1. SITUATION UPDATE

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

- 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.

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-to-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 ZNPHI 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, ZNPHI
  - The Incident Management System (IMS) continues to meet at the ZNPHI (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](image-url)

  **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

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

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

<table>
<thead>
<tr>
<th>PROVINCE</th>
<th>INSTITUTION</th>
<th>TESTING PLATFORM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lusaka</td>
<td>UTH</td>
<td>RT-PCR; Gene Xpert; Cobas 6800</td>
</tr>
<tr>
<td></td>
<td>UNZA – SVM</td>
<td>RT-PCR</td>
</tr>
<tr>
<td></td>
<td>CIDRZ</td>
<td>RT-PCR</td>
</tr>
<tr>
<td></td>
<td>MEDLand</td>
<td>RT PCR</td>
</tr>
<tr>
<td>Copperbelt</td>
<td>TDRC</td>
<td>RT-PCR</td>
</tr>
<tr>
<td></td>
<td>ADCH</td>
<td>Cobas 6800</td>
</tr>
<tr>
<td>Southern</td>
<td>MACHA RT</td>
<td>RT-PCR</td>
</tr>
<tr>
<td>Muchinga</td>
<td>CHINSALI DH</td>
<td>Gene Xpert &amp; PCR</td>
</tr>
<tr>
<td>Eastern</td>
<td>CHIPATA GH</td>
<td>Gene Xpert</td>
</tr>
</tbody>
</table>
• 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

![Graph showing daily tests conducted vs. daily rate of positive cases between 27th July and 2nd August, 2020](image)

**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**

![Graph showing cumulative number of PCR tests conducted, confirmed cases and tests per 1M population between 17th March and 2nd August, 2020](image)

**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:

![Figure 6: Admission and Discharge criteria for COVID-19 patients](image)

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

ZAMBIA COVID-19 INCIDENT MANAGEMENT STRUCTURE

MINISTER OF HEALTH PERMANANET SECRETARIES

DIRECTOR ZNPHI Prof. Victor Mukonka

INCIDENT MANAGER Dr. Paul Zulu (0977309725)

PHEOC MANAGER Dr. Nathan Kapata (0977427584)

PUBLIC RELATIONS OFFICER Mazanya Mazaba (0977879400)

SAFETY OFFICER Ms. Kaziya Cheleka (0977892550)

LIAISONS OFFICER Dr. Abel Kabalo (0979370118)

OPERATIONS SECTION CHIEF Dr. Fred Kapaya (0969609111)

LIVERATORY & SAMPLE MANAGEMENT
Dr. Mwaka Mwera (0977785646)
Dr. Kandia Mupasi (0973267150)

CASE MANAGEMENT Dr. Francis Mupeta (0977437785)

HEALTH PROMOTION Ms. Mulenga Winifridth (0977883176)

SURVEILLANCE Dr. Davie Sinumwa (0977414826)

OUTBREAK INVESTIGATION Dr. Nyambe Sinyainge (0977480267)

IPC & POINTS OF ENTRY Mr. Innocent Hamuganyu (0977421254)

RISK COMMUNICATION Ms. Mazanya Lieuwwe (0977879400)

PLANNING SECTION CHIEF Dr. Raymond Hainonga
(0966334365)

COMMUNICATION, REPORT WRITING & ACTION PLAN
Ms. Albertina Mupasi (0966455219)

DATA ANALYSIS Dr. Nkomba Kayeye (0969650035)

SCIENTIFIC ADVISORY GROUP Dr. Peter Chipimo
(0967977069)

TRAINING & CAPACITY DEVT. Dr. Nyambe Sinyainge
(0977430267)

MONITORING & EVALUATION Mr. Miyoba Dindi
(0977598236)

UTO Virology Lab
SVM-UNZA Lab
UTH-EMT
LMTH-EMT
NTH/ADH-EMT
KTH-EMT
LOH-EMT
Isolation Facilities

LOGISTICS SECTION CHIEF Mr. Mphango Kasondo
(0977596189)

TRANSPORT Mr. Chanda (0977529202)
Mr. Kateule (097246019)

FINANCE & ADMINISTRATION SECTION CHIEF
Ms. Sunikuru Bandu (0975613061)

POLICY GROUPS
NEPPC&MC
Epidemic preparedness & response committee for permanent secretaries
PEPPC&MC
DEPPC&MC

MOH/ZNPH/WHO
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

<table>
<thead>
<tr>
<th>Name of Hotel</th>
<th>Bed capacity</th>
<th>Contact Person</th>
<th>Contact number</th>
<th>Estimated cost in USD (negotiable)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Radisson Blu</td>
<td>120</td>
<td>John Klana</td>
<td>0977758823</td>
<td>100</td>
</tr>
<tr>
<td>Fallsway Apartments</td>
<td>50</td>
<td>Raj</td>
<td>0976024254</td>
<td>100</td>
</tr>
<tr>
<td>Hilton</td>
<td>40</td>
<td>Kudzayi</td>
<td>0960998475</td>
<td>65</td>
</tr>
<tr>
<td>Malanga Village</td>
<td>25</td>
<td>Ngoza</td>
<td>0964066685</td>
<td>65</td>
</tr>
<tr>
<td>Shakespeare Apartments</td>
<td>25</td>
<td>Oscar Mumba</td>
<td>0966431386</td>
<td>65</td>
</tr>
<tr>
<td>Skyview lodges</td>
<td>52</td>
<td>Mwakoi Katanekwa</td>
<td>0950628444</td>
<td>50</td>
</tr>
<tr>
<td>Chamba valley Exotic Lodge</td>
<td>90</td>
<td>Wally Makwele</td>
<td>0977463859</td>
<td>50</td>
</tr>
<tr>
<td>Wild dog</td>
<td>52</td>
<td>Reception</td>
<td>0971760423</td>
<td>65</td>
</tr>
<tr>
<td>Mahak Lodge &amp; Indian Restaurants</td>
<td>25</td>
<td>Rajesh Kumar</td>
<td>0971194151</td>
<td>35</td>
</tr>
</tbody>
</table>