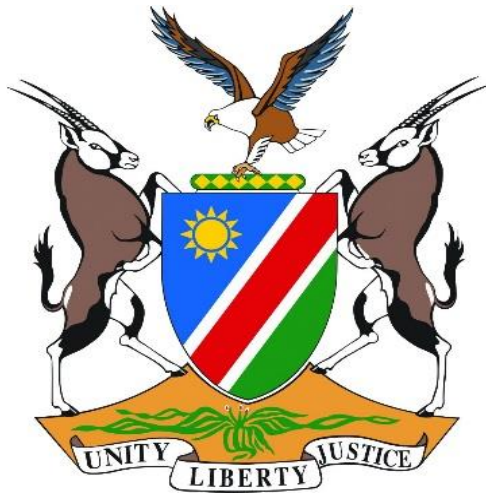


**REPUBLIC OF NAMIBIA**



**MINISTRY OF HEALTH AND SOCIAL SERVICES**

**STATEMENT BY DR. KALUMBI SHANGULA, MP, MINISTER OF HEALTH AND  
SOCIAL SERVICES ON OCCASION OF THE 33<sup>rd</sup> COVID-19 PUBLIC BRIEFING**

13 August 2021

**STATE HOUSE  
WINDHOEK**  
*\*Checked Against Delivery*

Your Excellency, Dr. Hage G. Geingob, President of the Republic of Namibia

Your Excellency, Dr. Nangolo Mbumba, Vice President

Rt. Hon Prime Minister, Dr. Saara Kuugongelwa-Amadhila

Honourable Ministers

Senior Officials

Members of the Media

Ladies and Gentlemen

1. Namibia is steadily emerging from one of the most devastating periods in our national COVID-19 preparedness and response. The months of June and July have exacted a heavy toll on our country in terms of persons hospitalized with severe and critical illnesses due to COVID-19 infections as well as in terms of lives lost. It is encouraging that we are starting to observe what I consider as the positive impacts of the multi-layered interventions, in the form of both public health measures and clinical interventions that have been instituted and implemented to fight the pandemic.
2. Namibia's COVID-19 epidemiological situation has significantly improved in the last weeks with the number of new infections, hospitalization and deaths showing a progressive decline, especially in the last twelve days. Following the implementation of the current regulations, from 1 August 2021 to 12 August 2021, a total of 2 812 new confirmed cases were reported, a reduction of 52% as compared to the twelve days prior between 20 July - 31 July 2021, where 5 847 new confirmed cases were reported. Average cases per day was 234 cases between 1-12 August 2021 while between 20-31 July it was 487 cases per day, this is a twofold decline. There was a day when we recorded a daily infection of less than 100 cases!
3. The positivity ratio has decline by 38% from 24% during 20-31 July 2021 to 15% for the period between 1-12 August 2021. This is a great improvement compared to 44% positive ratio that the country experienced at the peak of the pandemic during the last of week of June 2021. The regional proportion for number of new infection per 100 000 persons continue to show a decline in thirteen regions with an exception of Oshana Region. The basic reproduction ratio continues to decline down to 0.64 as of 12 August 2021.
4. As I stated earlier, the number of COVID-19 infections and related deaths reported daily continues to show a downward trend since the beginning of the current dispensation. Generally, a decline in case-fatality ratio has been observed countrywide in the past two weeks. However, it is of concern that Omaheke Region continues to be an outlier with a reported case fatality of above 6%. The persistently high case fatality rate in Omaheke Region necessitated the Ministry to deploy a team of medical and infection prevention and

control experts to the region at the beginning of August 2021 to assess and ascertain factors contributing to higher deaths in the region. The findings from this visit were presented this week to the technical team and confirmed anecdotal reports of delayed health seeking behaviours, wide use of unauthorized medications notably the animal medicine ivermectin, use of non validated testing kits and use of home remedies for self-treatment as some of the factors related to the high case fatality ratio in the Region. It was observed that patients were likely to turn up late at hospital for appropriate supportive treatment leading to poor prognosis and home deaths. The Ministry is devising strategies to address the situation in Omaheke.

5. Admissions to health facilities due to COVID-19 have significantly reduced in the last 2 weeks. A total of 307 admissions to isolation units were reported on 10<sup>th</sup> August as compared to 597 admissions in mid-July 2021. Similarly, a decline in the number of daily ICUs admission was observed with 39 admissions for 10 August compared to 113 admissions during the last week of July 2021 on a seven-days moving average. Thus, both the metrics tracking isolation and ICUs admission curves show a downward trend.
6. In terms of actual bed occupancy, 10 out of 14 regions are reporting an improvement in general isolation bed occupancy of between 11% and 60% consistently, since the beginning of the current dispensation. Hardap region reported a bed occupancy below 10%, while Kunene, Oshana and Otjozondjupa reported an occupancy of between 61% and 100%.
7. The demand for high care in Khomas, Erongo and Omaheke continues, and stand at between 61% and 100%, while in the Regions of Oshana, Oshikoto, Omusati the figures stand at a low of 11% and a high of 60%. ICUs bed occupancy remains high in Oshana and Khomas. None of the Regions has reached 100% of its ICU bed capacity to date.
8. Additional admission capacity that has been added to existing infrastructure has significantly expanded our ability to admit those who need care. The fully furnished tented COVID-19 ward with the capacity of 70 beds which was erected in Windhoek with the support of the private sector as well as the newly renovated former NIP Building at Katutura Hospital with the capacity of 46, have been completed and are ready for use. As at 12 August 2021, there were no patients admitted in these facilities. Activities to establish and expand further capacity are on-going across the country including a 98-bed Covid-19 facility at Katutura State Hospital.
9. The National Health Emergency Management Committee reviewed the current COVID-19 Public Health Regulations issued in terms of the Public and Environmental Health Act, 2015, which will expire at midnight 14 August 2021. As stated by His Excellency, the

President, I will provide further context on some of the amendments to the current Public Health COVID-19 General Regulations: Public and Environmental Health Act, 2015 for the period of 15 August–15 September 2021. I will now turn to provide technical details on some of the amended Regulations as announced by the President.

### **10.1. Education**

As all schools will operate in a face-to-face mode and at full capacity, they shall comply strictly to established Standard Operating Procedures and all infection prevention and control measures. We continue to encourage vaccination of teachers, other staff members and eligible learners. These are safeguards for safe schools that give confidence to the parents, guardians and school communities that learning and teaching are taking place in a safe environment.

### **10.2. Business**

All recreational places such as night clubs, casinos, gambling houses, betting houses as well as gyms, be allowed to open and allow patrons at half capacity or up to a number not exceeding 50 at a time, subject to strict adherence to preventive measures, mandatory wearing of face masks and maintaining of physical distance of no less than 1.5 meters.

### **10.3. Contact Sport**

Contact sport is allowed with no spectators. Organisers of contact sport activities must, as far as possible, put measures in place to prevent the spread of infections amongst athletes who participate in contact sports. We must avert the risk of athletes contracting infections, and spreading them to their families and communities. This threat and this possibility remain real.

### **10.4. COVID-19 Test results upon entry**

- This provision was misunderstood and applied incorrectly during the current dispensation. I now provide clarity on this matter.
- A person who enters Namibia with a negative SARS-COV-2 PCR test result which is older than 72 hours, calculated from the date when the sample for testing was taken, will be subjected to mandatory supervised quarantine for seven days and COVID-19 testing, at his or her own cost.
- Persons who depart from Namibia with a negative Antigen Rapid Diagnostic test result or a negative PCR test result and re-enter Namibia within seven days from the date the sample was taken for testing are not subject to PCR testing on re-entry into Namibia. This applies also to truck drivers.
- Non-Namibians may enter the country either with a PCR negative result or with a de-isolation certificate without being subjected to further test or quarantine.

## **10.5. COVID-19 Laboratory tests**

We have noted a mushrooming use of unauthorized Ag-RDT test kits in the country. As announced before, only rapid test kits approved and validated may be used. We have received information that testing is taking place in hotel rooms, homes and various other places. This is a point of serious concern. The Ministry of Health and Social Services has established Compliance Committees in all Regions to look into this worrisome situation in order to curb it as it has potential for distorting data and reporting on key indicators of monitoring the pandemic and the country's capacity to combat the spread of the disease. It may also interfere with other pandemic control measures.

For the past five months, the University of Namibia has been conducting Genome Sequencing as part of surveillance efforts to identify emerging Variants of Concern (VOC) in the country. The turn-around time for Genome Sequencing at UNAM is 2 weeks. However, the country continues to send additional specimens for Genome Sequencing to NICD in South Africa due to limited capacity in terms of volumes of specimens that can be processed by UNAM per week.

We observed a decline in the demand for testing at all approved 16 laboratories and none of the laboratories have reported any backlog.

## **11. Mortuaries**

The Government appreciates the support received from the private sector and development cooperation partners who provided refrigerated containers to serve as additional mortuary space to accommodate human remains of those who succumbed to COVID-19. The Ministry has commissioned an assessment of the functionality of all hospital-based mortuaries around the country. The study will be completed soon.

## **12. Oxygen**

We remain grateful to the NCCI and its membership for continued support with the supply of bulk oxygen supply to health facilities, including Katutura, Walvis Bay, and Tsumeb State Hospitals. The manifold system for Oshakati Hospital has been commissioned and preparation for installation of a 20-ton bulk supply is at an advanced stage. The Ministry continues to make use of Oxygen cylinders to complement the existing oxygen generating systems at hospitals. Oxygen cylinders are being distributed on a daily basis to various hospitals. Two hundred and fifty (250) oxygen cylinders were delivered to the Ministry and taken to Afrox for filling. Distribution of these cylinders to the Regions has commenced.

### **13. Vaccination Campaign**

- 13.1. Community engagement and mobilisation has been intensified. A vaccination communication campaign under the theme “*Get vaccinated, help Kick-COVID-19 out of Namibia*” was officially launched by the Right Honorable Prime Minister on 6 of August 2021. The launched campaign included several communication materials including a film show on NBC Television, audio clips, poster and other information materials. In addition, the collaboration with Mobile Telecommunications Limited (MTC) continues. It includes the dissemination of cellular telephone short text messages on COVID-19 and vaccination being sent to subscribers and mobile phone owners.
- 13.2. As at 11 August 2021, a total of 179 324 or 12% percent of the eligible population has received the first dose, while and 65 556 persons or 4.3% of the eligible population are fully vaccinated.
- 13.3. A consignment of 75 000 doses of Astrazeneca donated by the Kingdom of the Netherlands government were delivered to Namibia on 8 August 2021 and have since been distributed to all 14 Regions by 9 August 2021. I want to dispel misinformation about the quality of the donated vaccine. The Ministry is in possession of all relevant documentation for these doses. The batches of the vaccines were cleared by the Dutch government and assessed by the pharmaceutical department of the Ministry of Health before distribution to regions. All batches are within the expiration dates, meaning they have not expired not spoiled. This donation has boosted the vaccination campaign as 68 225 individuals have been waiting to received their outstanding 2<sup>nd</sup> doses of AstraZeneca. As at 11 August 2021 a total of 10 158 2<sup>nd</sup> doses of Astra Zeneca vaccine have been administered between the 9 to the 11 August 2021, bringing the total number of individuals who have received the 2<sup>nd</sup> dose of Astra Zeneca from 6 713 reported on 7 August to 116 871 report on 11 August 2021.
- 13.4. The procurement process of 350 000 additional doses of Sinopharm vaccines from the manufacturer is progressing well and is anticipated to be finalised by next week, latest. Once completed, doses will be delivered in September 2021.
- 13.5. We are in discussions with the COVAX Facility and manufacturer for the delivery of the 302 000 Johnson & Johnson donated by the Government of the United State of America. We will keep the nation informed.
- 13.6. All vaccination sites and mobile teams around the country have sufficient stock of vaccines. I re-iterate that the best vaccine is the vaccine which is available to you now! Let us make use of this opportunity to get vaccinated.

- 13.7. I have shared my experience from the visit two weeks ago to some regions where the uptake was low, a great concern considering the target we need to reach in order to achieve herd immunity. As country, we need to fully vaccinate 1 501 041 persons by March 2022. We have only fully vaccinated 65 556 persons or 4.3% of the eligible population by 11 August 2021. This requires drastic measures and a mind shift to achieve this target and save lives. I always say we have to be ahead of COVID not behind it. We have to be ahead of the upcoming waves and have more people protected not to face the wrath of the pandemic and unnecessary loss of lives as we saw in the past few weeks.
- 13.8. I urge fellow Namibians, that each and every one of us should take the initiative to get vaccinated. Vaccination remains one of the most effective interventions available to fight this pandemic. Let us protect ourselves, our families and our communities now
14. I thank members of the public for your unwavering commitment to the fight against COVID-19. We have come a long way. We have seen some of the worst and devastating moments in our fight against this pandemic. We have also seen the finest hours of the bravery and tenacity of our frontline workers doing their utmost for the best interest of their fellow human beings, demonstrating their selflessness, patriotism and heroism by putting their own line one the live to serve and save others. We will remain forever grateful and indebted to these brave men and women.
15. The positive trajectories and downward trends we are observing now are an indication that the measures we have put in place do work and can indeed have a positive effect on containing the spread of the pandemic. It is this imperative that we, and here I mean all persons who find themselves within the borders of the Republic of Namibia, do what is required of them to help combat the pandemic. This must continue to be a joint effort. As we have always said, our national response and preparedness for COVID-19 is guided and informed by the latest scientific evidence. Today, our President has announced some relaxations to the public health measures. The aim is to save lives and secure livelihoods of our people. In order for the measures to achieve the desired effect, it is important that we do not lose focus. We must continue to comply and behave in a manner that takes us further on the road towards bringing our country to normalcy. This is because COVID-19 is still and remains a serious public health threat in Namibia. We must therefore continue to observe and religiously comply and adhere to the Regulations, that is the only way we will safeguard the lives of our people. Let us not plant the seed for another wave to engulf us.

-END-