Overview
Since the declaration of the COVID-19 as a global pandemic by the WHO, The Gambia as of 2 May (43rd Gambia COVID-19 Situational Report), has recorded 17 confirmed cases and 1 death resulting from COVID-19. The disease was first imported from abroad and the country has since seen an emergence and uptake in local case transmissions. The discovery of 5 new cases in a day most of which were local transmission has triggered a heightened concern on the spread and uptake of the virus. One of the recently discovered cases was found outside of the Greater Banjul Area making it the second case reported in the regions. Considering the country’s socio-cultural contexts, there are heightened risks of an increase in cases due to possible multiple contact at communal places such as bantabas, family homesteads, markets, places of worship and health facilities as WHO has declared that the situation is likely to shift to local transmission as opposed to the initial recording of only imported cases. The increase in local transmission and spread beyond the Greater Banjul has raised alarm and thus requires concerted effort from the government and all partners to strengthen response mechanisms. The Government still has in place its March 23 State of Public Emergency measures closing all borders and banning all flights except for essential supplies. All schools, hotels, public gatherings such as open markets congregational prayers and meetings have been put on hold.

Based on this reality, the Government of The Gambia has developed a National COVID-19 Preparedness and Response Plan to contain the spread of the virus. This comprehensive and costed plan, modelled based on lessons learnt from the Ebola Virus Response Plan in 2015, focuses attention on strengthening the capacity of health facilities and institutional structures of coordination mechanisms, case management, contact tracing and surveillance, risk communications and community engagement, and logistics and seeks to maximize available resources to effectively respond to the COVID-19 pandemic. UNFPA seeks to support this plan in alignment to the UN and National response plans respectively with a view to achieving multi-sectoral/partner complementarity of action to reach the most vulnerable in the country.

The health sector response plan budgeted at USD11 million not only responds to COVID-19, but seeks to strengthen the health system to respond to future emergencies and routine health services for Gambians. However, the plan stops short on other relevant issues in emergency response such as socio-economic impact and response, livelihoods and the protection of the vulnerable including from gender based violence.

As a result, the agency has identified critical gaps in the national response plan and has committed to investing in health strengthening to ensure continuity of sexual and reproductive health care services including lifesaving maternal and child health services and Family Planning. Based on projections that the prevalence of Gender-Based Violence (GBV) is likely to rise as a result of the pandemic, UNFPA will also support efforts to address GBV and ensuring women, girls, boys and men alike are protected from violence and ensuring that an effective response mechanism is position to provide support services to survivors including mental health and psychosocial support. This will be coupled with logistical support to enhance epidemiological surveillance of the health system as recommended by the UN Deputy Secretary General in order to curb the socio-economic impact of COVID-19.

As a strong partner of the Government, UNFPA’s support to this National response is guided by the WHO COVID-19 Strategic Action Plan and is anchored on the UNFPA Global response plan by focusing strategic investments in limiting human-to-human transmission, mitigating the impact of the epidemic on the healthcare system by focusing on sexual and reproductive health at the level of affected communities, and ensuring the prevention of gender based violence.

Interventions
Ensure continuity of sexual and reproductive health services

i. Supporting the health system to maintain the delivery of RMNCAH services including antenatal, post-natal, BEMONC and CEMONC services
ii. Support infection prevention and control in health facilities and outreach settings, especially ANC clinics, labour & maternity wards, theaters and outreachs.
iii. Provision of capacity building and protection support; including PSS to frontline health workers especially women.

Addressing Gender Based Violence and providing MHPSS

i. Assessing the impact of COVID-19 on GBV prevalence and ensuring assess to an effective GBV response mechanisms
ii. Activating GBV and MHPSS helpline services
iii. Provision of MHPSS services to health care workers and GBV survivors
iv. Strengthening community mechanisms to prevent, monitor and respond to GBV

Support women and young people to live dignified lives

i. Provide immediate dignity and protection assistance to vulnerable women including women with disability
ii. Ensuring the sexual and reproductive health needs of women and young people including Family Planning are addressed
iii. Ensuring active engagement of young people in the COVID-19 response
iv. Supporting women to participate in COVID-19 decision making processes at all levels

Response Accelerators

- Leaving no one behind
- Data
- Risk communication and stigma reduction
- Youth engagement
These accelerators will be driven by the Country Office’s participation and contribution to the government’s COVID-19 response through these committees:
- Risk Communication and Community Engagement
- Case Management
- Infection Prevention & Control
- Logistics
- Surveillance and Contact Tracing
- MHPSS and GBV

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