



Situation Report: Confirmed COVID-19		Location: The Gambia
Date of Report: 27th October 2020		Investigation Start Date: 17th March 2020 as of 18hrs.
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I. HIGHLIGHTS

This is the 182nd national situation report since the confirmation of the first case of the novel coronavirus disease (COVID-19) in The Gambia, on the 16th March 2020

- No new COVID-19 related death recorded
 - No new posthumous samples tested
- 4 new cases registered, taking the total number of COVID-19 cases ever confirmed in the country to 3,670
 - This represents a 1.9% test positivity rate (4 out of 211 total tests performed)
 - A site-specific test positivity rate of 60% was registered at the MRC Keneba testing site
 - The median age of the new COVID-19 cases is 31.5 (range: 18 – 80 years)
- 211 new laboratory test results received (5 from MRC and 206 from NPHL)
 - No new test returned indeterminant / inconclusive
- 210 patients in self-isolation newly recovered and got discharged
- Whereas no new person has been taken into quarantine, no new person was discharged either
- The country currently has 4 people in quarantine, 675 active cases and a crude case-fatality ratio of 3.2%

COVID-19 SITUATION IN NUMBERS

Globally

- Confirmed Cases: **44,768,037**
- Recoveries: **32,720,062**
- Deaths: **1,178,570**

Senegal

- Confirmed Cases: **15,582**
- Recoveries: **14,565**
- Deaths: **322**

The Gambia

- Confirmed Cases: **3,670**
- Recoveries: **2,876**
- Deaths: **119**

II. EPIDEMIOLOGICAL DESCRIPTION



Figure 1: Distribution of COVID-19 cases, The Gambia, September 2020

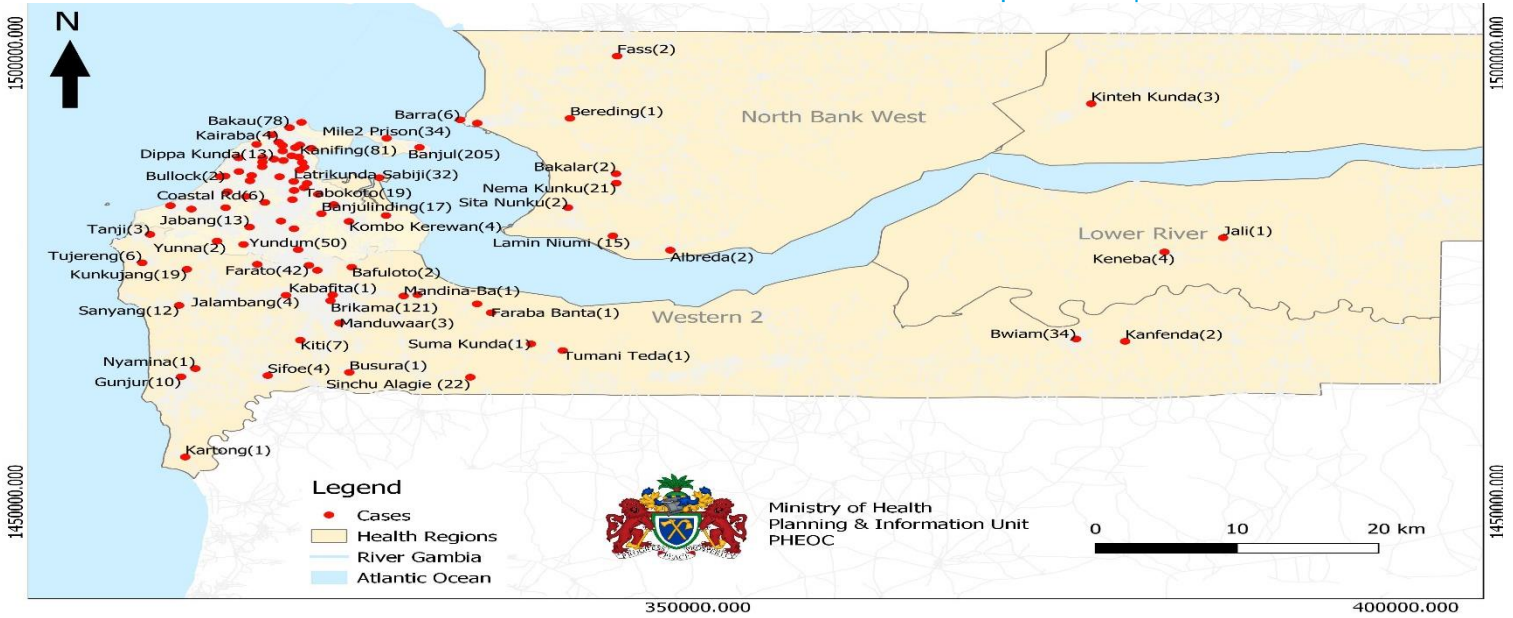


Figure 2: Distribution of COVID-19 cases in Western and North Bank West Regions, The Gambia, 2020

- All 7 health regions have reported cases of COVID-19 (See Fig. 1)
- Notwithstanding its population and size, Banjul recorded more cases than any other location within WR1 (See Fig. 2)

Figures 3 and 4 are the age-sex distribution and the Epi-curve of confirmed cases by reported date, respectively.

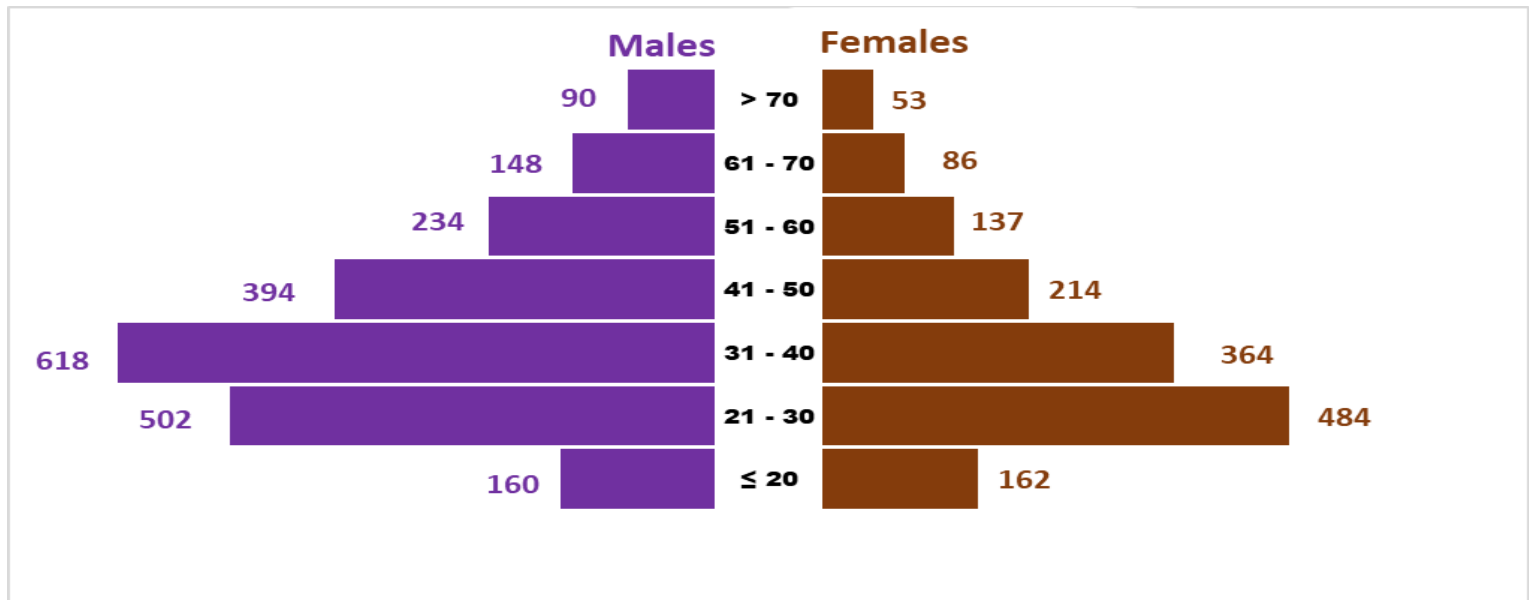


Fig. 3: Age-Sex Distribution of Confirmed COVID-19 Cases, The Gambia, 2020

* This excludes the 27 confirmed cases whose demographic information are not yet available

- About 59% of the confirmed cases are males (See Fig. 3)
- About 62% of the confirmed cases are below age 40 (See Fig. 3)
- The only age category with a few more female cases than males is the “age 20 and less” category (See Fig. 3)

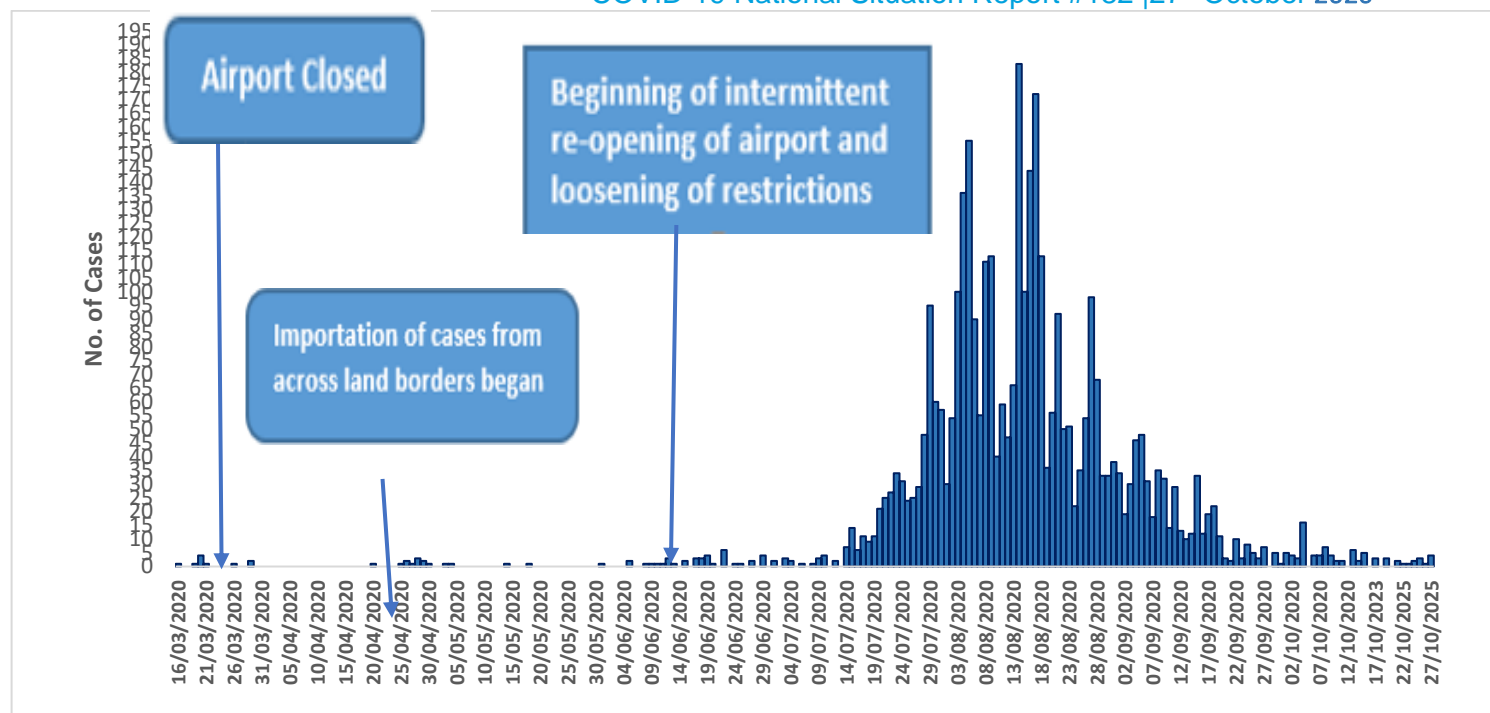


Fig. 4: Epidemic Curve of Laboratory-Confirmed Cases by Date Reported, COVID-19 Pandemic, The Gambia, 2020*.

* A considerable amount of time elapsed between date of reporting and the date of laboratory confirmation of some cases

- Three main waves of infection occurred – the pre airport closure wave, the importation from Senegal wave and the intermittent airport re-opening and loosening of restrictions wave (See Fig. 4)

Table 1: Summary of New and Cumulative Public Health Response Outputs, COVID-19 Pandemic, The Gambia, 2020

Status	New	Cumulative
No. of active cases in institutional isolation	4	
No. of COVID-19 patients on oxygen support	0	
No. of patients recovered and discharged	210	
In Quarantine	0	4
Completed Quarantine	0	2,692
Completed follow-up (asymptomatic people with travel history to affected countries) *	0	310
No. of Contact(s) Identified**	0	
No. of Contacts being monitored	0	
No. of Contacts who completed 14-day follow-up	0	14,664
No. of Contacts lost to follow-up	0	51
Total Tests conducted (Repeat Test (s))***	211 (0)***	20,772
Positive test result (Repeat Test (s))	4 (0)	3,670
Negative test result (Repeat Test (s))***	207 (0)***	15,900
Inconclusive test result (Repeat Test (s))***	0 (0)***	

* Follow-up completed prior to the 17th March (when the first confirmed case was reported)

** Includes both low-risk and high-risk contacts and not mutually exclusive with number quarantined (as some have been quarantined)

*** Includes repeat tests in bracket

III. Major Response Activities

Table 2: Major response activities undertaken newly, COVID-19 Outbreak, The Gambia, 2020

Component	Interventions
Coordination	<ul style="list-style-type: none"> Daily coordination meetings held at both central and regional levels
Surveillance/ Laboratory	<ul style="list-style-type: none"> A testing site-specific test positivity rate of 60% (3 out of 5 samples tested) was registered at the MRC Keneba testing site 211 new laboratory test results received (5 from MRC and 206 from NPHL) Of these, no test result returned inconclusive or indeterminate and 4 new tests returned positive for COVID-19
Case Management / Psychosocial Support & Research	<ul style="list-style-type: none"> 210 new patients recovered and got discharged
Logistics & Safety	<ul style="list-style-type: none"> A consultant epidemiologist from Public Health England has arrived and is currently working with the relevant response teams Distribution of PPEs to health facilities, across the country, has been completed for the month of October

RISK COMMUNICATION & COMMUNITY ENGAGEMENT

Public Information Center Actions	Community Engagement Actions	Feedback from Public Engagement Actions			
		Toll Free Helpline:	Radio phoning programme:	TV phoning programme:	Social Media pages:
Total No. of Calls received on toll free helpline	No. of communities reached on COVID-19 through messaging on prevention and access to services	No. of people shared their concerns and asking questions/clarifications for available support services to address their needs	No. of people shared their concerns and asking questions/clarifications for available support services to address their needs	No. of people shared their concerns and asking questions/clarifications for available support services to address their needs	No. of people react to post and or shared their concerns and asking questions/clarifications for available support services to address their needs
28	13	28	9	0	81

IV. GAPS/CHALLENGES:

- A high (60%) site-specific test positivity rate registered at the MRC Keneba testing site
- Absence of community-based surveillance in most regions to shore up demand for COVID-19 tests
- Security lapses at some of the treatment centers resulting in the abscondence of patients
- Dwindling compliance with mask-wearing requirements
- Low turn-out at COVID-19 sample collection sites resulting in fewer number of daily tests
- Denial, misinformation, stigma and discrimination against COVID-19 affected families

- The lack of a strong and reliable Internet connection at the NPHL is hampering the implementation of e-surveillance at the laboratory
- Uptick of COVID-19 among healthcare workers

V. NEXT STEPS/RECOMMENDATIONS:

- More tests required in the catchment area of the MRC Keneba testing site to ascertain the extent of spread of COVID-19
- Security needs to be beefed up at all COVID-19 treatment/isolation centers to prevent the abscondence of patients
- Urgently institute a robust community-based surveillance system in order to increase testing
- Thorough enforcement of the mandatory mask-wearing regulation
- Ensure there is reliable internet access at the NPHL to support the effective implementation of e-surveillance
- IPC measures should be strictly adhered to in all public and private health healthcare facilities
- Provision of adequate stocks of PPEs to all health facilities
- Health workers to observe all COVID-19 preventive measures including the donning of appropriate PPEs at all times
- Intensify RCCE activities at community level in a bid to curtail the ongoing community transmission and dispel misinformation and denial

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PARTNERS

