ABSTRACT
Transmission of COVID-19 cases has been found in clusters and sporadic form in different parts of Nepal, which swiftly strained the healthcare system. Contact tracing is a strategy to prevent further transmission of the COVID-19. It reduces the overwhelming burden in a health system. Academic institutions are the best alternative in contact tracing, not only in terms of task shifting but their training in epidemiology and research also best suits them. Besides, they can also train the health workers assigned for contact tracing in rural and urban settings. Multi-sectoral involvement from academia, community health workers, and effective information flow are instrumental for effective contact tracing in resource-limited settings.

CONTACT TRACING: IN THE PRESENT CONTEXT AND ITS ADEQUACY
A Contact tracing in the COVID-19 pandemic is a systematic process of identifying, assessing, and managing people exposed to SARS-CoV-2 to prevent further transmission. It is one of the pivotal strategies to prevent the spread of SARS-CoV-2. Government of Nepal (GON), Ministry of Health and Population (MOHP), has developed COVID-19 Case investigation and contact tracing teams (CICTTs) mobilization and management guidelines. The CICTTs are formed and mobilized by every local-level authority, led by public health professionals, and composed of diverse skill sets of human resources such as paramedic/nurse, laboratory workers, and representatives from other partner organizations. Local-level CICTS are responsible for contact tracing of close and casual contact and have to fill necessary contact tracing forms developed by the Epidemiology and Disease Control Division (EDCD). CICTTs work in close coordination with local level Rapid Response Teams in identifying contact people within line listing and do an essential follow up in 7 days, and report to inform public health actions. Contact tracing in rural areas is, to some extent working. However, incomplete information on how many contact tracings of confirmed cases was done...
During a pandemic, the health system has been overwhelmed by the rapid surge of cases and challenging to perform effective contact tracing. First, a health science academic institution could be an appropriate alternative for contact tracing. GON can employ public health faculties and students from academic institutions with adequate financial and logistics supplies for contact tracing in urban areas. Academic institutions equipped with professional faculties and health science students can be instrumental in tracing contacts during human resources shortage. Their training in research and epidemiology best suits them to do this task more effectively and efficiently. Second, in rural settings, contact tracing workforce may not be limited to health professionals. Contact tracing team consists of community-level health workers, teachers, and local club members who could be employed, followed by training, and supply of logistic and financial support. These two strategies reduce the workloads of contact tracing on frontline healthcare workers. This shifting of task from health worker to the academic community not only provides health worker more time to deliver needful clinical care but also a division of labor and efficient use of available resources. Real-time information exchange, advice and opinions between experts or officials and people on contact tracings are instrumental for combating pandemics. Effective communication of public health risk to the general public before, during, and after the COVID-19 outbreak would increase public trust and stewardship in health.

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