





COVID-19 CASES IN THE GAZA STRIP

Weekly epidemiological bulletin from (18/04 TO 24/04 2021) AND (25/04 TO 01/05 2021)

DATA SOURCES: MINISTRY OF HEALTH (MOH) DAILY REPORTS ON COVID-19 IN GAZA STRIP

GENERAL

		Weekly cases		Cumulative
Reporting Period		18-04-2021 24-04-2021	25-04-2021 01-05-2021	accumulative since 23/8/2020
# of samples tested # of positive cases # of closed cases	total	21,251	15,136	550,583
	total	7,170	4,445	101,703
	total	80,947	8,9647	
# recovered cases (%closed)		80,099 (99%)	88,738 (99%)	
# reported deaths (%closed)		848 (1%)	909 (1%)	
Classification of positive cases by	Mild	7,084	4,390	
severity*	Moderate	24	30	
	Severe	41	9	
	Critical	21	16	
Positivity rates (weekly)	total	33.74%	29.37%	18.5%
	contacts	44.5%	39.6%	
	suspect	28.5%	24.4%	
	surveillance	4.3%	6.3%	

^{*} The reported classification of positive cases by severity reflects the status at first day of admission at the last day of the reporting week. This classification may change over time according to progression of COVID-19 infection among patients.

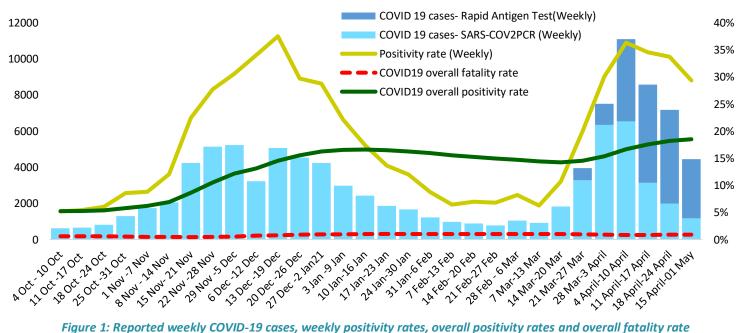
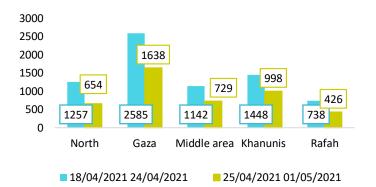


Figure 1: Reported weekly COVID-19 cases, weekly positivity rates, overall positivity rates and overall fatality rate

- Decrease in total number of conducted tests (both COVID-19 Antigen Rapid test and SARS-COV2-PCR test) to 15,136 between 25 April-1May from 21,251 between 18-24 April 2021.
- Decrease in number of newly reported COVID-19 cases to 4,445 between 25 April-May from 7,170 between 18-24 April 2021 (Figure 1).
- Decrease in newly reported COVID-19 cases and incidence per 100,000 along five Gaza Strip districts (Figure 2 and 3).
- Decrease in newly reported cases may be related to new procedures by MOH to prioritise tests for high risk groups, elderly people, and suspected cases.

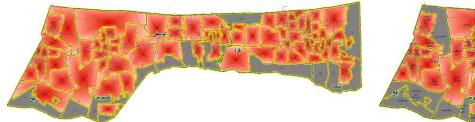


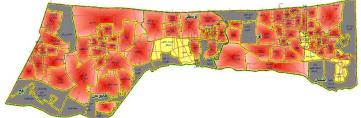
400 350 300 237 241 224 250 164 200 157 150 100 50 302 375 350 350 284 0 North Middle area Khanunis Rafah Gaza **18/04/2021 24/04/2021 25/04/2021 01/05/2021**

Figure 2: Newly reported weekly COVID-19 cases in Gaza Strip districts

Figure 3: Incidence of weekly COVID-19 reported cases per 100,000 population in Gaza Strip districts

• Most of Gaza Strip areas remain red on 29 April (Figure 4). The red areas represent high risk neighbourhoods based on a traffic light system (TLS) developed by PNIPH/WHO which distributes the ratio of newly detected COVID-19 cases (7 days average). This system classifies the neighbourhoods by color (Red, Yellow, Green).





24 April 2021

29 April 2021

Figure 4: Geographical distribution of newly reported COVID-19 cases (7 days average) in Gaza Strip neighborhoods

POSITIVITY RATES

- Decrease in weekly COVID-19 positivity rate to 29.37% between 25 April-1 May from 33.74% between 18-24 April 2021.
- Decrease in weekly positivity rates in all five districts comparing between last two weeks (Figure 5).
- Decrease in weekly positivity rates among suspected cases and contacts, with a slight increase among random surveillance comparing between the two weeks (Table on page 1).
- Increase in overall positivity rate up to 18.5% until 1 May 2021 (Table on page 1).

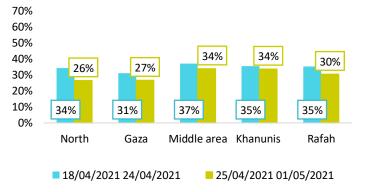


Figure 5: COVID-19 weekly positivity rates distributed by districts

DISTRIBUTION OF COVID-19 CASES AMONG AGE GROUPS AND GENDER

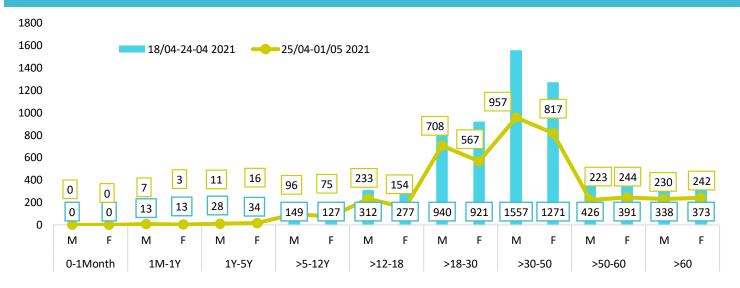


Figure 6: Weekly newly reported COVID-19 cases distributed by age groups and gender

- Decrease among all age groups between 25 April-1 May compared to 18-24 April 2021.
- Highest reported COVID-19 cases among people aged 18 to 50 among males and females in the two reporting periods.

DISTRIBUTION OF COVID-19 DEATHS

- Decrease in number of reported COVID-19 deaths to 61 (39 males, 22 females) between 25 April-1 May from 87 between 18-24 April 2021 (Figure 7).
- Majority of reported COVID-19 deaths are from people aged 60 years and older (Figure 7). 29 male and 17 female deaths
 were reported in the period between 25April-1 May 2021 in comparison with 48 male deaths and 30 female deaths in the
 period from 18-24 April 2021 (Figure 7).
- Thirteen (13) deaths among younger age groups (>30-60) reported between 25 April-1 May compared to 8 deaths between 18-24 April 2021.
- Total reported deaths since the start of COVID-19 outbreak in the Gaza Strip until 1 May reached 909 with an accumulative COVID-19 fatality rate of 1%. Out of the 909 COVID-19 reported deaths, 546 were males (60%) and 363 females (40%).

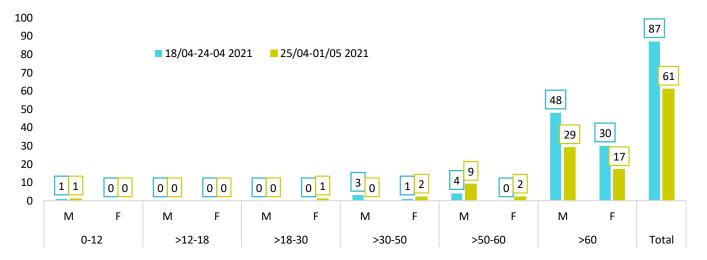


Figure 7: Distribution of reported COVID-19 deaths by age groups and gender

DISTRIBUTION OF COVID-19 CASES BY SEVERITY

- Decrease in cumulative moderate cases admitted to hospitals to 80 on 1 May from 82 cases on 24 April 2021 (Figure 8).
- Decrease in cumulative severe cases admitted to hospitals to 184 cases on 1 May from 221 cases on 24 April 2021.
- Decrease in cumulative critical cases admitted to hospitals to
 62 cases on 1 May compared to 64 cases on 24 April 2021.

HEALTH SYSTEM CAPACITY (COVID-19 MANAGEMENT)

- Decrease in total COVID-19 bed occupancy rates to 58% on 1 May 2021 from 66% on 24 April 2021 (Figure 9) based on 627 COVID-19 beds available in Gaza, including 381 high dependency and 86 ICU beds.
- Decrease in occupancy rate at high dependency and ICU units to 64% on 1 May from 74% on 24 April 2021 (Figure 9).

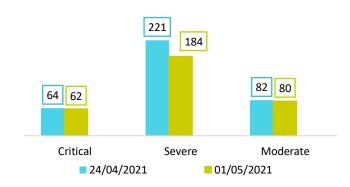


Figure &: Classification of cumulative hospital admitted COVID-19 patients by severity

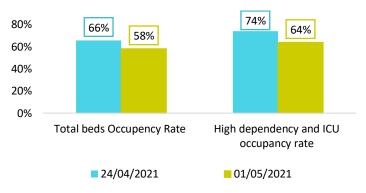


Figure 9: Occupancy rates of COVID-19 beds classified by type of bed

HEALTH CARE WORKERS INFECTIONS

- Decrease in total number of active COVID-19
 cases among health workers to 233 on 1 May
 2021 from 289 on 24 April 2021. Figure 10
 presents the distribution of cases by sex and
 profession of health workers.
- Decrease in newly reported COVID-19 infections among health workforce from 102 between 24 April-1 May from 130 between 18-24 April 2021 (Figure 11).
- Around 50% of newly reported infected health workers were working at hospital settings between 24 April-1 May 2021 (Figure 11).

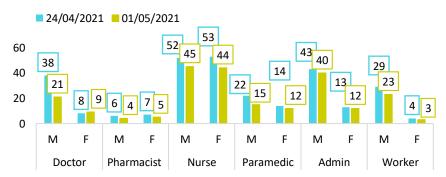


Figure 10: Active reported COVID-19 cases among health workforce distributed by gender and profession

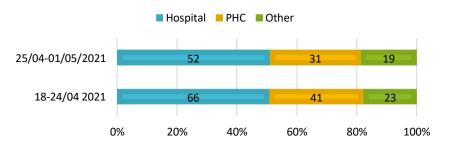


Figure 11: Distribution of newly weekly reported COVID-19 cases among health workforce by work setting

COVID-19 VACCINATION

- National vaccination campaign was launched in Gaza Strip on 22 February 2021 in parallel with established specific vaccine distribution criteria for elders with chronic health conditions, frontline health care workers and other patients with lifethreatening health conditions.
- Up to 5 May 2021, 37,464 frontline health workers and community members received the first dose of COVID-19 vaccinations at MOH hospitals, MOH and UNRWA clinics, with 28,475 receiving their second dose of vaccine.
- 8,750 health care workers have been vaccinated so far, as well as 15,264 people with co-morbidities.
- Figure 12 shows the total number of people vaccinated against COVID-19 by age group.

Table 2: Delivered COVID-19 vaccine doses- Gaza Strip (24 April 2021)

No	Date	Vaccine route	Delivered vaccine doses
1	February 2021	Palestinian Authority	2,000
2	February 2021	Donations from UAE	20,000
3	11 March 2021	Donations from UAE	38,700
4	21 March 2021	COVAX	21,300
5	19 April 2021	COVAX	28,800
		Total	110,800

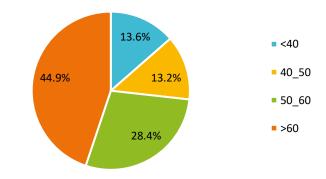


Figure 12: Distribution of COVID-19 vaccinated people by age groups

CONCLUSIONS AND RECOMMENDATIONS

- Decrease in newly reported COVID-19 cases and weekly positivity rates among males and females in all age groups along all five Gaza Strip districts. Almost all areas in Gaza remain coded red reflecting the wide range of COVID-19 community transmission at this stage.
- Alarming numbers in reported COVID-19 deaths and admitted COVID-19 patients in severe conditions. Protection of the
 most vulnerable COVID-19 patients such as elderly and patients with known co-morbidities remains vital. The process of
 early hospital admission for these groups should be enforced to provide early supportive care to prevent the deterioration
 of their health conditions and late access to lifesaving care.
- Supporting health care system for proper management of COVID-19 patients and all patients continues to be essential to
 prevent further deterioration. In response to the alarming increase in high dependency and ICU bed occupancy rates,
 MOH increased the COVID-19 bed capacity to provide appropriate care for COVID-19 patients.
- During Ramadan, Risk Communication and Community Engagement (RCCE) messaging on public health measures among
 the broader population need to be urgently stepped up to prevent further deterioration in COVID-19 figures specially
 where people gather more frequently than other seasons during the year. WHO produced the Safe Ramadan Practices
 Guide: English: https://apps.who.int/iris/bitstream/handle/10665/331767/WHO-2019-nCoV-Ramadan-2020.1-eng.pdf
- Strengthening of RCCE efforts to address vaccine hesitancy among the population and raise awareness of the urgency to get vaccinated including for those previously infected by COVID-19 in view of the unknown duration of immunity and the risk of re-infection.