Situation Update #71- Coronavirus Disease 2019 (COVID-19)
WHO Country Office for Nepal

Reporting Date: 17 - 23 August 2021

HIGHLIGHTS
*Data as of HEOC of MoHP Situation Report, 23 August 2021

- Of the total COVID-19 positive cases, 93.5% (70097) of cases have recovered and 5.1% (38,351) of cases are active.
- Of the total active cases, 91.6% (35,132) cases are in home isolation; 8.3% (3,219) of cases are undergoing hospital/institutional isolation. While 1.7% (679) of active cases require ICU admission, 25.9% (176) of the ICU admitted patients require ventilator support.
- Twenty one districts have reported more than 500 active cases.
- Among the total new cases (14143) reported this week, 27.9% (3946) are from Kathmandu district followed by Kaski district 11.2% (1580). Most of the new cases about 40.5% (5732) have been reported from Kathmandu valley (Kathmandu, Lalitpur and Bhaktapur districts), Bagmati Province.
- COVID-19 vaccination coverage status (as of 23 August 2021)
  - ChAdOx1-S*  
    - First dose: 199,7470
    - Second dose: 1,031,779
  - SARS-CoV-2 Vaccine (Vero Cell)  
    - First dose: 2,946,262
    - Second dose: 1,490,003
  - Johnson and Johnson Vaccine  
    - Single Dose: 1,335,816

NEPAL EPIDEMIOLOGICAL SITUATION

- As of 24 August 2021, 07:00:00 hours (week no. 34), a total of 748,981 (19.5%) COVID-19 cases were confirmed through polymerase chain reaction (RT-PCR); 3,839,395 RT-PCR tests have been performed nationwide by designated functional COVID-19 laboratories. A total of 80,462 (18.4%) cases were confirmed through Antigen RDT; 435,177 Antigen RDT have been performed nationwide.
- As of 9 May 2021, all 7 provinces in the country are experiencing community transmission.
- Province-wise RT-PCR test positivity rate in past week (week 33) ranged from 6.4% (Province 2) to 39.9% (Karnali Province), with national positivity rate averaging 22.6%.
- Overall, the sex-distribution remains skewed towards males, who constitute 60% (447,503/748,981) of the RT-PCR confirmed cases. Amongst the males, 78% (349,881/447,503) are in the economically productive age group (15-54 years).
• NPHL reported 43 diagnostic and surveillance samples (2 samples were tested at National Influenza center (NIC) and 41 tested at WARUN (Walter Reed/AFRIMS Research Unit-Nepal) on EPID-week 33 (16-22 August 2021).
  o 21 samples tested positive for Influenza A/H3, and 1 sample tested Positive for Influenza B Victoria and 5 samples tested positive for Influenza B (Un-typed).
  o None of the samples tested positive for SARS-CoV-2 on the samples tested at NIC (this is exclusive of SARS-CoV-2 reporting of the Influenza samples from WARUN)
  o Out of the total SARS-CoV-2 samples that tested negative at NPHL on EPID-week 32 (16-22 August 2021), 100 SARS-CoV-2 negative were tested for Influenza for the same week. 6 samples tested positive for Influenza A/H3, and 5 samples tested positive for Influenza B Victoria.
• From 4 January until 22 August 2021:
  o A total of 521 samples have tested positive for Influenza (448 Influenza A/H3, 53 Influenza B Victoria, 1 Co-Infection of Influenza A/H3 and Influenza B Victoria, 2 Co-Infection of Influenza A/H3 and Influenza Victoria, 1 Influenza A(H1N1) pdm09, 16 Influenza B Un-subtyped) from 3868 samples (sentinel and non-sentinel samples including SARS-CoV-2 negative SARI andILI cases).
  o Similarly, 273 samples tested positive for SARS-CoV-2 from 1165 samples (sentinel/non-sentinel ILI/SARI samples).  

Figure 1: WHO SEAR countries: Number of COVID-19 confirmed cases and cumulative incidence rate (per 100,000) (Data as of 23 August 2021; WHO COVID-19 Dashboard)

<table>
<thead>
<tr>
<th>SEAR Country</th>
<th>Total Population</th>
<th>COVID-19 Cases</th>
<th>Incidence (per 100,000)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bangladesh</td>
<td>172809384</td>
<td>1467715</td>
<td>849</td>
</tr>
<tr>
<td>Bhutan</td>
<td>756123</td>
<td>2585</td>
<td>342</td>
</tr>
<tr>
<td>India</td>
<td>1420972759</td>
<td>32449306</td>
<td>2284</td>
</tr>
<tr>
<td>Indonesia</td>
<td>272248454</td>
<td>3989060</td>
<td>1465</td>
</tr>
<tr>
<td>Maldives</td>
<td>546399</td>
<td>80067</td>
<td>14654</td>
</tr>
<tr>
<td>Myanmar</td>
<td>55008057</td>
<td>375871</td>
<td>683</td>
</tr>
<tr>
<td>Nepal</td>
<td>30201100</td>
<td>748981</td>
<td>2480</td>
</tr>
<tr>
<td>Sri Lanka</td>
<td>22036689</td>
<td>394355</td>
<td>1790</td>
</tr>
<tr>
<td>Thailand</td>
<td>66186727</td>
<td>1066786</td>
<td>1612</td>
</tr>
<tr>
<td>Timor-Leste</td>
<td>1317780</td>
<td>14403</td>
<td>1093</td>
</tr>
<tr>
<td><strong>SEAR</strong></td>
<td><strong>2042083472</strong></td>
<td><strong>40589129</strong></td>
<td><strong>1988</strong></td>
</tr>
</tbody>
</table>

1 These positive cases are included in the COVID-19 database.

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At a national level, the second wave of cases between July 2020 and February 2021 was followed by the third wave from the middle of March 2021. The total PCR tests done in Nepal on 23 August 2021 was 8704 which is 56% less than the number tested during the peak in the beginning of May 2021.

Figure 2B: Cumulative case count of laboratory-confirmed COVID-19 by province (N = 748981) (Data reported on 24 August 2021 up to 7:00:00)
The cumulative case incidence has been increasing in Nepal since the first case confirmed in 23 January 2020. Cases have been largely reported from Bagmati Province followed by Lumbini Province and Province 1.

Figure 2C: Lab confirmed COVID-19 cases: Trend of cases, 7-days rolling average, weekly cases and deaths and Test Positivity Rate (N = 748981) (Data reported on 24 August 2021 up to 7:00:00)

Note for all the Provinces (Figure 2C): Y-axis scale varies between Provinces

There were 2904 new cases reported in the past week in Province 1. Since a peak in week 20, new cases were continuously declining. The cases have decreased by 6% in the past week compared to the previous week. There were 36 deaths reported in the past week, 20% more than that of the previous week. The test positivity rate in Province 1 increased to 29.9% in the past week. A total of 9178 tests were performed in the past week, 7% less than that of the previous week.
There were 175 new cases reported in the past week in Province 2. Since a peak in week 20, new cases were continuously declining. The cases have decreased by 19% in the past week compared to the previous week. There were 2 deaths reported in the past week, 67% less than that of the previous week. The test positivity rate in Province 2 increased to 6.4% in the past week. A total of 809 tests were performed in the past week, 23% less than that of the previous week.
In Bagmati, 7952 new cases were reported in the past week. Since a peak in week 19, new cases were continuously declining. The cases have decreased by 15% in the past week compared to the previous week. There were 104 deaths reported in the past week, 2% more than that of the previous week. The test positivity rate in Bagmati decreased to 17.9% in the past week. A total of 50541 tests were performed in the past week, 1% more than that of the previous week.

In Gandaki, 2628 new cases were reported in the past week. Since a peak in week 21, new cases were continuously declining. The cases have decreased by 14% in the past week compared to the previous week. There were 48 deaths reported in the past week, 17% more than that of the previous week. The test positivity rate in Gandaki decreased to 31.9% in the past week. A total of 6267 tests were performed in the past week, 4% less than that of the previous week.
Lumbini reported 976 new cases in the past week. Since a peak in week 19, new cases were continuously declining. The cases have decreased by 9% in the past week compared to the previous week. There were 15 deaths reported in the past week, 25% more than that of the previous week. The test positivity rate in Lumbini decreased to 20.2% in the past week. A total of 4286 tests were performed in the past week, 1% less than that of the previous week.

In Karnali, 324 new cases were reported in the past week. Since a peak in Week 20, new cases were continuously declining. However, the cases have increased by 1% in the past week compared to the previous week. There were 9 deaths reported in the past week, 125% more than that of the previous week. The test positivity rate in Karnali decreased to 39.9% in the past week. A total of 689 tests were performed in the past week, 24% more than that of the previous week.
In Sudurpashchim, 202 new cases were reported in the past week. Since a peak in Week 20, new cases were continuously declining. The cases have decreased by 35% in the past week compared to the previous week. There were 3 deaths reported in the past week, 25% less than that of the previous week. The test positivity rate in Sudurpashchim decreased to 11.9% in the past week. A total of 1349 tests were performed in the past week, 9% more than that in the previous week.
Cases and deaths have been reported in high numbers from Bagmati Province, mostly from Kathmandu valley area. The overall case fatality ratio (CFR) of Nepal is 1.41%. However, the CFR is relatively high in Karnali Province with 2.10% and Lumbini Province with 1.77%.
### Table 1: Summary of laboratory-confirmed COVID-19 cases, deaths and transmission by provinces. (Data reported on 24 August 2021 up to 07:00:00)

<table>
<thead>
<tr>
<th>Reporting Province</th>
<th>Total confirmed cumulative cases RTPCR Tests</th>
<th>Total Confirmed cumulative cases Antigen RDT test</th>
<th>Total confirmed cumulative cases</th>
<th>% of total confirmed cumulative cases</th>
<th>Total cumulative deaths</th>
<th>Transmission classification*</th>
<th>Total confirmed cases in last 14 days Antigen RDT test</th>
<th>Total confirmed cases in last 14 days RT-PCR test</th>
<th>Total confirmed cases in last 14 days</th>
<th>% of total confirmed cumulative cases in last 14 days</th>
<th>Total Deaths in last 14 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Province 1</td>
<td>96341</td>
<td>22192</td>
<td>118533</td>
<td>14.5</td>
<td>1498</td>
<td>Community transmission</td>
<td>3314</td>
<td>6226</td>
<td>9540</td>
<td>21.6</td>
<td>66</td>
</tr>
<tr>
<td>Province 2</td>
<td>45479</td>
<td>453</td>
<td>45932</td>
<td>5.6</td>
<td>753</td>
<td>Community transmission</td>
<td>7</td>
<td>409</td>
<td>416</td>
<td>0.9</td>
<td>7</td>
</tr>
<tr>
<td>Bagmati</td>
<td>382462</td>
<td>17552</td>
<td>400014</td>
<td>48.8</td>
<td>4506</td>
<td>Community transmission</td>
<td>2214</td>
<td>18153</td>
<td>20367</td>
<td>46.2</td>
<td>208</td>
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<tr>
<td>Gandaki</td>
<td>72036</td>
<td>14138</td>
<td>86174</td>
<td>10.5</td>
<td>1202</td>
<td>Community transmission</td>
<td>2163</td>
<td>6032</td>
<td>8195</td>
<td>18.6</td>
<td>89</td>
</tr>
<tr>
<td>Lumbini</td>
<td>93845</td>
<td>11468</td>
<td>105313</td>
<td>12.9</td>
<td>1661</td>
<td>Community transmission</td>
<td>1986</td>
<td>2115</td>
<td>4101</td>
<td>9.3</td>
<td>28</td>
</tr>
<tr>
<td>Karnali</td>
<td>21293</td>
<td>2699</td>
<td>23992</td>
<td>2.9</td>
<td>452</td>
<td>Community transmission</td>
<td>243</td>
<td>651</td>
<td>894</td>
<td>2.0</td>
<td>15</td>
</tr>
<tr>
<td>Sudurpashchim</td>
<td>37525</td>
<td>2039</td>
<td>39564</td>
<td>4.8</td>
<td>461</td>
<td>Community transmission</td>
<td>92</td>
<td>518</td>
<td>610</td>
<td>1.4</td>
<td>5</td>
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<tr>
<td>National Total</td>
<td>748981</td>
<td>70541*</td>
<td>819522</td>
<td>100</td>
<td>10533</td>
<td>Community transmission</td>
<td>10019</td>
<td>34104</td>
<td>44123</td>
<td>100</td>
<td>418</td>
</tr>
</tbody>
</table>

*Total reported in HEOC Sitrep of 23 August 80462; but IMU reported 70541

Notes:
1. The source for case data used in this update is from RT-PCR test positivity reported by laboratories from various locations across Nepal, as shared by HEOC Sitrep and IMU/IHIMS.
2. Case data is screened and cleaned by our data team for double entry, wrong entry and manual errors such as a city’s name in place of districts, district name in place of province, etc.
3. Whereas the test positivity rate is calculated based on the test positivity reported in Sitrep for RT-PCR which may or may not be scrutinized or cleaned the same way and mark the cases on location of the laboratories rather than their place of stay.
Overall, the sex-distribution remains skewed towards males. The incidence of cases is higher in the economically productive age group (15-54 years) for both males and females.

Table 2: Age Specific Case Fatality Ratio and Co-morbidity of Deaths* in COVID-19 confirmed cases (N = 748981) (Data reported on 24 August 2021 up to 7:00:00)

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Total confirmed cases</th>
<th>Death (male)</th>
<th>Death (female)</th>
<th>Deaths with any known comorbid condition</th>
<th>Age specific case fatality ratio (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-4 yrs</td>
<td>7046</td>
<td>14</td>
<td>19</td>
<td>11</td>
<td>0.47</td>
</tr>
<tr>
<td>5-14 yrs</td>
<td>27756</td>
<td>13</td>
<td>7</td>
<td>10</td>
<td>0.07</td>
</tr>
<tr>
<td>15-24 yrs</td>
<td>113572</td>
<td>81</td>
<td>81</td>
<td>60</td>
<td>0.14</td>
</tr>
<tr>
<td>25-34 yrs</td>
<td>200790</td>
<td>346</td>
<td>233</td>
<td>119</td>
<td>0.29</td>
</tr>
<tr>
<td>35-44 yrs</td>
<td>155814</td>
<td>792</td>
<td>390</td>
<td>239</td>
<td>0.76</td>
</tr>
<tr>
<td>45-54 yrs</td>
<td>110871</td>
<td>1266</td>
<td>577</td>
<td>477</td>
<td>1.66</td>
</tr>
<tr>
<td>55-64 yrs</td>
<td>70102</td>
<td>1523</td>
<td>693</td>
<td>654</td>
<td>3.16</td>
</tr>
<tr>
<td>65-74 yrs</td>
<td>37205</td>
<td>1449</td>
<td>769</td>
<td>799</td>
<td>5.96</td>
</tr>
<tr>
<td>75-84 yrs</td>
<td>16950</td>
<td>1032</td>
<td>555</td>
<td>603</td>
<td>9.36</td>
</tr>
<tr>
<td>85+ yrs</td>
<td>4756</td>
<td>425</td>
<td>245</td>
<td>208</td>
<td>14.09</td>
</tr>
<tr>
<td>Unknown</td>
<td>4119</td>
<td>17</td>
<td>6</td>
<td>10</td>
<td>0.56</td>
</tr>
<tr>
<td>National</td>
<td>748981</td>
<td>6958</td>
<td>3575</td>
<td>3190</td>
<td>1.41</td>
</tr>
</tbody>
</table>

Case Fatality ratio (CFR, in%) = \( \frac{\text{Number of deaths from disease}}{\text{Number of confirmed cases of disease}} \) \times 100

COVID-19 positive lab result is temporally associated with death; causal association under investigation.

A total of 10,533 deaths have been reported. Out of the total deaths, 6,958 (66.1%) were males and 3,575 (33.9%) were females. Amongst the deaths, 3,190 persons (30.3%) had at least one 

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known comorbidity. Although the overall case fatality ratio (CFR) across all ages is less than 1%, the CFR progressively increases with age beyond 65 years of age, ranging from 6.0% to 14.1%.

PREPAREDNESS AND RESPONSE

What are the Government of Nepal (GoN) & the Ministry of Health & Population (MoHP) doing?

- Government of Nepal formed a high-level committee chaired by Hon’ble State Minister (MoHP) and co-chaired jointly by Health Secretary (Dr Roshan Pokhrel) and Chief Specialist (Dr Dipendra Raman Singh). A ToR was prepared by the committee which outlines 8 major functions (Link [Here](#)) as highlighted below:
  1. Make policy decisions related with COVID-19 prevention and control measures which includes PoE, contract tracing, quarantine, isolation, treatment, vaccine supply and campaign, procurement of drugs, equipment and supplies.
  2. Develop appropriate policy decisions to ensure continuity of essential health services.
  3. Coordinate and facilitate with all provinces and local level to make health services effective.
  4. Make necessary decisions related with human and financial resources and facilitate its implementation.
  5. Make necessary policy decisions for effective information management.
  6. Mobilize technical and financial support from donor agencies, development partners, international organization, I/NGOs and private institutions effectively.
  7. Collect necessary suggestions from subject experts in relations with COVID-19 prevention and control.
  8. Organize bi-weekly meetings and address any problem or issue related with COVID-19 prevention and control, and continuity of essential health services.

- COVID-19 Vaccination Campaign Update
  - Nepal is currently administering three types of COVID-19 vaccines (COVISHIELD (manufactured by Serum Institute of India)/Japanese-made COVID-19 AstraZeneca vaccine/ Swedish AstraZeneca vaccine, Vero Cell and Johnson and Johnson).
  - COVID-19 vaccination campaign is going simultaneously in all provinces for the first and second doses of Sinopharm; and Janssen vaccines to specific target group as specified by MoHP and as per National Deployment and Vaccination Plan.
  - Nepal has also started second dose of AstraZeneca vaccine campaign from 9 August targeting previously vaccinated ≥ 65 years age and other groups who had received COVISHIELD vaccine as the first dose.
  - As of 23 August 2021, a total of 8,801,330 doses of COVID-19 vaccines (different types) have been safely administered.
  - Around 16.27% of the total population have received the first dose while, 12.7% have received full dose as of 23 August 2021.
• Government of Nepal is receiving medical equipment, supplies and health commodities from many countries and donor agencies. Within the reporting time frame, the following have provided logistics support:
  o The Government of Lithuania has handed over 5 units of ventilators and 20 units of oxygen concentrators.
  o UNHCR handed over 30 units of oxygen concentrators, 32,500 units of gloves, 80,000 units of surgical mask, 9,000 units of non-surgical mask and 11,663 units of personal protective equipment.
  o The Government of Japan has handed over second batch of 280,060 doses of AstraZeneca vaccine through COVAX facility.

What is the WHO Country Office for Nepal doing?

Laboratory Capacity
• WHO Nepal has been providing technical support to NPHL in the following activities:
  o Monitoring the quality standard of designated COVID-19 laboratories in the country through the National Quality Assurance Program (NQAP). A total of 8 designated COVID-19 laboratories participated in the NQAP this week with the result of ≥ 90% satisfactory.
  o Sample preparation and shipment of 48 COVID-19 positive samples to Council of Scientific and Industrial Research (CSIR)-Institute of Genomics and Integrative Biology (IGIB) for gene sequencing. The result is awaited.
  o Monitoring of sample collection, sample tracking, sample processing for ELISA test and, Internal Quality Control (IQC) panel preparation for second round of SARS-CoV-2 sero surveillance. As of 24 August, 13,419 samples out of total 13,700 samples for sero surveillance was received at NPHL. The ELISA test of 98% of the samples have been done and technical support was provided in data management of the result for ELISA test.
• WHO Nepal has been providing technical support to National Influenza Surveillance in the following activities:
  o Participation during virtual meeting of 14th Bi-Regional meeting of National Influenza Centres and Influenza Surveillance in the WHO’s Western Pacific and South-East Regions held from 17-19 Aug 2021.
  o Participation during virtual PIP meeting (20 Aug 2021) to review implementation of Pandemic Influenza Preparedness (PIP) activities in the current biennium and decide directions for planning for 2022-2023 by PIP partnership contributions.

Point of Entry
• Prohibitory Order imposed in Kathmandu Valley since 29 April 2021 has been further extended by a week from 24 August 2021 until 1 September 2021 by the District
Administration Offices of Kathmandu district (Link [Here]), Lalitpur district (Link [Here]) and Bhaktapur district (Link [Here]). Compared to previous orders, DAOs have decided to lift all the restrictive measures against public and private transportation and allow more operation hours for shops while extending the ongoing lockdown for 7 more days to contain the COVID-19 pandemic.

**Technical Planning and Operations**

- National Health Training Centre in coordination with Nepal Paediatric Society (NEPAS) and technical and financial support of WHO has been conducting 3 batches of 2 days virtual Training on "management of COVID-19 Case in Paediatric population"
  - The third batch of ongoing training was held from 23 - 24 August 2021. About 506 participants (doctors, nurses and paramedics) attended the training from Province 01, Province 02, Gandaki Province, Karnali Province and Sudurpashchim province.
  - Total of 3667 registered participants attended the training (all 3 batches).

**Risk Communication and Community Engagement**

- The weekly sub-cluster meeting on mental health and disability was conducted on 21 August 2021. The program was chaired by Chairperson, National Federation of the Disabled Nepal (NFDN) Bagmati Province and co-chaired by Central Coordinator, NFDN. There were 13 participants of which 8 were NFDN district’s focal person (Kathmandu, Bhaktapur, Chitwan, Dhading, Kavrepalanchowk, Sindhuli, Makwanpur, Nuwakot). Progress and challenges regarding current situation was presented and discussed by district focal person during the meeting.


- WHO Nepal’s support to the NHEICC continued this week by providing risk communication expertise through staff embedded at the NHEICC and also through support in production of audio content for dissemination via Radio Nepal.
- Science in 5 videos were translated, dubbed, and published (17 - 23 August 2021)
<table>
<thead>
<tr>
<th>Episodes</th>
<th>Titles</th>
<th>Language</th>
<th>Links</th>
</tr>
</thead>
<tbody>
<tr>
<td>49</td>
<td>Can I get infected after vaccination?</td>
<td>Nepali</td>
<td>OneDrive (downloadable link); Facebook link; YouTube link</td>
</tr>
<tr>
<td>49</td>
<td>Can I get infected after vaccination?</td>
<td>Maithili</td>
<td>OneDrive (downloadable link); Facebook link; YouTube link</td>
</tr>
</tbody>
</table>

- The news of the handover of gene sequencing equipment, reagents, and SARS-CoV-2 RT-PCR kits (capable of detecting variants) to the National Public Health Laboratory, Ministry of Health and Population, was shared via Facebook (link here) and Twitter (link here).
- The following documents were uploaded on ReliefWeb (link here):
  I. Daily *Focused COVID-19 Media Monitoring*,
  II. Weekly COVID-19 EPI Dashboard, and
  III. The latest *Weekly WHO Nepal COVID-19 Situation Update*.
- Infographics on the following topics were shared via WHO, Country Office for Nepal, social media:
  I. Importance of routine immunization during COVID-19,
  II. OpenWHO Courses,
  III. COVID-19 Vaccinations,
  IV. Staying healthy at home during COVID-19,
  V. Breastfeeding and COVID-19,
  VI. Correct ways to wear a mask during COVID-19,
  VII. Public health and social measures to implement during COVID-19.

**What are the health clusters partners doing?**
- Federal Level Health Cluster Coordination meeting has been organized every alternate Thursday at 2:00 PM.
- Provincial Health Directorate Offices are organizing Provincial Level Health Cluster Coordination meeting as and when on required basis.
- Health partners are providing their support to government for the continuation of COVID and non-COVID responses throughout the country. The support provided through Ministry of Health and Population (MOHP) especially with Health Emergency Operation Centre (HEOC), Health Coordination Division (HCD), Policy, Planning & Monitoring Division (PP&MD), Epidemiology and Diseases Control Division (ECD), National Public Health Laboratory (NPHL), National Health Training Centre (NHTC), National Health Education Information Communication Centre (NHEICC), Family Welfare Division (FWD), Management Division (MD), Hub hospital networks; MOHP/Ministry of Social Development (MOSD) especially with Provincial Health Directorate Offices, District Public/Health Offices, and municipalities. COVID-19 response support provided by specialist teams through telemedicine services.
UNICEF and WHO are providing support for COVID-19 vaccination campaign in close coordination with External Development Partners (EDPs), this includes: Micro planning including financing for the procurement of vaccination; Training/orientations – to health personnel at various level, local governments; Logistics – vehicle, cold chain boxes, delivery of vaccines, transportation of beneficiaries to the vaccination site; Information Technology – registration, information communication, data management; Risk communication and community engagement – production and dissemination of messages, public awareness campaign; and continuation of Technical Assistance. All members of the Health Cluster are advocating through multiple channels that are available to them for the swift supply of vaccines to Nepal.

WHO’s STRATEGIC OBJECTIVES FOR COVID-19 RESPONSE - link here

RECOMMENDATION AND ADVICE FOR THE PUBLIC
- Protect yourself
- Questions and answers
- Travel advice
- EPI-WIN: tailored information for individuals, organizations and communities

USEFUL LINKS
- MoHP COVID-19 official portal is available here.
- Nepal COVID-19 regular updates and resources are available here.
- For COVID-19 updates from the WHO South-East Asia Region Office, please visit here.
- For information regarding coronavirus disease (COVID-19) Pandemic from WHO, please visit here.
- Please visit this site for all technical guidance from WHO.
- Online courses on COVID-19 from WHO can be found here.
- WHO Coronavirus (COVID-19) Dashboard can be found here.
- Visit the WHO Nepal Facebook page and webpage on COVID-19 here.

CONTACT DETAILS

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