



<b>Situation Report: Confirmed COVID-19</b>	<b>Location: The Gambia</b>
<b>Date of Report: 27<sup>th</sup> &amp; 28<sup>th</sup> Jan 2021</b>	<b>Investigation Start Date: 17<sup>th</sup> March 2020 as of 18hrs.</b>
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## I. HIGHLIGHTS

This is the 257<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 16<sup>th</sup> March 2020

- 71 new cases registered, bringing the total number of COVID-19 cases ever confirmed in the country to 4,090
  - Of these, 38 and 33 cases were confirmed on the 27<sup>th</sup> and 28<sup>th</sup> January respectively
  - The median age of the new cases (22 female and 49 male) is 36.5 (range: 5 to 79 years)
  - Over 75% of these new cases sought to be tested on account of being intending travellers who required a COVID-19 test certificate
- 699 new laboratory test results received (78 from MRC and 621 from NPHL)
  - Of these, 71 new samples tested positive, representing a 10.2% test positivity rate
  - 10 new tests returned indeterminate
- 11 patients newly released from home isolation [10 days from symptom onset]
- 1 COVID-19 patient newly discharged from a treatment center
- While 18 people were newly taken into hotel quarantine for coming into the country from hotspot countries of the new coronavirus variant, 32 were discharged
- 2 COVID-19 patients currently on oxygen therapy
- The country currently has 18 people in hotel quarantine, 167\* active cases and a crude case-fatality ratio of 3.1%

\*3 patients recently absconded from the COVID-19 Treatment Centers

## COVID-19 SITUATION IN NUMBERS

### Globally

- Confirmed Cases: **101,110,605**
- Recoveries: **73,965,013**
- Deaths: **2,202,672**

### Senegal

- Confirmed Cases: **25,895**
- Recoveries: **21,561**
- Deaths: **617**

### The Gambia

- Confirmed Cases: **4,090**
- Recoveries: **3,792**
- Deaths: **128**

## II. EPIDEMIOLOGICAL DESCRIPTION

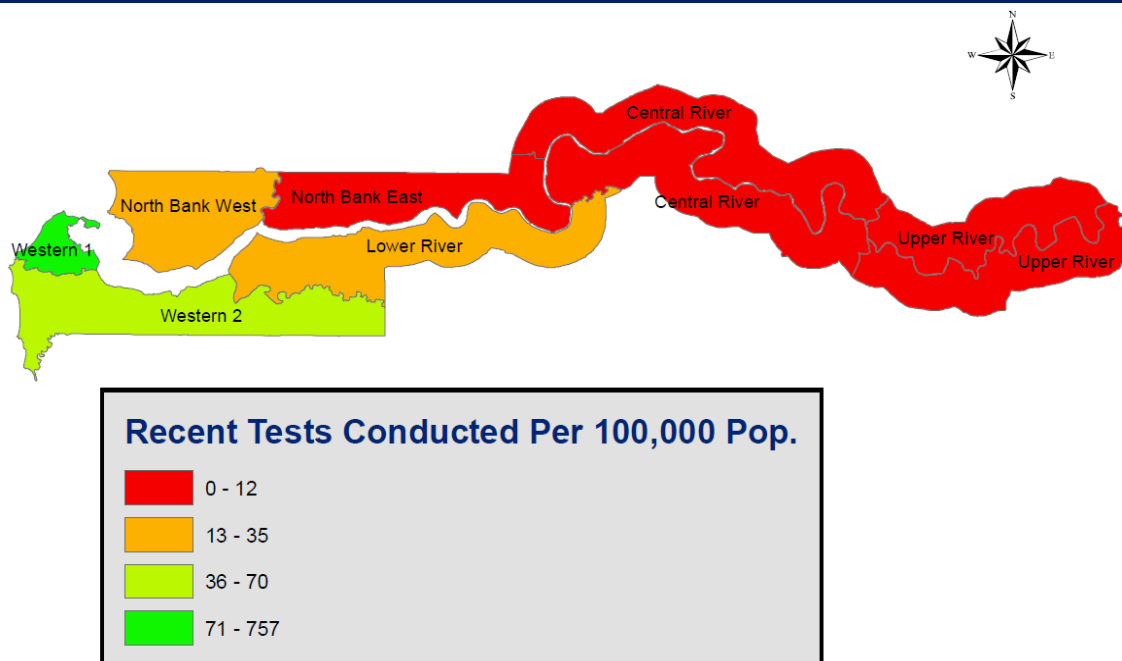
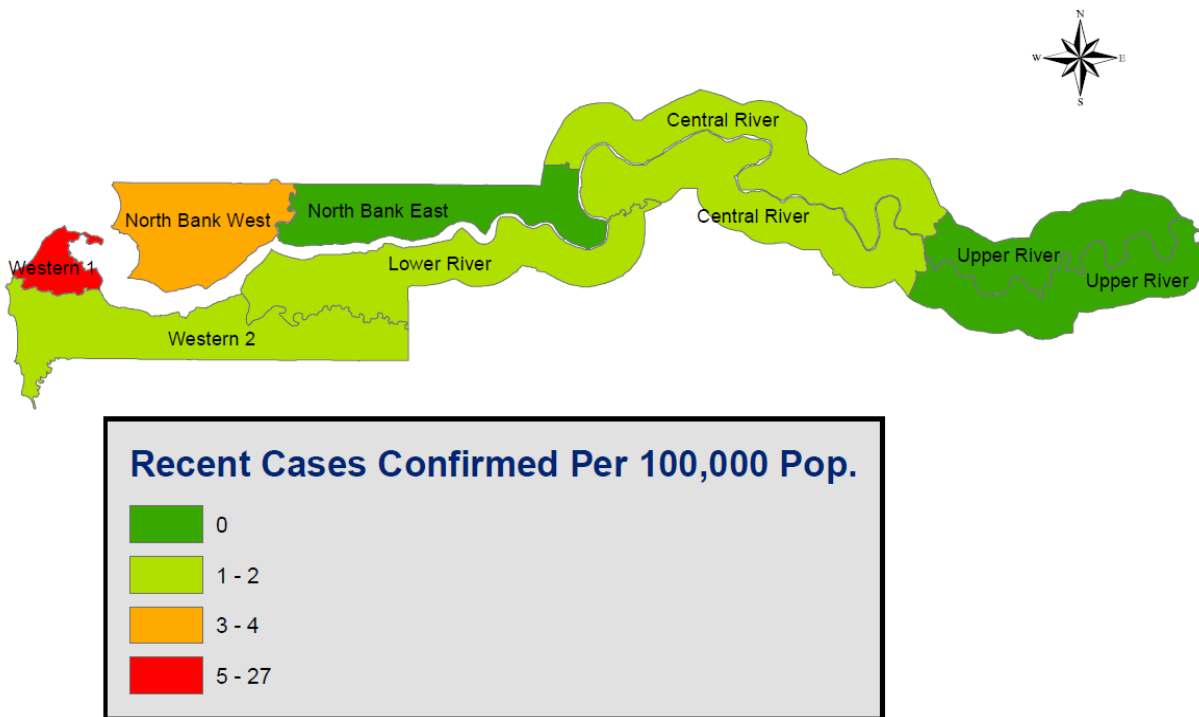


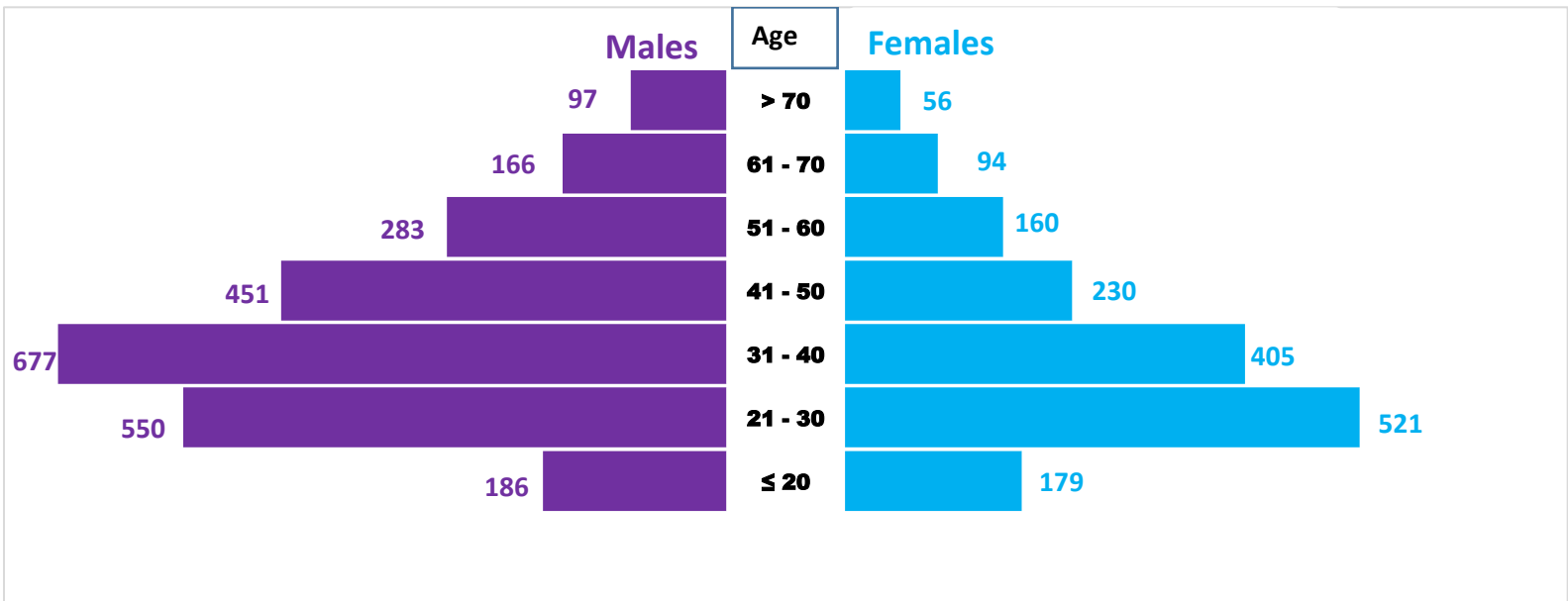
Fig 1: Geographic Distribution of Recent Tests Conducted Per 100,000 Pop. by Region, Dec 30 2020 – Jan 28 2021



**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.

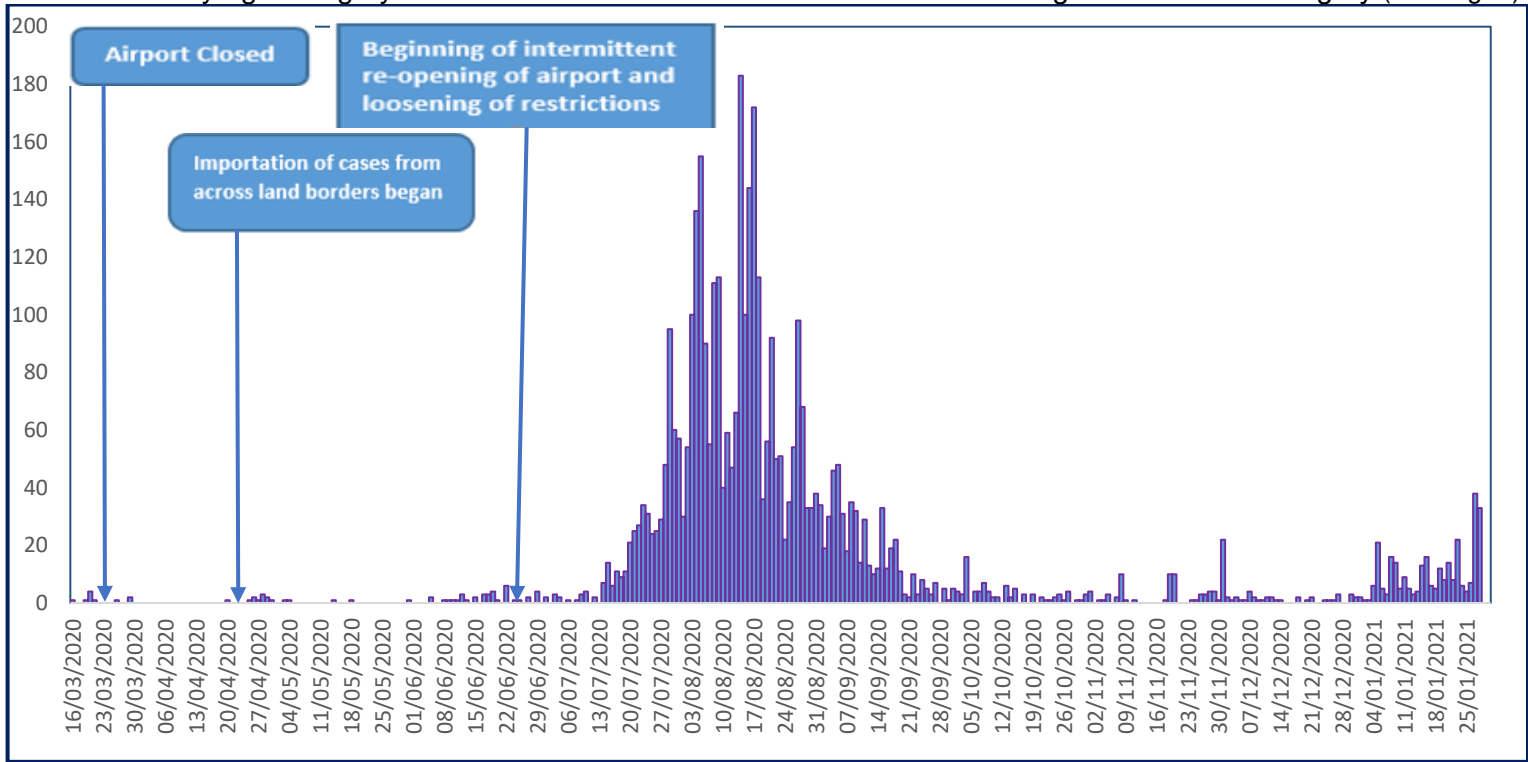


**Fig. 3: Age-Sex Distribution of Confirmed COVID-19 Cases, The Gambia, 2020**

\* 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		40
No. of COVID-19 patients on oxygen support		2
No. of patients recovered and discharged	12	
In Hotel Quarantine	18	18
Completed Hotel Quarantine	32	3,415
Completed follow-up (asymptomatic people with travel history to affected countries) *	0	310
No. of Contact(s) Identified**	0	
No. of Contacts being monitored	126	
No. of Contacts who completed 14-day follow-up	0	15,264
No. of Contacts lost to follow-up	0	51
Total Tests conducted (Repeat Test (s))***	699 (0)***	38,167
Positive test result (Repeat Test (s))	71 (0)	4,090
Negative test result (Repeat Test (s))***	618 (0)***	32,706
Inconclusive test result (Repeat Test (s))***	10 (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>• <i>Daily coordination meetings held at both central and regional levels</i></li> </ul>
<b>Surveillance/ Laboratory</b>	<ul style="list-style-type: none"> <li>• <i>699 new laboratory test results received (78 from MRC and 621 from NPHL)</i></li> <li>• <i>Of these, while 10 new test results returned inconclusive or indeterminant, 71 samples tested positive</i></li> </ul>
<b>Case Management / Psychosocial Support &amp; Research / IPC</b>	<ul style="list-style-type: none"> <li>• <i>No new death registered</i></li> <li>• <i>While 1 new patient got discharged from the treatment centers, 11 were released from home isolation [10 days from symptom onset]</i></li> <li>• <i>2 patients are currently on oxygen therapy</i></li> </ul>

### 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

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

