



Situation Report: Confirmed COVID-19		Location: The Gambia	
Date of Report: 03rd & 04th Feb 2021		Investigation Start Date: 17th March 2020 as of 18hrs.	
Prepared by:	Epidemiology and Disease Control Unit, MoH, The Gambia		

I. HIGHLIGHTS

COVID-19 SITUATION IN NUMBERS

Globally

- Confirmed Cases: **105,403,118**
- Recoveries: **77,233,033**
- Deaths: **2,292,806**

Senegal

- Confirmed Cases: **27,733**
- Recoveries: **22,808**
- Deaths: **659**

The Gambia

- Confirmed Cases: **4,237**
- Recoveries: **3,886**
- Deaths: **134**

This is the 260th 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

- 2 new COVID-19 related deaths recorded, bringing the total number of deaths, since March 2020, to 134
 - Both newly deceased cases were males aged 70 and 91
 - Both had their samples collected and processed posthumously
- 53 new cases registered, bringing the total number of COVID-19 cases ever confirmed in the country to 4,237
 - Of these, 28 and 25 cases were confirmed on the 03rd and 04th February respectively
 - The median age of the new cases (14 female and 39 male) is 37 (range: 7 to 91yrs)
 - The bulk of the new cases got tested on account of either being intending travellers (60%) or being contacts of recently confirmed cases (15%)
- 813 new laboratory test results received (119 from MRC and 694 from NPHL)
 - Of these, 53 new samples tested positive, representing a 6.5% test positivity rate
- While 47 high-risk contacts [of recently confirmed cases] were identified and their follow-up began in earnest, the 14-day follow-up for 81 has been completed
- While 7 COVID-19 patients were newly discharged from treatment centres, the 3 asymptomatic patients who absconded a while ago are no longer considered to be infectious because a minimum of 10 days has elapsed after they tested positive
- 3 COVID-19 patients currently on oxygen therapy
- The country currently has 36 people in hotel quarantine, 217 active cases and a crude case-fatality ratio of 3.2%

II. EPIDEMIOLOGICAL DESCRIPTION

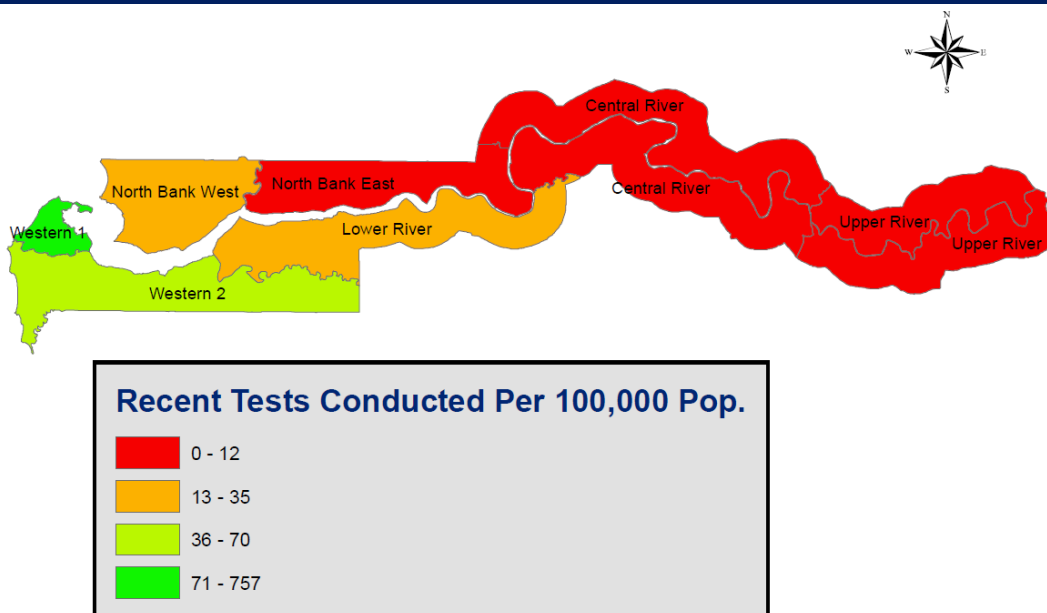


Fig 1: Geographic Distribution of Recent Tests Conducted Per 100,000 Pop. by Region, Dec 30 2020 – Jan 28 2021

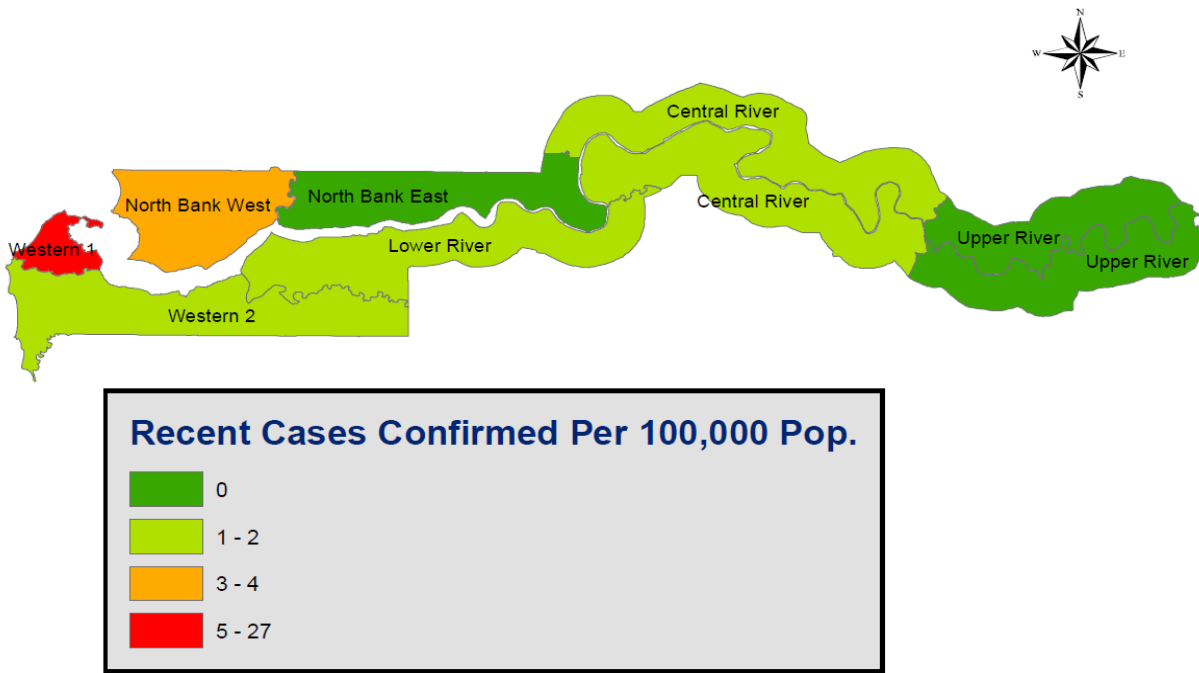


Fig 2: Geographic Distribution of Recent COVID-19 Cases Per 100,000 Pop. by Region, Dec 30 2020 – Jan 28 2021

- 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.

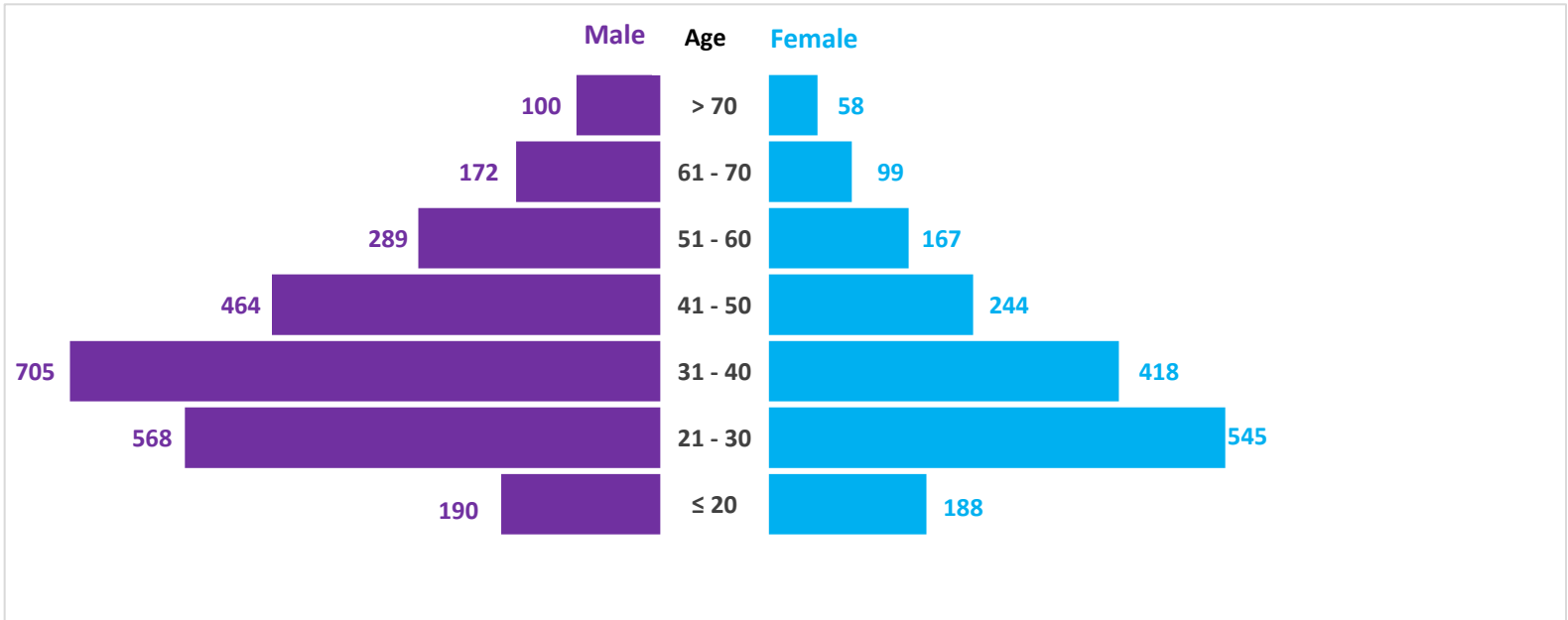


Fig 3: Age-Sex Distribution of Confirmed COVID-19 Cases, The Gambia, 2020

* 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)

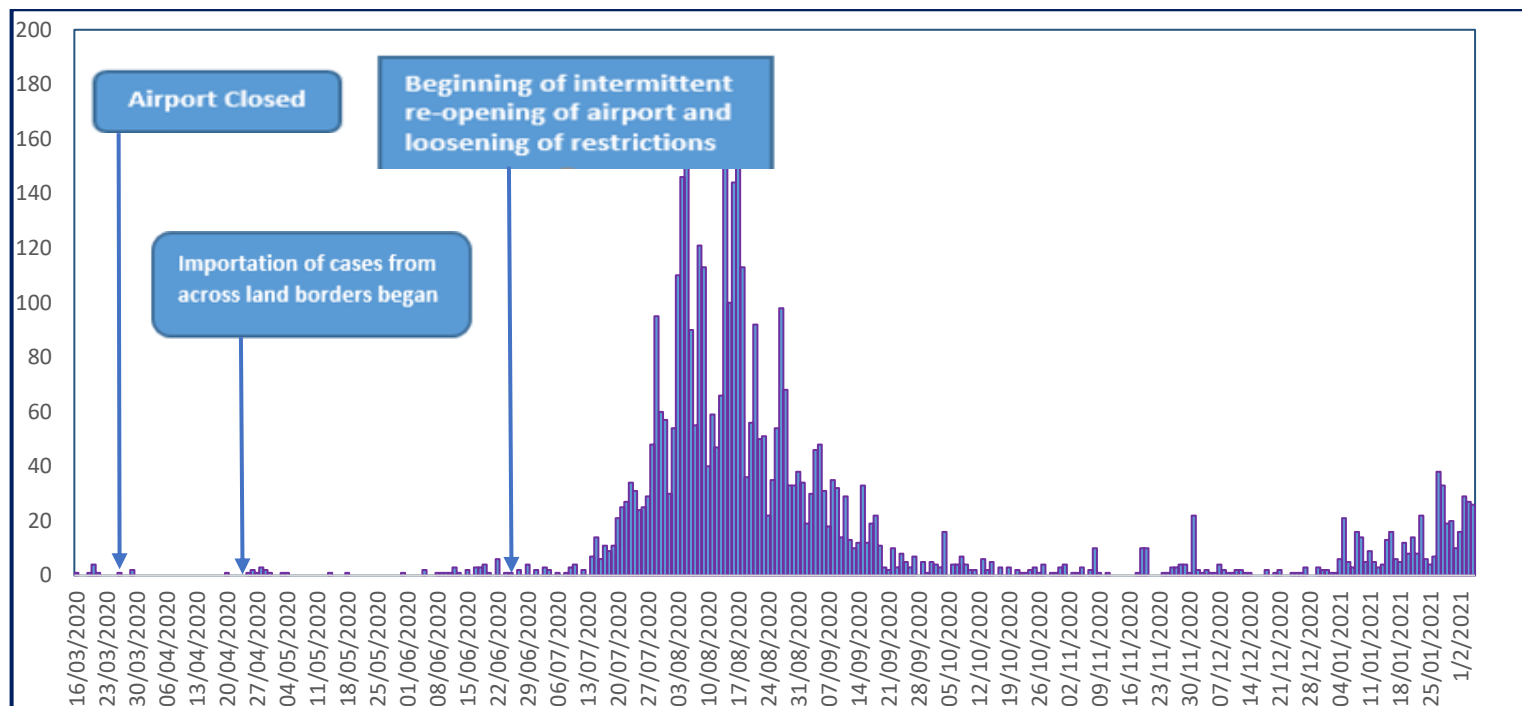


Fig. 4: Epidemic Curve of Laboratory-Confirmed Cases by Date Reported, COVID-19 Pandemic, The Gambia, 2020*.

* 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		63
No. of COVID-19 patients on oxygen support		3
No. of patients recovered and discharged	10	
In Hotel Quarantine	0	36
Completed Hotel Quarantine	46	3,487
Completed follow-up (asymptomatic people with travel history to affected countries) *	0	310
No. of Contact(s) Identified**	47	
No. of Contacts being monitored	260	
No. of Contacts who completed 14-day follow-up	81	15,395
No. of Contacts lost to follow-up	0	51
Total Tests conducted (Repeat Test (s))***	601 (212)***	40,536
Positive test result (Repeat Test (s))	53 (0)	4,237
Negative test result (Repeat Test (s))***	546 (212)***	34,924
Inconclusive test result (Repeat Test (s))***	3 (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"> 813 new laboratory test results received (119 from MRC and 694 from NPHL) Of these, while 3 new test results returned inconclusive or indeterminant, 53 new samples tested positive
Case Management / Psychosocial Support & Research / IPC	<ul style="list-style-type: none"> While 7 patients were newly discharged from treatment centres, the 3 asymptomatic patients who absconded a while ago are no longer considered to be infectious because a minimum of 10 days has elapsed after they tested positive 3 COVID-19 patients currently on oxygen therapy

Risk Communication & Community Engagement

COVID-19 RISK COMMUNICATION AND COMMUNITY ENGAGEMENT DAILY REPORT- 4/2/21					
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
83	51	83	16	0	105

IV. GAPS/CHALLENGES:

- I. High site-specific test positivity rate registered at the Basse COVID-19 testing site
- II. CBS activities not translating to increase in the number of daily tests being conducted
- III. Regions furthest from testing sites had the lowest testing rates over the last 30 days
- IV. Support for innovative countrywide risk communication strategies and activities on COVID-19 is suboptimal
- V. Security lapses at some of the treatment centers resulting in the abscondence of patients
- VI. Dwindling compliance with mask-wearing requirements
- VII. Low turn-out at COVID-19 sample collection sites resulting in fewer number of daily tests
- VIII. Denial, misinformation, stigma and discrimination against COVID-19 affected families
- IX. 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:

- I. More tests required in the catchment area of the MRC Basse testing site to ascertain the extent of spread of COVID-19
- II. CBS activities need to be synchronized with MRC's ILI surveillance to spur up testing rates in the hinterland
- III. Expedite the process of having testing sites in CRR and NBW
- IV. 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
- V. More tests required in the catchment area of the MRC Keneba testing site to ascertain the extent of spread of COVID-19
- VI. Security needs to be beefed up at all COVID-19 treatment/isolation centers to prevent the abscondence of patients
- VII. Strengthen community-based surveillance in order to increase awareness and testing rates
- VIII. Thorough enforcement of the mandatory mask-wearing regulation
- IX. Ensure there is reliable internet access at the NPHL to support the effective implementation of e-surveillance
- X. IPC measures should be strictly adhered to in all public and private health healthcare facilities
- XI. Provision of adequate stocks of PPEs to all health facilities
- XII. Health workers to observe all COVID-19 preventive measures including the donning of appropriate PPEs at all times

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