This is the 291st national situation report since the confirmation of the first case of the coronavirus disease (COVID-19) in The Gambia, on the 16th March 2020

- No new COVID-19-related death registered, bringing the total number since March 2020 to 166
- 59 new cases registered taking the total number of COVID-19 cases ever confirmed in the country to 5,564
  - 15, 11, 19 & 14 (59) new cases were reported on the 1st, 2nd, 3rd & 4th April 2021 respectively
  - 58% of these tested for reasons of travelling and 37% being ill seeking health due to suspicion of COVID-19
- The median age of the new cases (29 female and 30 male) is 40 (Range: 10 to 80 years)
- A total of 1306 new laboratory test results received (30 from MRCG and 1276 from NPHL)
  - Of these, 59 new samples tested positive, representing a 4.5% test positivity rate
- 30 high-risk contacts [of recently confirmed cases] were identified
- 13 COVID-19 patients were newly discharged from treatment centres, while 12 got discharged at least 10 days from the day they tested positive but evaded institutional isolation
- 8 COVID-19 patients are currently on oxygen therapy
- The country currently has no one in hotel quarantine, 287 active cases and a crude case-fatality ratio of 3%
- 12,674 people have been vaccinated against COVID-19 as of 5th April 2021
- 165 Rapid diagnostic tests conducted at the Airport for travelers coming into The Gambia

**COVID-19 SITUATION IN NUMBERS**

**Globally**
- Confirmed Cases: 132,326,146
- Recoveries: 106,536,050
- Deaths: 2,871,499

**Senegal**
- Confirmed Cases: 39,093
- Recoveries: 37,767
- Deaths: 1,063

**The Gambia**
- Confirmed Cases: 5,564
- Recoveries: 5,111
- Deaths: 166

**II. EPIDEMIOLOGICAL DESCRIPTION**

Fig 1: Geographic Distribution Of Recent COVID-19 Cases Per 100,000 Pop.by Region, 15th Feb-16th March, 2021
Western 1 Health Region has a disproportionately higher number of cases than all the health regions (See Fig. 1).

Despite being far-flung from current testing sites, North Bank East has sent in more samples per 100,000 population than all other regions in the hinterland, over the last 30 days (See Fig. 2).

Table 1: summary of COVID-19 tests conducted, The Gambia, 1st-4th April 2021

<table>
<thead>
<tr>
<th>Date</th>
<th>Positive</th>
<th>Negative</th>
<th>Inconclusive</th>
<th>Test Positivity</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/4/2021</td>
<td>15</td>
<td>254</td>
<td>3</td>
<td>5.9</td>
</tr>
<tr>
<td>2/4/2021</td>
<td>11</td>
<td>390</td>
<td>0</td>
<td>2.8</td>
</tr>
<tr>
<td>3/4/2021</td>
<td>19</td>
<td>360</td>
<td>0</td>
<td>5.2</td>
</tr>
<tr>
<td>4/4/2021</td>
<td>14</td>
<td>240</td>
<td>0</td>
<td>5.8</td>
</tr>
</tbody>
</table>
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Figures 3 and 4 are the age-sex distribution and the Epi-curve of confirmed cases by reported date, respectively. 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, 2021

- 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, 2021. 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)

*as of 29th March 2021 @ 00:11. Data from WHO novel coronavirus dashboard and European CDC situation report
## Major Response Activities

### COVID-19 RISK COMMUNICATION AND COMMUNITY ENGAGEMENT DAILY REPORT - 1/4/21

<table>
<thead>
<tr>
<th>Total No. of Calls received on toll-free helpline</th>
<th>No. of communities reached on COVID-19 through messaging on prevention and access to services</th>
<th>Toll Free Helpline: No. of people shared their concerns and asking for available support services to address their needs</th>
<th>TV phoning programme: No. of people shared their concerns and asking for available support services to address their needs</th>
<th>Social Media pages: No. of people reacted to post and or shared their concerns and asking for available support services to address their needs</th>
</tr>
</thead>
<tbody>
<tr>
<td>42</td>
<td>81</td>
<td>42</td>
<td>25</td>
<td>0</td>
</tr>
</tbody>
</table>

*as of 29th March 2021 @ 00:11. Data from WHO novel coronavirus [dashboard](https://covid19.who.int) and European CDC [situation report](https://www.ecdc.europa.eu/en/publications-data/download-report-新型冠状病毒肺炎%20%E6%9C%89%E5%92%8C%E6%83%85%E5%86%85%E7%9A%84%E6%80%9D%E7%AD%89)
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Component | Interventions
---|---
Coordination | • Coordination meetings held at both central and regional levels
Surveillance/ Laboratory | • A total of 1306 new laboratory test results received 30 from MRCG and 1276 from NPHL
• Of these, 3 test results returned inconclusive or indeterminate, 59 new samples tested positive
Case Management / Psychosocial Support & Research / IPC | • No new COVID-19 related death recorded
• 13 patients were newly discharged from treatment centres
• 8 COVID-19 patients currently on oxygen therapy

Table 2: Major response activities undertaken newly, COVID-19 Outbreak, The Gambia, 2021

<table>
<thead>
<tr>
<th></th>
<th>Total Cov-1</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>279</td>
</tr>
<tr>
<td>Health Care workers</td>
<td>2276</td>
</tr>
<tr>
<td>People with pre-existing conditions</td>
<td>760</td>
</tr>
<tr>
<td>Community workers</td>
<td>2068</td>
</tr>
<tr>
<td>65 years and above</td>
<td>1020</td>
</tr>
<tr>
<td>Teacher</td>
<td>16</td>
</tr>
<tr>
<td>Hotellers</td>
<td>158</td>
</tr>
<tr>
<td>Security forces</td>
<td>36</td>
</tr>
<tr>
<td></td>
<td>6334</td>
</tr>
<tr>
<td></td>
<td>5229</td>
</tr>
<tr>
<td></td>
<td>713</td>
</tr>
<tr>
<td></td>
<td>398</td>
</tr>
<tr>
<td></td>
<td>12674</td>
</tr>
<tr>
<td></td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>3</td>
</tr>
</tbody>
</table>

Table 3: Total vaccinated with COVISHIELD (AstraZeneca Vaccine) by priority group as of 5th April 2021

IV. GAPS/CHALLENGES:

• High site-specific test positivity rate registered at the Basse COVID-19 testing site
• CBS activities not translating to increase in the number of daily tests being conducted
• 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.
• Weak and unreliable internet connection at the NPHL is hampering the implementation of e-surveillance at the laboratory.
• Inadequate fuel for the implementation of the vaccination campaign.
• Inadequate electronic devices and internet bundles for capturing vaccination data at vaccination sites

*as of 29th March 2021 @ 00:11. Data from WHO novel coronavirus dashboard and European CDC situation report
V. NEXT STEPS/RECOMMENDATIONS:

- More tests required in the catchment area of the MRC Basse testing site to ascertain the extent of spread of COVID-19
- 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
- Stakeholders/partners to support in filling the gaps identified in the vaccination campaign process

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