



Situation Report: Confirmed COVID-19	Location: The Gambia
Date of Report: 15th - 17th April 2022	Investigation Start Date: 17th March 2020 as of 18hrs.
Prepared by: Epidemiology and Disease Control Unit, MoH, The Gambia	

I. HIGHLIGHTS

This is the 435th national situation reports 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 to 365 (Crude Case-Fatality Ratio, 3.0%)
- No new case was registered (Cumulative cases 11,995)
- The test positivity rate is 0.0% (0/327), NPHL –313(0 positives) and MRCCG – 14 (0 Positives)
 - No case is currently on oxygen therapy
 - Two (2) cases were discharged after at least 10 days monitoring from the day they tested positive but evaded institutional isolation and none from COVID-19 treatment centre
- As of 13th April 2022, the following number of people have been vaccinated with:

Pfizer

- Dose 1:627
- Dose 2:0
- Booster:216
- Johnson & Johnson:
 - Only 1 dose: 288,802
- Sinopharm:
 - Dose 1: 4,513
 - Dose 2: 3,395
- AstraZeneca:
 - Dose 1: 40,680
 - Dose 2: 28,692

TARGET POPULATION (based on microplanning estimates - 1,564,214)

- Proportion of target population fully vaccinated (2 doses of AZ/Sinopharm or 1 dose of J&J): 20.5%
- Proportion of target population that received at least one Covid-19 vaccine dose (AZ or J&J or Sinopharm): 21.4%

TOTAL POPULATION (Based on final MoH population projections for 2021 - 2,438,899)

- Proportion of total population fully vaccinated (2 doses of AZ/Sinopharm or 1 dose of J&J): 13.2%
- Proportion of total population that received at least one COVID-19 vaccine dose (AZ or J&J or Sinopharm): 13.7%

COVID-19 SITUATION IN NUMBERS

Globally

- 👤 Confirmed Cases: 505,437,874
- 👤 Recoveries: 457,350,050
- ➡ Deaths: 6,225,686

Senegal

- 👤 Confirmed Cases: 85,972
- 👤 Recoveries: 83,986
- ➡ Deaths: 1,965

The Gambia

- 👤 Confirmed Cases: 11,995
- 👤 Active Cases: 01
- 👤 Recoveries: 11,629
- ➡ Deaths: 365

II. EPIDEMIOLOGICAL DESCRIPTION

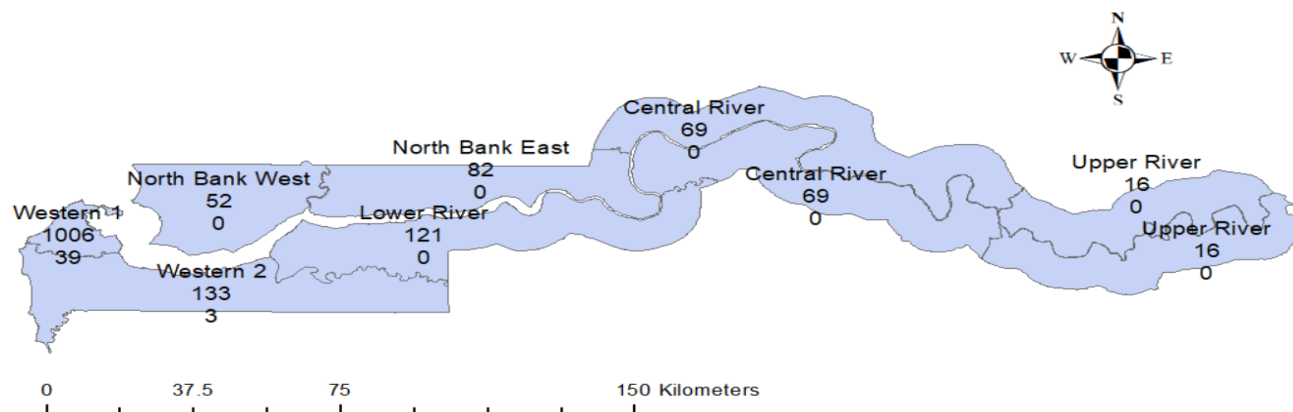


Fig1: Geographic Distribution of COVID-19 Cases per 100,000 Pop. by Region Since the start of the Pandemic to 31st December (Number Above) and December only (Number below) 2021 in The Gambia

- 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**)

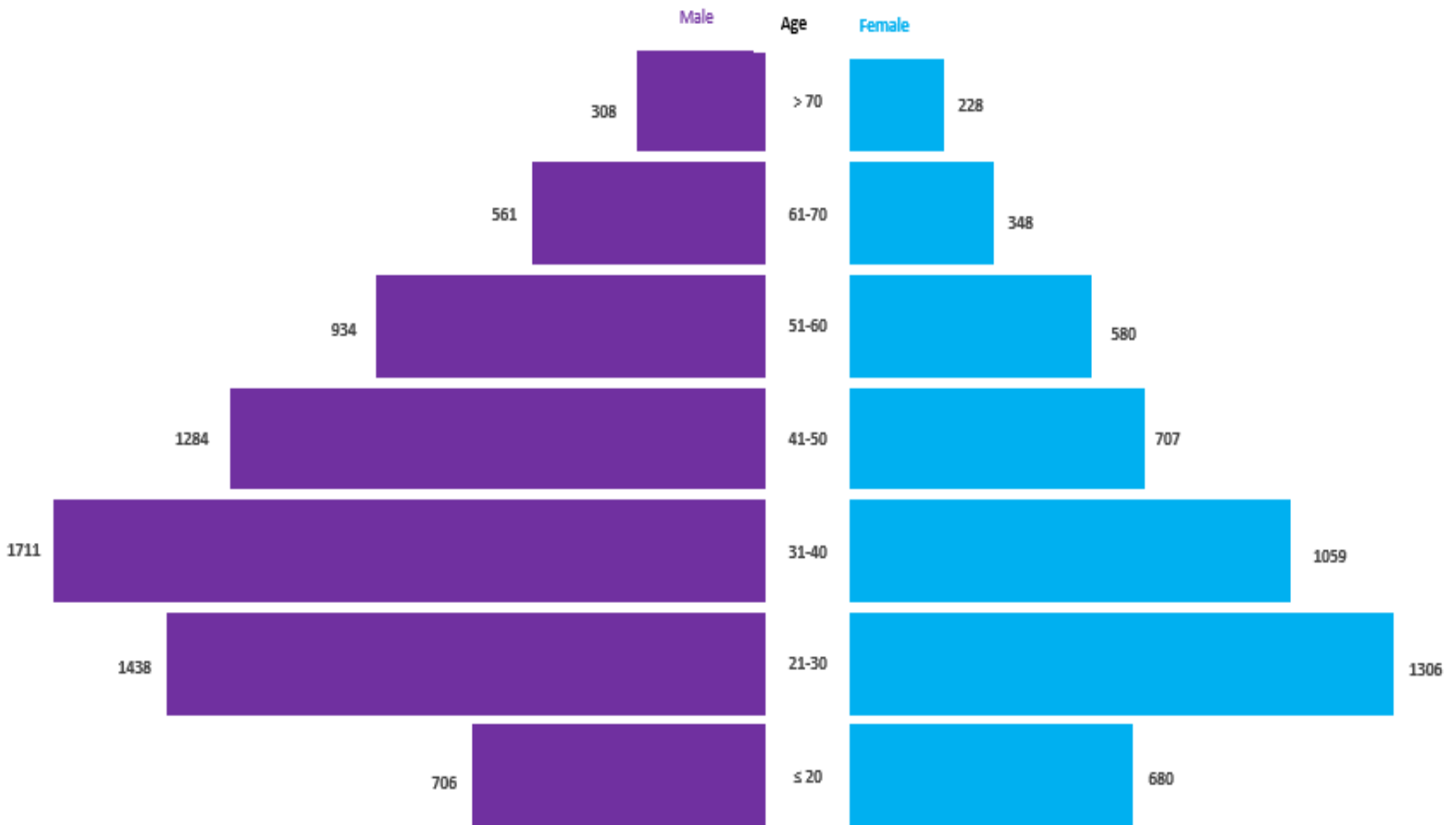


Fig 2: Age-Sex Distribution of Confirmed COVID-19 Cases, The Gambia, 2022

✧ 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 58% of the confirmed cases are 40 years below (**See Fig. 2**)

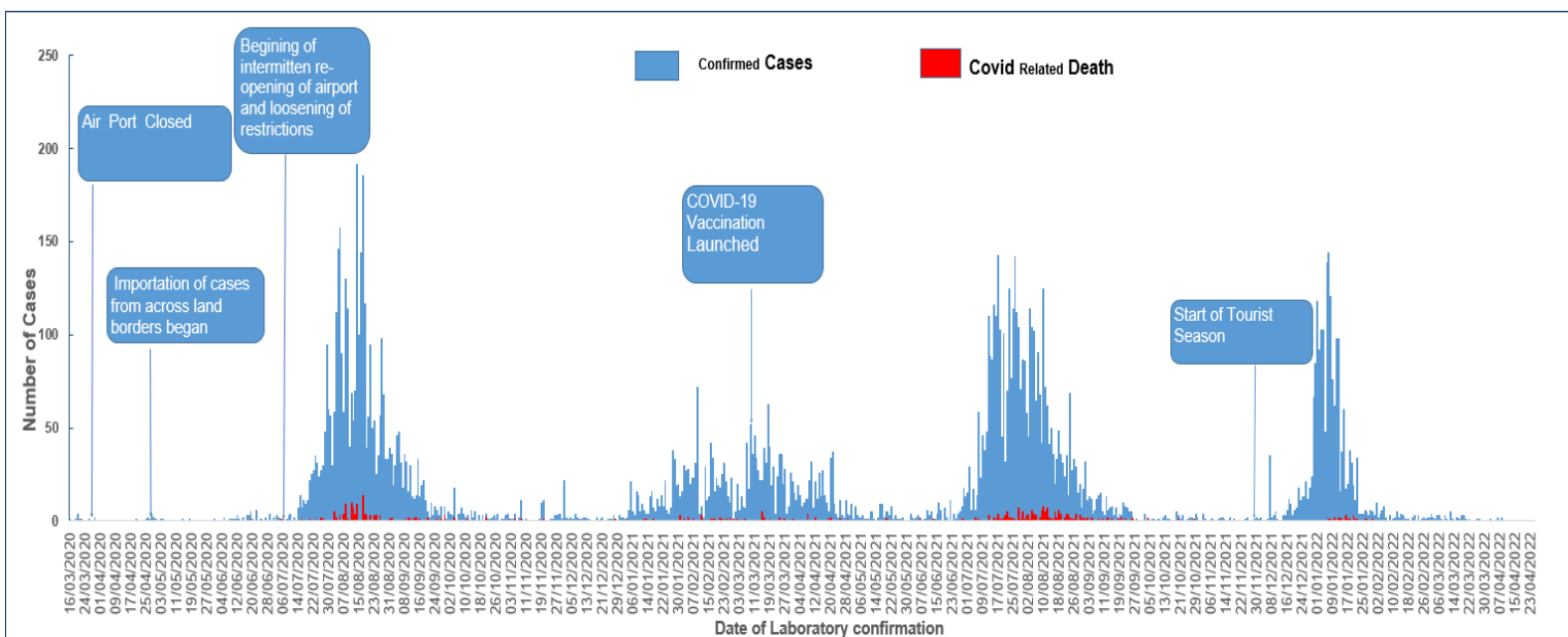


Fig. 3: Epidemic Curve of Laboratory-Confirmed Cases Reported daily, COVID-19 Pandemic, The Gambia, 16th March 2020-19th April 2022*.

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

Table 1: Summary of New and Cumulative Public Health Response Outputs, COVID-19 Pandemic, The Gambia, 2022

Status	New	Cumulative
No. of active cases in institutional isolation		0
No. of COVID-19 patients on oxygen support		0
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	17,129
No. of Contacts lost to follow-up	0	58
Total Tests conducted (Repeat Tests)***	327(0)	162,449
Positive test result (Repeat Tests)***	00(0)	11,995
Negative test result (Repeat Tests)***	327(0)	149,047
Inconclusive test result (Repeat Tests)***	00(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

Table 2: Covid-19 vaccine Doses administered over the last 10 days by region in The Gambia, 2022

Region	04 April 2022	05 April 2022	12 April 2022	13 April 2022	Total
CRR	0	0	0	0	0
LRR	0	0	0	0	0
NBER	15	0	0	0	15
NBWR	0	0	0	0	0
URR	0	0	1,013	0	1,013
WR1	319	133	83	145	680
WR2	0	0	0	0	0
Total	334	133	1,096	145	1,708

Table 3: Major response activities undertaken newly, COVID-19 Outbreak, The Gambia, 2022

III. MAJOR RESPONSE ACTIVITIES

Component	Interventions
Coordination	<ul style="list-style-type: none"> • Coordination meetings held at both central and regional levels
Surveillance/ Laboratory	<ul style="list-style-type: none"> • A total of 327 new laboratory test results received 313 from NPHL and 14 from MRCG <ul style="list-style-type: none"> ○ Of these, no test result returned inconclusive or indeterminate, no new sample tested positive
Case Management / Psychosocial Support & Research / IPC	<ul style="list-style-type: none"> • No new COVID-19 related death recorded • No patient was newly discharged from treatment centres • No new contacts traced and monitored • No COVID-19 patient is currently on oxygen therapy

IV. GAPS/CHALLENGES:

- CBS activities not replicated in all regions 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. NEXT STEPS/RECOMMENDATIONS:

- CBS activities need to be synchronized with MRC's ILI surveillance to spur up testing rates in the hinterland.
- Strengthen community-based surveillance in all regions to increase awareness and testing rates
- 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

- 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
- Strengthen the capacity of the National Public Health Laboratories to conduct sequencing to identify new variants from positive samples as the COVID-19 virus evolves.

For comments or questions, please contact:
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PARTNERS

