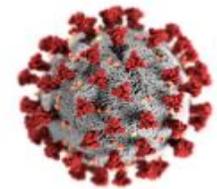


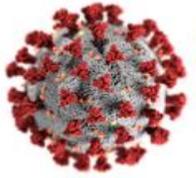


# COVID-19 Pandemic in Zimbabwe: An Overview and Vaccine Update

Presented by  
Dr A Mahomva, Chief Coordinator

09 March 2021  
Media Centre Webinar

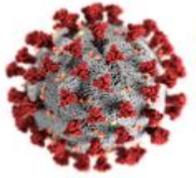




# Presentation Outline

- Brief overview of the COVID-19 Pandemic in Zimbabwe
  - ✓ Our numbers and Epidemic curve
  - ✓ Lessons learnt
  - ✓ Capacities built
- National COVID-19 Vaccine Deployment Plan
- Vaccination roll out update
- Conclusion

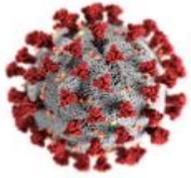




# General overview

- The COVID-19 pandemic has caused untold suffering throughout the world.
- Zimbabwe has not been spared. By the end of Monday 08 March 2021 Zimbabwe's
  - ✓ Cumulative number of cases was 36 289
  - ✓ Recoveries were 33 872
  - ✓ Deaths at 1 487



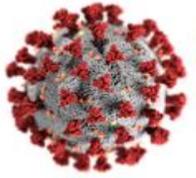


# Overview and Whole of Government Approach

National Preparedness and Response Plan developed in March 2020 – Goal was to Minimize adverse impact of COVID-19 with a focus on morbidity and mortality

- Includes prevention, containment and mitigation strategies.
- Structured around 8 strategies/Pillars consistent with WHO guidelines
  1. Surveillance,
  2. Testing/Laboratories
  3. Case management
  4. Infection Prevention Control
  5. Risk Communication
  6. Procurement
  7. Ports of Entry
  8. Coordination

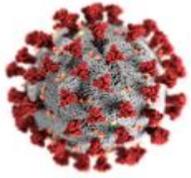




# Overview and Whole of Government Approach

- A Cabinet Inter-Ministerial Task Force (TF) with 8 Sub-Committees for **a whole of government and society response**
- Command Centre
- Experts Advisory Committee for evidence ie science-based advice and guidance to the national response





**Zimbabwe COVID-19  
CABINET Inter-Ministerial Task Force**

**Command Centre**  
Including  
**Implementation M&E  
Subcommittee**

**Chief Coordinator,  
Office of the President and Cabinet**

**Working Party of Permanent Secretaries  
for**  
Day to day Implementation and Production of  
consolidated subcommittee reports

**Expert Advisory Committee**  
Evidence based Advice and  
guidance  
**(Team of Experts)**

**Health Strategy and Infrastructure Sub-Committee**

Lead: Ministry of Health & Child Care

**Focus/Pillars:**

1. Surveillance
2. Lab/Testing
3. Case Mn
4. IPC
5. Ports of Entry
6. Risk Communicate
7. Procurement
8. Pillar Coordination
9. **Vaccines/EPI**

Provincial Public Health EOC

**Primary and Secondary Education Sub-Committee**

Lead: Ministry of Primary and Secondary

**Focus:** Reopening of schools

**Resource Mobilization Sub-Committee**

Lead: Ministry of Local Government, Public Works and National Housing

**Focus:** Resource mobilization

**Risk Communication Sub-Committee**

Lead: Ministry of Information, Publicity and Broadcasting

**Focus:** Awareness, Community engagement, Media Mn

**Food, Water & Sustainability Sub-Committee**

Lead: Ministry of Public Service, Labour Social Welfare

**Focus:**

1. Quarantine facilities;
2. Grain and Water distribution
3. Social Welfare;

**Materials Production Sub-Committee**

Lead: Ministry of Industry & Commerce

**Focus:** Local production of PPE and other COVID-19 consumables

**Law and Order Sub-Committee**

Lead: Ministry of Home Affairs and Cultural Heritage

**Focus:** Enforcement of COVID-19 containment measures

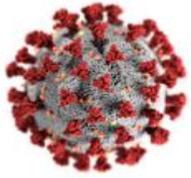
**Transport and Logistics Sub-Committee**

Lead: Ministry of Transport and Infrastructural Development

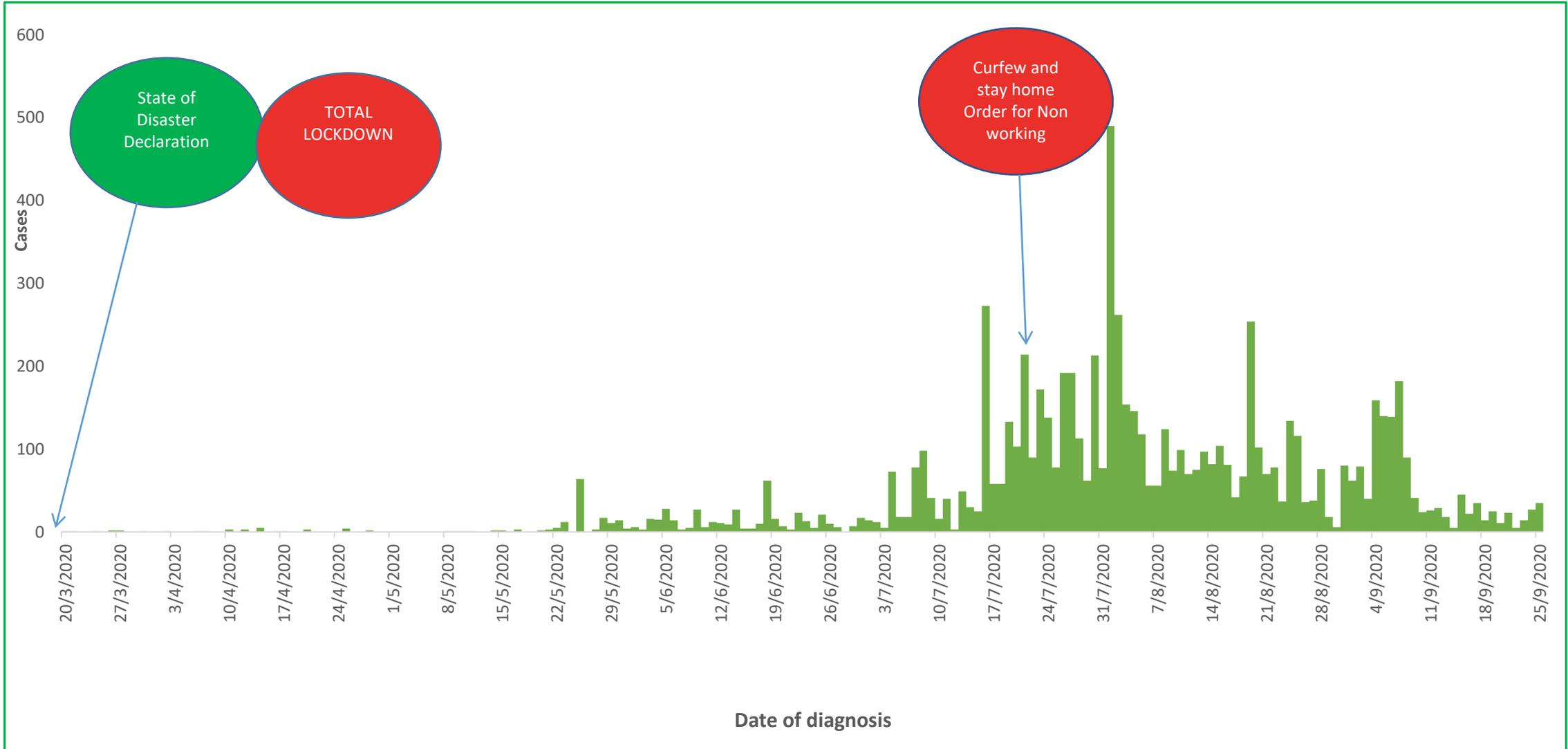
**Focus:** Transport and logistics

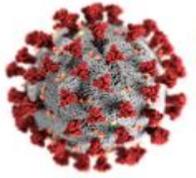
**Zimbabwe National COVID-19 Management and Coordination Structure**





# Zimbabwe COVID-19 Epidemic curve as of 25 September 2020:

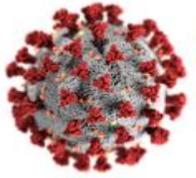




# Lessons learnt at the end of the first wave

- Zimbabwe delayed COVID-19 epidemic through stringent Public Health and Social Measures (PHSM), including a total lockdown, enacted very early
- Number of new COVID-19 infections decreased towards the end of October - The epidemic was coming under control
  - ✓ Implementation of PHSMs contributed to this decrease
- The need to follow science in addressing the pandemic whilst recognizing that it was a human socio-behavioral driven disease was key.
- Whole of Government and Whole of Society (public and private) approach strengthened the national response

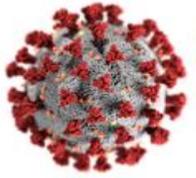




## Capacities Built: Laboratory, Case Management and Isolation Facilities

- Seven COVID-19 PCR confirmatory Laboratories including 2 private laboratories were introduced nation wide
- COVID-19 PCR Confirmatory testing was further expanded to all 52 District laboratories using GeneXpert machines.
- Case management and isolation facilities were initially designated at the two main national infections diseases hospitals (Wilkins in Harare and Thorngrove in Bulawayo) only.
  - ✓ Additional case management and isolation facilities including some private facilities were identified in each of all 10 Provinces and major urban areas

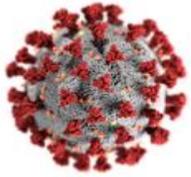




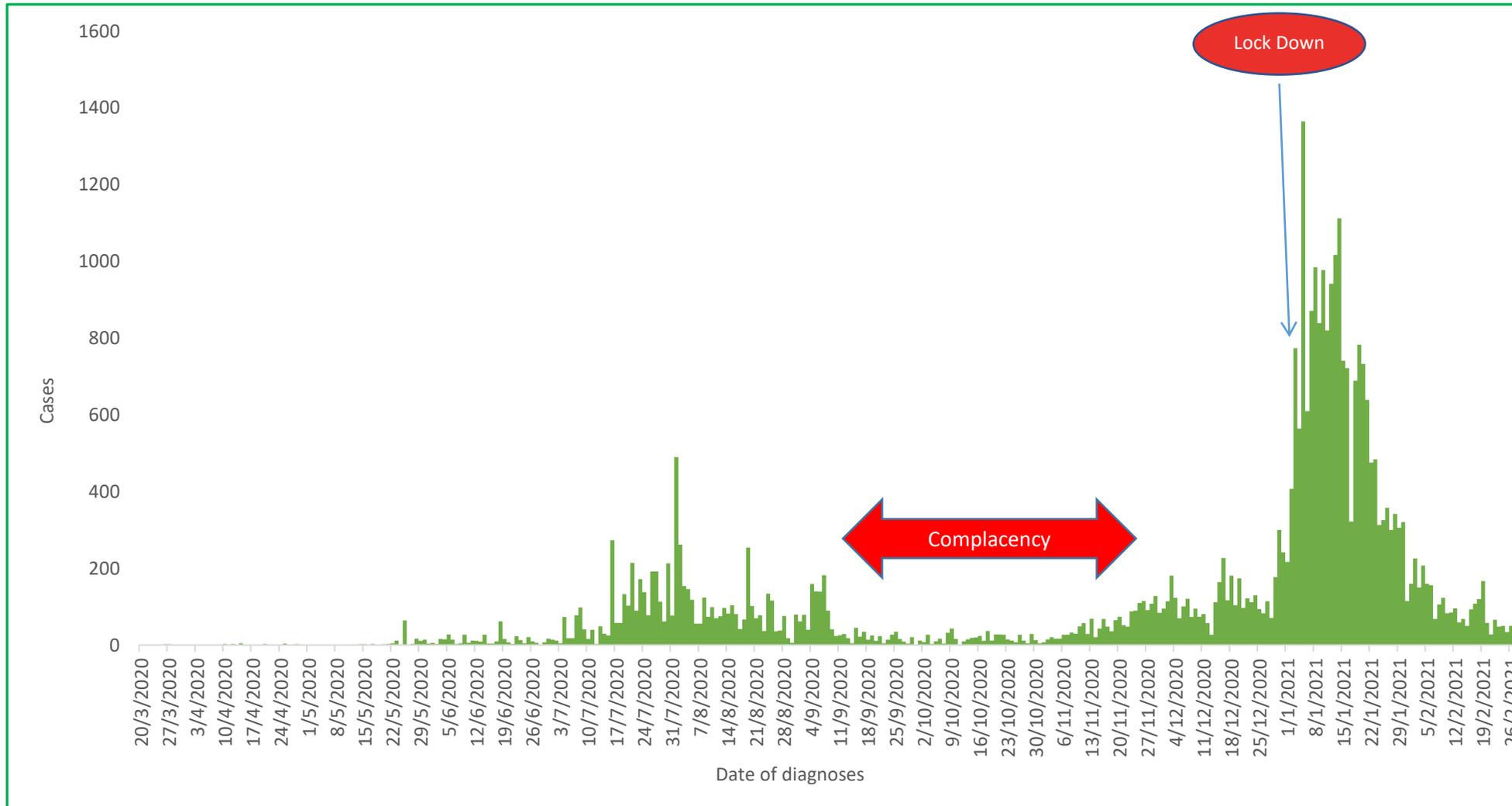
## Capacities Built: In-Country Manufacturing

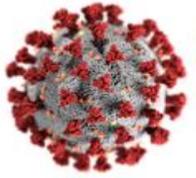
- In line with government's primary responsibility over the health of its citizens and its strategy and thrust towards self-sufficiency and import substitution, the national response built capacity for local production of COVID-19 commodities:
  - ✓ Local universities set up units to produce PPE, hand sanitizers and some testing consumables such as viral transport media and swabs
  - ✓ Local Pharmaceutical Companies set up production of registered medicines such as paracetamol and some antibiotics required for the supportive management of COVID-19 cases.
  - ✓ Small to medium scale enterprises received support to produce reusable face masks and hand sanitizers for the public.





# Zimbabwe Epidemic Curve of COVID-19 confirmed cases as of 26 Feb 2021

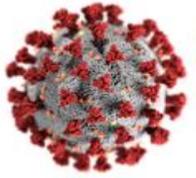




# Major shifts in understanding the pandemic since mid 2020

- The second wave affecting us now, much bigger than the first wave
  - ✓ Complacency, super spreader events and SA variant contributed.
- Need to prevent a potentially bigger third wave using two prevention fronts:
  - ✓ The first prevention front is our current response strategy that includes all the Public Health and Social Measures (PHSM)
  - ✓ The second prevention front is the vaccine deployment





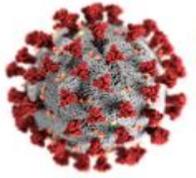
# Government Direction on COVID-19 vaccines

Statement issued post **CABINET** meeting of 9 February 2021:

.... the intention is to reach ‘sixty per cent of the population’, choice of vaccine will be ‘science based with adequate research and findings guiding decision making’, priority will be ‘health workers, the elderly and other vulnerable groups’, and it would be ‘voluntary’.

....vaccine to be sourced from multiple manufacturers, through multiple financing arrangements.....

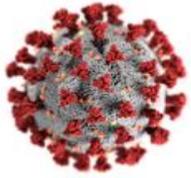




# What is the National COVID-19 Vaccination Plan

- Broad objective is to enable high quality vaccination services and reduce morbidity and mortality due to COVID-19 disease
- The National Deployment and Vaccination Roll out Plan (NDVP) provides a framework for deployment, implementation and monitoring of the COVID-19 vaccine(s) in the country ensuring that:
  - ✓ Both the plan and related financing are well aligned to the Zimbabwe COVID-19 preparedness and response plans, and that implementation is **fully integrated** into national governance mechanisms, implementation and coordination structures.
  - ✓ The plan covers 12 key strategic areas for a successful roll out of the vaccine.

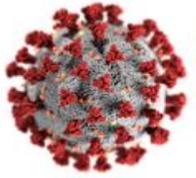




# Key Vaccine Deployment Plan Strategies

1. Country context and Deployment Plan Objectives
2. Regulatory preparedness
3. Planning and coordination of vaccine introduction
4. Resources and funding
5. Target populations and actual vaccination approaches/delivery
6. Supply chain management
7. Human Resources management including training
8. Advocacy, communication and social mobilization
9. Vaccine safety monitoring and management of Adverse Events Following Immunization (AEFI) and injection safety
10. Immunization monitoring system
11. COVID-19 surveillance
12. Evaluation of the introduction of COVID-19 vaccines

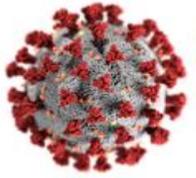




# Regulatory Framework

- The COVID-19 vaccines to be registered by the Medicines Control Authority of Zimbabwe (MCAZ) under Emergency Use Authority, in terms of section 75 of Medicines and Allied Substances Control Act.
- Ministry of Health and Child Care (MoHCC) has set up and is implementing a safety monitoring plan to enable swift detection of any Adverse Events Following Immunization (AEFI)

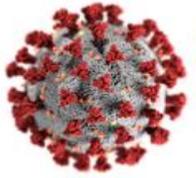




# Resources and funding

- Treasury has set aside USD100 million for procurement
- USD7 million for roll out operational costs
- Many well wishers including the private sector, other nations as well as international and regional funding initiatives have come on board to support government on this very important national initiative.

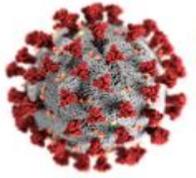




# Zimbabwe COVID-19 vaccines - Donated and procured

- Government of Zimbabwe
  - ✓ 600 000 doses of Sinopharm vaccine **procured**
- China
  - ✓ 200 000 doses of Sinopharm vaccine donation **received**
  - ✓ 200 000 doses of Sinopharm donation on its way
- Other Countries
  - ✓ India pledged donation of 75 000 doses of Covaxin
  - ✓ Russia pledged donation of 20 000 doses of Sputnik V vaccine
  - ✓ UK
- WHO/GAVI COVAX facility donation
  - ✓ USD 1.25 million worth of doses
- African Union (AU) facility
- Private sector contributions





# Target groups for vaccinations

## Phase 1 - population at high risk

- Stage one

Front line Workers (eg Health Workers ,Ports of Entry Personnel ZIMRA, Immigration Customs, Security and others )

- Stage two

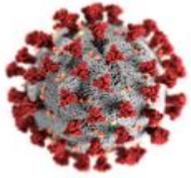
VHW ,Chronic Illnesses, Elderly Population  $\geq 60$ years, Inmates Prison Population & others in confined settlements including Tongogara refugee camp

## Phase 2

Lecturers, All School Staff Population and other staff at medium risk depending with the epidemiological picture of the disease

## Phase 3 Population at low risk

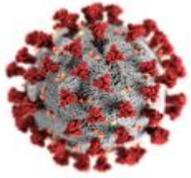




# Target populations for vaccinations

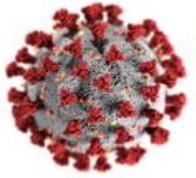
	Population	% of Population
Phase 1 ( stage 1 and 2)	3 662 279	22%
Phase 2	3 050 855	18.4%
Phase 3	3 050 855	18.4%
Subtotal	9 763 988	<b>58.8%</b>
Total population under 16 yrs	6 795 000	41.2%
Total Populations	16 558 987	100%





# Vaccine roll out progress

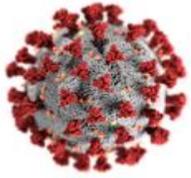




# Vaccine roll out approach and progress

- Roll out launched on Thursday 18 Feb 2021
  - ✓ VP Chiwenga the first to get Sinopharm vaccine
- Roll out to provinces from Monday 22 February 2021
- The actual administration of the vaccine is being done at fixed and outreach points
- By the end of Monday 8 March 2021 over **35 518** front line workers had been vaccinated

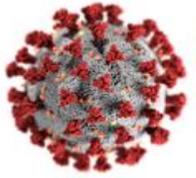




# Vaccine safety monitoring and management of AEFI and injection safety

- In partnership with MoHCC- ZEPI, the National Pharmacovigilance & Clinical Trials Committee, MCAZ, are the main drivers of vaccine safety surveillance
- COVID-19 vaccine safety surveillance is being guided by already existing MoHCC's Adverse Events Structures - Following Immunization (AEFI) surveillance guidelines and the WHO COVID-19 vaccines safety surveillance manual.

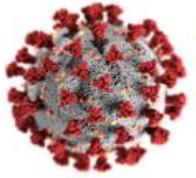




# Vaccine safety monitoring and management of AEFI and injection safety

- Safety surveillance for COVID-19 vaccine will be further strengthened through additional:
  - Training of national stakeholders and investigation teams
  - Training of national AEFI committee on causality assessment of adverse events following COVID-19 vaccination
  - Training and preparation of health care workers on identification, management and reporting of potential cases of anaphylaxis and ensuring availability of comprehensive emergency tray at all vaccination points.
  - The trainings will be provided as part of a comprehensive COVID-19 vaccine introduction trainings.
- Instituting active surveillance of Adverse Events of Special Interest following COVID-19 vaccination.

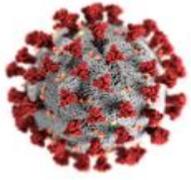




# Conclusion

- National Response is back on track as demonstrated by the downward trend on our epidemic curve
  - ✓ The second wave and the pandemic are being brought under control
- Need to remain vigilant, avoid **complacency** in order to safeguard against a third and potentially bigger wave.
- We must continue with the two prevention front measures
  - ✓ PHSM that include social distancing, washing hands, wearing face masks.
  - ✓ Vaccine roll out





**Thank  
You**

