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| <b>Situation Report: Confirmed COVID-19</b>     |   | <b>Location: The Gambia</b>  |
| <b>Date of Report: 03<sup>rd</sup> Nov 2020</b> |   | <b>Investigation Start Date: 17<sup>th</sup> March 2020 as of 18hrs.</b> |
| <b>Prepared by:</b>                             | <b>Epidemiology and Disease Control Unit, MoH, The Gambia</b> |  |

## I. HIGHLIGHTS

This is the 186<sup>th</sup> 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 posthumous sample tested
- 195 new laboratory test results received (21 from MRC and 174 from NPHL)
  - 1 new COVID-19 positive case registered, taking the total number of COVID-19 cases ever confirmed in the country to 3680
  - The newly confirmed case is a 36-year-old male
  - No new test returned indeterminant / inconclusive
- While 4 people were newly taken into quarantine, 1 was discharged after testing negative for COVID-19
  - The 4 newly quarantined individuals recently arrived in the country by a Turkish Airline flight without valid COVID-19 negative PCR test certificates
- 10 patients in self-isolation newly recovered and got discharged by the virtual clinics
- The country currently has 4 people in quarantine, 56 active cases\* and a crude case-fatality ratio of 3.3%

\*The bulk of active cases are asymptomatic and are as such self-isolating at home pending the manifestation of symptoms

### COVID-19 SITUATION IN NUMBERS

#### Globally

- 👤 Confirmed Cases: **47,842,843**
- 🌿 Recoveries: **34,346,280**
- ➡ Deaths: **1,219,734**

#### Senegal

- 👤 Confirmed Cases: **15,640**
- 🌿 Recoveries: **15,149**
- ➡ Deaths: **326**

#### The Gambia

- 👤 Confirmed Cases: **3,680**
- 🌿 Recoveries: **3,504**
- ➡ Deaths: **120**

## II. EPIDEMIOLOGICAL DESCRIPTION



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

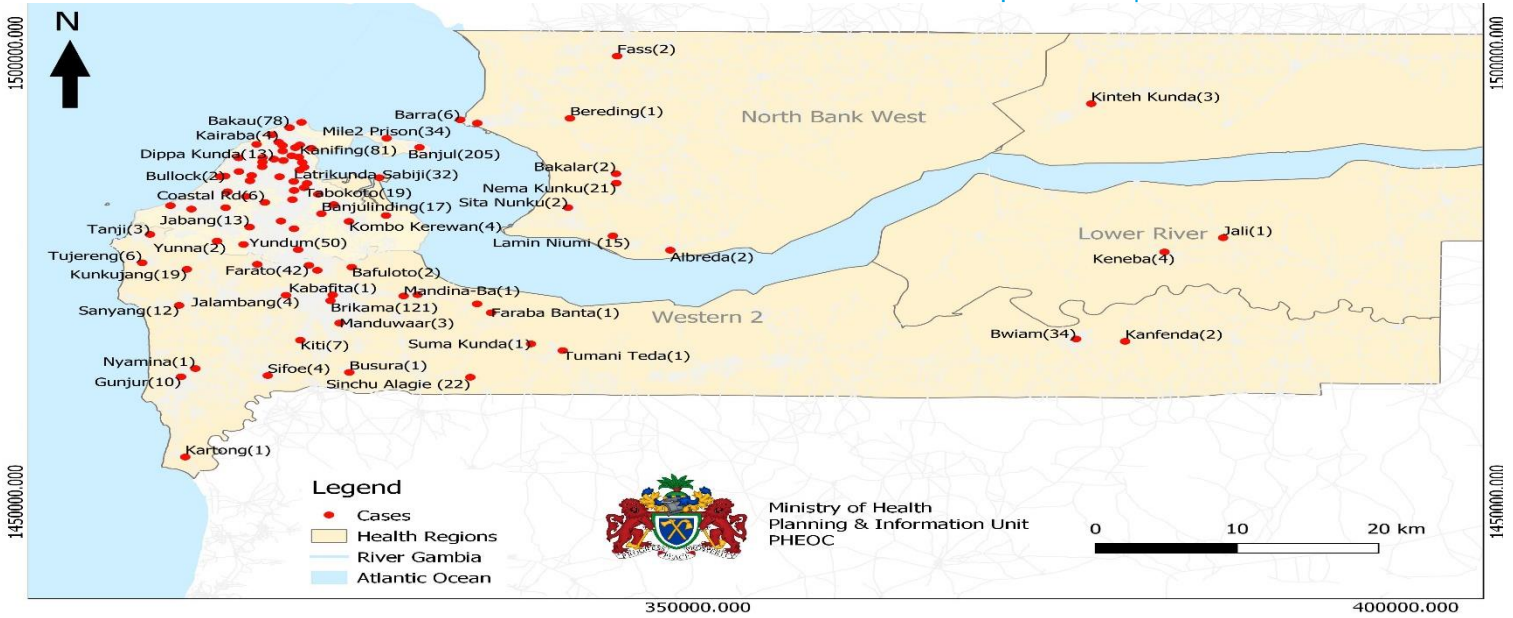


Figure 2: Distribution of COVID-19 cases in Western and North Bank West Regions, The Gambia, 2020

- 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.

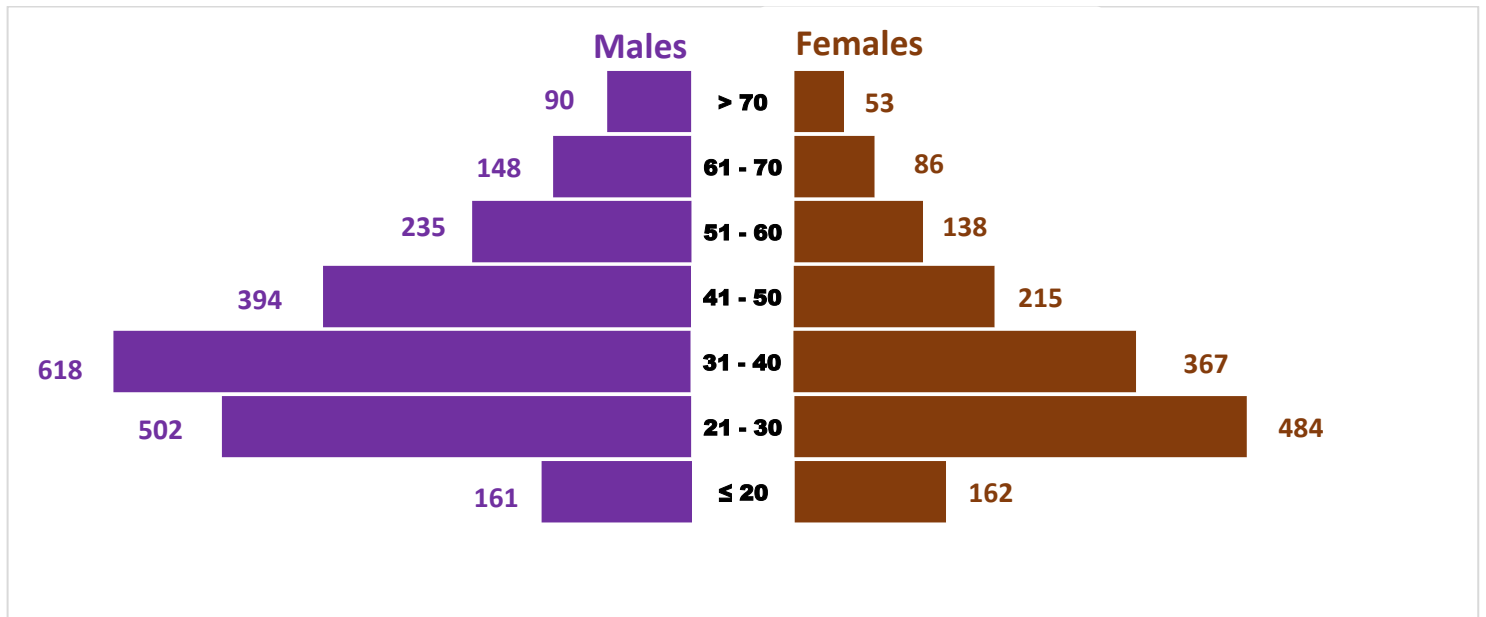
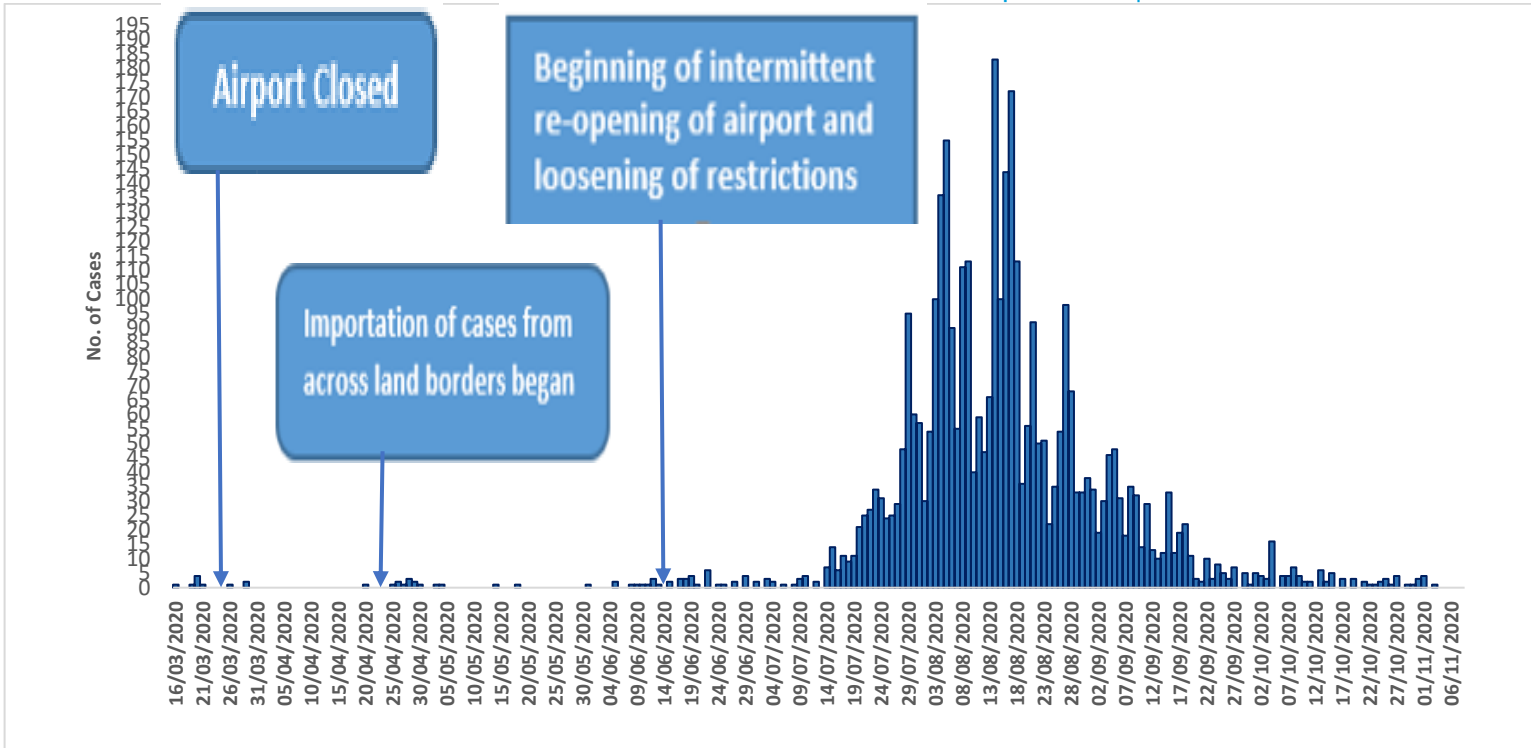


Fig. 3: Age-Sex Distribution of Confirmed COVID-19 Cases, The Gambia, 2020

- <sup>\*</sup>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  | 6           |            |
| No. of COVID-19 patients on oxygen support  | 0           |            |
| No. of patients recovered and discharged  | 10          |            |
| In Quarantine   | 4           | 4          |
| Completed Quarantine  | 1           | 2,697      |
| 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))***  | 154 (41)*** | 21,374     |
| Positive test result (Repeat Test (s))  | 1 (0)       | 3,680      |
| Negative test result (Repeat Test (s))***   | 153 (41)*** | 16,492     |
| Inconclusive test result (Repeat Test (s))***   | 0 (0)***    |            |

\* Follow-up completed prior to the 17<sup>th</sup> 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   |
|--|---|
| <b>Coordination</b>  | <ul style="list-style-type: none"> <li>Daily coordination meetings held at both central and regional levels</li> </ul>  |
| <b>Surveillance/ Laboratory</b>                              | <ul style="list-style-type: none"> <li>195 new laboratory test results received (21 from MRC and 174 from NPHL)</li> <li>Of these, no test result returned inconclusive or indeterminant and 1 new test returned positive for COVID-19</li> </ul> |
| <b>Case Management / Psychosocial Support &amp; Research</b> | <ul style="list-style-type: none"> <li>10 new patients recovered and got discharged</li> </ul>  |

**RISK COMMUNICATION & COMMUNITY ENGAGEMENT**

| Public Information Center Actions                 | Community Engagement Actions  | Feedback from Public Engagement Actions  |   |  |   |
|---|---|--|---|--|---|
| Total No. of Calls received on toll free helpline | No. of communities reached on COVID-19 through messaging on prevention and access to services | <b>Toll Free Helpline:</b> No. of people shared their concerns and asking questions/clarifications for available support services to address their needs | <b>Radio phoning programme:</b> No. of people shared their concerns and asking questions/clarifications for available support services to address their needs | <b>TV phoning programme:</b> No. of people shared their concerns and asking questions/clarifications for available support services to address their needs | <b>Social Media pages:</b> No. of people react to post and or shared their concerns and asking questions/clarifications for available support services to address their needs |
| 17  | 9   | 17   | 7   | 0  | 76  |

**IV. GAPS/CHALLENGES:**

- A high site-specific test positivity rate recently recorded at one of the testing sites in the hinterland
- 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

**For comments or questions, please contact:**  
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### PARTNERS

