



Ministry of Health and Social Services  
Republic of Namibia

Situational Report No.20 for COVID-19 Namibia			
Outbreak Name	<i>COVID-19</i>	Country affected	Namibia
Date & Time of report	<i>07 April 2020 22:00</i>	Investigation start date	13 March 2020
Prepared by	<i>Surveillance Team</i>		

**Date of outbreak declaration in Namibia: 14 March 2020.**

**1. SITUATION UPDATE / HIGHLIGHTS**

- No new confirmed cases were reported today (07 April 2020).
- Cumulatively, 16 confirmed cases have been reported in the country, to date.
- Supervised quarantine for all Namibians arriving from other countries for 14 days is ongoing.
- Partial lockdown of Erongo and Khomas regions took effect on 28 March 2020 till 16 April 2020.
  - Borders have been closed except for essential/critical services and humanitarian support to the response.
  - All others prevention measures are applicable to the entire country

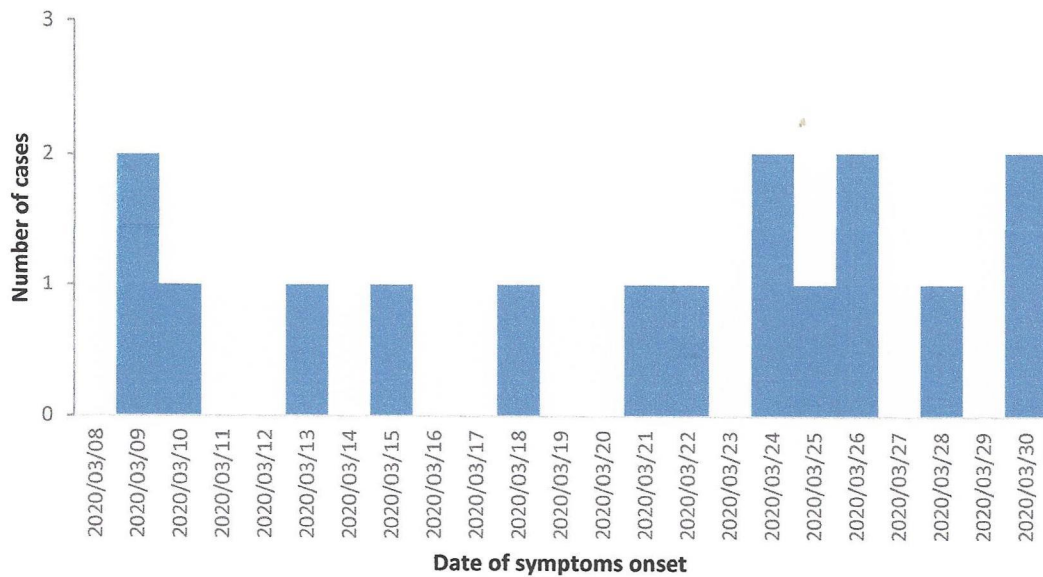
**2. BACKGROUND**

**Description of the latest cases**

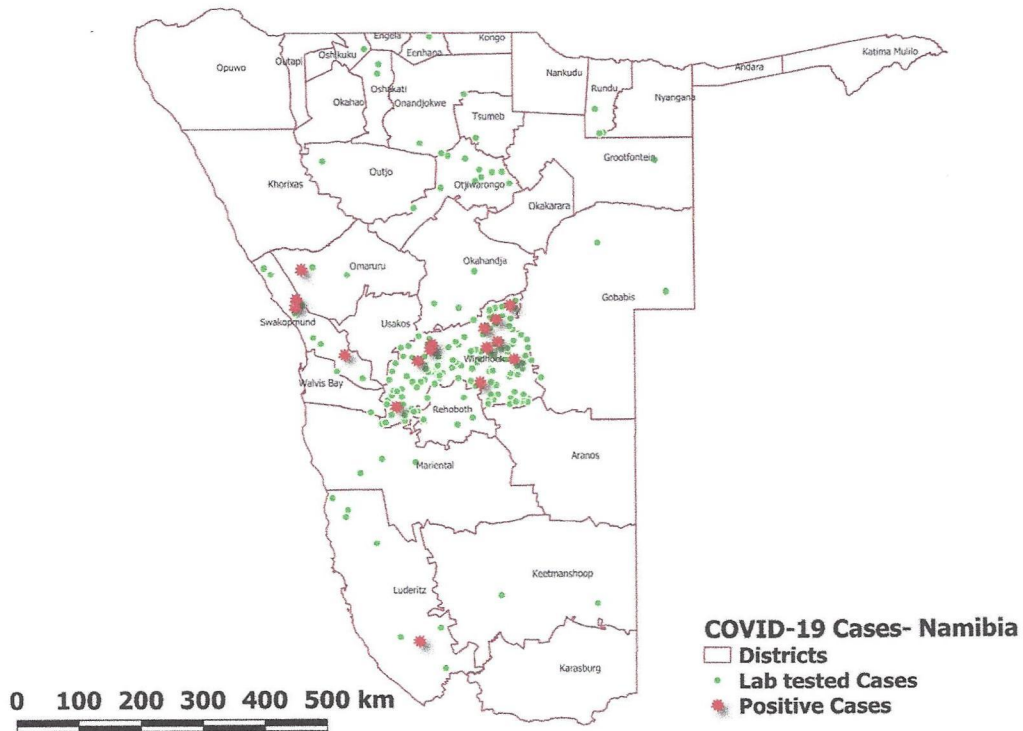
- **Index cases:** Two confirmed cases of COVID-19 were reported in Windhoek district on 13 March 2020. The married couple; a 35-year-old male and a 25-year-old female, arrived from Madrid, Spain on 11 February 2020.
- Total number of imported cases currently stands at 13 and local transmission are 3
- There is no evidence of community transmission in the country at the moment.

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

Reporting region	Total Cases	New cases	Active cases	Recovered	Death
Khomas	11	0	8	3	0
Karas	1	0	1	0	0
Erongo	4	0	4	0	0
<b>Total</b>	<b>16</b>	<b>0</b>	<b>13</b>	<b>3</b>	<b>0</b>



**Figure 1: Epi-curve for COVID-19 confirmed cases in Namibia as of 07 April 2020**



*Figure 2: Suspected and confirmed COVID-19 cases in Namibia per District, as of 07 April 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 (see definition of contact) 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.

- **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 per day.
  - People under mandatory quarantine are being monitored daily (see table 3)
  - Data entry is ongoing and data dashboards are under development using existing platforms.
  - Project Active Case Finding (ACF) is currently underway in Khomas, Erongo and Kharas regions, aimed to look for possible community transmission.
  - Contact tracing is ongoing (see table 2)

### Contact tracing Summary

**Table 2: Contacts tracing summary as of 07.04.2020**

Variables	Contact risk level			
	High	Medium	Low	Total
Total Number of contacts listed	61	34	109	204
Total Number of contacts identified	61	34	99	194
Total Number of active contacts (being followed)	41	14	31	86
Number of contacts monitored/followed in the last 24hrs	34	7	9	50
Total number of Contacts completed 14-days follow up	17	17	63	97
Total Number of contacts that developed signs & symptoms	18	3	5	26
Total Number of contacts tested positive	3	1	0	4
*Total Number of contacts tested without signs and symptoms	6	0	4	10
© Total Number of contacts lost to follow up	0	2	5	7
# Total number of Contacts never reached	0	0	10	10

\*Number of (highly exposed) 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.

# Ten contacts could not be reached as they did not provide contact numbers.



**Table 3: Number of people in mandatory quarantine facility of 07.04.2020**

<b>Name of the Facility</b>	<b>Cumulative number of people</b>	<b>Number of people who developed signs &amp; symptoms and tested</b>	<b>Test results</b>	<b>Number of people discharged</b>
Hardap Resort	40	0	0	0
Rock Lodge (Debmarine)	39	0	0	0
*Other places in Windhoek	141	6	4 Negative	35
Zambezi Waterfront park	78	3	3 Negative	0
Gross Barman	22	0	0	0
<b>Total</b>	<b>320</b>	<b>7</b>	<b>7</b>	<b>35</b>

### LABORATORY INVESTIGATIONS

- Stock level of testing kits at NIP is currently 1300
- As of 7 April 2020, a total of 408 COVID-19 specimens were recorded for testing in the two laboratories (NIP and Path Care) as per table below:

**Table 4: COVID-19 specimens recorded in at NIP and Path care as of 07.04.2020**

<b>As of 07/04/2020</b>	<b>Laboratory</b>			<b>Total</b>
	<b>NIP</b>	<b>Path care</b>	<b>South Africa</b>	
Total sample received by the Laboratory	248	160	-	408
Total sample tested	175	158	-	333
Total results received	175	158	-	333
Total results positive	9	6	*1	16
Total results negative	166	152	-	318
Total sample discarded	29	2	-	31
Total results pending	20	0	-	20
Total results inconclusive/indeterminate	0	0	-	0
Total new suspected cases in last 24 hours	20	0	-	20

*\*1 Patient specimen collected and tested in South Africa*

### COORDINATION AND LEADERSHIP:

- Daily feedback meetings between pillar leads, coordination team and Incident manager ongoing, to share daily accomplishments and to address key challenges
- Monitoring at road blocks, quarantine and isolation facilities being conducted regularly to ensure smooth coordination of COVID-19 interventions.
- Members from coordination team have been allocated to support/coordinate pillar activities.
- Many efforts to increase isolation and quarantine facilities are ongoing.

## **CASE MANAGEMENT**

- Out of the 16 cumulative confirmed cases, 3 recovered, and have been discharged, after testing negative for COVID-19.
- The other 13 confirmed cases are in stable conditions.
- Conversion of casualty department at Windhoek Central Hospital (WCH) into a highly infectious referral ICU underway.
- A 12-bed Isolation Unit is under construction at final stage of completion at WCH.
- Ramatex renovation underway to be repurposed as an isolation facility
- More screening sites have been identified in the regions.

## **LOGISTICS:**

- Facilitation of the allocation of quarantine facilities in the country and transport for discharged people from quarantine facilities is ongoing.
- Procurement of PPE, Medical suppliers and pharmaceuticals is ongoing
- Provision of commodities' specifications and verification for procurement is being done constantly

## **RISK COMMUNICATION AND COMMUNITY ENGAGEMENT:**

- Educational sessions on COVID-19 continue to be conducted in various media
- The MoHSS in-conjunction with other sectors continues to give daily updates and prevention measures on COVID-19 at the communication hub.
- A pamphlet for truck drivers has been developed.
  - It communicates information on COVID-19 prevention measures for the truckers and informs about procedures that should be taken into account when entering Namibia.
- The translations of the posters on COVID-19 signs and symptoms and preventions measures have been concluded and now awaits printing.
- The Deputy Minister of Health and Social Services marks the World Health Day, putting emphasis on this year's theme of supporting the nurses and midwives as the country battles to contain the spread of COVID-19.
- The MoHSS continue to conduct press briefing regularly.

## PSYCHOSOCIAL SUPPORT SERVICES:

- Mapping of 3 shelters for placement of persons without shelter in Windhoek completed
- Rapid assessment on persons without shelter conducted
- Provision of food, water, as well as psychosocial support and public health education were provided to a group of 900 persons in need of shelter in Windhoek
- Psychosocial support and post counselling services offered to people under quarantine, COVID-19 confirmed cases and their families are ongoing
- Two social workers assigned to surveillance team

## 4. CHALLENGES

- Inadequate and at some places lack of isolation units at health facilities and at points of entry in the regions.
- Inadequate PPE and printed IEC materials on COVID-19
- Insufficient COVID-19 laboratory testing kits
- Need for health information and education materials in multiple languages.

## 5. RECOMMENDATIONS

- Identify and costed urgent needs e.g. PPE to submit to the management to ensure health care workers are protected from infections when handling suspected and confirmed cases
- Establish fully equipped isolation units at health facilities and at points of entry in the regions.
- Fast track procurement process for Personal Protective Equipment and COVID-19 laboratory testing kits.
- Expedite printing of IEC materials in different vernacular languages.
- Continue to build capacity of response workers.

**Approved:**



Incident Manager

Date: 07.04.2020

  
Secretariat