

ZAMBIA SITUATION REPORT NO. 75

Disease Outbreak: COVID-19

Response start date: 30th January, 2020

Outbreak Declared: 18th March, 2020

Report date: Sunday 2nd August 2020

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1. SITUATION UPDATE

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

- In the past epidemiological week (Monday 27th July to Sunday 2nd August):
 - There were **1,866 new confirmed cases, 31 deaths and 2,143 recoveries**.
 - This represents an increase of 40% in the number of new cases recorded in the last 7 days, compared to the previous week
 - Cumulative number of confirmed COVID-19 cases recorded to date is **6,347 with 170 associated deaths and 1,434 recoveries (70.79% recovered)**.
 - Of the 170 total deaths among the confirmed cases, **51** have been classified as due to COVID-19 (CFR=0.80%); **104** as associated deaths and **15** are **yet to be classified**. See Annex 1 for definitions
 - There are currently **1,684 active cases**

Zambia Numbers

👤 **6,347 Confirmed (119 new)**

👤 **170 Deaths (5 new)**

👤 **4,493 Recoveries (363 new)**

**New: in the last 24hrs*

Global Numbers

(Source: JHU)

👤 **17,852,451 Confirmed**

👤 **679,742 Deaths**

👤 **10,598,297 Recoveries**

2. EPIDEMIOLOGICAL HIGHLIGHTS

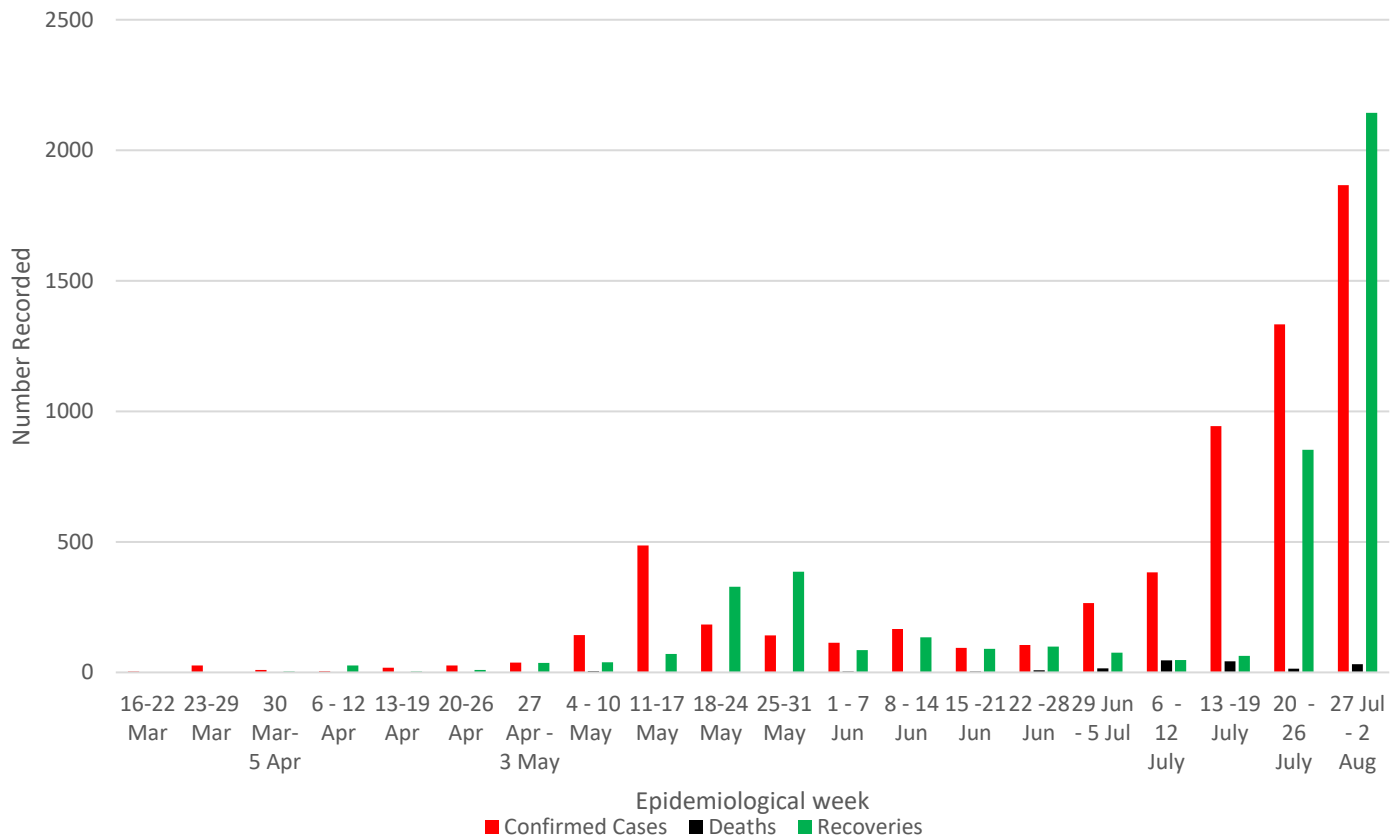


Figure 1: Weekly COVID-19 confirmed cases (N=6,347), deaths (N=170) and recoveries (N=4,493) as of 2nd August 2020

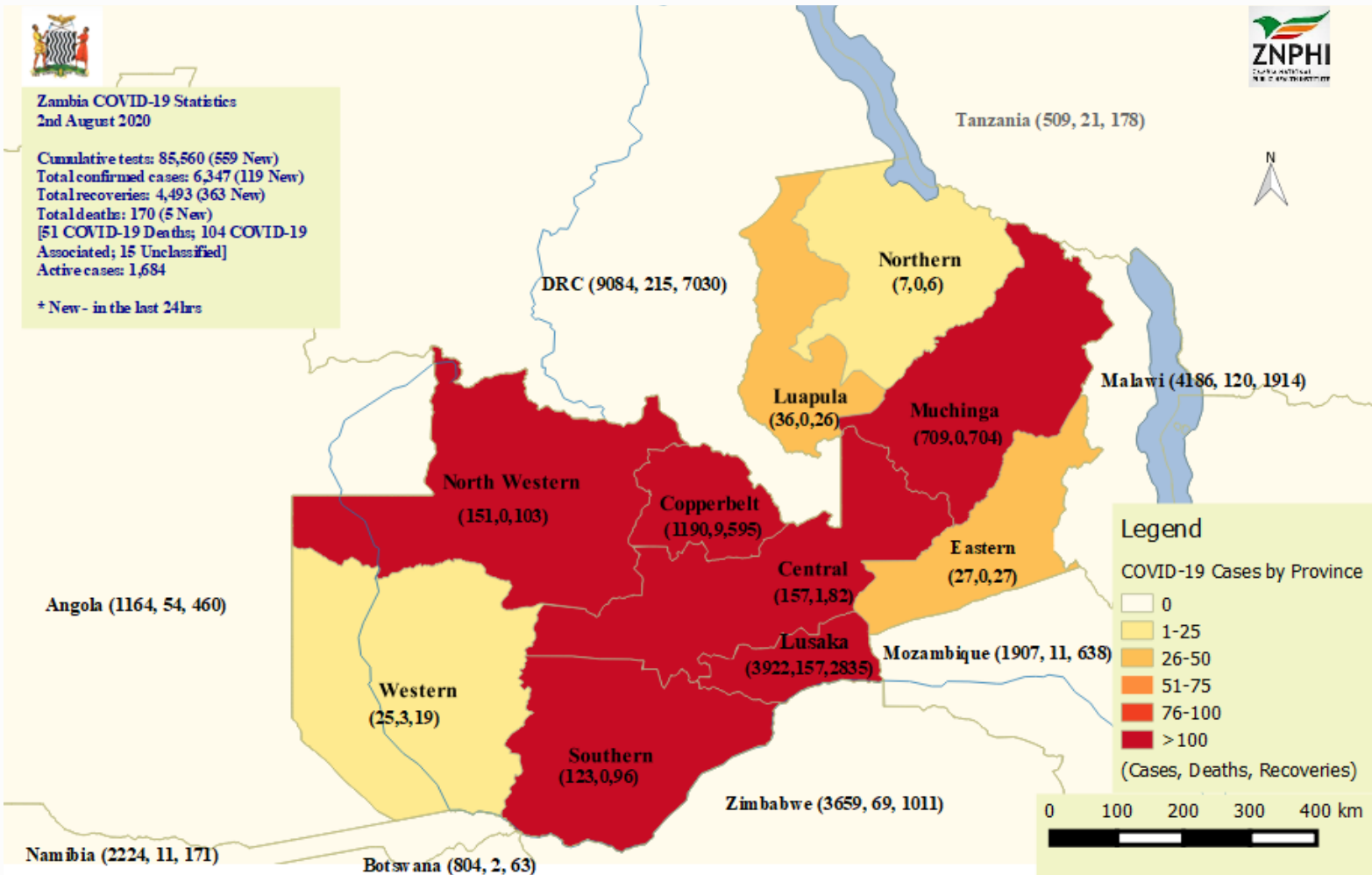


Figure 2: Map showing confirmed COVID-19 cases, deaths and recoveries (in brackets) by province and in neighbouring countries, as of 2nd August 2020

- **Age and Sex distribution:** Of the confirmed cases, 66% are male and 34% are female. The most affected age groups are those in the age groups 30-39 (28%), 40-50 (24%), 20-29 (22%) and above 50 (18%)

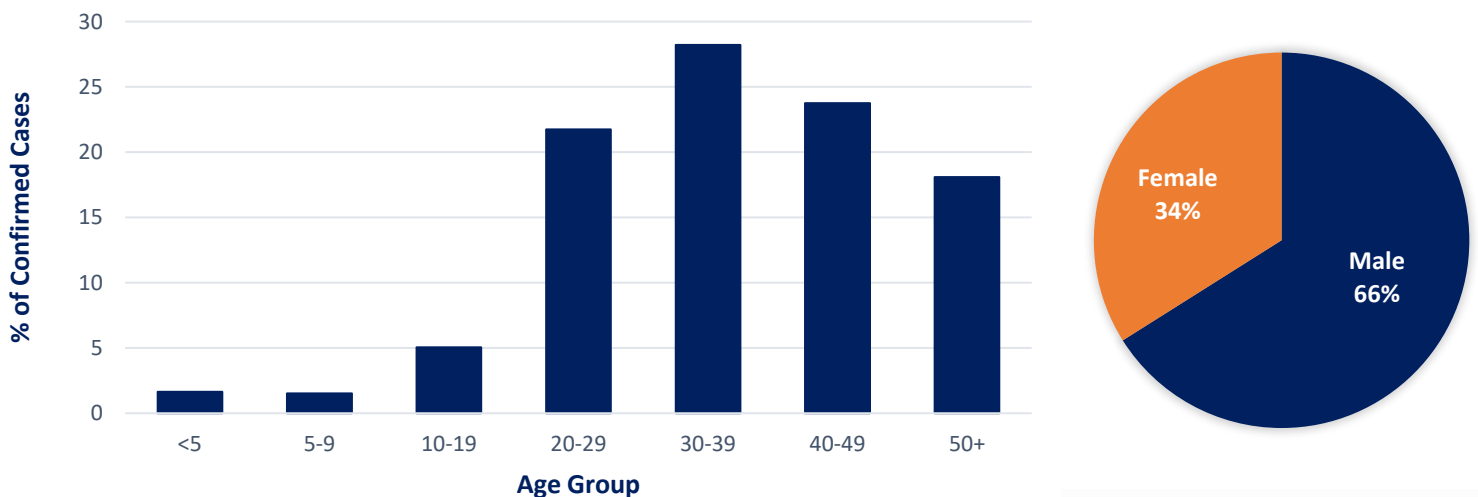


Figure 3: Age and Sex distribution of confirmed cases, as of 2nd August, 2020

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 526,870 confirmed cases of COVID-19 including 8,642 deaths and 352,233 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.
- An eight pronged strategy has been implemented in response to the outbreak: **Surveillance and case finding; Case management; Infection prevention and control; Risk communication and community engagement; Laboratory diagnosis; Logistics and supply chain management; Appropriate competent and adequate workforce; and Routine essential health services**
- The public health safety measures that have been implemented in response to the outbreak include closure of schools and higher learning institutions; mandatory wearing of a mask while out 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

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 being the last to record cases of COVID-19.

public gatherings; restaurants to operate only on take away and delivery basis; and closure of all bars, nightclubs, cinemas, gyms 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. However, a number of measures have been eased over time. The details are provided below

- **Easing of public health and safety measures:**

- **24th April, 2020:** Resumed congregation at places of worship, non-contact sports, and operation of saloons and barbershops subject to adherence to public health regulation, guidelines and certification
- **8th May, 2020:** Restaurants, cinemas, gyms, and casinos reopened; hotels, lodges event management, tour operators and other business proprietors that closed voluntarily advised to consider reopening
- **1st June 2020:** Primary and secondary schools reopened for examination classes only.
- **8th June 2020:** Commenced phased reopening of colleges and universities for final year students only
- **25th June 2020:** All international airports reopened

➤ **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
- 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 1**

3.2 SURVEILLANCE AND OUTBREAK INVESTIGATION

➤ **Categorisation of confirmed cases:** the confirmed cases recorded have been categorised as follows (see Figure 4 below)

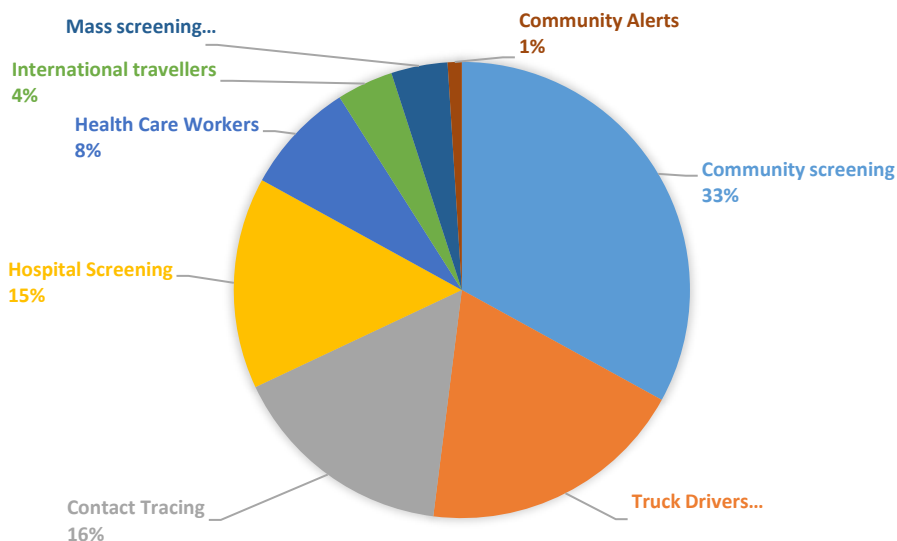


Figure 4: Categorisation of confirmed cases, as of 2nd August, 2020

- **Case finding:** in the past 7 days, **1,866 new cases** were identified through community, hospital and point of entry screening, as well as contact tracing and verification of alerts. The breakdown is provided in Table 2 below.

Table 3: Breakdown of confirmed COVID-19 cases reported between 27th July and 2nd August, 2020

DATE	NUMBER REPORTED	LOCATION
27 th July, 2020	71 Cases	44 Ndola, 12 Lusaka, 10 Kalulushi, 4 Solwezi, 1 Kafue
	1 Death	1 Lusaka (Facility death)
	465 Recoveries	465 Lusaka
28 th July, 2020	450 Cases	366 Lusaka, 31 Kitwe, 17 Choma, 13 Chingola, 13 Ndola, 6 Chililabombwe, 2 Mansa, 1 Mazabuka, 1 Solwezi
	2 Deaths	2 Lusaka (Community deaths)
	380 Recoveries	260 Lusaka, 76 Southern, 39 Central, 4 Luapula, 1 Western
29 th July, 2020	247 Cases	230 Lusaka, 9 Kitwe, 6 Chilanga, 2 Ndola
	4 Deaths	4 Lusaka (2 Community deaths, 2 Facility deaths)
	90 Recoveries	76 North-western, 12 Eastern, 2 Lusaka
30 th July, 2020	306 cases	253 Lusaka, 19 Nakonde, 17 Kitwe, 6 Kafue, 3 Mpika, 3 Ndola, 2 Chingola, 1 Chinsali, 1 Kalabo, 1 Mongu
	3 Deaths	3 Lusaka (2 Community deaths, 1 Facility death)
	4 Recoveries	4 Lusaka
31 st July, 2020	408 Cases	147 Lusaka, 60 Ndola, 49 Chililabombwe, 47 Kabwe, 27 Kitwe, 23 Solwezi, 18 Mumbwa, 10 Chingola, 6 Kawambwa, 4 Luanshya, 4 Nakonde, 4 Chilanga, 3 Choma, 2 Lufwanyama, 2 Mazabuka, 1 Masaiti, 1 Mufulira,
	2 Deaths	1 Lusaka, 1 Kabwe
	514 Recoveries	323 Lusaka, 170 Copperbelt, 17 Muchinga, 3 North-western, 1 Southern
1 st August, 2020	265 Cases	161 Lusaka, 31 Ndola, 30 Chingola, 14 Kitwe, 10 Chililabombwe, 8 Kalumbila, 4 Kabwe, 2 Chilanga, 2 Mansa, 2 Mpongwe, 1 Chinsali
	14 Deaths	14 Lusaka (10 Community deaths; 4 Facility deaths)
	327 Recoveries	315 Lusaka, 6 Muchinga, 6 North-western
2 nd August, 2020	119 Cases	119 Lusaka
	5 Deaths	5 Lusaka (4 Community deaths; 1 Facility death)
	363 Recoveries	356 Lusaka, 3 North-western, 2 Central, 2 Eastern
TOTAL	1,866 new confirmed cases; 31 deaths; 2,143 recoveries	

- **Laboratory and sample management:** The currently **designated laboratories** for COVID-19 diagnostics are listed below (Table 2). 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. Testing facilities are available in five of the 10 provinces.

Table 4: National Laboratory Diagnostic Capacity for COVID-19 by province, July 2020

PROVINCE	INSTITUTION	TESTING PLATFORM
Lusaka	UTH	RT-PCR; Gene Xpert; Cobas 6800
	UNZA – SVM	RT-PCR
	CIDRZ	RT-PCR
	MEDLand	RT PCR
Copperbelt	TDRS	RT-PCR
	ADCH	Cobas 6800
Southern	MACHA RT	RT-PCR
Muchinga	CHINSALI DH	Gene Xpert & PCR
Eastern	CHIPATA GH	Gene Xpert

- In the last 7 days, **9,042 tests** were conducted, out of which **1,866** samples tested positive for SARS-CoV-2. Below is a graph showing the daily tests conducted vs. the daily rate of positive cases between 27th July and 2nd August, 2020

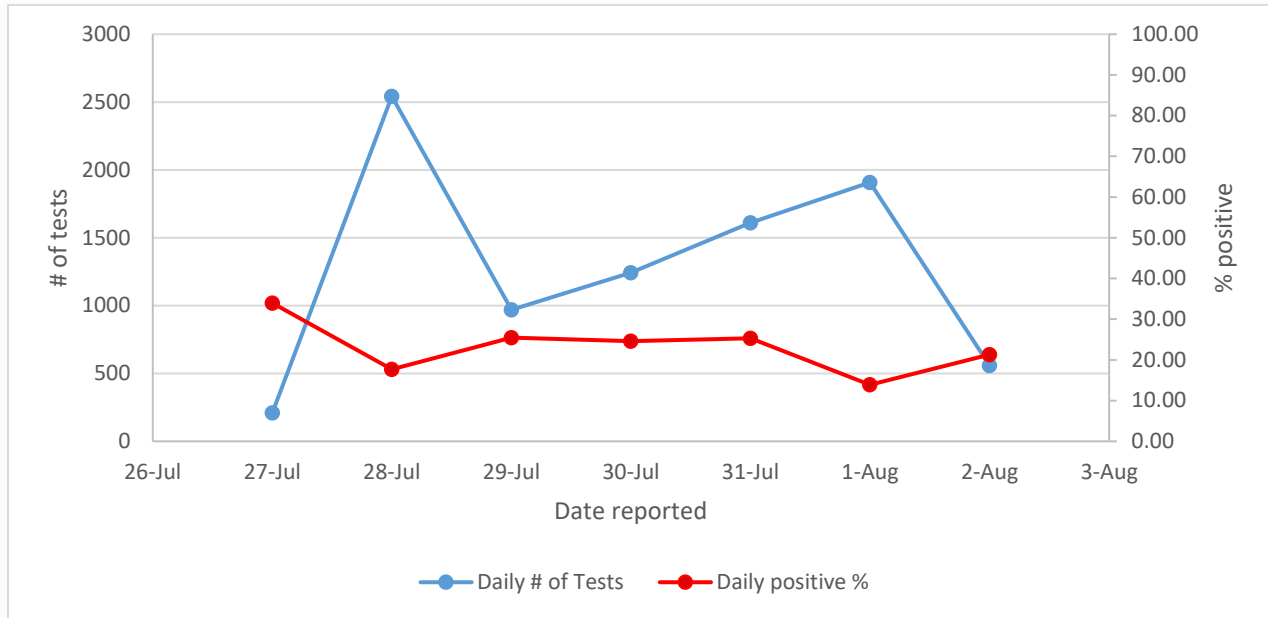


Figure 5: Daily number of tests vs % of positive results recorded between 27th July and 2nd August, 2020

- A total of **85,560 tests** have been conducted to date with a cumulative **6,347 confirmed positive (7.42% positivity rate)** for SARS-CoV-2. The testing coverage is **5,033 per 1,000,000 population**

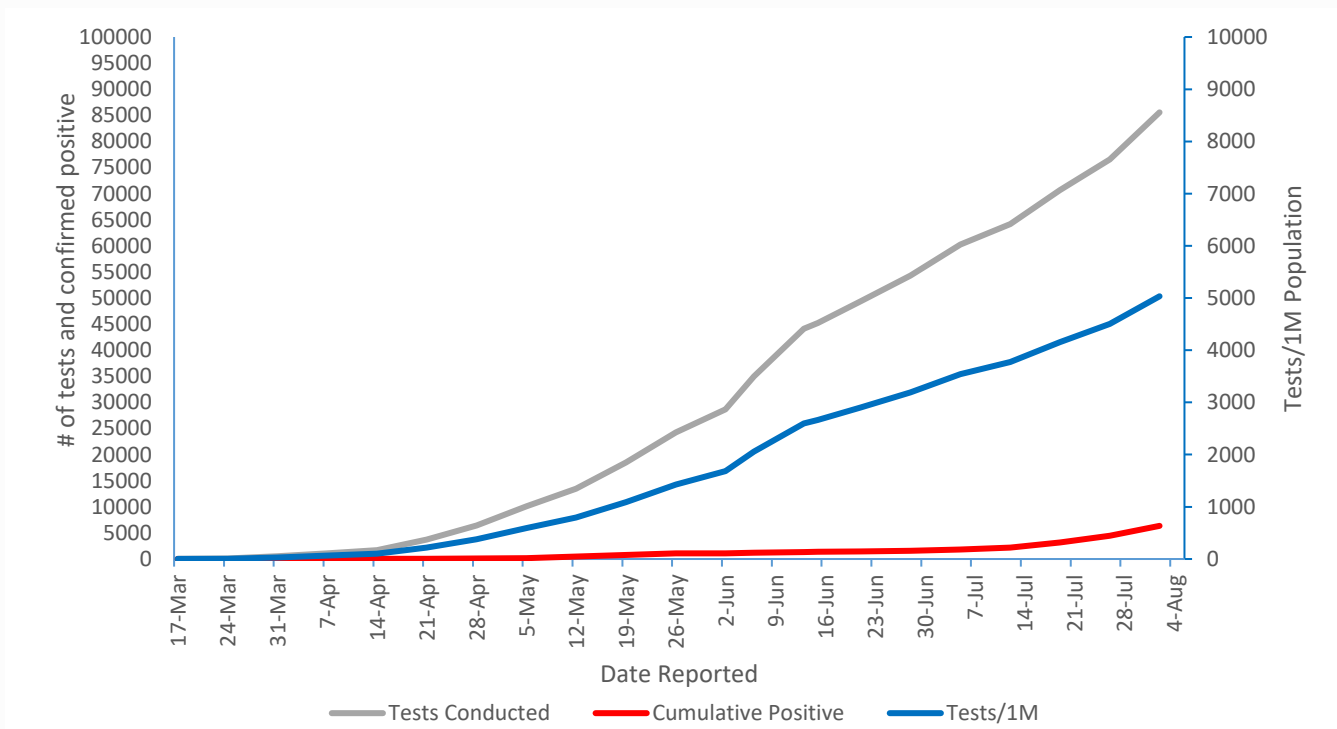


Figure 6: Graph showing cumulative number of PCR tests conducted, confirmed cases and tests per 1M population between 17th March and 2nd August, 2020

➤ **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.

- 119 new cases were identified in the last 24hrs; all from Lusaka.
- 363 patients were discharged following recovery; 356 Lusaka, 3 North-western, 2 Central, 2 Eastern
- There are currently **1,684 active COVID-19 cases** being managed. Among the active cases, 40 currently require oxygen and five are in the Intensive Care Unit (ICU)
- A community model to manage stable patients was introduced in April 2020.
- Below is the admission and discharge criteria for persons who test positive for COVID-19:

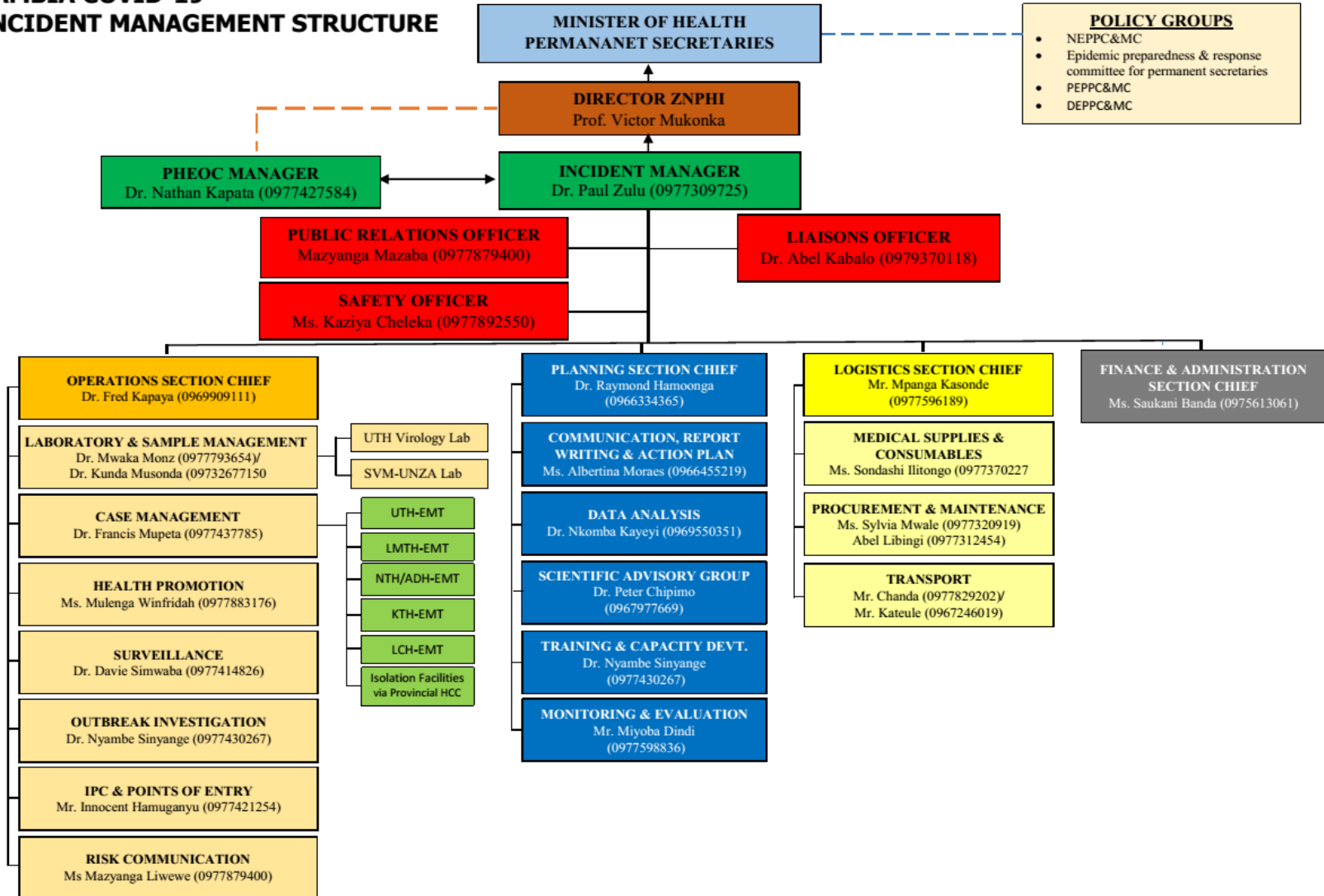
S E T T I N G	Hospital/Facility Care	Patients with Medical Conditions requiring continued Care beyond COVID-19 Recovery	Home Care
A D M I S S I O N	<ul style="list-style-type: none"> ➔ Any symptoms for COVID-19 ➔ Asymptomatic High-Risk patients ➔ Presence of other Medical conditions ➔ Where Home Isolation 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: Admission and Discharge criteria for COVID-19 patients

- **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 ZNPFI website

ANNEX 1: NATIONAL LEVEL INCIDENT MANAGEMENT SYSTEM FOR THE COVID-19 PREPAREDNESS RESPONSE

ZAMBIA COVID-19 INCIDENT MANAGEMENT STRUCTURE



ANNEX 2: 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 3: 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