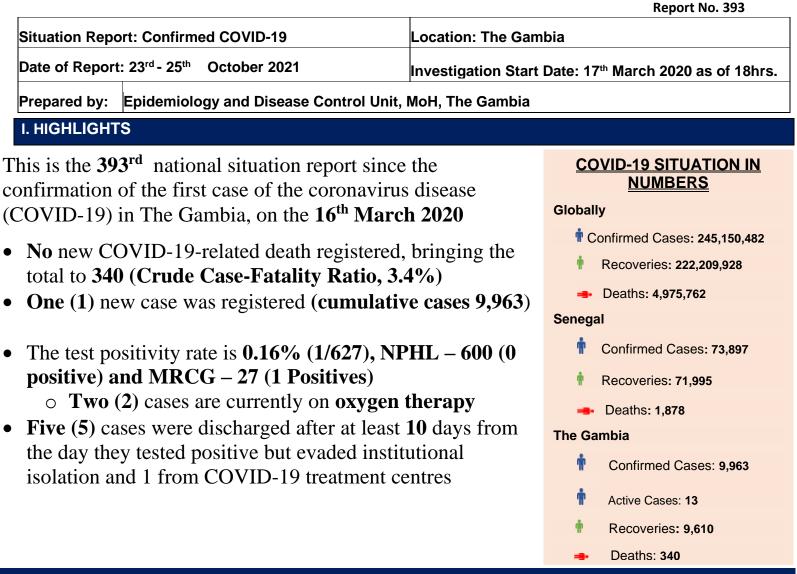
The Gambia COVID-19 Outbreak Situational Report # 393

**Epidemiology and Disease Control Unit** 



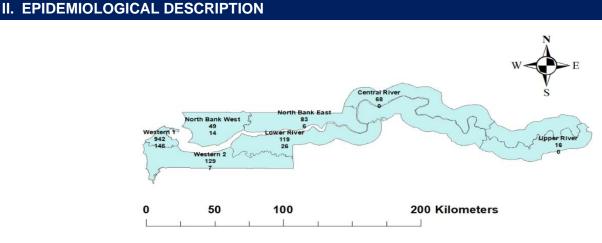
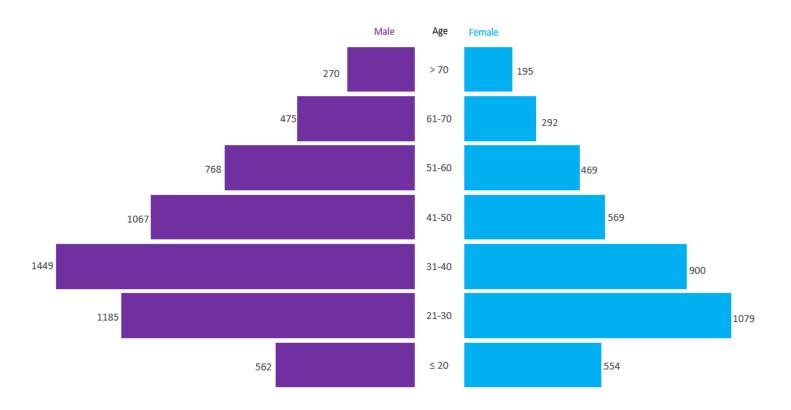


Fig 1:Geographic Distribution of COVID-19 cases per 100,000 Pop. by Region since the start of Pandemic to 31" August 2021(Number Above) and the month of August 2021(Number below) in The Gamiba

- Western 1 Health Region has a disproportionately higher number of cases than all the health regions (See Fig. 1)
- Below are the age-sex distribution and the Epi-curve of confirmed cases by date of sample collection, respectively (See Fig. 2 and 3)



#### Fig 2: Age-Sex Distribution of Confirmed COVID-19 Cases, The Gambia, 2021

<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. 2*) About 59% of the confirmed cases are 40 years below (*See Fig. 2*)

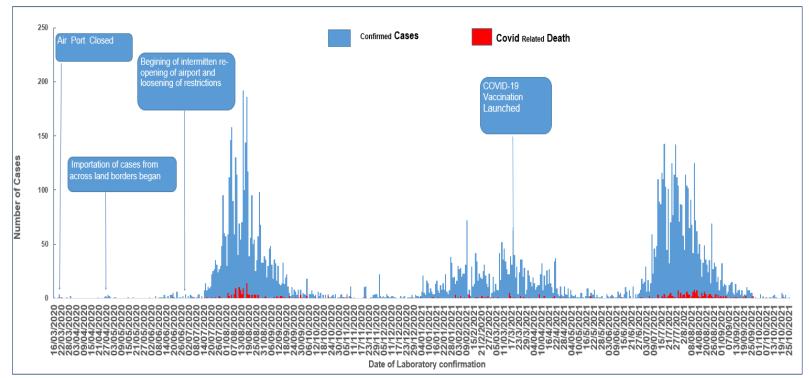


Fig. 3: Epidemic Curve of Laboratory-Confirmed Cases Reported daily, COVID-19 Pandemic, The Gambia, 16<sup>th</sup> March 2020-10<sup>th</sup> August 2021<sup>\*</sup>.

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.

| Status  | New    | Cumulative |
|---|--------|------------|
| No. of active cases in institutional isolation  |        | 5          |
| No. of COVID-19 patients on oxygen support  |        | 2          |
| No. of patients recovered and discharged  | 0      |            |
| In Hotel Quarantine   | 0      | 19         |
| Completed Hotel Quarantine  | 0      | 5,240      |
| 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      | 17,119     |
| No. of Contacts lost to follow-up   | 0      | 58         |
| Total Tests conducted (Repeat Tests)***   | 627(0) | 117,456    |
| Positive test result (Repeat Tests)***  |        | 9,963      |
| Negative test result (Repeat Tests)***  | 625(0) | 106,236    |
| Inconclusive test result (Repeat Tests)***  | 1(0)   |            |

Table 2: Summary of New and Cumulative Public Health Response Outputs, COVID-19 Pandemic, The Gambia, 2021

\* 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                             |             |   |  |
|--|-------------|---|--|
| Component  |             | Interventions   |  |
| Coordination   | •           | Coordination meetings held at both central and regional levels  |  |
| Surveillance/ Laboratory                                   | •           | <ul> <li>A total of 627 new laboratory test results received 27 from MRCG and 600 from NPHL</li> <li>Of these, 1 test result returned inconclusive or indeterminate, 1 new samples tested positive</li> </ul> |  |
| Case Management / Psychosocial<br>Support & Research / IPC | •<br>•<br>• | No new COVID-19 related death recorded<br>One (1) patient was newly discharged from treatment centres<br>No new contacts traced and monitored<br>Two (2) COVID-19 patients are currently on oxygen therapy    |  |

### Table 3: Major response activities undertaken newly, COVID-19 Outbreak, The Gambia, 2021

- GAPS/CHALLENGES:
- 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
- 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.
- Low COVID-19 vaccination coverage rate

## V.

IV.

# **NEXT STEPS/RECOMMENDATIONS:**

- CBS activities need to be synchronized with MRC's ILI surveillance to spur up testing rates in the hinterland.
- 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 and vaccine hesitancy
- Strengthen community-based surveillance to increase awareness and testing rates
- Thorough enforcement of the mandatory mask-wearing regulation
- 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 always including the donning of appropriate PPEs
- Intensify activities geared to increase COVID-19 vaccination coverage at all levels

### COVID-19 National Situation Report #393, 26th October 2021

