

ZAMBIA SITUATION REPORT NO. 68

Disease Outbreak: COVID-19

Response start date: 30th January, 2020

Outbreak Declared: 18th March, 2020

Report date: Monday 15th June, 2020

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1. SITUATION UPDATE

1.1 CURRENT CASE NUMBERS (as of 12:00 hours CAT)

➤ In the past 24 days:

- There were **24 new confirmed cases and 20 recoveries**.
- Cumulative number of confirmed COVID-19 cases recorded to date is **1,382, with 11 deaths (CFR=0.80%) and 1,142 recoveries (83% recovery)**.
- There are currently **229 active cases** spread across Lusaka, Muchinga, Copperbelt, Northern, Eastern, North-western and Western provinces.

Zambia Numbers

♂ **1,382 Confirmed (24 new)**

♀ **11 Deaths (0 new)**

♂ **1,142 Recoveries (20 new)**

Global Numbers
(Source: JHU)

♂ **7,925,237 Confirmed (89,897 New)**

♀ **433,648 Deaths (2,882 New)**

♂ **3,788,781 Recoveries (55,169 New)**

**New: in the last 24hrs*

2. EPIDEMIOLOGICAL HIGHLIGHTS

Table 1: COVID-19 Surveillance and case management summary, based on 14th June reported figures

Parameter	Number
Cumulative number of high risk persons under observation	23,365
Cumulative number of high risk persons that have completed 14 days observation	6,620
Cumulative number of alerts notified & verified as non-cases	2,959
Cumulative Number of Test Results Processed	45,248
Tests per 1,000,000 population	2,662

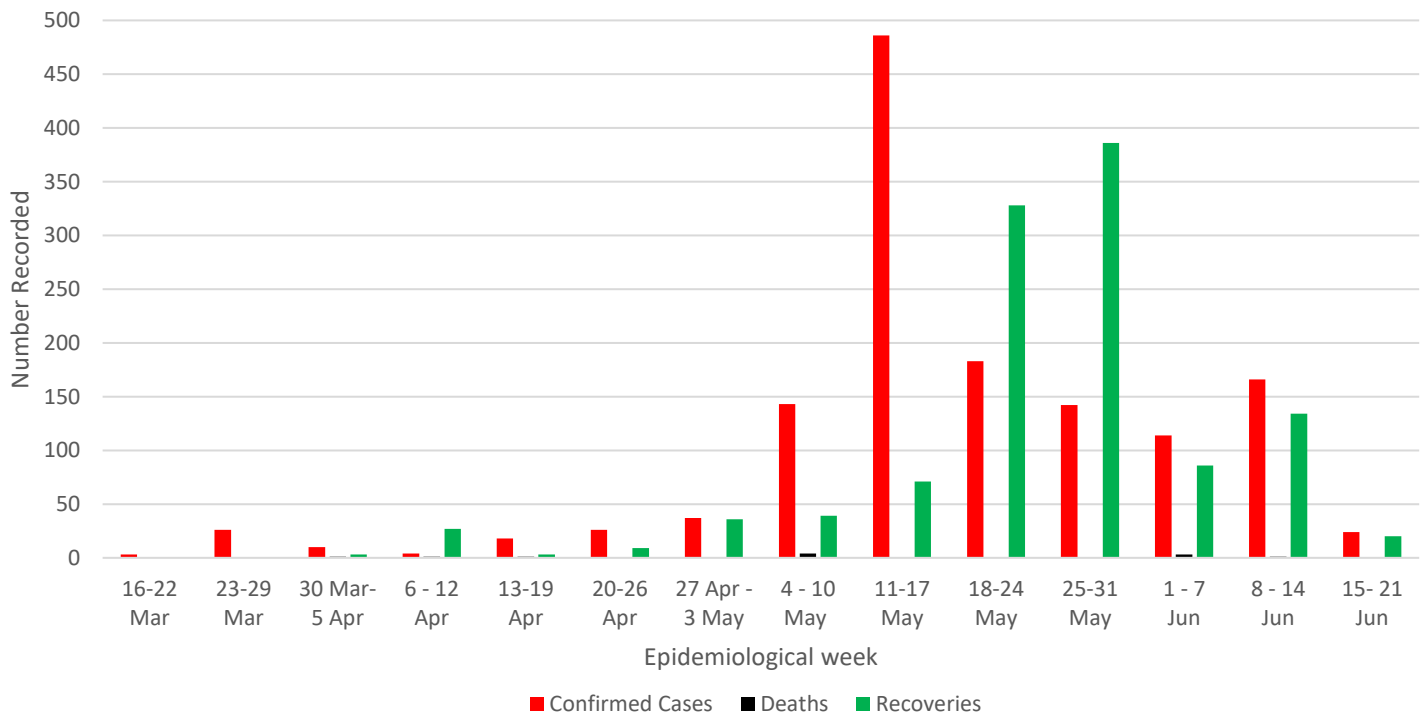


Figure 1: Weekly COVID-19 confirmed cases (N=1382), deaths (N=11) and recoveries (N=1142) as of 15th June 2020

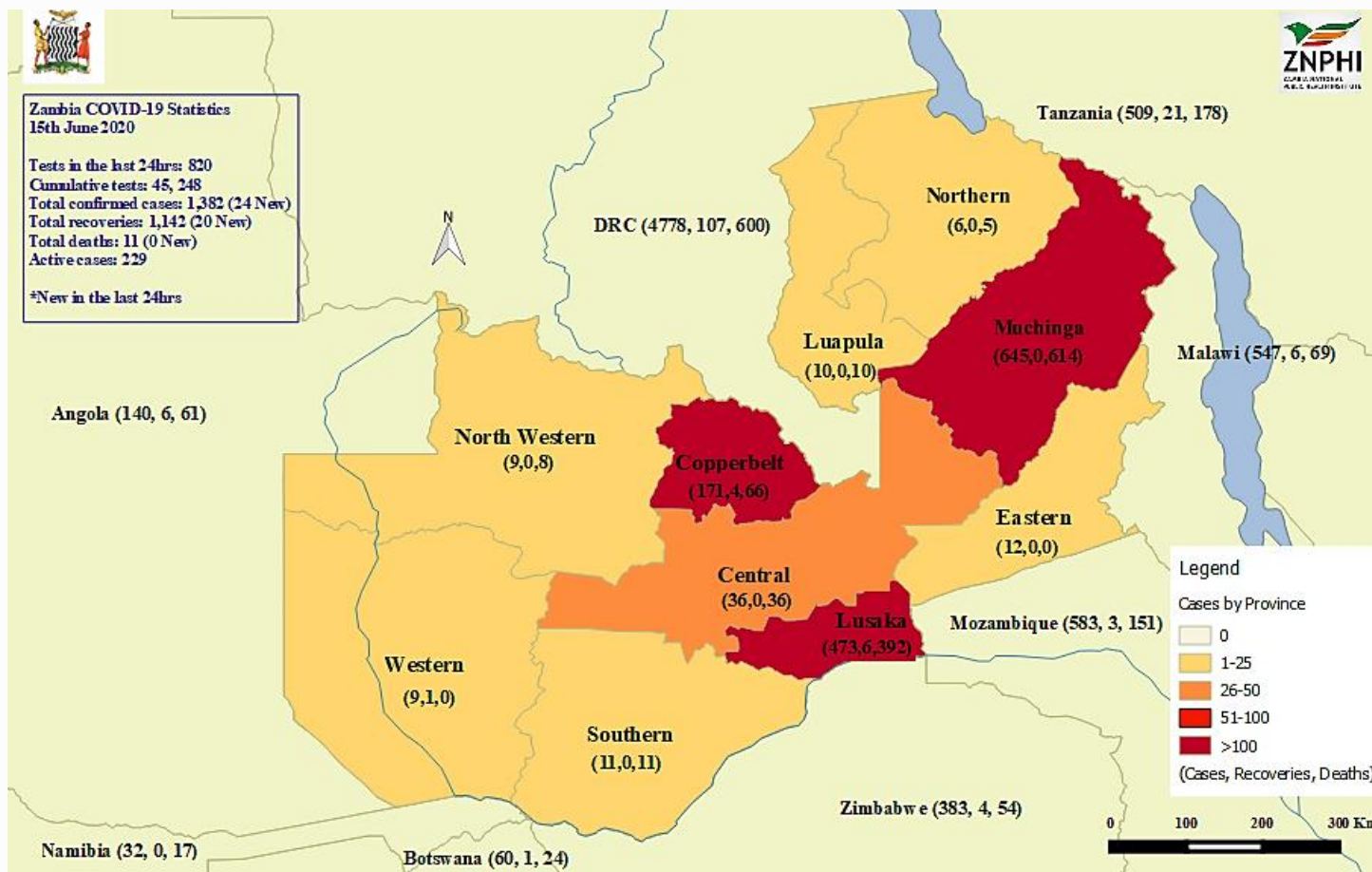


Figure 2: Map showing confirmed COVID-19 cases, deaths and recoveries (in brackets) by province and in neighbouring countries, as of 15th June, 2020

➤ **Age and Sex distribution:** Of the confirmed cases, 67% are male and 33% are female. The most affected age groups are those aged between 31-44 years old (37%), 15-30 years old (32%), and 45-60 years old (22%).

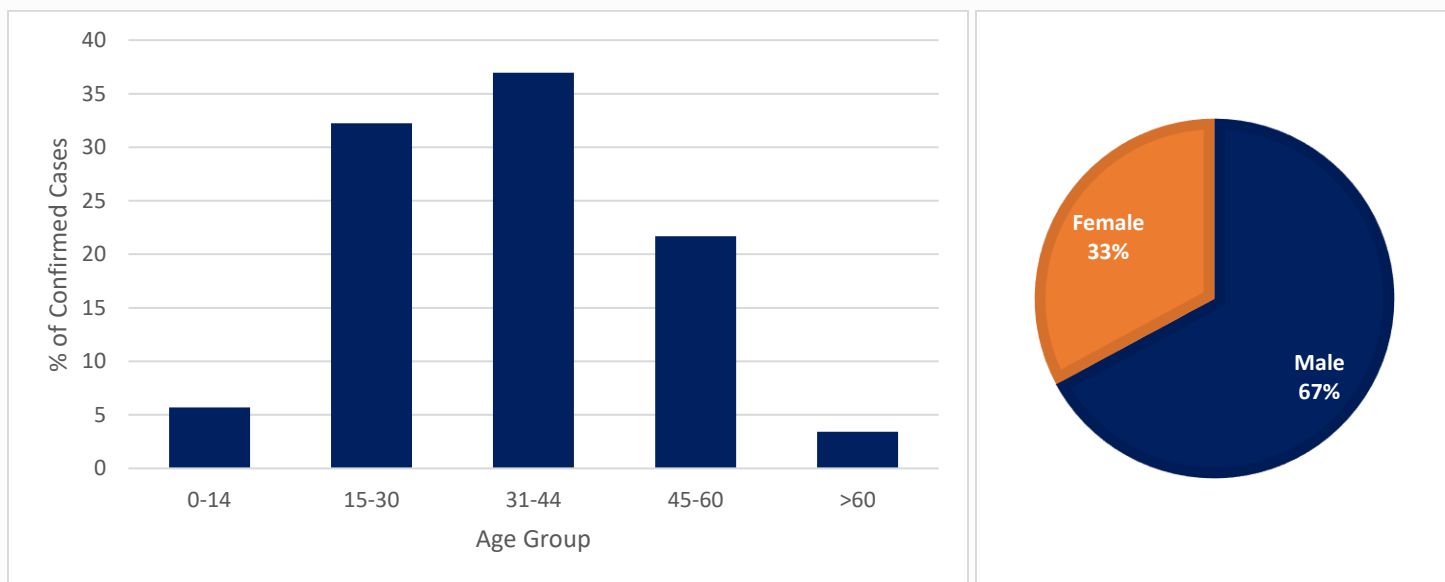


Figure 3: Age and Sex distribution of confirmed cases, as of 15th June 2020

3. ACTIONS TO DATE

3.1 CO-ORDINATION

- **Regional/Continental level:** Zambia hosts the Southern Africa Regional Collaborating Centre of the Africa CDC and has been coordinating the response at regional level. To date, **Southern Africa has recorded 73,635 confirmed cases of COVID-19 including 1,515 deaths and 40,280 recoveries.** Zambia continues to participate in AU meetings to ensure continued regional and continental trade and strategies to stop transmission of COVID-19.

- **Policy Level:**

- Meetings of the Committee of Ministers (chaired by the Vice President), Inter-ministerial Committee of Permanent Secretaries (chaired by the Secretary to Cabinet), and the National Epidemic Preparedness, Prevention Control and Management Committee (NEPPC&MC) (chaired by the Minister of Health) have been convened since the declaration of the outbreak
 - Multi-sectoral collaboration meetings at cabinet level of the government are ongoing.
 - A **COVID-19 contingency plan** outlining the country's COVID-19 preparedness and response activities was finalised and continues to be regularly updated as the outbreak evolves.
 - The government continues to enforce the measures and interventions to control the spread of COVID-19 countrywide as outlined in the Statutory instruments **SI21 and SI22 of 2020 on COVID-19 and presidential directives** issued in March 2020. The public health safety measures being implemented include continued closure of non-examination classes in schools and higher learning institutions; wearing of masks in public; continued screening of travellers into Zambia; redirection of all international flights to land and depart from KKIA only; suspension of non-essential travel to countries with confirmed COVID-19 cases; restriction of public gatherings; and closure of all bars, nightclubs, and casinos. Travellers into Zambia must be isolated at designated government facilities, or alternatively at designated lodges and hotels at own cost, while awaiting test results
- **Technical level:** The ZNPPI continues to provide leadership and partner collaboration on the response through the Public Health Emergency Operation Centre (PHEOC).
 - Technical co-ordinating meetings are being held with cooperating partners and other stakeholders. The meetings are chaired by the Director, ZNPPI

BACKGROUND

The WHO was alerted of an increase in the number of pneumonia cases of unknown cause detected in Wuhan City, Hubei Province, China. The disease now called Coronavirus Disease 2019 (COVID-19) is caused by a new coronavirus named SARS-CoV-2. The WHO declared the outbreak a PHEIC on 30th January and further declared COVID-19 a pandemic on 12th March. Zambia recorded its first two cases of COVID-19 on 18th March 2020. The first 28 cases in Zambia all had a history of travel to Europe or Asia. Three weeks into the outbreak, cases were noted among people without history of travel but in contact with confirmed cases. There has since been an increase in local person-person transmission with increasing geographic spread. Cases have been reported in all ten provinces, with Western province reporting its first few cases in the past week.

- The Incident Management System (IMS) continues to meet at the ZNPPI (with a Zoom link provided to ensure social distancing) on Tuesdays and Thursdays. The IMS structure is available at **Annex 2**
- All the response pillars under the IMS have an Incident Coordinator whose responsibility it is to map the partners and resources for the respective units to ensure no duplication of efforts and resources. Public Health Specialists in each of the sub-districts in Lusaka serve as Incident Commanders and coordinate daily activities of field teams.

3.2 SURVEILLANCE AND OUTBREAK INVESTIGATION

- Surveillance has been heightened around the country at community level, health facilities, points of entry (POEs), and sentinel sites. The COVID-19 case definitions for surveillance are available at **Annex 3**
- **Case finding: 24 new cases** were identified from Chililabombwe (12), Lusaka (4), Ndola (3), Kitwe (2), Chingola (1), Kafue (1), and Chirundu (1) through community, hospital and point of entry screening, as well as contact tracing and verification of alerts.

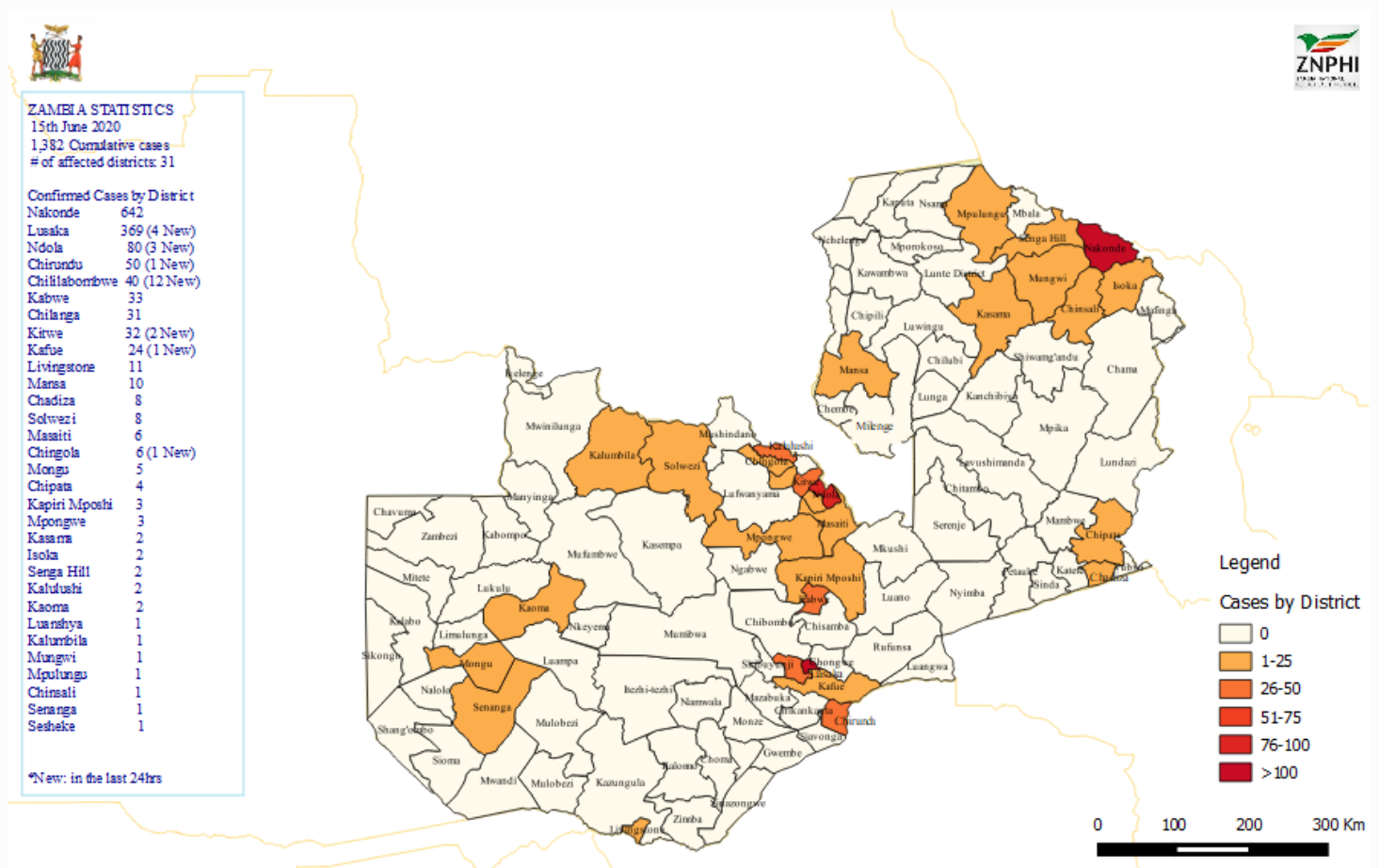


Figure 4: Map of Zambia showing distribution of confirmed COVID-19 cases by district, as of 15th June, 2020

- **Laboratory and sample management:** There are currently **seven (07) designated laboratories** for COVID-19 diagnostics (Table 2 below). Efforts are under way to establish other testing facilities around the country. A sample referral system is in place for samples being collected in other provinces.
 - Zambia is utilising real-time Reverse Transcriptase Polymerase Chain Reaction (RT-PCR), Gene Xpert and Roche Cobas 6800 testing platforms for COVID-19 diagnosis.
 - In the last 24 hours, **820 tests** were conducted, out of which **24** samples tested positive for SARS-CoV-2.
 - A total of **45,248 tests** have been conducted to date with a cumulative **1,382 confirmed positive (3.05% positivity rate)** for SARS-CoV-2. The testing coverage is **2,662 per 1,000,000 population**

Table 2: National Laboratory Diagnostic Capacity for COVID-19 by province, as of 6th June, 2020 report
* Blue = Operational; Black = Yet to be Operational

PROVINCE	INSTITUTION	TESTING PLATFORM	CAPACITY/24HRS
Lusaka	UTH	RT-PCR; Gene Xpert; Cobas 6800	400; 192; 1200
	UNZA – SVM	RT-PCR	400
	CIDRZ	RT-PCR	400
Copperbelt	TDRS	RT-PCR	200
	ADCH	Cobas 6800	1200
	KITWE CH	Gene Xpert	128
Southern	MACHA RT	RT-PCR	80
	LIVINGSTONE CH	Gene Xpert	128
	CHOMA GH	Gene Xpert	128
Muchinga	CHINSALI DH	Gene Xpert	128
Eastern	CHIPATA GH	Gene Xpert	128
	ST.FRANCIS MH	Gene Xpert	64
Central	KABWE GH	Gene Xpert	128
Luapula	MANSA GH	Gene Xpert	128
Northern	KASAMA GH	Gene Xpert	128
Western	LEWANIKA GH	Gene Xpert	128

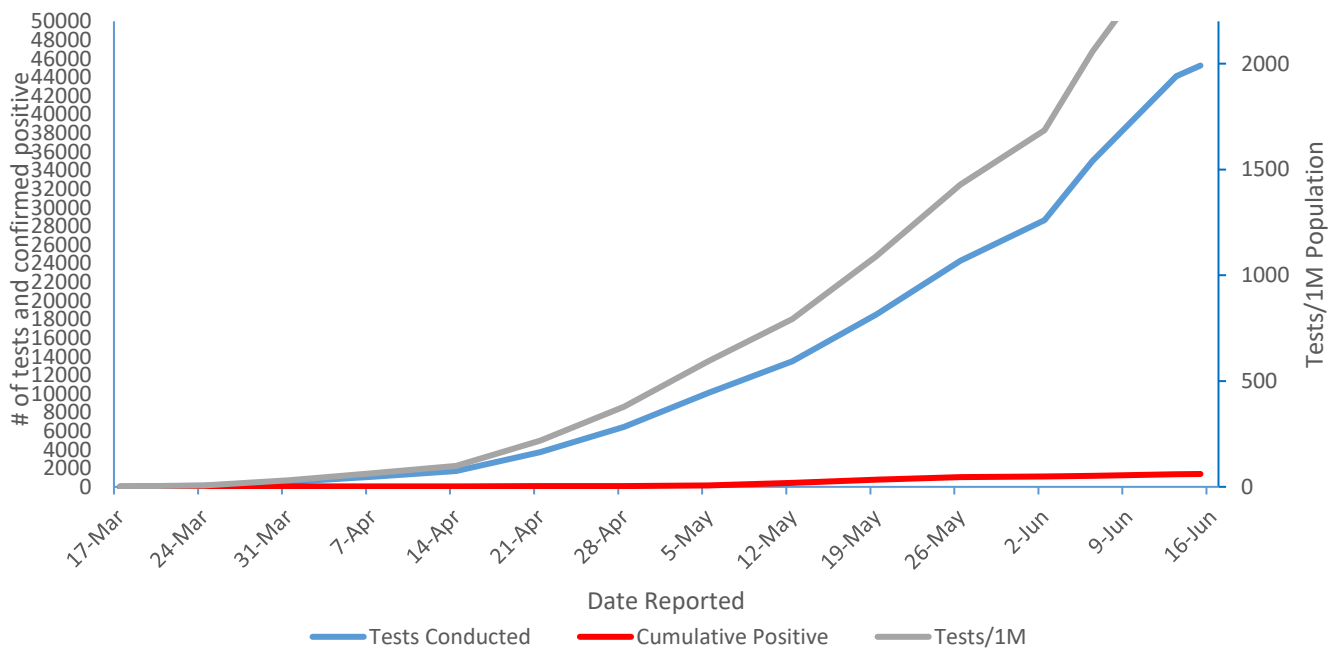


Figure 5: Graph showing cumulative number of PCR tests conducted, confirmed cases and tests per 1M population between 17th March and 15th June 2020

- **Case Management:** All symptomatic confirmed cases are admitted to the designated isolation facilities or under supervised home quarantine for those who are asymptomatic. Psychosocial care is also provided for staff and patients at the isolation facilities. Additionally, all health workers are required to undergo 14-day quarantine following their shift at the isolation facilities before they return to their communities.
 - 24 new cases were identified in the last 24hrs; known contacts are being traced and screened.
 - 20 patients were discharged following recovery; all from Lusaka.
 - There are currently **229 active COVID-19 cases** being managed. All cases are stable.
 - Persons who test positive must meet the following key criteria before being deemed recovered:

S E T T I N G	Hospital/Facility Care	Patients with Medical Conditions requiring continued Care beyond COVID-19 Recovery	Home Care
A D M I S S I O N	<ul style="list-style-type: none"> ➔ Any symptoms for COVID-19 ➔ Asymptomatic High-Risk patients ➔ Presence of other Medical conditions ➔ Where Home Isolation is not feasible 	<ul style="list-style-type: none"> ➔ As medically indicated 	<ul style="list-style-type: none"> ➔ Asymptomatic ➔ No comorbidity ➔ If home Isolation feasible
D I S C H A R G E / D E I S O L A T I O N	<ul style="list-style-type: none"> ➔ Asymptomatic for at least 3 days plus 1 negative PCR at day 7 or beyond AND ➔ 14 days since first Positive PCR 	<ul style="list-style-type: none"> ➔ Two negative PCR Tests at least 24 hours apart 	<ul style="list-style-type: none"> ➔ 1 negative PCR at day 7 or beyond AND ➔ 14 days since first Positive PCR

Figure 6: Graph showing the number of PCR tests conducted, confirmed cases and tests per 1M population between 17th March and 22 May 2020

Figure 6: Discharge criteria for COVID-19 patients

- **COVID-19 Screening Facilities:** Dedicated screening structures have been set up at the UTH and Levy Mwanawasa, away from the areas of routine service delivery.
- **Isolation facilities** have also been set up in all high risk districts across the ten provinces, including an isolation facility at **Mpima Prison** in Kabwe which was converted to an isolation bay for inmates that might be positive for COVID-19. A detailed list is available on the ZNP HI website

ANNEX 1: COVID-19 RESPONSE IN PICTURES



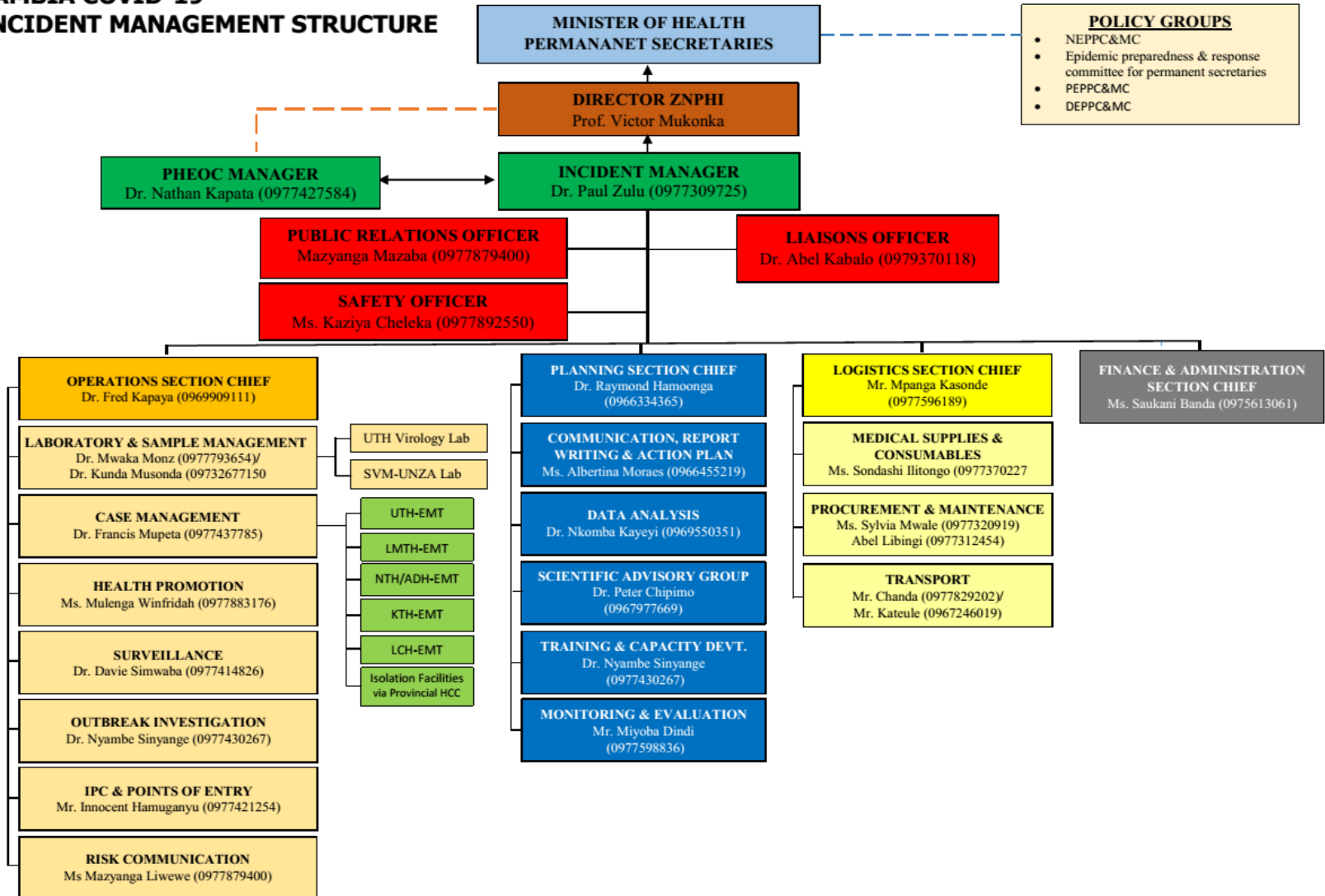
Minister of Health, Hon. Chitalu Chilufya checks in with outbreak response field teams in Chawama



Sensitisation at COMESA market in readiness for the mass screening, scheduled for 10th June 2020

ANNEX 2: NATIONAL LEVEL INCIDENT MANAGEMENT SYSTEM FOR THE COVID-19 PREPAREDNESS RESPONSE

ZAMBIA COVID-19 INCIDENT MANAGEMENT STRUCTURE



ANNEX 3: CORONAVIRUS DISEASE 2019 (COVID-19) CASE DEFINITIONS

1. Suspect case:

A. Patient with acute respiratory infection (fever and at least one sign/symptom of respiratory disease e.g. cough, shortness of breath), AND with no other aetiology that fully explains the clinical presentation AND a history of travel to or residence in a country/area or territory reporting local transmission of COVID-19 during the 14 days prior to symptom onset,

OR

B. 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. Patient with severe acute respiratory infection (fever and at least one sign/symptom of respiratory disease e.g. cough, shortness of breath), AND requiring hospitalization AND with no other aetiology that fully explains the clinical presentation

2. Probable case: A suspect case for whom testing for COVID-19 is inconclusive or is tested positive using a pan-coronavirus assay and without laboratory evidence of other respiratory pathogens.

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

4. COVID-19 Death: COVID-19 death is defined for surveillance purposes as a death resulting from a clinically compatible illness in a probable or confirmed COVID-19 case, unless there is a clear alternative cause of death that cannot be related to COVID disease (e.g. trauma). There should be no period of complete recovery between the illness and death.

5. Person Under Investigation: a suspected case, irrespective of admission status, with either history of travel to an area with local transmission or worked in/attended a health care facility treating COVID-19 infections or admission to a facility for severe pneumonia of unknown aetiology

6. Contact: a person who experienced any one of the following exposures during the 2 days before and the 14 days after the onset of symptoms of a probable or confirmed case: a. Face-to-face contact with a probable or confirmed case within 1 meter and for more than 15 minutes; b. Direct physical contact with a probable or confirmed case; c. Direct care for a patient with probable or confirmed COVID-19 disease without using proper personal protective equipment; OR d. Other situations as indicated by local risk assessments.

ANNEX 4: LIST OF AVAILABLE HOTELS AND LODGES FOR COVID-19 QUARANTINE

	Name of Hotel	Bed capacity	Contact Person	Contact number	Estimated cost in USD (negotiable)
1	Radisson Blu	120	John Klana	0977758823	100
2	Fallsway Apartments	50	Raj	0976024254	100
3	Hilton	40	Kudzayi	0960998475	65
4	Malanga Village	25	Ngoza	0964066685	65
5	Shakespeare Apartments	25	Oscar Mumba	0966431386	65
6	Skyview lodges	52	Mwakoi Katanekwa	0950628444	50
7	Chamba valley Exotic Lodge	90	Wally Makwele	0977463859	50
8	Wild dog	52	Reception	0971760423	65
9	Mahak Lodge & Indian Restaurants	25	Rajesh Kumar	0971194151	35