



Situation Report: Confirmed COVID-19		Location: The Gambia	
Date of Report: 10th Dec 2020		Investigation Start Date: 17th March 2020 as of 18hrs.	
Prepared by:	Epidemiology and Disease Control Unit, MoH, The Gambia		

I. HIGHLIGHTS

This is the 218th 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 registered
 - No posthumous sample collected
- 1 new case registered, taking the total number of COVID-19 cases ever confirmed in the country to 3,780
 - The newly confirmed case is a 31-year-old male who sought to be tested on account of being an intending traveller who needed a COVID-19 test certificate
- 247 new laboratory test results received from NPHL
 - Of these, 1 new test returned positive, representing a test positivity rate of 0.4%
 - None returned indeterminate
- 1 COVID-19 patient newly got discharged
- No COVID-19 patient is currently on oxygen therapy
- The country currently has 20 people in quarantine, 8 active cases and a crude case-fatality ratio of 3.3%
 - *3 recently confirmed cases absconded from the Sanatorium

COVID-19 SITUATION IN NUMBERS

Globally

- Confirmed Cases: **70,707,659**
- Recoveries: **49,137,539**
- Deaths: **1,587,807**

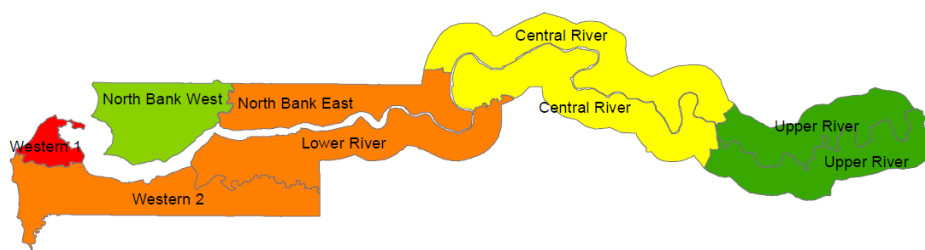
Senegal

- Confirmed Cases: **16,766**
- Recoveries: **15,950**
- Deaths: **343**

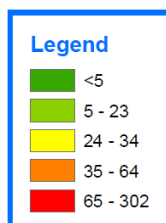
The Gambia

- Confirmed Cases: **3,780**
- Recoveries: **3,646**
- Deaths: **123**

II. EPIDEMIOLOGICAL DESCRIPTION



0 5 10 20 30 40 Miles



WGS_1984_Complex_UTM_Zone_28N

Figure 1: Geographic Distribution of COVID-19 Cases Per 100,000 Pop. by Region, The Gambia, March 16th – 2nd Dec, 2020

COVID-19 Tests Conducted Per 100,000 Pop., Nov 3rd - Dec 2nd, 2020

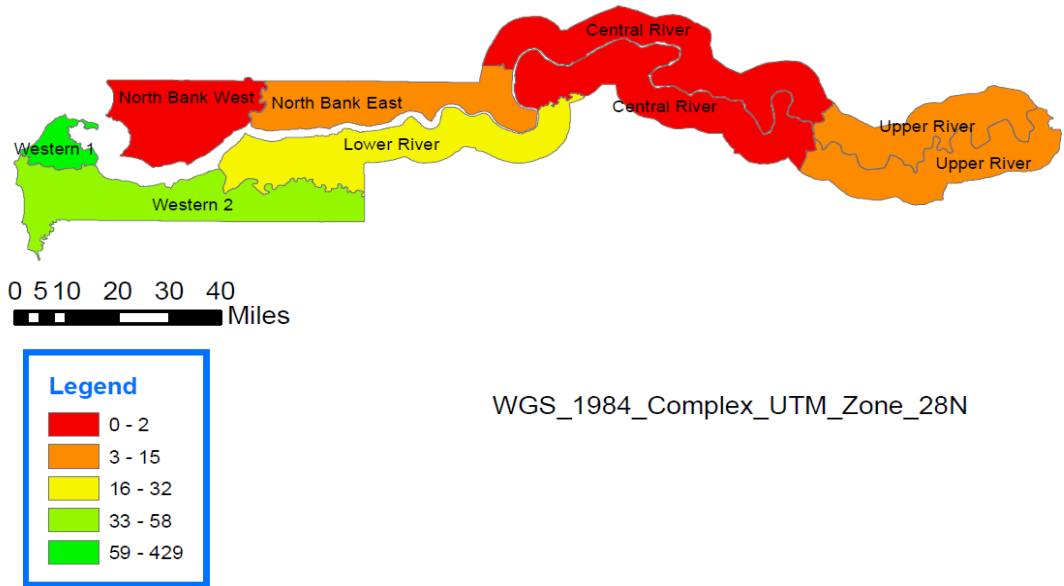


Figure 2: Geographic Distribution of Recent COVID-19 Tests Conducted Per 100,000 Pop. by Region, 3rd Nov. – 2nd Dec, 2020

- Western 1 Health Region has a disproportionately higher number of cases than all the health regions (See Fig. 1)
- Regions furthest from testing sites had the lowest testing rates over the last 30 days (See Fig. 2)

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

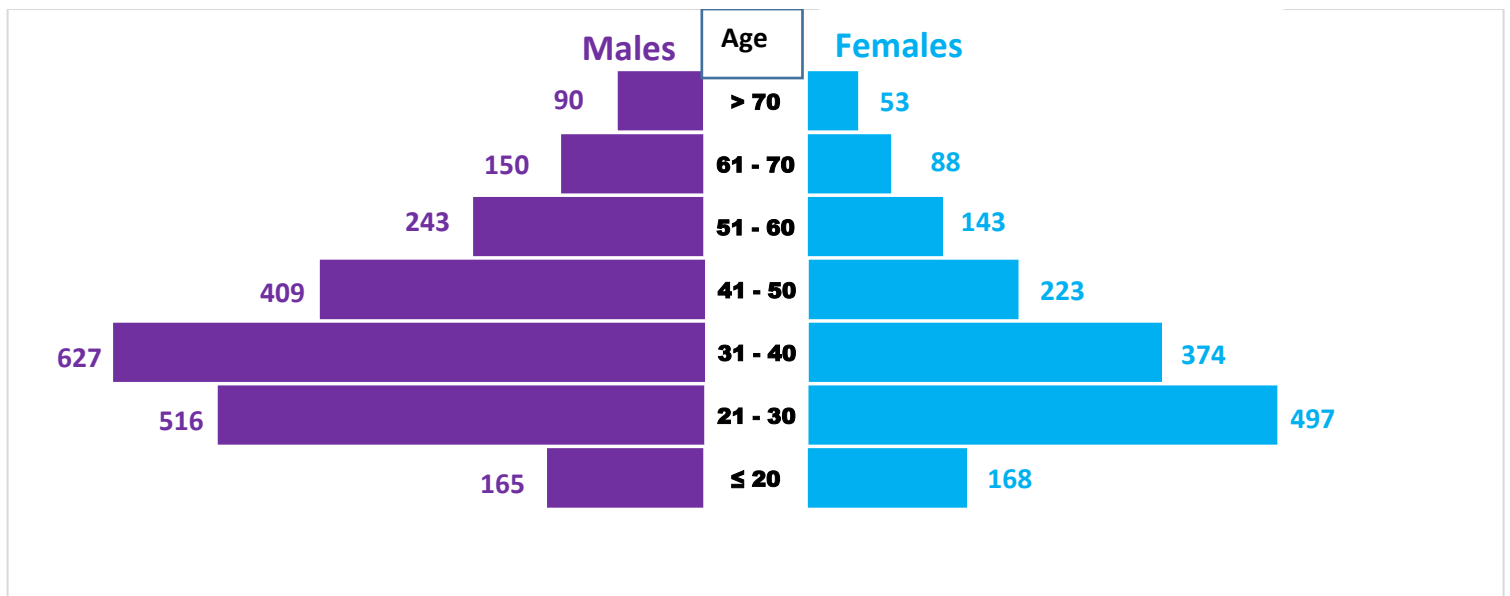


Fig. 3: Age-Sex Distribution of Confirmed COVID-19 Cases, The Gambia, 2020

- ^{*}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)

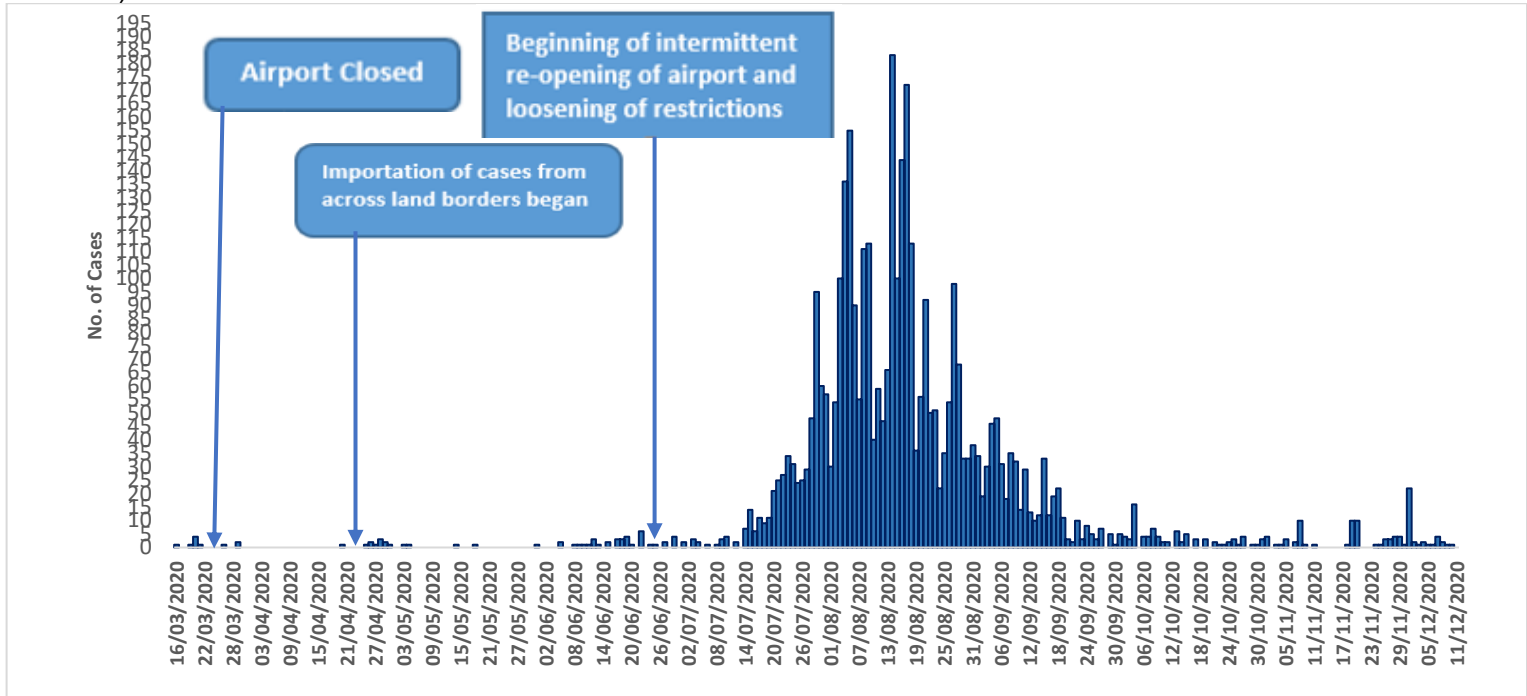


Fig. 4: Epidemic Curve of Laboratory-Confirmed Cases by Date Reported, COVID-19 Pandemic, The Gambia, 2020*.
 * A considerable amount of time elapsed between date of reporting and the date of laboratory confirmation of some cases

- 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		6
No. of COVID-19 patients on oxygen support		0
No. of patients recovered and discharged	1	
In Quarantine	0	20
Completed Quarantine	0	2,734
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	14,724
No. of Contacts lost to follow-up	0	51
Total Tests conducted (Repeat Test (s))***	207 (40)***	27,098
Positive test result (Repeat Test (s))	1 (0)	3,780
Negative test result (Repeat Test (s))***	206 (40)***	22,195
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"> 247 new laboratory test results received from NPHL Of these, no test result returned inconclusive or indeterminant and 1 new test returned positive for COVID-19
Case Management / Psychosocial Support & Research	<ul style="list-style-type: none"> 1 new COVID-19 patient got discharged

Risk Communication & Community Engagement

COVID-19 RISK COMMUNICATION AND COMMUNITY ENGAGEMENT DAILY REPORT- 11/12/20

Total No. of Calls received on toll free helpline	No. of communities reached on COVID-19 through messaging on prevention and access to services	Toll Free Helpline: No. of people shared their concerns and asking questions/clarifications for available support services to address their needs	Radio phoning programme: No. of people shared their concerns and asking questions/clarifications for available support services to address their needs	TV phoning programme: No. of people shared their concerns and asking questions/clarifications for available support services to address their needs	Social Media pages: No. of people react to post and or shared their concerns and asking questions/clarifications for available support services to address their needs
38	7	38	12	0	61

IV. GAPS/CHALLENGES:

- CBS activities not translating to increase in the number of daily tests being conducted
- Regions furthest from testing sites had the lowest testing rates over the last 30 days
- Support for innovative countrywide risk communication strategies and activities on COVID-19 is suboptimal
- 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

V. NEXT STEPS/RECOMMENDATIONS:

- CBS activities need to be synchronized with MRC’s ILI surveillance to spur up testing rates in the hinterland
- Expedite the process of having testing sites in CRR and NBW
- Intensify risk communication and community engagement activities, on COVID-19 at community level, including at LUMOS, in a bid to curtail community transmission and dispel misinformation and denial
- 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
- Strengthen community-based surveillance in order to increase awareness and testing rates
- 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

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