

Viet Nam COVID-19 Situation Report #33

14 March 2021

Report as of 14 March 2021, 18:00

Situation Summary

Highlights of Current Situation Report

- **The latest outbreaks have been basically brought under control. As of 14 Mar 2021, 10 out of 13 provinces have not reported additional cases in at least past one month.**
- Since the emergence of this outbreak which initiated from Hai Duong and Quang Ninh provinces on 25 Jan, by 14 March **901 locally transmitted cases** have been reported from thirteen (**13**) cities/ provinces across the country (no additional provinces reported in past 7 days). These include: Hai Duong (717); Quang Ninh (61), HCMC (36), Ha Noi (34), Gia Lai (27), Binh Duong (6), Bac Ninh (5), Hai Phong (4), Dien Bien (3), Hung Yen (3), Hoa Binh (2), Bac Giang (2), and Ha Giang (1). See *Figures 1* and *2* for Epi curve of the current outbreak and case distribution by province.
- **Lockdown, social distancing lifted; schools reopened; nonessential services resumed in various provinces/ areas** including Ha Noi, HCMC, Hai Phong, Hai Duong, Gia Lai. Of notes:
 - From 8 Mar: Ha Noi lifted social distancing in all public transports but compliance to 5K measures is required.
 - From 24:00, 8 Mar – lockdown lifted in Transport hospital in Hai Phong city after 14 days (after 3 cases including 2 nurses were reported which were linked with Cam Giang, Hai Duong). As of mid-night 9 March – lockdown was lifted in the last two locations (hamlet 4 of Loi Dong village, Thuy Nguyen district and Block 112 of Du Hang worker's residential area, Du Hang ward, Le Chan district).
 - From 0:00, 10 March, Hai Duong province lifted lockdown in Viet My Urban area, Lai Cach. However, precautionary measures will continue to be applied. The outbreak hotspot in Cam Giang district is under control. During the week, nine additional cases were reported though with a down trend (from 0 to 4 cases per day) from 6 district hotspots (Cam Giang district, Chi Linh city, Hai Duong city, Kim Mon, Tu Ky and latest district of Kim Thanh). Eight out of nine cases were among F1 contacts of existing cases or within the lockdown areas; one case was detected from community screening in Hai Duong city who was already in quarantine since 8 March.
 - 13 Mar: social distancing was lifted in the last 2 areas of Ia Pa district and Ayun Pa town after more than one month without new cases reported. Currently, 287 people are under HCF quarantine; 1,522 people are under centralized quarantine; and 18,618 people are under home quarantine in Gia Lai.
- **The vaccination campaign officially started on March 8 with the AstraZeneca vaccine** to be given to health care workers (HCWs) in 3 priority locations including Hai Duong, National Hospital of Tropical Diseases – facility #2 (NHTD #2) in Ha Noi and Hospital of Tropical Diseases (HTD) in HCMC.
 - From 8 Mar to 14 Mar, **11,065** HCWs and other frontline workers in 12 localities have received their first shot: Hai Duong (**7,276**), Ha Noi (**163**), Hung Yen (**1,008**), Bac Ninh (**312**), Bac Giang (**1,230**), Hai Phong (**205**), HCMC (**774**), Gia Lai (**200**), Long An (**193**), Da Nang (**117**), Hoa Binh (**32**) and Khanh Hoa (**95**).
 - During the first week of vaccination campaign, 14 cases were reported with post-immunization reactions from several sites; all cases had been timely detected, managed and being stable at health care facilities.
 - The vaccination campaign will continue as planned while health authorities will be closely monitoring post-immunization reactions. The MoH is investigating the reasons of those AEFIs.
 - **Vaccinated foreign arrivals should still undergo 14-day quarantine.** On 10 Mar, a Vietnamese national landed at Tan Son Nhat International Airport in HCMC from the U.S. Prior to returning to Viet Nam, he had received two COVID-19 Moderna vaccine shots in the U.S., evidenced by a "COVID-19 Vaccination Record Card" in his passport. However, he was still put in quarantine for 14 days as per the current Viet Nam MoH's protocol.
- **Viet Nam is also stepping up homegrown vaccine research and production**, with Nano Covax started the second phase of human trials on February 26 and Human trials for Vietnam's second indigenous Covid-19 vaccine (Covivac)

will begin on 15 Mar at the Hanoi Medical University.

- The **National Steering Committee** for COVID-19 Prevention and Control **issued the Official Letter No. 1545/CV-BCĐ** dated 11 Mar 2021 to all 63 cities/ provinces about **testing plan to detect SARS-CoV-2 infection during COVID-19 outbreak**. Surveillance and testing from high risk areas in community.
- **Majority of the cases either asymptomatic (85.4%) or with mild symptoms (10.8%)**, the remaining 17 cases (3.8%) are severe or with severe prognosis and one case in a critical condition.
- **Sub-national transmission assessment¹**:
 - ✓ Hai Duong province remains Stage 2 – Localized community transmission: cases with unknown/ unclear epi links. Sporadic cases continue to be reported though with a down trend.
 - ✓ Two provinces are in Stage 1 – Imported transmission (Ha Noi and Hai Phong): cases reported in these provinces were imported from either Hai Duong or Quang Ninh, so far, transmission is still within 3 generations, and have not passed at least 28 days without new cases reported. There are no clear signals of locally acquired transmission.
 - ✓ 10 remaining provinces are in Stage 0 – No transmission: no additional cases reported for at least 28 days and no clear signals of community transmission.
- As of 14 Mar, **Viet Nam has reported 2,554 laboratory confirmed cases including 35 deaths (PFC 1.4%); 2,086 cases (81.7%) have recovered.**
- Currently **40,631 people are under quarantine** of which 498 are quarantine at HCFs, 17,222 are in centralized quarantine (including hotels), and 22,911 are under home quarantine.

Other ongoing response includes:

- Right after receiving a **notification from Japan on 25 Jan of the case from Viet Nam** –detected upon arrival in Osaka – with the **same variant found in the UK**, the Government has been taking **vigorous actions**. **All public health** measures being implemented this time are one-level higher (i.e. taking no-risk approach).
- Fast and vigorous- whole system activated on 27 Jan night: NSC met, VC meetings with 2 provinces
- Deputy Prime Minister (DPM), Chairman of NSC, ordered Hai Duong Province to stay focused to stamp out the outbreak within ten days, emphasizing that **every minute counts**.
- Rapid case investigation with fast, thorough contact tracing (up to F3 & F4 of two index cases)
- Sent national expert teams to Hai Duong, Quang Ninh, Dien Bien, Gia Lai to support local response.
- A series of Government directions released, such as MOH telegrams, Prime Minister's Directive No.05; also at subnational levels.
- Targeted community lockdown based on outbreak situation and risk assessment.
- Reactivated technical teams at central level (contact tracing, information & rapid response, communication) to coordinate and support local response.
- Reactivated/ strengthened **community COVID teams** at all levels.
- Enhancing surveillance and testing, even up to F3 contacts in hotspots, test all presented with fever and cough
 - ✓ Mass testing approach applied using different strategies including targeted testing of higher risk groups as well as random testing of households and inpatients. Wide testing aimed at active and early identification of possible cases. There are currently 152 laboratories capable of detecting SARS-CoV-2 by Realtime RT-PCR technique with 98 designated as confirmatory laboratories. Testing capacity can be increased with guidance issued on pooling of lower risk specimens, up to 10 specimens may be pooled.
 - ✓ Full genome sequencing of the initial cases was conducted. NIHE reported the result of samples of Hai Duong COVID-19 cases, as SARS-CoV-2 B.1.17 variants. Hospital of Tropical Diseases (HTD) in HCMC also reported the result of a case whole travelled from Hai Duong to HCMC as SARS-CoV-2 B.1.17 variants.
 - ✓ Full genome sequencing of the Tan Son Nhat (TSN) airport HCMC determined as PANGO lineage A.23.1. The virus associated with this cluster does not have the E484K mutation reported in a sub-set of A.23.1 detected in the UK.

¹ Transmission stage assessment continues to be adjusted based on evolving outbreak situation at subnational level.

- ✓ Full genome sequencing of the Japanese deceased case in Ha Noi revealed variant B.1.429 (otherwise known as CAL.20C) which has been circulating primarily in the US since late 2020 but has been detected globally in early 2021. So far there is no clear evidence of an increased or decreased transmissibility, virulence or severity of infection associated with the B.1.429. It is the first time in Viet Nam, to date.
- Enhancing surveillance and testing – more than 1,186,000 samples have been collected for testing in the 13 affected provinces. An onsite laboratory in Hai Duong has been established with initial capacity of testing of about 5,000 tests per day and can be increased as needed. Three changes have been introduced during first week of Feb in the outbreak response strategy which included: i) Pool sampling; ii) Quarantine guidelines for under 5 years old children; and iii) Maintaining the flow of goods in the COVID-19 context.
- After two weeks applied a 21-day quarantine and community lockdown, MOH has amended the quarantine period, back to a 14-day duration as before, given the latest scientific evidence on the new variants.
- Field hospitals were established: 3 in Hai Duong, 1 each in Quang Ninh, Dien Bien and Gia Lai, ready to cater for increased number of cases. On 28 Feb, field hospital #1 in Hai Duong has been disbanded.
- **The ministry of Health issued the Resolution No 1215/ QLD-KD dated 17 Feb 2021 to approve importation of first 200,000 doses of AstraZeneca Covid-19 vaccine for emergency use.**
- **The Government issued the Resolution No. 21/NQ-CP dated 26 Feb 2021 on COVID-19 vaccine procurement and deployment**, signed by the Prime Minister. The resolution highlights the priority groups and provinces for vaccination; specifies budget source and mechanism; and guides implementation.
- Timely and transparent communication and risk communication activities.

Update from past 7 days:

- **From 8-14 Mar 2021, 42 new laboratory-confirmed cases of COVID-19 have been reported (decrease 34.4% compared to last week);** of those **21.4% were locally transmitted** cases, and without any additional deaths. There were 33 imported cases during the week of those 11 cases were Vietnamese citizens returning from UAE.
- During the week, number of RT-PCR conducted daily was approximately 12,000 tests, bringing **total number of tests conducted to 2,684,679 since the beginning of the outbreak.**
- **As of 14 Mar 2021**, Viet Nam has reported a total of **2,554 laboratory confirmed cases** of COVID-19, including 40 health care workers (HCWs), from **48 out of 63 cities/ provinces** in country, including **35 deaths** (PFC \approx 1.4%) (see *Figure 4*). All the 35 death cases were related to the community outbreak in Da Nang (31 from Da Nang, 3 from Quang Nam and 1 from Quang Tri); most of them had long-term chronic diseases and comorbidities.
 - Of the 2,554 cases, 993 cases (38.9%) are imported. About 93.2% are Vietnamese (see *Figure 3*).
 - The ages of cases range from 2 months to 100 years old. About 59.6% of all cases are in the 30-69 years old group, 3.2% above 70 years old, and the remaining 37.2% under 30 years old. The proportion of male vs female is around 49.2% vs 50.8%. (See *Table 1*).
 - Approx. 182 clusters have been recorded including from households, schools, workplaces, bus/train stations and 25 clusters are currently active which are relate to the ongoing community outbreaks in 13 cities/ provinces.
- 10 Mar: IHR/NFPs of Viet Nam and Australia have been in communication regarding the 2 mothers and children of Vietnamese in Le Chan district, Hai Phong tested positive when arrived in Australia from Noi Bai on 28 Feb. The result of investigation detected that the source of transmission is not from Vietnam.
- **Other Non-pharmaceutical interventions (NPIs)**
 - During last week, more lockdowns, social distancing have been lifted including in public transports, universities reopened; nonessential services resumed in various provinces/ areas including Ha Noi, HCMC, Hai Phong, Hai Duong and Gia Lai.
 - *Details before 7 March: refer to previous reports*
- **Incoming and exit travellers:** from 6 PM 8 Mar – 6 PM 13 Mar
 - Through ground crossing:
 - Viet Nam -China: Immigrants: 11,685(11,515 legal, 170 illegal), emigrants: 10,877

- Viet Nam- Laos: Immigrants: 6,940 (6,902 legal, 38 illegal), emigrants: 7,264
- Viet Nam -Cambodia: Immigrants: 248 (142 legal, 106 illegal), emigrants: 218
- Through airlines:
 - Foreigners: Immigrants: 3,081; emigrants: 1,606
 - Vietnamese: Immigrants: 2,713; emigrants: 3,561
 - Number of immigrants and emigrants some main countries
 - ✓ ROK: immigrants: 1,271; emigrants: 530
 - ✓ Japan: immigrants: 170; emigrants: 129
 - ✓ USA: immigrants: 65, emigrants: 69
 - ✓ Schengen countries: immigrants: 122; emigrants: 99

○ **Case management:**

- **2,086 cases (81.7%) have recovered.** One patient (case #1823) is critical condition (in the current outbreak). Case #1536 (previously reported) has improved and discontinued ECMO.
- **Majority of the cases either asymptomatic (85.4%) or with mild symptoms (10.8%),** the remaining 17 cases (3.8%) are severe or with severe prognosis and one case in a critical condition.
- MoH updated the guideline on health care for COVID-19 patient in HCFs

○ **Numbers of quarantine:**

- **A total of approximately 40,631 people are currently placed under quarantine.** Of those 498 were quarantined in HCFs; 17,222 were centralized quarantined; and 22,911 were under self-/home quarantine.
- **Cumulatively:** from beginning of the outbreak to date, a total of **more than 14.3 million people have been placed under quarantine.**

WHO supported activities & collaborative activities under vaccination:

- Joined monitoring of the first day of COVID-19 vaccination at NHTD No.2
- Trainings for AEFI causality assessment committee members at provincial level (4 training courses in different areas: 2 in North, 1 in Central/Highland, 1 in South): ongoing
- Provision on 1) WHO training materials for health workers translated in Vietnamese (also uploaded to Open WHO), 2) WHO guidance on monitoring and reporting, logistics, 3) Product details on Janssen vaccine that was in the EUL on 12 Mar
- On 12 March, technical coordination meeting was conducted with in-country partners and donors co-organized with UNICEF: update on COVID-19 vaccination (global and country) & map-out the potential supporting areas

Risk communication

- A Communications Plan for COVID-19 Vaccination has been developed and approved. A supplemental plan for communicating adverse events following immunization (AEFI) is being developed by Ministry of Health with support from partners such as WHO and UNICEF.
- Development partners' briefing was held on 12 March to discuss support for vaccine roll-out, including for communication.
- Communication on prevention messages continues on multiple platforms, including social media ads
- A short video explaining mild side effects to be expected after receiving vaccine is being adapted/translated to Vietnamese for sharing this week

○ **Media monitoring and social listening highlights**

- Following the start of the vaccination, there was a significant increase in discussion in all media platforms on the vaccine, with optimism for the roll-out and being cautious with some reports of mild side effects in a number of those vaccinated.



Other key updates (in past 7 days) – no updates

- **The first batch of 117,600 doses of Oxford/AstraZeneca's Covid-19 vaccine arrived in HCMC's Tan Son Nhat Airport on 24 Feb.** The containers, delivered on a Korean Air flight KE351 (using Boeing cargo plane B77L) from Seoul, South Korea (SK Bioscience is one of the three global producers of the AstraZeneca vaccines), were disinfected then transported to specialised cold chain storage facility run by Vietnam Vaccine Joint Stock Company (VNVN). It has been permitted by the Ministry of Health to receive, preserve and distribute COVID-19 vaccines across the country.
- **24 Feb - MOH has met with WHO and UNICEF Viet Nam to discuss about vaccine rollout plan.**
- **Rollout plan - MOH revealed its vaccine rollout plan, designating 11 priority groups to be given the first jabs:** medical workers; people directly involved anti-pandemic efforts (COVID-19 prevention and control steering committees of all levels, quarantine facility staff, reporters, etc.); diplomats, customs officers and people working entry and exit procedures; military personnel; public security forces; teachers; elders above 65 years old; essential service workers (aviation, transport, tourism staff, utility workers, etc.); people with chronic health issues; people who want to study or work overseas; and people in virus-hit regions.

Recent and upcoming Events and Priorities

- WHO continues supporting MOH in various technical areas, providing technical advice and scientific updates especially with relates to the mutated variants; supporting ongoing efforts on COVID-19 vaccine development and vaccine deployment and distribution plans, effective communication (e.g. reinforcement of preventive measures communications through social media such as reactivation of Facebook ads, produced social media cards on laboratory testing)
- Ongoing support is provided to:
 - ✓ Development of guideline on Ship Sanitation and Disinfection
 - ✓ Finalization of Procedures for Management of incoming travellers in the context of COVID-19
 - ✓ Conducting IAR for COVID-19 preparedness and response in Central-highland region
 - ✓ Conducting RA for COVID-19 in community with PI NT
 - ✓ Delivering training courses on surveillance, outbreak investigation, contact tracing and quarantine operation for selected higher risk provinces in Northern and Central regions (with NIHE and PI NT)
 - ✓ Dissemination and Training courses on the newly issued Set of framework indicators to assess risk of communicable diseases including COVID-19 in three regions (with VIHEMA)
 - ✓ Training course on Case management and IPC for COVID-19 in Hue, etc.
- Working with VAMS to compile provincial request for PPE
- Through support from WPRO, WHO CO handed over 25,800 specimen collection kits to NIHE, to support ongoing outbreak response.
- The MOH has requested support for approximately 200,000 primers and probes and 300,000 further specimen collection kits. WHO CO remain working with WPRO and HQ on this request, which shipments expected in coming weeks.

Transmission Stage Assessment

Overall assessment – the recent community outbreaks emerged after 57 days since the last locally transmitted case was reported. Between 25 Jan and 14 March, **901 cases have been reported from 13 cities/ provinces**. Even though majority of cases were linked to the two initial outbreak spots in Hai Duong and Quang Ninh, there were cases with unknown or unclear epidemiological links reported especially in Hai Duong, HCMC, Gia Lai and Ha Noi. **Hai Duong remains the only province continues to have cases reported during past weeks** though daily number declined, but **no clear signals of a large-scale community transmission** observed. Ten out of 12 remaining provinces had no new cases

reported in at least past one month. Hai Phong reported the last case 20 days ago. By 14 Mar, most lockdown and social distancing measures have been lifted; schools and universities have reopened. **High number of immigrants, both legal (142 people) and illegal (106 people) from Cambodia continue to be recorded across the borders during past week but no one was tested positive with SARS-CoV-2, compared to last week (17 cases).**

Given the continued efforts in enhanced surveillance including border surveillance and testing, contact tracing, additional cases, both from community (especially in Hai Duong) and imported cases (notably through borders with Cambodia) are still expected in coming days.

Sub-national level*

City/ province	No. of cases reported, as of 14 Mar 2021	Transmission Stage Assessment	Notes
Hai Duong	717	2	Basically, under control. Mostly related to POYUN company (79%). Unknown/ unclear epi links cases in other 6 clusters (Chi Linh City, Hai Duong City, Cam Giang, Kim Mon, Ba Sach, Kim Thanh Districts). Source of infection for index case (#1552) remains unknown. During past 7 days, 9 new cases were reported, of those 8 cases were among F1 contacts, already in quarantine and 1 case through community screening in Hai Duong city on 10 March.
Quang Ninh	61	0	Under control. All cases linked with POYUN company or Van Don airport. Source of infection for index case (#1553) remains unknown. No additional cases reported in past 33 days → move back to Stage 0.
HCMC	36	0	Under control. Epi links in Tan Son Nhat airport staff case remains unknown. No additional cases reported in past 36 days → move back to Stage 0.
Ha Noi	34	1	All three clusters with known epi links. Transmission within 3 generations. Source of transmission for the Japanese deceased remains unknown. No additional cases reported in past 27 days . Ongoing monitoring while NPIs gradually being lifted.
Gia Lai	27	0	One case remains with unknow epi links. 13 Mar: social distancing was lifted in the last 2 areas of Ia Pa district and Ayun Pa town. No additional cases reported in past 38 days → move back to Stage 0.
Binh Duong	6	0	All cases linked with Hai Duong. No additional cases reported in past 35 days.
Bac Ninh	5	0	All cases with clear epi links. No new cases reported in past 37 days.
Dien Bien	3	0	All cases with clear epi links. No new cases reported in past 44 days.
Hai Phong	4	1	Case with clear epi links. From 24:00 of 8 Mar – lockdown lifted in Transport hospital in Hai Phong city after 14 days (after 3 cases including 2 nurses were reported which were linked with Cam Giang, Hai Duong). No new cases reported in past 20 days . Still under monitoring.
Hoa Binh	2	0	All cases with clear epi links. No new cases reported in past 49 days.
Hung Yen	3	0	All cases with clear epi links. No new cases reported in past 40 days.
Bac Giang	2	0	All cases with clear epi links. No new cases reported in past 46 days.
Ha Giang	1	0	Case with clear epi links. No new cases reported in past 46 days.
TOTAL	901		

*WHO/WPR Transmission Assessment criteria

- **Stage 0 – No transmission:** No clear signals of transmission for at least 28 days.
- **Stage 1 – Imported transmission:** Recent transmission is imported from another sub-national or international area or is linked to such importation within 3 generations, no clear signals of locally acquired transmission.
- **Stage 2 – Localized community transmission:** recent locally acquired and localized to place(s), and there are no clear signals of large-scale community transmission.
- **Stage 3 – Large-scale community transmission:** recent transmission is locally acquired and not specific to place(s) or population sub-group(s). The risk of infection for most people in this area is high

Assessment done by WHO Viet Nam with concurrence from the Ministry of Health of Viet Nam.

Epidemiology

Epi Update COVID-19

Tests	Cases	Deaths	ICU Admissions
85,926	42	0	0
NAT Tests past 7 days (-0.6% 7-day)	New cases past 7 days (-34.4% 7-day)	Deaths past 7 days (-% 7-day)	ICU Admissions past 7 days (+0 cases 7-day)
2,684,678	2,554	35	60 (TBC)
Cumulative NAT Tests	Cumulative Cases	Cumulative Deaths	Cumulative ICU Admissions

19%	326	25 (TBU)	0
Imported Cases in past 28 days (62)	Cases in past 28 days with no link (TBU)	Active Clusters	Active clusters with >3 generations

Health Service Provision COVID-19

Most of national hospital staff	0	42	371	0 (TBD)
Health care workers trained in COVID19 Case Management	Healthcare worker cases reported past week	Hospitals admitting COVID-19 patients past week	ICU beds for COVID-19 patients (estimated in 6 currently affected provinces) (out of approx. 3,500 beds nationwide)	Non-ICU Hospital beds for COVID-19 patients (Six field hospitals established: 3 in Hai Duong, 1 each in Quang Ninh, Dien Bien, Gia Lai.
				28 Feb - Hai Duong field hospital #1 disbanded)

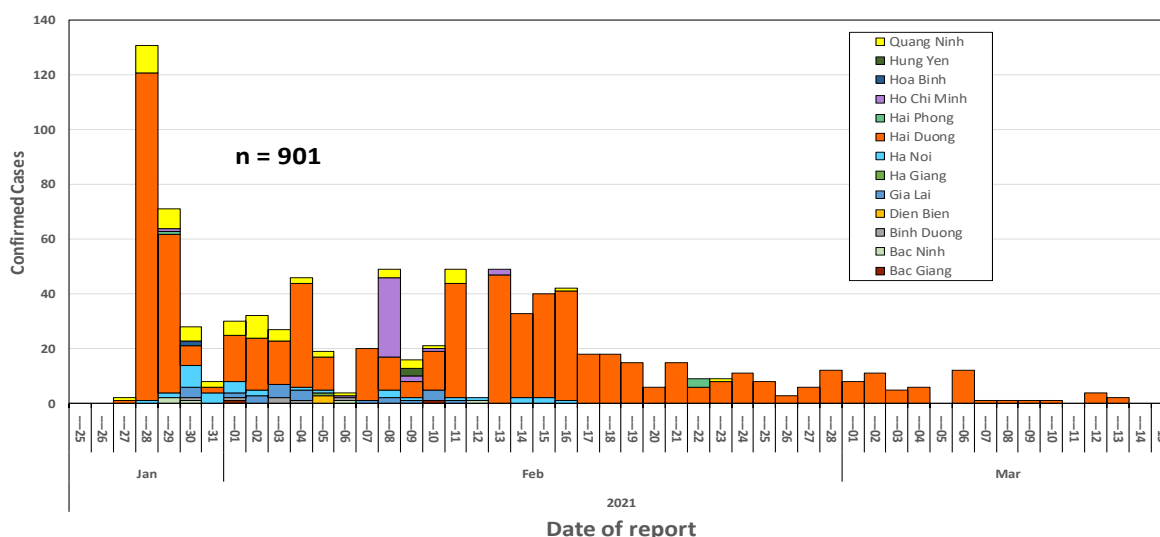


Figure 1. Epidemic curve of COVID-19 laboratory confirmed cases by date of reporting, current outbreak, Viet Nam, as of 14 Mar 2021

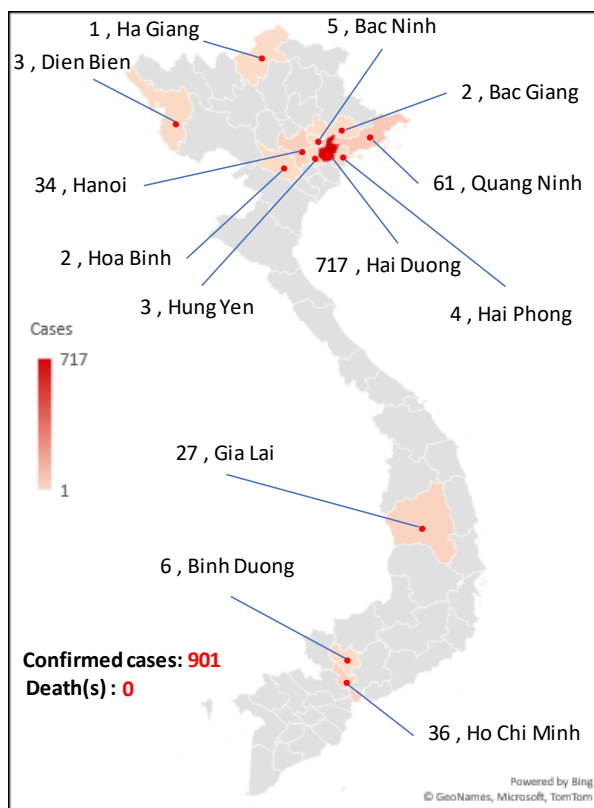


Figure 2. Distribution of COVID-19 laboratory confirmed cases by place of detection, current outbreak, Viet Nam, as of 14 Mar 2021

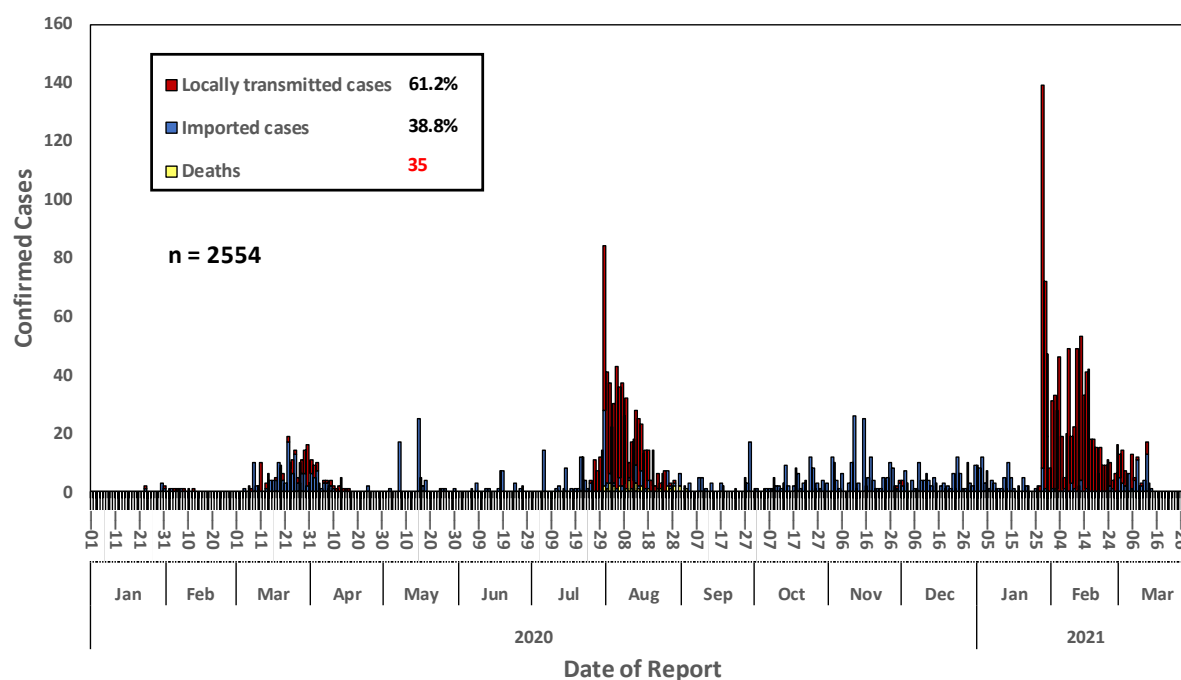


Figure 3. Epidemic curve of COVID-19 laboratory confirmed cases, Viet Nam, by date of reporting

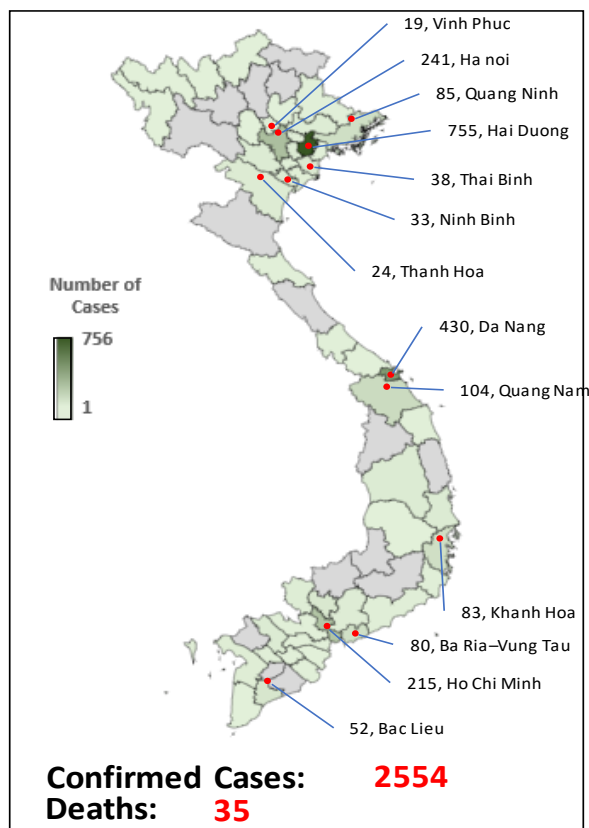


Figure 4. Distribution of cumulative COVID-19 laboratory confirmed cases by place of detection, Viet Nam

Age Group	Female		Male	
	Cases	Deaths	Cases	Deaths
0-9	62 (0)	0 (0)	57 (0)	0 (0)
10-19	76 (0)	0 (0)	74 (0)	0 (0)
20-29	323 (6)	2 (0)	360 (6)	0 (0)
30-39	373 (11)	1 (0)	338 (6)	1 (0)
40-49	167 (3)	1 (0)	167 (3)	0 (0)
50-59	153 (3)	5 (0)	145 (4)	3 (0)
60-69	98 (0)	6 (0)	80 (0)	6 (0)
70-79	30 (0)	2 (0)	23 (0)	1 (0)
80-89	12 (0)	5 (0)	9 (0)	1 (0)
90+	2 (0)	0 (0)	5 (0)	1 (0)
Total	1296 (23)	22 (0)	1258 (19)	13 (0)

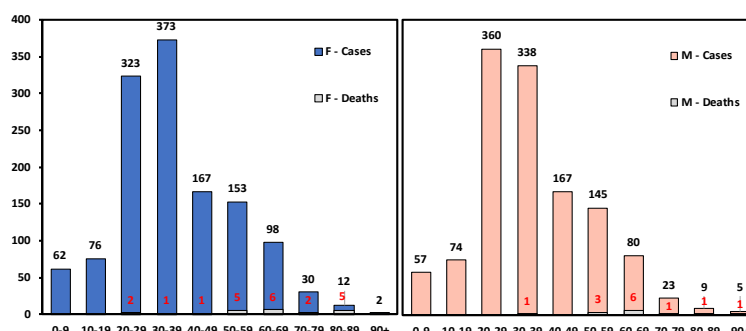


Table 1. Cumulative and new (past 7 days) cases and deaths by age and sex

Strategic Approach –

National and Provincial Public Health Response

In January 2020, the Government of Viet Nam rapidly issued the first National Response Plan and assembled the National Steering Committee (NSC) to implement this plan. The NSC is central to the command and control governance of the COVID-19 response. The Committee is chaired by Deputy Prime Minister Vu Duc Dam with high-level representation from 14 Ministries and sectors, the National Assembly, media, and information technology companies, and oversees four sub-committees in technical and logistic areas. The plan outlines clear roles and responsibilities of each sector and levels of authority – central, provincial, district, and commune. The rapid mobilization of financial and human resources allowed the Prime Minister and Deputy Prime Minister to lead a whole-of-society approach, based on the Prime Minister's Directive No. 05/CT-TTg, toward combating COVID-19, with the principle of “protecting people's health first.” The Government's commitment had remained the same, even one-level higher given the recent important events including Vietnamese New Year, the 13th National Party Congress, ongoing national efforts to achieve dual objectives of disease control and economic development, in the response to the current community outbreaks initiated from Hai Duong and Quang Ninh provinces. This has resulted in a quick containment of the outbreak across the 13 affected cities/ provinces after just more than one month (from end of Jan to early Mar). The country is now moving actively with COVID-19 procurement and deployment plan with a careful consultation and planning with support from WHO, UNICEF and other relevant partners. The biggest ever COVID-19 vaccination campaign which commenced on 8 March 2021 is now moving forward.

Strategic Approach to COVID-19 Prevention, Detection and Control

Viet Nam has successfully and rapidly implemented necessary COVID-19 prevention, detection, and control activities under the strong leadership of the Government and effective multi-sectoral coordination and collaboration. There have been persistent and strict applications of key outbreak response measures: early detection – testing and treatment – contact tracing – isolation/quarantine, along with strategic risk communications. This was evident during the first phase of the outbreak response and once again reconfirmed in the response to the latest resurgence of cases in the community related to Da Nang and HCMC events, and for the latest community outbreaks that affected 13 cities/ provinces (as of 14 March 2021) – which has been brought under control. To support Government efforts with early detection and control further community transmission, WHO continues to provide additional laboratory test kits and reagents for mass and targeted testing, especially in the affected provinces. WHO Country Office has also been working with UNICEF to support the vaccine deployment plan including development of guidance, training, logistics and vaccine safety (AEFI) surveillance. For years, WHO has been supporting Viet Nam in building and strengthening the capacities for managing disease outbreaks and public health emergencies, as required by the International Health Regulations (IHR) (2005). Guided by the APSED III, Viet Nam has made significant progress in enhancing capacity in the required technical areas and all the years of investment are reflected in the country's ongoing response to COVID-19.

Best Practice/Lessons Learned - unchanged

The Response Enabling Factors and Adjustments to the Response

- Strong government leadership with effective multi-sectoral collaboration and coordination and successful mobilization of national resources using a whole-of-society approach.
- Early activation of a strong response system, including surveillance and risk assessment, laboratory, clinical management and IPC, and risk communication, which enabled Viet Nam's successful control of COVID-19.
- WHO supports long-term country investment to strengthen the health emergency response after previous epidemics, and is providing technical support in necessary areas, including the continuation of essential public health services.



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Coronavirus Disease 2019 (COVID-19) Situation Report #33

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Non-Pharmaceutical Interventions (NPI)

Narrative Non-Pharmaceutical Interventions

Viet Nam instituted a gradual roll-out of comprehensive NPIs based on the evolving context/evidence, thus they did not come as a “shock” to the public. Such interventions were implemented along with strong economic relief efforts, thereby minimizing the economic impact to businesses and households, especially vulnerable populations, during these uncertain times. As the global situation of COVID-19 has continued to evolve with complexity, the country borders have basically remained close except for specific circumstances. This whole-of-society approach is being one more time well reflected in the ongoing response to community outbreaks across the country under a strong leadership and guidance of GoV, NSC and MOH. (**Latest updates** – see also Key updates section on pages 1 to 4).