





COVID-19 CASES IN THE GAZA STRIP

Weekly epidemiological bulletin from (17/01 TO 23/01 2021) AND (24/01 TO 30/01 2021)

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

GENERAL

	Weekly cases			Cumulative
Reporting Period		17-01-21 23-01-21	24-01-21 30-01-21	accumulative since 23/8/2020
# of samples tested	total	13,573	13,922	316,051
# of positive cases	total	1,853	1,668	51,312
# of closed cases	total	44,474	46,827	
# recovered cases (%closed)		43,966 (99%)	46,305 (99%)	
# reported deaths (%closed)		508 (1%)	522 (1%)	
Classification of positive	mild	1,831	1,647	
cases	moderate	14	12	
by severity*	severe	6	6	
	critical	2	3	
Positivity rates	total	13.65%	11.98%	16.2%
	contacts	23.4%	27.2%	
	suspect	21.6%	21.5%	
	surveillance	5.5%	4.8%	

^{*} 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.

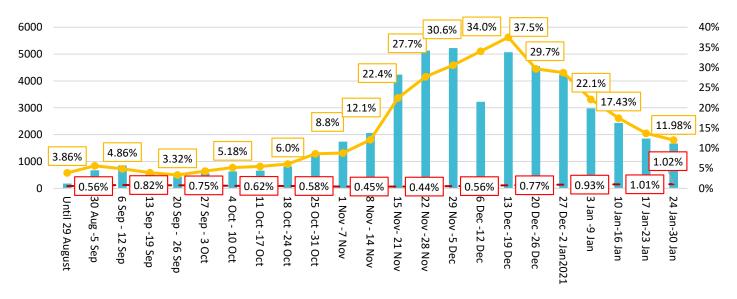
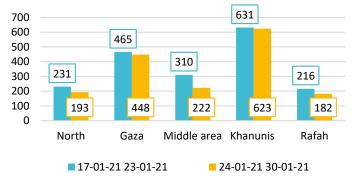


Figure 1: Reported weekly COVID-19 cases, positivity rates and overall fatality rates

- Gradual decrease in positivity rates and number of newly reported COVID-19 cases in the last five weeks (Figure 1).
- Increase in number of conducted tests to 13,922 between 24-30 January from 13,573 between 17-23 January 2021.
- Decrease in newly reported COVID-19 cases and incidence per 100,000 population in all districts in the Gaza Strip (Figure 2 and 3).



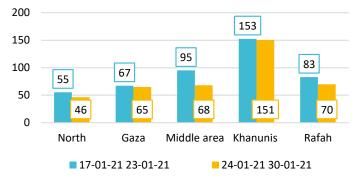


Figure 2: Newly reported weekly COVID-19 cases in Gaza Strip districts

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

• Decrease in the number of red coded areas to 14 on 25 January, from 22 on 19 January 2021 (Figure 4). Most red areas are located in the Middle area and Rafah districts.





19 January 2021

25 January 2021

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

POSITIVITY RATES

- Continued decrease in overall COVID-19 positivity rates to 11.98% between 24-30 January from 13.65% between 17-23 January 2021. Decrease occurred in four districts, with a slight increase in the Middle Area to 15% between 24-30 January from 14% between 17-23 January 2021 (Figure 5).
- Positivity rates increased among close contacts from 23.4% to 27.2% between 24-30 January, with a decrease among suspected cases and random surveillance, as presented in the general table above.
- Overall positivity rate reached 16.2% on 30 January 2021.

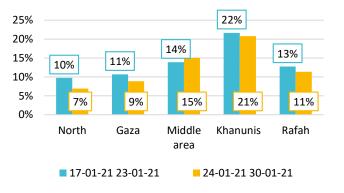


Figure 5 : Reported COVID-19 weekly positivity rates in Gaza Strip districts

DISTRIBUTION OF COVID-19 CASES AMONG AGE GROUPS AND GENDER

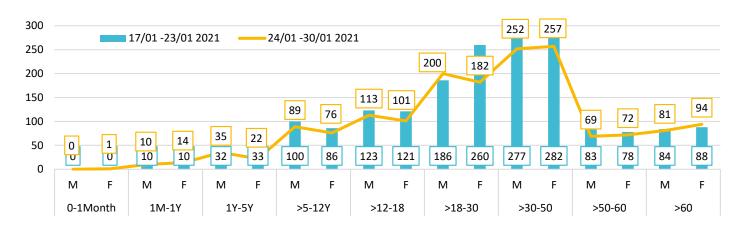


Figure 6: Weekly newly reported COVID-19 cases distributed by age groups and gender

- Overall decrease among most age groups and genders comparing 24-30 January with 17-23 January 2021 (Figure 6). Highest reported COVID-19 cases among people aged 18 to 50.
- Slight increase in newly reported COVID-19 cases among males aged 18-30 to 200 between 17-23 January from 186 between 17-23 January, as well as among females aged over 60 to 94 between 17-23 January, from 88 between 24-30 January 2021 (Figure 6). This increase should be monitored during the coming weeks.

DISTRIBUTION OF COVID-19 DEATHS

- Continued decrease in reported COVID-19 deaths in the last five weeks: 14 between 24-30 January compared to 24 between 17-23 January (Figure 7).
- Majority of reported COVID-19 deaths are people over 60. Decrease in reported deaths among males to 4 deaths between 24-30 January from 20 between 17-23 January 2021. Slight increase in reported deaths among females to 6 between 24-30 January from 2 between 17-23 January 2021.
- Increase in reported deaths among people aged >50 to 60: 4 deaths between 24-30 January compared to 2 deaths between 17-23 January 2021. This should be monitored during the coming weeks.
- Total reported deaths since the start of COVID-19 outbreak in the Gaza Strip until 30 January 2021 reached 522 with an accumulative COVID-19 fatality rate of 1.02% (522 deaths out of 51,312 COVID-19 cases). Out of the 522 deaths, 295 were males (57%) and 227 were females (43%).

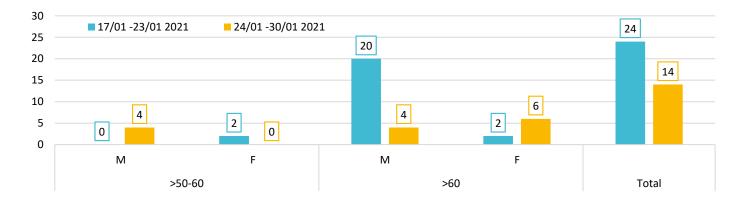


Figure 7: Distribution of reported COVID-19 deaths by age groups and gender

DISTRIBUTION OF COVID-19 CASES BY SEVERITY

- Moderate cases admitted to hospitals decreased to 35 on 30
 January compared to 36 cases on 23 January 2021 (Figure 8).
- Severe cases admitted to hospitals decreased to 32 cases on 30 January compared to 54 cases on 23 January 2021.
- Critical cases admitted to hospitals decreased to 5 cases on 30
 January compared to 14 cases on 23 January 2021.
- Decrease is in line with the lower number of newly reported COVID-19 cases and deaths. Number of admitted cases at severe and critical levels is currently lower than the number of moderate cases, which might reflect better access to care.

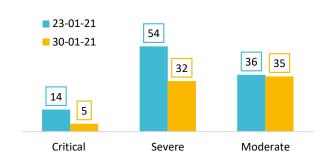


Figure 8: Classification of cumulative hospital admitted COVID-19 patients by severity

HEALTH SYSTEM CAPACITY (COVID-19 MANAGEMENT)

- In line with the gradual decrease in number of hospitaladmitted COVID-19 patients, the total bed occupancy rate and high dependency and ICU unit occupancy rate continues to decrease in the last six weeks.
- Total COVID-19 bed occupancy rate decreased to 18% on 30 January compared to 27% on 23 January 2021 (Figure 9).
- High dependency and ICU occupancy rates decreased to 28% on 30 January from 38% on 23 January 2021.

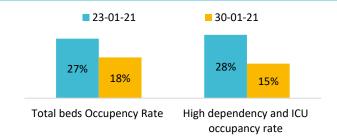


Figure 9: Occupancy rates of COVID-19 beds classified by type of bed

HEALTH CARE WORKERS INFECTIONS

- Decrease/no change in number of active COVID-19 cases among most health workforce categories, except for male workers (Figure 10).
- Decrease in total number of active COVID-19 cases to 71 on 30 January from 101 on 23 January 2021 (Figure 10).
- Slight increase in newly reported COVID-19 infections among health workforce to 39 between 24-30 January compared to 32 between 17-23 January 2021 (Figure 11).
- Approximately 50% of newly infected workers between 24-30 January were working at primary health care and other health departments, compared to 34% between 17-23 January 2021 (Figure 11).

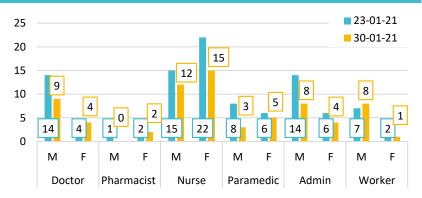


Figure 10: Active reported COVID-19 cases among health workforce distributed by gender and profession

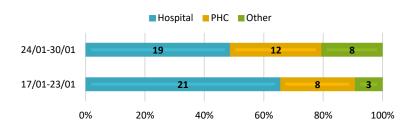


Figure 11: Distribution of newly weekly reported COVID-19 cases among health workforce distributed by work setting

CONCLUSIONS AND RECOMMENDATIONS

- Continued decrease in newly reported COVID-19 cases and positivity rates in the last five reporting weeks in all Gaza Strip districts.
- Similarly, continued decrease in number of COVID-19 patients admitted to hospitals in severe and critical health condition, as well as bed occupancy rates, indicating a flattening of the curve of COVID-19 infections after implementing stricter public health measures.
- Gaza authorities declared further easing of public health measures by allowing community members to walk on Friday and
 Saturday without using any transportation means. The Ministry of Education re-opened preparatory and secondary schools.
 Clear monitoring, strong surveillance and trend analysis, and contact tracing should remain in place to evaluate the results
 of easing the measures during the coming weeks, combined with maintaining strict adherence to COVID-19 mitigation
 measures.
- 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.
- As COVID-19 cases are decreasing, health facilities can refocus their efforts on revitalising the provision of essential health services and elective care. A slight increase in reported COVID-19 infections among health workforce reflects the continued need to maintain robust IPC measures in all health facilities to sustain the before mentioned achievements.
- While the COVID-19 situation is clearly improving, the health system in the Gaza Strip remains fragile with MOH reporting 45% of all essential medicines and 33% of essential disposables at zero stock levels. Strengthening of the health care system and supporting vulnerable communities in the Gaza Strip should be the main goal.
- As part of the National Deployment and Vaccination Plan (NDVP), Gaza health authorities supported by WHO, UNICEF and
 UNRWA, are making the necessary preparations for the pending arrival of COVID-19 vaccines, in line with the agreed
 prioritisation of vulnerable groups, including training of health workers to correctly receive, store and administer vaccines,
 as well as adequate response to potential Adverse Effects Following Immunization (AEFI). Preparations are also ongoing to
 inform the broader public on future vaccination, and to address potential vaccine hesitancy.