



Ministry of Health and Social Services
Republic of Namibia

NAMIBIA COVID-19 SITUATION REPORT NO. 65			
Outbreak Name	<i>COVID-19 outbreak</i>	Country affected	Namibia
Date & Time of this report	<i>22.05.2020 23:15 hrs</i>	Investigation start date	13 March 2020
Prepared by	<i>Surveillance Team</i>		

1. SITUATION UPDATE / HIGHLIGHTS

- One new confirmed case was reported (today) 22 May 2020; from Hardap region, he was under quarantine.
- Cumulatively, 20 confirmed cases have been reported in the country, of which fourteen (14) have recovered.
- One case who had two consecutive negative tests by the 19th of May 2020 was reswabed when he complained of sore throat and the results came out positive on 21 May 2020.
- Supervised quarantine for all people arriving from abroad, for 14 days is ongoing.
- Stage 1 of the state of emergency ended on 4 May 2020, and stage 2 is ongoing from 5 May 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.

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.
- The new confirmed case is a 35 years old Namibian male who returned from South Africa on 9 May 2020 and he was quarantined in Hardap Region. He was swabed

on 19 May 2020 as he was due to be discharged on 23 May 2020. He has since been taken into isolation and he is asymptomatic.

- On 21 May 2020 a 30 years old Namibian male who returned from South Africa on 9 May 2020 was confirmed positive. He has since been taken into isolation in Hardap Region and he is in stable condition.
- The two cases who were confirmed on 20 May 2020, both arrived in the country from South Africa via Noordoewer border post in different private vehicles. They are both females aged 28 and 66 years old. They in isolation in stable condition.
- Total number of imported cases currently stands at 17 while 3 cases are local transmissions.
- There is no evidence of community transmission in the country at the moment.

Table 1: Confirmed cases by region as of 22 May 2020

Reporting region	Total Cases	New cases	Active cases	Recovered	Death
Khomas	11	0	2	9	0
//Karas	3	0	2	1	0
Erongo	4	0	0	4	0
Hardap	2	1	2	0	0
Total	20	1	6	14	0

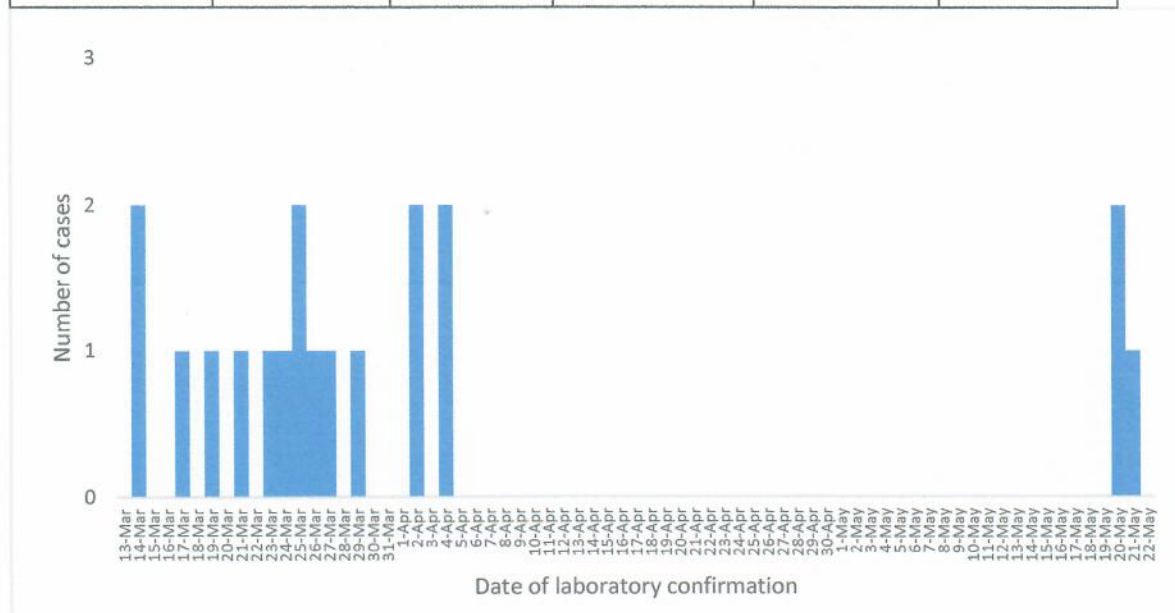


Figure 1: Epi-curve for confirmed COVID-19 cases in Namibia as of 22 May 2020

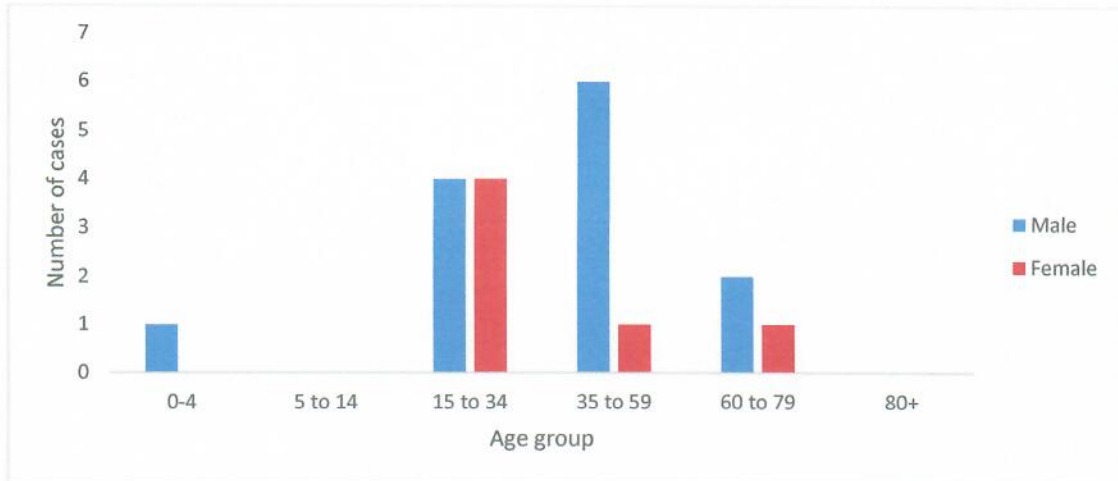


Figure 2: Age and sex distribution for COVID-19 confirmed cases in Namibia as of 22 May 2020

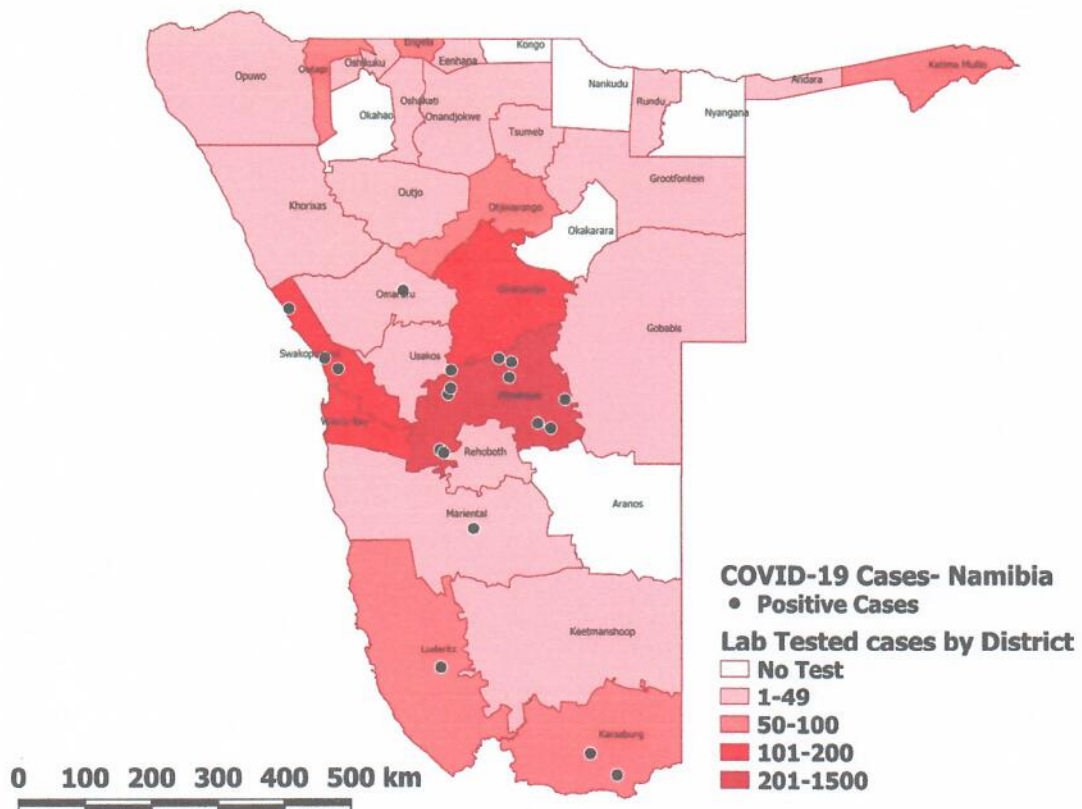


Figure 3: Suspected and confirmed COVID-19 cases in Namibia per District, 22 May 2020

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***

- Two rapid response teams will be sent from National level Plans to investigate the new cases and give technical support to //Karas and Hardap Region.5
- Daily pillar and intra-pillar discussions are held to deliberate on daily progress, gaps and way forward;

- Call centre continue operations for 24 hours every day; 903 calls answered at the hotline today (22.05.2020).
- Data entry is ongoing, realtime data dashboard will be launched on 1 June 2020.
- Supporting COVID-19 intergrated online training in partnership with WHO.
- Active case search in all regions is ongoing.
- Weekly ZOOM sessions with regional teams is on going, last meeting held 17 May 2020; issues of truck driver screening and quarantine facilities discussed
- Contact tracing and monitoring is ongoing (see table 2);
- People under mandatory quarantine are being monitored daily (see table 3) and are being tested on day 12 before release on day 15 if they test negative.
- Plans are underway to conduct online Data management training early June; 48 participants (34 HIS officers and 14 Regional MIS officers) identified and training materials under development

Contact tracing Summary

Table 2: National contacts tracing summary for COVID-19 as of 22 May 2020

Variables	High	Medium	Low	Total
Total Number of contacts listed for follow up (potential)	76	52	137	265
Total Number of contacts identified (cumulative)	76	52	121	249
Total number of Contacts never reached	0	0	16	16
© Total Number of contacts lost to follow up	0	2	5	7
Total Number of contacts that developed signs & symptoms (cumulative)	25	8	7	40
Total Number of contacts that tested positive (became cases)	3	1	0	4
*Total Number contacts without signs & symptoms TESTED	20	5	27	52
Number of active contacts monitored/followed in the last 24hrs	8	0	0	8
Total number of Contacts completed 14-days follow up (cumulative)	65	49	116	230

**Number of contacts without signs & symptoms that were 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 22 May 2020

Region	Newly quarantined 24hrs	Cumulative number of people	Number of people discharged	Number of people in quarantine now
Kunene	0	49	26	23
Omaheke	0	56	27	29
Kavango	0	13	4	9
Omusati	0	78	60	18
Oshana	3	12	6	6
Ohangwena	0	131	73	58
Hardap	0	102	72	30
Otjozondjupa	0	215	168	47
Khomas	3	322	227	95
Zambezi	0	247	134	113
//Karas	0	190	99	91
Erongo	9	61	46	15
Total	15	1476	942	534

Table 4. Distribution of truck drivers who came into Namibia from neighboring countries and their destined regions on 22 May 2020.

Destination	Country of departure				Total
	South Africa	Zambia	Botswana	Angola	
Karas	49	0	0	2	51
Khomas	64	0	0	1	65
Oshana	4	0	0	0	4
Otjozondjupa	4	0	0	0	4
Kavango	0	0	0	4	4
Ohangwena	14	0	0	1	15
Hardap	1	0	0	0	1
Kunene	0	0	0	0	0
Omaheke	0	0	0	1	1
Omusati	0	0	0	0	0
Oshikoto	0	0	0	1	1
Zambezi	0	1	0	0	1
Erongo	13	39	0	1	53
Total	149	40	0	11	200

LABORATORY INVESTIGATIONS

- As of 22 May 2020, a total of 2918 COVID-19 specimens were tested in the two laboratories (NIP and Path Care) as per table 5 below:

Table 5: COVID-19 specimens recorded at NIP and Path care Laboratories as of 22 May 2020

Variables	Laboratory			Total
	NIP	Path care	South Africa	
Total sample received by the Laboratory	2208	776	-	2984
Total sample tested	2024	745	-	2769
Total sample re-tested	126	23	-	149
Total results positive	13	6	*1	20
Total results negative	2011	739	-	2750
Total sample discarded	58	8	-	66
Total results pending	11	0	-	11
Total results inconclusive/indeterminate	0	0	-	0
Total new suspected cases in last 24 hours	75	69	-	144

**1 Patient specimen collected and tested in South Africa, he travelled back before results came out*

COORDINATION AND LEADERSHIP:

- Feedback meetings of pillar leads and Incident Manager (IM) are ongoing (3 times a week), to share accomplishments and to address key challenges.
- Integrated online training started on 6 May 2020 and are ongoing until 26 May 2020.

CASE MANAGEMENT:

- Out of the 20 cumulative confirmed cases, 14 have recovered after testing negative twice for COVID-19 at 48 hours' interval.
- One of the remaining 6 active cases has mild symptoms while the other five are asymptomatic.

INFECTION PREVENTION AND CONTROL:

- IPC activities are on going as part of IPC preparedness plan;

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.
- Distribution of PPEs to the regions

POINTS OF ENTRY:

- Screening and inspection of incoming travellers and trucks at points of entry and check points is ongoing
- Plans are underway to prepare the regions to collect and submit daily reports at the points of entry.
- SOP for management and monitoring of cross border road transport at designated Points of Entry and COVID-19 checkpoints finalised
- Checklist for assessment of quarantine facility at ground crossing drafted.

RISK COMMUNICATION AND COMMUNITY ENGAGEMENT:

- The COVID-19 Communication Centre continues to give updates on COVID-19 and clarify miscommunications on a daily basis.
- The RCCE continues to share messages on COVID-19 prevention measures through mass media.
- The Community Engagement toolkit has been printed and being distributed to all community health workers countrywide.

PSYCHOSOCIAL SUPPORT SERVICES:

- Continuous provision of health education, psychosocial support services, as well as food to people in need of shelter.

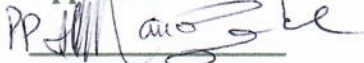
4. CHALLENGES:

- Inadequate isolation units at health facilities in the regions.
- Insufficient PPE and swabs for sample collection from suspected cases identified through active case search in some districts.
- Inadequate nasal swab and appropriate transport media.

5. RECOMMENDATIONS AND WAY FORWARD:

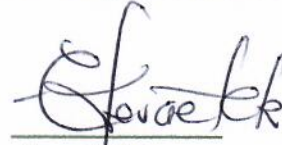
- Establish fully equipped isolation units at health facilities in the regions.
- Logistics pillar to continue with the procurement and distribution of sufficient PPE to the regions to ensure that response is not interrupted.
- NIP to continue sourcing for swabs and appropriate transport media for all districts.

Approved:



Incident Manager

Date: 22 May 2020



Secretariat