This layered approach is important because psychological impacts can become more visible after the immediate emergency phase.

5. Child Protection, Helpline and Humanitarian Assistance

Child Helpline Nepal 1098 and case response

Child Helpline Nepal 1098 remains a critical protection mechanism during the emergency. CWIN's established helpline mandate includes emergency rescue, relief, psychosocial counselling, support for missing and separated children, referral, family tracing and reintegration, and coordination with government and civil-society actors. During the flood response, the helpline complements field teams by maintaining an accessible channel for children and families who need information, counselling and protection support.

Child-sensitive assistance

655	40	27
DIGNITY KITS DISTRIBUTED	RECREATIONAL KITS DISTRIBUTED	HOLDING CENTRES REACHED

CWIN's material assistance is designed to support dignity, safety and psychosocial wellbeing rather than function as stand-alone relief. Recreational kits help create structured, child-friendly activity spaces, while dignity kits respond to practical needs among displaced children and adolescents. Distribution should continue to be linked with protection observation, referral and feedback from affected children and caregivers.

Education and recovery

The response should increasingly support safe return to learning as communities move from acute emergency toward early recovery. Priorities include temporary or flexible learning arrangements where schools remain disrupted, provision of stationery and learning materials, safe WASH facilities, recreational and social-emotional activities, and psychosocial support for both children and education personnel. Children who are displaced, separated, living with disabilities or otherwise vulnerable should be prioritised in recovery planning.

6. Coordination, Partnerships and Board-Level Priorities

CWIN has coordinated with local government and humanitarian actors including Bidur Municipality, UNICEF, KOSHISH, TPO Nepal, UNFPA, provincial/public health authorities and other partners. Public reporting during the emergency also identified CWIN among organisations supporting the government's mental-health response. A FORUT partner update described CWIN as participating in emergency coordination alongside government authorities, WHO and UNICEF, with a focus on child safety and psychosocial support.

Strategic priorities for the next phase

Sustain MHPSS follow-up	Maintain PFA, counselling and specialist referral beyond the acute phase, including supervision and care for frontline responders.
Strengthen protection case management	Keep Child Helpline 1098, field identification, case referral, follow-up, family tracing and reintegration connected to local protection structures.
Support education recovery	Prioritise learning continuity, safe school access, school materials, WASH and psychosocial support in affected education settings.
Ensure disability inclusion	Build accessibility, rehabilitation referral and assistive-support pathways into all recovery interventions.
Improve data quality	Strengthen age-, sex-, disability- and location-disaggregated reporting, clarify unique versus cumulative reach, and track outcomes as well as service counts.
Plan resource continuity	Replenish dignity/recreational stocks, maintain specialist deployment capacity, and mobilise flexible recovery resources for emerging needs.

7. Summary of CWIN's Contribution

CWIN on the move - a child-centred emergency response

By 10 September 2026, CWIN-Nepal had translated its child-protection and child mental-health expertise into a multidisciplinary emergency response that combined direct support with systems coordination. CWIN reported reaching 2,838 children and adolescents in five districts and 27 holding centres; mobilising 35 psychosocial counsellors alongside psychiatrists, child and adolescent psychiatrists, clinical psychologists and psychiatric nurses; and distributing 40 recreational kits and 655 dignity kits. Through PFA, counselling, screening, referral, Child Helpline Nepal 1098, child-friendly activities, material assistance and coordination with government and humanitarian partners, CWIN has addressed both immediate distress and broader protection risks. The response demonstrates the value of linking specialist mental-health capacity with community-level child protection, while the next phase should consolidate follow-up, education recovery, disability inclusion and stronger outcome monitoring.

8. Conclusion

The Bhotekoshi flash flood and landslides remain a serious child-rights and humanitarian emergency. CWIN-Nepal's response has expanded substantially since the initial status report and now combines a wider geographic reach with strengthened psychosocial and clinical capacity, protection mechanisms and child-sensitive material support. The immediate priority is to maintain continuity of care while shifting deliberately toward recovery: restoring safe learning and routines, sustaining psychosocial follow-up, protecting children at heightened risk, supporting families and local systems, and ensuring that children's voices and needs remain central to recovery decisions.

For Board oversight, the most important management task is to preserve the strengths of the emergency response while improving the quality of evidence on who is reached, what services they receive, what outcomes are achieved, and which needs remain unmet. This will support responsible resource allocation, donor communication and a more accountable transition from emergency response to recovery.

9. Sources and Data Notes

Primary internal sources used for this update:

- CWIN-Nepal Emergency Response Status Report: “CWIN-Nepal Response to Children and Adolescents Affected by the Bhotekoshi Flash Flood and Landslides,” reporting period from 29 August 2026 onward (original PDF supplied for revision).
- CWIN-Nepal public response infographic, “Supporting Children Through the Flood Crisis,” dated 10 September 2026 (image supplied for this revision).
- CWIN-Nepal field photographs embedded in the original response report (used in the photo documentation section).

Public sources used to corroborate response context and coordination:

- CWIN-Nepal - Child Helpline Nepal 1098
- Kathmandu Post, “In Nepal’s flood zone, the second disaster is psychological,” 1 September 2026
- FORUT, partner update on CWIN psychosocial flood response, 2 September 2026
- CWIN-Nepal organisational website

Data note

Disaster casualty and missing-person figures changed rapidly during the reporting period and are not reproduced as headline statistics in this Board update. The report focuses on CWIN’s own response figures and uses external reporting primarily to corroborate dates, operational context and coordination. CWIN’s 10 September response figures should continue to be validated through routine MEAL processes, including deduplication and disaggregation where possible.

10. Photo Documentation - CWIN Field Response

The photographs below are drawn from CWIN-Nepal field documentation embedded in the original status report. Captions describe the visible activity; where the source file did not specify a location or exact date, no location or date is inferred.

Field team transporting response materials to an affected community. Photo: CWIN-Nepal field documentation.

One-to-one supportive engagement with a child in a temporary setting. Photo: CWIN-Nepal field documentation.

Children participating in a structured recreational activity, supporting routine, play and psychosocial wellbeing. Photo: CWIN-Nepal field documentation.

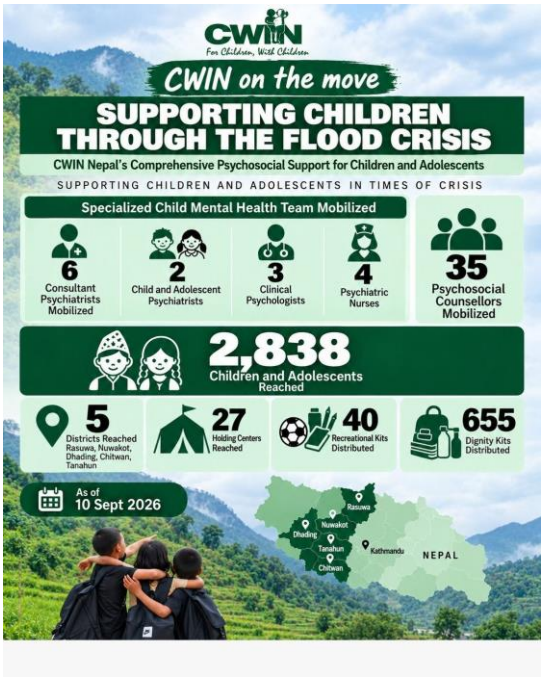
Group activity in a temporary/holding-centre setting as part of community-level response support. Photo: CWIN-Nepal field documentation.

Photo Documentation - Preparedness and Child-Friendly Support

Preparation and packing of child-sensitive response supplies before field distribution. Photo: CWIN-Nepal field documentation.

Recreational and child-friendly materials being organised for deployment to affected communities. Photo: CWIN-Nepal field documentation.

Child-friendly learning and activity support, illustrating the link between psychosocial wellbeing and continuity of learning. Photo: CWIN-Nepal field documentation.



CWIN public response snapshot dated 10 September 2026, the source for updated cumulative reach, staffing and distribution figures in this report.

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