Ministry of Health and Social Services
Republic of Namibia

NAMIBIA COVID-19 SITUATION REPORT NO. 50

<table>
<thead>
<tr>
<th>Outbreak Name</th>
<th>COVID-19</th>
<th>Country affected</th>
<th>Namibia</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date &amp; Time of report</td>
<td>07 May 2020 20:34</td>
<td>Investigation start date</td>
<td>13 March 2020</td>
</tr>
<tr>
<td>Prepared by</td>
<td>Surveillance Team</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Date of outbreak declaration in Namibia: 14 March 2020.

1. SITUATION UPDATE / HIGHLIGHTS

- No new confirmed case was reported in the last 33 days (5 April – 7 May 2020).
- Cumulatively, 16 confirmed cases have been reported in the country, to date.
- Of the 16 confirmed cases, nine (9) have recovered
- Supervised quarantine for all people arriving from abroad, for 14 days is ongoing.
- Stage 1 of the national lockdown ended on 4 May 2020, and stage 2 is ongoing until 2 June 2020;
  - Wearing a mask in public is mandatory
  - All borders will remain closed except for essential/critical services and humanitarian support to the response.
  - All other prevention measures are applicable to the entire country
2. BACKGROUND

Description of the cases

- **Index cases:** Two confirmed cases of COVID-19 were reported in Windhoek district on 13 March 2020. The married couple; a 35-year-old male and a 25-year-old female, arrived from Madrid, Spain on 11 March 2020.

- Total number of imported cases currently stands at 13 while 3 cases are local transmissions.

- There is no evidence of community transmission in the country at the moment.

<table>
<thead>
<tr>
<th>Reporting region</th>
<th>Total Cases</th>
<th>New cases</th>
<th>Active cases</th>
<th>Recovered</th>
<th>Death</th>
</tr>
</thead>
<tbody>
<tr>
<td>Khomas</td>
<td>11</td>
<td>0</td>
<td>3</td>
<td>8</td>
<td>0</td>
</tr>
<tr>
<td>//Karas</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Erongo</td>
<td>4</td>
<td>0</td>
<td>3</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>16</td>
<td>0</td>
<td>7</td>
<td>9</td>
<td>0</td>
</tr>
</tbody>
</table>

**Table 1: Confirmed cases by region as of 07 May 2020**

*Figure 1: Epi-curve for COVID-19 confirmed cases in Namibia as of 07 May 2020*
Figure 2: Age and sex distribution for COVID-19 confirmed cases in Namibia as of 07 May 2020

Figure 3: Suspected and confirmed COVID-19 cases in Namibia per District, 07 May 2020
3. PUBLIC HEALTH ACTION / RESPONSE INTERVENTIONS
EPIDEMIOLOGY & SURVEILLANCE

- Case definitions as of 20 March 2020:
  
  Suspect case:
  A. A patient with acute respiratory illness (fever and at least one sign/symptom of
  respiratory disease, e.g., cough, shortness of breath), AND a history of travel to or
  residence in a location reporting community transmission of COVID-19 disease
  during the 14 days prior to symptom onset;
  
  OR

  B. A patient with any acute respiratory illness AND having been in contact with a
  confirmed or probable COVID-19 case in the last 14 days prior to symptom
  onset;
  
  OR

  C. A patient with severe acute respiratory illness (fever and at least one
  sign/symptom of respiratory disease, e.g., cough, shortness of breath; AND
  requiring hospitalization) AND in the absence of an alternative diagnosis that
  fully explains the clinical presentation.

Probable case: A suspect case for whom testing for COVID-19 is inconclusive.
Inconclusive being the result of the test reported by the laboratory

Confirmed case: A person with laboratory confirmation of COVID-19 infection,
irrespective of clinical signs and symptoms

Active surveillance working case definition as of 20 April 2020
A patient diagnosed with Upper/Lower Respiratory Infection (Mild or Severe)
Presenting any of the following signs and symptoms: cough, sore throat, fever,
chills, myalgia/body pains or shortness of breath in the past 7 days.

- Surveillance activities
  
  - Daily pillar and intra-pillar discussions are held to deliberate daily progress,
gaps and way forward;
  
  - Call centre continue operations for 24 hours every day.
- Data entry is ongoing and real-time data dashboard has been completed and ready to be launched soon.
- Active case search in all regions aimed at looking for possible community transmission is ongoing.
- Weekly ZOOM sessions with regional teams set to be held every Thursday, last meeting held on 07.05.2020
- An online training part of the Integrated training was conducted with participants ranging between 93-113 participants per day with the support of WHO and all areas were covered except RRT which will be completed next week
- Contact tracing is ongoing (see table 2) and all contacts will be tested.
- People under mandatory quarantine are being monitored daily (see table 3) and will be tested on day 12 before release on day 15 if they test negative.

Contact tracing Summary

<table>
<thead>
<tr>
<th>Variables</th>
<th>Contact risk level</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>High</td>
</tr>
<tr>
<td>Total Number of contacts listed (potential)</td>
<td>68</td>
</tr>
<tr>
<td>Total Number of contacts identified</td>
<td>68</td>
</tr>
<tr>
<td>Total Number of active contacts (being followed)</td>
<td>1</td>
</tr>
<tr>
<td>Number of contacts monitored/followed in the last 24hrs</td>
<td>1</td>
</tr>
<tr>
<td>Total number of Contacts completed 14-days follow up</td>
<td>64</td>
</tr>
</tbody>
</table>
| Total Number of contacts that developed signs 
  & symptoms                                         | 25     | 8      | 7      | 40     |
| Total Number of contacts tested positive             | 3      | 1      | 0      | 4      |
| *Total Number of contacts tested without signs 
  and symptoms                                        | 20     | 5      | 27     | 52     |
| © Total Number of contacts lost to follow up         | 0      | 2      | 5      | 7      |
| Total number of Contacts never reached               | 0      | 0      | 16     | 16     |

*Number of contacts without signs & symptoms tested. One tested positive.
© Seven contacts are lost to follow up, all are non-Namibians and have travelled back to their countries of origin.
Table 3: Number of people in mandatory quarantine facilities as of 07.05.2020

<table>
<thead>
<tr>
<th>Region</th>
<th>Newly quarantined 24hrs</th>
<th>Cumulative number of people</th>
<th>Number of people discharged</th>
<th>Number of people in quarantine</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kunene</td>
<td>0</td>
<td>22</td>
<td>0</td>
<td>22</td>
</tr>
<tr>
<td>Omaheke</td>
<td>0</td>
<td>20</td>
<td>0</td>
<td>20</td>
</tr>
<tr>
<td>Kavango</td>
<td>0</td>
<td>4</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Omusati</td>
<td>1</td>
<td>57</td>
<td>6</td>
<td>51</td>
</tr>
<tr>
<td>Oshana</td>
<td>0</td>
<td>6</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td>Ohangwena</td>
<td>73</td>
<td>131</td>
<td>34</td>
<td>77</td>
</tr>
<tr>
<td>Hardap</td>
<td>0</td>
<td>40</td>
<td>40</td>
<td>0</td>
</tr>
<tr>
<td>Otjozondjupa</td>
<td>0</td>
<td>168</td>
<td>100</td>
<td>68</td>
</tr>
<tr>
<td>Khomas</td>
<td>1</td>
<td>221</td>
<td>151</td>
<td>70</td>
</tr>
<tr>
<td>Zambezi</td>
<td>13</td>
<td>138</td>
<td>108</td>
<td>30</td>
</tr>
<tr>
<td>//Karas</td>
<td>0</td>
<td>109</td>
<td>93</td>
<td>16</td>
</tr>
<tr>
<td>Erongo</td>
<td>0</td>
<td>35</td>
<td>35</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>88</strong></td>
<td><strong>951</strong></td>
<td><strong>591</strong></td>
<td><strong>360</strong></td>
</tr>
</tbody>
</table>

LABORATORY INVESTIGATIONS

- As of 07 May 2020, 1311 COVID-19 specimens were tested in the two laboratories (NIP and Path Care) as per table 4. below:

Table 4: COVID-19 specimens recorded at NIP and Path care Laboratories as of 07.05.2020

<table>
<thead>
<tr>
<th></th>
<th>Laboratory</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>NIP</td>
<td>Path care</td>
</tr>
<tr>
<td><strong>Total sample received by the Laboratory</strong></td>
<td>1165</td>
<td>282</td>
</tr>
<tr>
<td><strong>Total sample tested</strong></td>
<td>1034</td>
<td>277</td>
</tr>
<tr>
<td>Total results received</td>
<td>1033</td>
<td>277</td>
</tr>
<tr>
<td>Total sample re-tested</td>
<td>90</td>
<td>1</td>
</tr>
<tr>
<td>Total results positive</td>
<td>9</td>
<td>6</td>
</tr>
<tr>
<td>Total results negative</td>
<td>1024</td>
<td>271</td>
</tr>
<tr>
<td>Total sample discarded</td>
<td>41</td>
<td>4</td>
</tr>
<tr>
<td>Total results pending</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Total results inconclusive/indeterminate</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>@Total new suspected cases in last 24 hours</td>
<td>84</td>
<td>35</td>
</tr>
</tbody>
</table>

*1 Patient specimen collected and tested in South Africa, he travelled back before results came out
@ Total new suspected cases laboratory results received within past 24 hours
COORDINATION AND LEADERSHIP:

- Daily feedback meetings between pillar leads, coordination team and Incident manager (IM) ongoing, to share daily accomplishments and to address key challenges.
- Integrated Zoom trainings started on 6 May 2020 and ongoing.

CASE MANAGEMENT

- Out of the 16 cumulative confirmed cases, 9 have recovered, and have been discharged after testing negative twice for COVID-19 at 48 hours’ interval.
- The remaining 7 active cases are in stable condition and are all asymptomatic.
- Conversion of casualty department at Windhoek Central Hospital (WCH) into a highly infectious referral ICU is nearing completion with a total of 8 beds.
- Construction of WCH isolation facility complete, installation of oxygen and siphon completed, while interlocks still being installed.
- Katutura State Hospital (KSH) TB ward being re-purposed into a COVID-19 ward. Completion date set for 08 May 2020.
- Pre-fabricated isolation units being constructed in Opuwo, Oshakati, and Rundu.

INFECTION PREVENTION AND CONTROL (IPC)

- Conducted a training on Overview of COVID-19 and IPC for HCWs in Correctional facilities and from Ministry of Defence
- SOP for management and handling of remains of people who die from infectious diseases completed and signed.

LOGISTICS:

- Facilitation of the allocation of quarantine facilities in the country and transportation for discharged people from quarantine facilities is ongoing.
- Provision of commodities’ specifications and verification for procurement is being done regularly.
POINTS OF ENTRY:

- A meeting was held with other stakeholders, after which the SOP for the management and monitoring of trucks and other cross border vehicle drivers was finalized.
- The implementation of the SOP will be enhanced once the Transport Sector directives to combat the spread of COVID-19 has been gazetted.
- Continuing to work on the training content of the planned integrated training for COVID-19 response.
- Screening and inspection of incoming travellers and trucks at points of entry and check points are ongoing

RISK COMMUNICATION AND COMMUNITY ENGAGEMENT:

- The communication hub continues to give updates on COVID-19 and clarify miscommunications on a daily basis.
  - This is done concurrently with the social media updates.
- The Media continue to communicate messages on COVID-19 and the lifting of the lockdown to stage 2.
- The RCCE continues to share messages on COVID-19 prevention measures.

PSYCHOSOCIAL SUPPORT SERVICES:

- The psychosocial support team offered counselling services to 253 persons under quarantine countrywide. Counselling is also provided to 3 COVID-19 confirmed persons and their families.
- A total of 523 persons in need of shelter housed at two sites in Windhoek, while a total of 102 still on the street.
- Provision of health education, psychosocial support services, as well as food at places where persons in need of shelter are placed are ongoing.
- Draft leaflet was developed on messages for gender-based violence, alcohol and drug abuse, suicide prevention and prevention of elder abuse during COVID-19.
- Drafted SOPs: (i) Bereavement amidst COVID-19 finalized; Pre- and Post-testing Counselling; and Psychosocial Support Services to Persons in Quarantine.
4. CHALLENGES

- Inadequate and at some places lack of isolation units at health facilities and at points of entry in the regions.
- Unavailability of swabs, probes and primers for NIP laboratory to start testing for Seasonal Influenza (H1N1) from beginning May 2020.
- Inadequate viral swabs and PPE at different regions such to implement active case search testing.

5. RECOMMENDATIONS

- Establish fully equipped isolation units at health facilities and at some points of entry in the regions.
- NIP to fast track procurement process laboratory testing kits (swabs, probes and primers) for Seasonal Influenza (H1N1) testing.
- IPC and logistics pillar to continue maintaining the procurement and supplies of sufficient PPE to the regions to ensure response is not interrupted.

Approved:  
[Signature]

Incident Manager  
Date: 07.05.2020

[Signature]  
Secretariat