

REPUBLIC OF NAMIBIA



MINISTRY OF HEALTH AND SOCIAL SERVICES

MINISTERIAL STATEMENT ON COVID-19 IN NAMIBIA

17 February 2021

WINDHOEK

**Check against Delivery*

Hon Speaker
Hon Members

1. I take the floor to brief this August House on the following issues: the status of Covid-19 in Namibia; the Covid-19 vaccination programme and the status of clinical and pharmaceuticals supplies in Namibia.

Status of Covid-19 in Namibia

2. It is almost one year since Namibia recorded the positive index COVID-19 on the 13 March 2020. On the 8th of September 2020, I delivered a Ministerial Statement in this August House on the COVID-19 situation in the country. Following the lapse of the State of Emergency on the 17 September 2020, the legal framework to regulate the COVID-19 response and preparedness is anchored on the Public Health COVID-19 Regulations issued by the Minister responsible for health under the Public and Environmental Health Act, 2015 (Act No. 1 of 2015).
3. As the nation is aware, a current dispensation came into force at midnight on 4th February 2021 and will lapse midnight on the 24 February 2021. This is part of the ongoing implementation of the measures to control and suppress the spread of COVID-19 and protect the health of Namibians. Indeed, we have learnt important and valuable lessons in combating the pandemic over the past 11 months. Namibia continues to strengthen our response on the basis of available scientific, epidemiological, social and economic data. Our focus remains on the imperative of protecting lives, securing livelihoods and reviving our national economy.
4. During the last few weeks, we have seen an upward trajectory in the number of cases recorded in Namibia. We note with concern that the peak of the first wave on 23 August 2020, which reached 316 cases, has been eclipsed by the second wave which reached 683 cases on 25 December 2020. Also, worryingly, the number of deaths has increased, surpassing the figures estimated in our disease projections models. These figures indicated that Namibia would have recorded 338 deaths due to COVID-19 by March 2021. However, by 17 February 2021, Namibia has recorded 394 deaths. Although the number of deaths is high, other figures, such as those related to the projected number of infections, hospitalizations and case severity, have not been exceeded.
5. It is a source of encouragement and satisfaction that we have built capacity and have so far been able to admit and treat all Covid-19 patients who needed hospitalization. In other words, we have built the capacity for admission and treatment in terms of high care and intensive care units in the public and private sectors. The availability of isolation and intensive care unit beds are monitored and reported on a daily basis. We know, on any

given day, how many Covid-19 isolation and ICU beds are available. Table 1 below shows the number of Covid-19 health facility beds both in public and in private sectors.

Table 1: Number of Covid-19 beds in the country

Sector	Number of healthcare Isolation beds	Number of Highcare/ICU beds	Number of ventilators in Covid-19 beds
Public	698	131	111
Private	115	35	25
Total	813	166	136

6. I must state that Namibia has done relatively well in terms of the numbers of Covid-19 tests conducted. We have significantly increased local testing capacity and cleared backlogs that were experienced in the past. Covid-19 test results now can be available between 24 and 48 hours. In terms of continental statistics on Covid-19 testing, Namibia stands at number 3 with 13 per 1 000 population. Only Morocco and South Africa have conducted more tests, per capita than Namibia.
7. Let me also clear the air about some concerns raised in diplomatic circles about Namibia's capacity to speedily issue Covid-19 test results. We have completed the validation of antigen Rapid Test Kits. This will allow for speedier and timely isolation of positive cases as well as expedited testing for departing tourists for jurisdictions that accept negative Rapid Test results for returning passengers. We have engaged the Ministry of International Relations and Cooperation for appropriate communication with the diplomatic and international community on the matter.

COVID-19 Vaccination programme in Namibia

8. Namibia has made progress in preparation to acquire suitable COVID-19 vaccines. Namibia has made financial commitment to purchase doses sufficient to vaccinate 20% of the target population through the COVAX Facility. We have put in place mechanisms to ensure country readiness to roll out the Covid-19 vaccines. The Covid-19 Vaccine Taskforce was established and developed the National Covid-19 Deployment and Vaccination Plan. The Task Force continues to review the latest evidence, training needs of our health workers and all regulatory, legal and safety frameworks to ensure a high-quality vaccination campaign.
9. The Namibia Medical Regulatory Council is providing the necessary guidance and regulatory oversight. Vaccines go through stringent evaluation to ensure that they are safe and efficacious. In Namibia, Polio, Measles, and Tuberculosis Prevention Vaccines have worked very well to protect our people and to date we have those diseases under control.

We hope to achieve the same impact with Covid-19 vaccination campaign which will be rolled out under the Expanded Programme of Immunization (EPI).

10. Namibia will collaborate with Botswana in areas related to procurement of vaccine, regulatory approval of vaccines, delivery of vaccines, bilateral agreement for vaccination of citizens who reside in each other's country, sharing of evidence and best practice in vaccine deployment, technical exchange visits and training, sharing surveillance reports, safety and reports of any Adverse Events following immunization (AEFI) and other opportunities for collaboration as they emerge.
11. Namibia will procure vaccines to immunize at least sixty percent (60%) of its population against Covid-19. This is the minimum required in order for our country to achieve herd immunity. During the last briefing on the 13 January 2021, I informed the public that Namibia will receive the first consignment of vaccines from the COVAX Facility by the end of January or beginning of February 2021. This was based on a formal letter from COVAX Facility, dated the 6 January 2021.
12. I have since received another letter from COVAX Facility dated the 29 January 2021 stating that Namibia can expect to be distributed doses of AstraZeneca vaccine during mid or late February 2021, subject to WHO Emergency Use Listing (EUL). The WHO Emergency Listing has now taken place. It is pleasing that private medical aid schemes and business community have expressed readiness to complement government efforts in the procurement and participation in the vaccination campaign.
13. Apart from the COVAX Facility, we are in discussion with governments and manufacturers of Covid-19 vaccines in countries such as China, the Russian Federation, India and United States of America in order to secure additional vaccine supplies to cover the remaining 40% of the population. All the vaccines that are currently available are acceptable to Namibia. The choice of the vaccine takes into consideration the availability of the vaccine, cold chain imperatives and of course the cost amongst others.
14. We have received enquiries on the AstraZeneca vaccine following reports that South Africa who took delivery of this vaccine has put on hold the roll-out of the vaccine campaign. It was found in South Africa that AstraZeneca vaccine is less effective in mild and moderate cases of the new Covid-19 variant that is circulating in that country. We are carrying out investigations to establish with certainty whether the new Covid-19 variant is present in Namibia and the extent of its prevalence. In the meantime, our preparations for Covid-19 vaccine roll-out are ongoing. Studies are ongoing elsewhere to establish the safety and effectiveness of AstraZeneca among person who are more than 65 years old; who are below 18 years and among pregnant women. The safety and effectiveness of AstraZeneca in these age groups and categories have not been established scientifically. WHO recommends that AstraZeneca vaccine can be given to all persons 18 years and above.

15. We are disturbed by misinformation and false claims against the safety and benefits of the vaccines to individuals. Countries are scrambling to obtain vaccines for their citizens and individuals in Europe and USA are competing to be vaccinated and protected against Covid-19. I call on the Namibian people not to be misled and to have faith in the government to safeguard their health.
16. The second wave of Covid-19 has further highlighted the imperative of ensuring that our people comply with the health measures. If we slip up and if we lower our guard, the consequences will be dire and even deadly. For this reason, we must all do our part to protect ourselves and our families. The power to defeat this pandemic is in our own hands.

Status of Clinical and Pharmaceuticals supplies in the Namibia

17. It is a known fact that up to 85% of the Namibian population depend on state funded health facilities for their health needs. The Ministry of Health and Social Services, as the custodian of public health care services, strives to maintain a robust public health care system in the country. In addition to the provision of physical infrastructure, recruitment of a critical mass of health care workers, and procurement of equipment, the provision and availability of safe and reliable pharmaceuticals, is a critical component in the delivery of quality public health care services. I am pleased to state that despite challenges experienced, the supply of pharmaceuticals has improved markedly over the past months. Many categories of pharmaceuticals have been ordered and received at Central Medical Stores and distributed to health facilities around the country. In terms of statistics, the Service Level of the Central Medical Stores to health facilities around the country has improved from 63% in January 2019 to 81% in January 2021.
13. I wish to further point out that the procurement of pharmaceuticals is a complex process. Namibia does not manufacture the pharmaceuticals we use. This means that we import literally all the medicines and the majority of clinical supplies we use in the country. Medicines are manufactured with what is known as Active Pharmaceutical Ingredients (APIs). There are times when these Active Pharmaceutical Ingredients are in short supply on the global market. When that happens, it is not possible to manufacture the affected pharmaceuticals, leading to the shortage of these products. This situation affects Namibia, like it affects other countries around the world. I am happy to report Honourable Speaker that the supply of most medicines in the following categories has improved:
 - Hypertension
 - Psychotropics
 - Contraceptives
 - ARVs
 - Antibiotics

14. Out of 493 **Active Clinical supplies**, 370 or 75% are currently in stock and 123 or 25% are out of stock at Central Medical Stores (CMS). However, of the items out of stock at CMS, there are quantities at health facilities around the country for use and also for inter-facility lending. Of the 123 clinical supplies currently out of stock, 94 or 76% of them are on order and 16 or 13% are in the procurement pipeline. Of the remaining 11%, some were cancelled because of overdue deliveries by suppliers. They will be included in the upcoming advertisements for orders.
15. Out of **585 Active Pharmaceutical Supplies**, 425 or 75% are currently in stock and 157 or 27% are out of stock at CMS. However, limited amounts are available at health facilities around the country for use and for inter-facility lending. Of the 157 active pharmaceutical supplies out of stock, 60% are on order and 29% are in the procurement pipeline. The remaining 11% were canceled because of long overdue delivery of orders by suppliers and will be included in the upcoming procurement adverts. I urge suppliers to fulfil their obligations and deliver the orders on time. The delays caused in this manner are undermining our efforts to deliver quality health care services to the nation. The Ministry can only supply the 4 referral hospitals, 34 district hospitals, 44 health Centres and 285 Clinics around the country with clinical and pharmaceutical supplies if those who were given tenders to supply fulfil their contractual obligations.
16. The main challenges that affected the availability of pharmaceuticals and clinical supplies in the country during the 2020/2021 Financial Year related to supply chain interruptions due to Covid-19, shortage of Active Pharmaceutical Ingredients for some products, and demand fluctuations for pharmaceuticals and clinical supplies in light of the Covid-19 pandemic.
17. The Ministry will continue to strengthen our planning and procurement processes to ensure a secure supply of these critical items. The health of our people is our priority. A healthy nation is a productive nation. We will therefore do all that we can to secure the health of our people. I call upon members of the public to refrain from distributing information based on lack of understanding of the status of availability of pharmaceuticals in the country. Concerns that any member of the public may have should be directed to the Ministry so that accurate and truthful information and clarification can be provided. This way, we can help to strengthen our public health system together.

I thank you for your kind attention.