

REPUBLIC OF NAMIBIA



MINISTRY OF HEALTH AND SOCIAL SERVICES

STATEMENT BY DR KALUMBI SHANGULA, MINISTER OF HEALTH AND SOCIAL SERVICES ON HIV/AIDS AND COVID-19 SITUATION IN NAMIBIA

26 January 2023

WINDHOEK

**Check against Delivery*

Honourable Deputy Minister of Health and Social Services, Dr Esther Muinjangué
The Executive Director of the Ministry of Health and Social Services, Mr Ben Nangombe
Esteemed Members of the Media Fraternity
Ladies and Gentlemen!

1. Since this is the first time we are meeting this year, allow me to convey to you, on behalf of the Ministry of Health and Social Services and indeed on my own behalf our best wishes for the year 2023. I express the confidence that we will continue to work together in a constructive manner as has been the case in the past years.
2. During this first engagement, I will share with you information on two public health issues, namely, HIV/AIDS epidemic and Covid-19-pandemic in Namibia. I start with the former.
3. I address HIV/AIDS epidemic in Namibia in light of the current public discourse on the procurement of clinical supplies. There has been, in recent weeks, extensive and intense commentary on the tender, adjudicated and evaluated by the Central Procurement Board of Namibia for the supply of clinical items to the Ministry of Health and Social Services. The notice of award was publicized on 11 January 2023. The CPBN has indicated that the notice is subject to reconsideration by the Board in the event of objections by any bidder.
4. Calls have also been made from different quarters for the said tender to be cancelled. Most of the comments and dissatisfaction on the tender relate to the supply of surgical gloves and latex condoms. The Central Procurement Board of Namibia has provided clarification on these matters. There are 492 items on this tender including gloves and condoms. Most of the items are for OPD, Casualty, IPD, Theatre, ICU, Maternity Ward among others. Cancellation of this tender will paralyse the operations of the Ministry, endanger public health and put human life at great risk.
5. Let me explain briefly the role of the Ministry in the tendering process. The Ministry identifies its needs, compile a list of her needs, determine quantities and specifications and send these to the Central Procurement Board of Namibia. The role of the Ministry starts and ends there. When the CPBN has completed its work, it informs the Ministry which supplier has been selected.
6. It is a matter of great concern that there are unfortunate and dangerous views being spread both in the traditional/mainstream and social media that the procurement, supply and availability of condoms as a public health intervention are not useful. Nothing can be more dangerous nor further from the truth. Yes, it is true notable progress has been achieved in the fight against HIV/AIDS in Namibia. This was possible through a combination of interventions, including awareness creation, prevention and initiation to treatment. The international targets on the elimination of HIV AIDS as a public health threat by 2030 are premised on the 95-95-95 fast tracked targets. On this cascade, Namibia now stands at 98-92-93. This means that in Namibia, 98% of persons who are HIV positive know their status; 92% of them have been initiated on treatment; and 93% of those who have been initiated on treatment are virally suppressed. Viral suppression is important because a person who is virally suppressed is less likely to transmit the virus to a partner during sexual intercourse.

7. However, the gains that Namibia has made in the fight against HIV/AIDS are fragile. Let me take the nation down memory lane to 2002. This was at the peak of the HIV epidemic in Namibia. During that time, antiretroviral treatment was not available. Hospitals were overwhelmed by people suffering from HIV/AIDS. There were 12 000 deaths each year due to AIDS. Data shows that there were more than 17 000 new infections per year.
8. By 2022, we were able to gain control of the epidemic. Number of annual deaths among People Living with HIV has more than halved. Rate of new HIV infections is almost 4 times lower. Number of new HIV infections among children under the age of 1 year has decreased by over 90%. Hospitals and health system are no longer overwhelmed by HIV/AIDS. People Living with HIV have free, universal access to Anti-Retroviral Therapy (ART) and can live long, healthy lives. Weekends are no longer characterized by burials.
9. However, despite the gains of the past two decades, there are still 6 000 new HIV infections and 3 000 deaths from HIV/AIDS, each year in Namibia.
10. Intensive campaigns about HIV prevention have reduced over time, and some people have become complacent about behaviors that can spread HIV, such as having multiple sexual partners and having unprotected sex. This has led to a reduction in the use of simple, effective prevention measures such as using a condom.
11. Without critical HIV prevention and control measures, the epidemic could spiral out of control. More than 13% of Namibian adults are HIV-positive. This translates into 219 000 people living with HIV in the country. Most People Living with HIV who are taking their medication correctly every day, are stable, and will live long healthy lives. However, approximately 33 000 People Living with HIV either do not know their status, or do not have the virus under control. This means that they may transmit the infection to sexual partners. HIV-positive pregnant and breastfeeding mothers, can pass the virus to their children.
12. All of this means that the gains of the past two decades are fragile, and the number of new cases of HIV could increase rapidly if we fail to continue to do what is necessary to prevent and control the spread of HIV.
13. The critical keys to maintaining epidemic control include the following:
 - *Identification*
Finding People Living with HIV who do not know their status is critical. When found, they are to be linked to treatment. This will improve their health and prevent them from transmitting the virus unknowingly to others.
 - *Treatment*
If People Living with HIV are adherent to current anti-retroviral regimens, the virus becomes suppressed and eventually undetectable in their blood. This means that they cannot transmit the virus to others.
 - *Prevention*
Prevention of the spread of the virus include Voluntary Medical Male Circumcision (VMMC), condom use, and pre-exposure prophylaxis (PrEP). These measures are effective biomedical prevention methods to stop the spread of the virus.

14. I emphasize that condoms are a highly effective and cost-effective prevention intervention. Condoms not only protect against HIV, but also prevent unintended pregnancies and the spread of other sexually transmitted infections. The Ministry of Health and Social Services makes condoms available free of charge in communities. The availability of condoms gives people a simple and effective way to reduce the risk of HIV exposure, spread of sexually transmitted infections and unplanned pregnancies. It cost less than a dollar to prevent HIV infection using a condom. It costs approximately N\$300 000.00 to treat an HIV-positive client over an average lifespan.
15. The bottom line is despite the incredible achievements of the past two decades, the HIV epidemic in Namibia is a tinderbox, and without careful vigilance and attention, it could rapidly spin out of control. The consequences will be dire. For this reason, we need to act, and communicate responsibly, least we send a wrong message to the public.
16. Condom use has always been part of a package in our arsenal to fight HIV/AIDS. The Ministry has always budgeted and bought condoms every year. This is not something new.
17. I now proceed to share information on Covid-19 pandemic in the country.
18. For the past week, 16-22 January 2023, we recorded one hundred and twenty-six (**126**) positive cases from six-hundred and fifty-nine (**659**) tests conducted, representing **19.1%** positivity ratio. Among these positive cases nine (**9**) are reinfections. The sex distribution is sixty-four (**64**) females and sixty-two (**62**) males. The age ranges from one (**1**) year to ninety-nine (**99**) years.

Table 1: New COVID-19 positive cases & reinfections, 16-22 January 2023

Region	New Cases	Reinfections	Total
Kavango East	44		44
Oshana	17		17
Erongo	14	2	16
Karas	11	4	15
Erongo	10		10
Oshana	5		5
Karas	5		5
Otjozondjupa	4	1	5
Oshikoto	3		3
Hardap	2	2	4
Kunene	2		2
Total	117	9	126

19. The number of tests decreased by 23% compared to the previous week of 9-15 January 2023 whereby 853 tests were conducted. The number of cases recorded increased by 6% from 119-126. Correspondingly, the positivity ratio has increased by 36.4%.
20. Cases were reported from eleven (**11**) regions. Of these positive cases, twenty (**20**) are learners, six (**6**) students, two (**2**) are health care workers, and two (**2**) teachers.

21. Twelve (12) cases received one dose of COVID-19 vaccine, twenty-three (**23**) were fully vaccinated of which eleven (**11**) received a booster dose, eleven (**11**) were not eligible and eighty (**80**) cases are not vaccinated. More cases (64%) are unvaccinated.
22. We recorded ninety-six (**96**) recoveries from nine (**9**) regions during the reporting period.
23. As of 22 January 2023, there were one hundred and eighty-four (**184**) active cases.
24. There were nineteen (**19**) cases admitted during the course of the reporting period. By 22 January 2023, seven of these cases, were still hospitalized. Four (4) of them were vaccinated with 2 doses of the COVID-19 vaccines. The remainder were not vaccinated.
25. We are reporting two (2) deaths during this reporting period. A 68-year-old male from Rundu district died on 22 January 2023 due to Covid-19 and a 59-year-old male from Onandjokwe district died on 14 January 2023 from Covid-19 related illness. Both died at health facilities and both were not vaccinated.
26. The cumulative number of people vaccinated with the first dose of the COVID-19 vaccine for both adults and children is **580 731** of which **503 839** are fully vaccinated, translating to **28.3 %** of the total target population (1 779 271).

Table 5: Summary of the national update, as at 22 January 2023

Cumulative confirmed individuals excluding reinfections	167 593
Cumulative cases including reinfections	170 724
Newly confirmed individuals	117
New reinfections	9
Recoveries	166 356
Recovery rate	99.4%
Active cases	156
Cumulative COVID-19 vaccine 1 st dose	580 731
Cumulative COVID-19 vaccine 2 nd dose	291 705
Cumulative COVID-19 vaccine completed	503 839
COVID-19 Deaths	3 727
COVID-19 Related Deaths	361
Total Deaths	4 088
Total samples tested	1 092 883

10. Key message

- 10.1. Since the 15 July 2022 when Covid-19 regulations ceased to operate, the responsibility for infection control and prevention transferred from government to individuals, families and communities.

- 10.2. We learned good practices during Covid-19 pandemic, including personal hygiene and etiquette that have served us well in controlling the infection. We are encouraged to continue with such practices going forward.
- 10.3. The most effective tool against Covid-19 pandemic is vaccination. Our data shows that the overwhelming majority of new infection, hospitalization and death are invariably those individuals who have not been vaccinated. I therefore implore those who have not been vaccinated to do so.
- 10.4. The Ministry will continue and intensify our surveillance and will update the public when warranted. In the meantime, we should remain calm and continue to work together to prevent any upsurge in the number of cases.

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