Situation Update #74- Coronavirus Disease 2019 (COVID-19)
WHO Country Office for Nepal

Reporting Date: 7 – 13 September 2021

HIGHLIGHTS *Data as of HEOC of MoHP Situation Report, 13 September 2021

- Of the total RT-PCR confirmed COVID-19 cases, 95.2% (740,717) of cases have recovered and 3.4% (26,630) of cases are active.
- Of the total active cases, 93.7% (24,958) cases are in home isolation; 6.2% (1,672) of cases are undergoing hospital/institutional isolation. While 1.8% (475) of active cases require ICU admission, 28.2% (134) of the ICU admitted patients require ventilator support.
- Twelve districts have reported more than 500 active cases.
- Among the total new cases (7,553) reported this week, 26.7% (2,016) are from Kathmandu district followed by Morang district 9.9% (749). Most of the new cases about 39.3% (2,965) have been reported from Kathmandu valley (Kathmandu, Lalitpur and Bhaktapur districts), Bagmati Province.
- COVID-19 vaccination coverage status (as of 13 September 2021, 10:00:00)

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>First dose</th>
<th>Second dose</th>
</tr>
</thead>
<tbody>
<tr>
<td>ChAdOx1-S*</td>
<td>2,402,432</td>
<td>1,399,660</td>
</tr>
<tr>
<td>SARS-CoV-2 Vaccine (Vero Cell)</td>
<td>3,431,506</td>
<td>2,416,309</td>
</tr>
<tr>
<td>Johnson and Johnson Vaccine</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Single Dose</td>
<td>1,382,224</td>
<td></td>
</tr>
</tbody>
</table>

* COVISHIELD (manufactured by Serum Institute of India), Japanese-made COVID-19 AstraZeneca vaccine, Swedish AstraZeneca vaccine

NEPAL EPIDEMIOLOGICAL SITUATION
- As of 14 September 2021, 07:00:00 hours (week 36), a total of 778,312 (19.3%) COVID-19 cases were confirmed through polymerase chain reaction (RT-PCR); 4,034,593 RT-PCR tests have been performed nationwide by designated functional COVID-19 laboratories. A total of 87,031 (16.8%) cases were confirmed through Antigen RDT; 515,988 Antigen RDT have been performed nationwide.
- Since 9 May 2021, all 7 provinces in the country are experiencing community transmission.
- Province-wise RT-PCR test positivity rate in past week (week 36) ranged from 5.0% (Province 2) to 26.9% (Karnali Province), with national positivity rate averaging 10.9%.
- Overall, the sex-distribution remains skewed towards males, who constitute 60% (463,252/778,312) of the RT-PCR confirmed cases. Amongst the males, 78% (361,534/463,252) are in the economically productive age group (15-54 years).
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- NPHL reported 32 diagnostic and surveillance samples [20 samples tested at National Influenza center (NIC) and 12 samples tested at WARUN (Walter Reed/AFRIMS Research Unit-Nepal) on EPID-week 36 (6-12 September 2021).  
  - One sample tested positive for Influenza A/H3, 5 samples tested positive for Influenza B Victoria and 6 samples tested positive for Influenza B (Yet to be subtyped).  
  - 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)  
  - Out of the total SARS-CoV-2 samples that tested negative at NPHL on EPID-week 36 (6-12 September 2021), 80 SARS-CoV-2 negative samples were tested for Influenza for the same week. 6 samples tested positive for Influenza A/H3, and 12 samples tested positive for Influenza B Victoria.

- From 4 January until 12 September 2021:  
  - A total of 699 samples tested positive for Influenza (545 Influenza A/H3, 96 Influenza B Victoria, 1 Co-Infection of Influenza A/H3 and Influenza B Victoria, 3 Co-Infection of Influenza A/H3 and Influenza B, 2 Influenza A(H1N1)pdm09, 51 Influenza B Un-subtyped) from 4439 samples (Sentinel and non-sentinel samples including SARS-CoV-2 negative SARI and ILL cases).  
  - Similarly, 297 samples tested positive for SARS-CoV-2 from 1218 samples (Sentinel/non-sentinel ILI/SARI samples). All these positive cases are included in the COVID-19 database.¹

Figure 1: WHO SEAR countries: Number of COVID-19 confirmed cases and cumulative incidence rate (per 100,000) (Data as of 13 September 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>1532366</td>
<td>887</td>
</tr>
<tr>
<td>Bhutan</td>
<td>756123</td>
<td>2596</td>
<td>343</td>
</tr>
<tr>
<td>India</td>
<td>1420972759</td>
<td>33264175</td>
<td>2341</td>
</tr>
<tr>
<td>Indonesia</td>
<td>272248454</td>
<td>4170088</td>
<td>1532</td>
</tr>
<tr>
<td>Maldives</td>
<td>546399</td>
<td>82950</td>
<td>15181</td>
</tr>
<tr>
<td>Myanmar</td>
<td>55008057</td>
<td>434106</td>
<td>789</td>
</tr>
<tr>
<td>Nepal</td>
<td>30201100</td>
<td>778312</td>
<td>2577</td>
</tr>
<tr>
<td>Sri Lanka</td>
<td>22036689</td>
<td>488482</td>
<td>2217</td>
</tr>
<tr>
<td>Thailand</td>
<td>66186727</td>
<td>1394756</td>
<td>2107</td>
</tr>
<tr>
<td>Timor-Leste</td>
<td>1317780</td>
<td>18597</td>
<td>1411</td>
</tr>
<tr>
<td>SEAR</td>
<td>2042083472</td>
<td>42166428</td>
<td>2065</td>
</tr>
</tbody>
</table>

¹ These positive cases are included in the COVID-19 database.
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 13 September 2021 was 12532 which is 37% less than the number tested during the peak in the beginning of May 2021.
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 Province 1 and Lumbini Province.

Figure 2C: Lab confirmed COVID-19 cases: Trend of cases, 7-days rolling average, weekly cases and deaths and Test Positivity Rate (N = 778312) [Data reported on 14 September 2021 up to 7:00:00]

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

There were 1902 new cases reported in the past week in Province 1. The cases have decreased by 2% in the past week compared to the previous week. There were 23 deaths reported in the past week, 12% less than that of the previous week. The test positivity rate in Province 1 increased to 25.2% in the past week. A total of 6937 tests were performed in the past week, 16% less than that of the previous week.
There were 158 new cases reported in the past week in Province 2. Since a peak in week 20, new cases were continuously declining. However, the cases have increased by 10% in the past week compared to the previous week. There were 2 deaths reported in the past week, same as in the previous week. The test positivity rate in Province 2 decreased to 5.0% in the past week. A total of 1127 tests were performed in the past week, 36% more than that of the previous week.
In Bagmati, 3945 new cases were reported in the past week. Since a peak in week 19, new cases were continuously declining. The cases have decreased by 29% in the past week compared to the previous week. There were 48 deaths reported in the past week, 14% less than that of the previous week. The test positivity rate in Bagmati decreased to 9.4% in the past week. A total of 48960 tests were performed in the past week, 5% more than that of the previous week.

In Gandaki, 1045 new cases were reported in the past week. Since a peak in week 21, new cases were continuously declining. The cases have decreased by 22% in the past week compared to the previous week. There were 18 deaths reported in the past week, 10% less than that of the previous week. The test positivity rate in Gandaki decreased to 25.5% in the past week. A total of 3012 tests were performed in the past week, 10% less than that of the previous week.
Lumbini reported 529 new cases in the past week. Since a peak in week 19, new cases were continuously declining. The cases have decreased by 11% in the past week compared to the previous week. There were 13 deaths reported in the past week, 18% more than that of the previous week. The test positivity rate in Lumbini decreased to 15.6% in the past week. A total of 2806 tests were performed in the past week, 13% less than that of the previous week.
In Karnali, 175 new cases were reported in the past week. The cases have decreased by 34% in the past week compared to the previous week. There were 6 deaths reported in the past week, same as in the previous week. The test positivity rate in Karnali decreased to 26.9% in the past week. A total of 516 tests were performed in the past week, 17% less than that of the previous week.

In Sudurpashchim, 138 new cases were reported in the past week. Since a peak in week 20, new cases were continuously declining. The cases have decreased by 23% in the past week compared to the previous week. There was 1 death reported in the past week, 67% less than that of the previous week. The test positivity rate in Sudurpashchim increased to 23.7% in the past week. A total of 591 tests were performed in the past week, 38% less than that in the previous week.
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Figure 3: National -Municipalities (By domicile) with reported laboratory-confirmed COVID-19 cases and deaths (N = 778312) (Data reported on 14 September 2021 up to 7:00:00)

Cases and deaths have been reported in high numbers from Bagmati Province, mostly from Kathmandu valley area. The overall case fatality rate (CFR) of Nepal is 1.41%. However, the CFR is relatively high in Karnali Province with 2.13% and Lumbini Province with 1.78%. 
Table 1: Summary of laboratory-confirmed COVID-19 cases, deaths and transmission by provinces. (Data reported on 14 September 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>102658</td>
<td>24017</td>
<td>126675</td>
<td>14.8</td>
<td>1580</td>
<td>Community transmission</td>
<td>865</td>
<td>4171</td>
<td>5036</td>
<td>22.7</td>
<td>45</td>
</tr>
<tr>
<td>Province 2</td>
<td>45948</td>
<td>475</td>
<td>46423</td>
<td>5.4</td>
<td>761</td>
<td>Community transmission</td>
<td>10</td>
<td>322</td>
<td>332</td>
<td>1.5</td>
<td>6</td>
</tr>
<tr>
<td>Bagmati</td>
<td>397760</td>
<td>18741</td>
<td>416501</td>
<td>48.7</td>
<td>4695</td>
<td>Community transmission</td>
<td>620</td>
<td>10093</td>
<td>10713</td>
<td>48.3</td>
<td>103</td>
</tr>
<tr>
<td>Gandaki</td>
<td>76335</td>
<td>15608</td>
<td>91943</td>
<td>10.8</td>
<td>1285</td>
<td>Community transmission</td>
<td>732</td>
<td>2539</td>
<td>3271</td>
<td>14.7</td>
<td>38</td>
</tr>
<tr>
<td>Lumbini</td>
<td>95650</td>
<td>12756</td>
<td>108406</td>
<td>12.7</td>
<td>1707</td>
<td>Community transmission</td>
<td>675</td>
<td>1198</td>
<td>1873</td>
<td>8.4</td>
<td>27</td>
</tr>
<tr>
<td>Karnali</td>
<td>21957</td>
<td>2940</td>
<td>24897</td>
<td>2.9</td>
<td>468</td>
<td>Community transmission</td>
<td>104</td>
<td>444</td>
<td>548</td>
<td>2.5</td>
<td>11</td>
</tr>
<tr>
<td>Sudurpashchim</td>
<td>38004</td>
<td>2176</td>
<td>40180</td>
<td>4.7</td>
<td>469</td>
<td>Community transmission</td>
<td>85</td>
<td>323</td>
<td>408</td>
<td>1.8</td>
<td>5</td>
</tr>
<tr>
<td>National Total</td>
<td>778312</td>
<td>76713*</td>
<td>855025</td>
<td>100</td>
<td>10965</td>
<td>Community transmission</td>
<td>3091</td>
<td>19090</td>
<td>22181</td>
<td>100</td>
<td>235</td>
</tr>
</tbody>
</table>

*Total reported in HEOC Sitrep of 13 September 87031; but IMU reported 76713

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 = 778312) (Data reported on 14 September 2021 up to 7:00:00)

```markdown
<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>7303</td>
<td>15</td>
<td>20</td>
<td>12</td>
<td>0.48</td>
</tr>
<tr>
<td>5-14 yrs</td>
<td>28723</td>
<td>13</td>
<td>7</td>
<td>10</td>
<td>0.07</td>
</tr>
<tr>
<td>15-24 yrs</td>
<td>118107</td>
<td>85</td>
<td>82</td>
<td>60</td>
<td>0.14</td>
</tr>
<tr>
<td>25-34 yrs</td>
<td>208062</td>
<td>357</td>
<td>245</td>
<td>129</td>
<td>0.29</td>
</tr>
<tr>
<td>35-44 yrs</td>
<td>161660</td>
<td>819</td>
<td>413</td>
<td>257</td>
<td>0.76</td>
</tr>
<tr>
<td>45-54 yrs</td>
<td>115164</td>
<td>1301</td>
<td>599</td>
<td>503</td>
<td>1.65</td>
</tr>
<tr>
<td>55-64 yrs</td>
<td>73032</td>
<td>1573</td>
<td>730</td>
<td>686</td>
<td>3.15</td>
</tr>
<tr>
<td>65-74 yrs</td>
<td>39009</td>
<td>1504</td>
<td>803</td>
<td>832</td>
<td>5.91</td>
</tr>
<tr>
<td>75-84 yrs</td>
<td>17947</td>
<td>1082</td>
<td>589</td>
<td>636</td>
<td>9.31</td>
</tr>
<tr>
<td>85+ yrs</td>
<td>5092</td>
<td>446</td>
<td>257</td>
<td>218</td>
<td>13.81</td>
</tr>
<tr>
<td>Unknown</td>
<td>4213</td>
<td>18</td>
<td>7</td>
<td>10</td>
<td>0.59</td>
</tr>
<tr>
<td>National</td>
<td>778312</td>
<td>7213</td>
<td>3752</td>
<td>3353</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 10,965 deaths have been reported. Out of the total deaths, 7,213 (65.8%) were males and 3,752 (34.2%) were females. Amongst the deaths, 3,353 persons (30.6%) had at least one known comorbidity. Although the overall case fatality rate (CFR) across all ages is less than 1%, it progressively increases with age beyond 65 years of age, ranging from 5.9% to 13.8%.

**PREPAREDNESS AND RESPONSE**

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

- **COVID-19 Vaccination Campaign Update**
  - COVID-19 vaccination campaign is going simultaneously in all provinces for the first, and second doses of AstraZeneca and Sinopharm 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 9th August targeting previously vaccinated ≥ 65 years age and other groups who had received Covishield vaccine as the first dose.
  - Till now, Nepal has received 13,358,710 doses of COVID-19 vaccine from various sources.
  - Rasuwa (55%), Kathmandu (49%) and Lalitpur (45%) districts of Bagmati Province are top three leading districts with high coverage of the first dose.
  - 19.3% of total population have received first dose, 17.3% have received full dose.
  - As of 14 September 2021 10:00AM, a total of 11,120,315 doses of COVID-19 vaccines (different types) have been safely administered.
  - Around 19.3% of the total population have received the first dose while, 17.3% have received full dose as of 14 September 2021.

- **Government of Nepal, Ministry of Health and Population 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:**
  - UNICEF, Nepal has handed over four ultra-low temperature freezers - provided through the COVAX Facility.
  - A total of 800 oxygen concentrators were handed over to the MoHP by UNICEF, Nepal - 600 of which were provided with funding contribution from the European Civil Protection and Humanitarian Aid Operations (ECHO) and 200 through support from the US Fund for UNICEF and the Bill and Melinda Gates Foundation.

- **Prohibitory Order imposed in Kathmandu Valley since 29 April 2021 has been further extended from 17 September until further notice 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 to contain the COVID-19 pandemic.**

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What is the WHO Country Office for Nepal doing?

**Laboratory Diagnosis**

- WHO Nepal has been providing technical support to NPHL in the following activities:
  - Monitoring the quality standard of designated COVID-19 laboratories in the country through the National Quality Assurance Program (NQAP). A total of 31 designated COVID-19 laboratories participated in the NQAP. Of the total 31 laboratories, 26 laboratories scored 100% (excellent), 4 laboratories scored 90% (satisfactory) and 1 laboratory scored 80% (unsatisfactory).
  - Validation of newly established two private laboratories i.e.
    - Global hospital and education foundation, Gwarko and Mahendra Narayan Nidhi Memorial Hospital, Basundhara
      - The newly established laboratories sent 10 positive and 10 negative samples for the validation at NPHL. WHO provided support in result verification, report preparation and report dissemination to the designated laboratories.
    - Result dissemination of the gene sequencing of 48 COVID-19 positive samples which were sent to Council of Scientific and Industrial Research (CSIR)-Institute of Genomics and Integrative Biology (IGIB).
  - WHO Nepal has also been providing technical support to National Influenza Centre (NIC), NPHL for surveillance of influenza in the following activities:
    - Shipment of 20 diagnostic influenza virus samples to WHO Collaborating Center for Reference and Research on Influenza, National Institute of Infectious Disease (NIID), Influenza Virus Research Center at Tokyo, Japan for diagnostic purpose.
    - Shipment of 20 diagnostic influenza virus samples to WHO Collaborating Center-Influenza Reference Laboratory, Victorian Infectious Disease Reference Laboratory (VIDRL), Melbourne, Australia for confirmation and further characterization purpose.

**Technical Planning and Operations**

- With financial and technical support from WHO Nepal, National Trauma Centre Kathmandu is conducting a two-day training on "Essential Critical Care Training (ECCT)" at National Trauma Centre Kathmandu from 13-14 September 2021. A total of 16 participants (medical officers, staff nurses & medical residents) along with 8 trainers will be part of this training program.
WHO Nepal conducted a meeting with Curative Service Division (CSD) on 12 September 2021 to discuss in detail the developed SoP for telemedicine and the development of software to provide telemedicine services. The outcome of the meeting was to finalize the SoP by next week and CSD to provide the format for the data collection/variables, based on which software is to be developed.

WHO Nepal is supporting NHTC for conducting a 5-day training on “Training of trainers on Pediatric Essential Critical Care (PECC).” The first batch of training was held from 2-6 September 2021 and the second batch was held from 8-12 September 2021 which included 19 participants (consultant doctors, pediatricians & nurses) from all 7 provinces. The third batch of the training program will be held from 17-21 September 2021. After the completion of TOT, service provider training in PECC will be started at the Provincial level.

Risk Communication and Community Engagement

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 translated, dubbed, and published as of 13 September 2021:

<table>
<thead>
<tr>
<th>Episodes</th>
<th>Titles</th>
<th>Language</th>
<th>Links</th>
</tr>
</thead>
<tbody>
<tr>
<td>50</td>
<td>Do I still need the vaccine if I have COVID-19?</td>
<td>Maithili</td>
<td>OneDrive (downloadable link); Facebook link; YouTube link</td>
</tr>
</tbody>
</table>

Remarks by WHO Representative to Nepal about the 74th session of World Health Organization, South-East Asia Region (SEAR), Regional Committee (RC), which is being hosted by Nepal, was shared here.

WHO Director-General's opening remarks at the 74th Session of the WHO RC for South-East Asia, being hosted by Nepal, was shared here.

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• The following press releases from the 74th RC Meeting of WHO SEAR were translated in Nepali, shared with members of the Nepali media, and uploaded on the WHO Nepal website (links below):
  I. Scale-up routine immunization along with COVID-19 vaccination: WHO: Link
  II. Strengthening health emergency security systems top priority: WHO: Link
  III. Accelerate action to prevent and control non-communicable diseases: WHO: Link
  IV. Countries in WHO South-East Asia Region endorse health promoting schools, safe school operations during pandemic: Link
• Quote cards of the following dignitaries, from the 74th RC Meeting of WHO SEAR, were shared:
  I. Mr Umesh Shrestha, State Minister for Health and Population: Facebook link | Twitter link
  II. Dr Poonam Khetrapal Singh, Regional Director, WHO SEAR: Facebook link | Twitter link
  III. Dr. Tedros Adhanom Ghebreyesus, Director-General of WHO: Twitter link
  IV. Ms Sara Beysolow Nyanti, United Nations Resident Coordinator in Nepal: Link
• The following achievement videos of Nepal was also shared on the 74th RC Meeting:
  I. Strengthening health emergency security systems during the COVID-19 pandemic: Link
  II. Accelerating progress on prevention and control of non-communicable diseases during the COVID-19 pandemic: Link
  III. Routine Immunization during the COVID-19 pandemic: Link
• Glimpses from the 74th RC Meeting was shared via Facebook (link here) and Twitter (link here).
• The news of the launch of the publication, Towards a safer future: Learnings from a decade of public health emergencies in the South-East Asia Region, at the 74th RC Meeting, was shared here.
• The news and invitation for Nepal Conference on Geriatrics 2021 was shared via Facebook (link here) and Twitter (link here). The conference mainly aims to raise awareness of the demographic changes among the elderly in Nepal; engage health policymakers, rehabilitation and social care needs of the elderly; address how the role of elders has changed within families in the context of increasing economic opportunities in cities; and identify related gaps and challenges even during the COVID-19 pandemic.
• 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:
Public health safety measures to implement at schools,
Facets of domestic violence during COVID-19,
Suicide Prevention and COVID-19, and
Public health and social measures to implement during COVID-19.

What are the health clusters partners doing?
- Ministry of Health and Population, Nepal successfully hosted virtual WHO Regional Committee meeting from 6-10 September 2021 with technical support from WHO Country Office Nepal. SEAR member states, three levels of WHO, key health partners, professional societies and experts participated in the meeting.
- Health Cluster Coordination at federal and provincial levels is being conducted by Ministry of Health and Population and Provincial Health Directorate Offices as and when required.
- Health partners are continuing their technical, operational, and logistics support for COVID and non-COVID responses to health-related offices and institutions throughout the country.
- Tele-consultation services are being provided by specialists with support from different health partners.
- UNICEF and WHO are providing following support for COVID-19 vaccination campaign in close coordination with External Development Partners (EDPs).
  - 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
  - Technical Assistance
- All members of the Health Cluster are advocating for swift supply of vaccines to Nepal through available channels.

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
Situation Update #74 – Corona virus Disease 2019 (COVID-19)
WHO Country Office for Nepal
Sunday 19 September 2021
• 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.

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