

2022 ANNUAL REPORT

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WORLD HEALTH ORGANIZATION THE GAMBIA

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2022 ANNUAL REPORT

WORLD HEALTH ORGANIZATION

THE GAMBIA

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ACRONYMS

AEFI	Adverse Events Following Immunization		
AFP	Acute Flaccid Paralysis		
ART	Antiretroviral Therapy		
ССА	Country Common Analysis		
CCS	Country Cooperation Strategy		
CDC	Centres for Disease Control and Prevention		
CEBS	Community Event Based Surveillance		
CEHS	Continuity of Essential Health Services		
CFR	Case Fatality Rate		
CMS	Central Medical Store		
COVID-19	Corona Virus Diseases 2019		
CRVS	Civil Registration and Vital Statistics		
СТСА	Centre for Tobacco Control in Africa		
cVDPV2	circulating Vaccine Derived Polio Virus type 2		
DFC	Direct Finance Cooperation		
DHIS	District Health Information System		
DI	Direct Implementation		
EDC	Epidemiology and Disease Control		
EHP	Essential Health PACKAGE		
eLMIS	electronic Logistics Management Information System		
EOC	Emergency Operations Centre		
EPI	Expanded Program on Immunization		
FSW	Female Sex Workers		
GAVI	Global Alliance for Vaccination and Immunization		
GDP	Gross Domestic Product		
GEPI	Global Polio Eradication Initiative		
GERD	Equity, Human rights, and disability		
GLC	Green Light Committee		
GoTG	Government of The Gambia		
GPW13	13th General Programme of Work		
HBV	Hepatitis B Virus		
HIS	Health Information System		
HLMA	Health Labour Market Analysis		
HPG	Health Partners Group		

HSS	Health System Strengthening
iaho	Integrated African Health observatory
IAR	Intra-Action Review
ICD-11	International Classification of Diseases 11th
IDSR	Integrated Disease Surveillance and Response
IEC	Information Education Communication
IHR	International Health Regulations
IMNCI	Integrated Management of Neonatal and Childhood Illnesses
IMS	Incident Management System
IPC	Infection Prevention and Control
IPD	Institute Pasteur de Dakar
JEE	Joint External evaluation
KPI	Key Performance Indicator
LLIN	Long-Lasting Insecticidal Nets
M&E	Monitoring and Evaluation
МСА	Medicines Control Agency
MCCoD	Medical Certification of Cause of Death
MDR	Multi-Drug-Resistant
MDSR	Maternal Death Surveillance And Response
MHPSS	Mental Health And Psychosocial Support
МоН	Ministry of Health
MPTF	UN Multi Partner Trust Fund
MRC	Medical Research Council
MSM	Men who have sex with Men
NAPHS	National Action Plan for Health Security
NCDs	Non-Communicable Diseases
NDMA	National Disaster Management Agency
NDVP	National Deployment and Vaccine Plan
NGOs	Non-Government Organisations
NHA	National Health Accounts
NHIS	National Health Insurance Scheme
NHWA	National Health Workforce Account
NIAP	National Incident Action Plan
NPHL	National Public Health Laboratories

ACRONYMS

OIEWorld Organization for Animal HealthOPDOutpatient DepartmentPCRPolymerase Chain ReactionPHAPublic Health AuthorityPHCPrimary Health Care				
PCRPolymerase Chain ReactionPHAPublic Health Authority				
PHA Public Health Authority				
· · · · · · · · · · · · · · · · · · ·				
PHC Primary Health Care				
PHEOC Public Health Emergency Operation Centre				
PHO Public Health Officer				
PHSM Public health and social measures				
PoE Points of Entry				
RCCE Risk Communication and Community Engagement				
RDT Rapid Diagnostics Test				
RHD Regional Health Directorates				
RMNCAH Reproductive, Maternal, Newborn, Child and Adolescent Health				
RRTs Rapid Response Teams				
SCM Supply chain management				
SDG Sustainable Development Goals				
SHA System Health Accounts				
SMC Seasonal Malaria Chemotherapy				
SOPs Standard Operating Procedures				
SRH Sexual and Reproductive Health				
STH Soil-Transmitted Helminthiasis				
ToT Training of Trainers				
UHC Universal Health Coverage				
UN United Nations				
UNCT United Nations Country Team				
UNFPA United Nations Population Fund				
UNRCO United Nations Resident Coordinator Office				
USAID United States Agency for International Development				
VHDC Village Health Development Committees				
VPDs Vaccine Preventable Diseases				
WCO WHO Country Office				
WHO World Health Organization				

MESSAGE FROM THE WHO COUNTRY REPRESENTATIVE

It is with great pleasure that I introduce the 2022 annual report for WHO Gambia, a year marked by remarkable solidarity in the face of COVID-19 pandemic. As we reflect on the successes and challenges, our commitment to improving healthcare in The Gambia remains steadfast.

The key themes for this year revolved around resilience, response, and reform. We navigated the challenges of the Acute Kidney Injury (AKI) crisis while fighting COVID-19 pandemic, demonstrating resilience and adaptability in addressing an unexpected health crisis. Our response to the COVID-19 pandemic highlights our commitment to public health, with an emphasis on communitybased strategies and vaccination campaigns. The year saw important reforms in healthcare, including the validation of the HRH Strategic Plan and the formulation of various health promotion frameworks, guidelines, and plans. These efforts underscore our determination to enhance healthcare, address emerging health issues, and drive positive change.

Our journey in 2022 was characterized by the strengthening of mutual accountability through

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the Joint Annual Review (JAR). We also dedicated ourselves to fostering internal and external coordination, to guide decision in introducing reforms within the Ministry of Health (MoH). Significant strides were made in resource allocation, operational efficiency, and the prioritization of Primary Health Care (PHC), with a special focus on addressing inequality in PHC service coverage.

Our response to Acute Kidney Injury (AKI) crisis demanded multipronged approach to enhance coordination, surveillance, community engagement, pharmacological measures, and case management. We reaffirmed our commitment through our response to the COVID-19 pandemic. Effective strategies, such as epidemiological surveillance and vaccination campaigns, led to a modest increase in COVID-19 vaccination coverage. Throughout this journey, we collaborated with the government and partners to conduct cycles of COVID-19 vaccination campaign, emphasizing the importance of prevention.

We also assisted in developing comprehensive guidelines to promote mental health awareness in school environments. Our dedication to health promotion and development was evident through the formulation of various health promotion frameworks, updating policies and setting the stage for more comprehensive and effective strategies.

In the face of challenges, we remain committed to our mission of advancing healthcare and wellbeing in The Gambia. We express our heartfelt gratitude to the EU, Gavi, Canada, USA, Germany, UK, and others for their unwavering financial support which played a pivotal role in empowering positive change and making a lasting impact on the lives of those we serve.

Finally, I want to extend my sincere appreciation to Minister of Health Hon. Dr Ahmadou Lamin Samateh for his unwavering commitment, outstanding collaboration, and exceptional leadership. His dedication has been instrumental in achieving our shared goals.

Thank you for your trust in WHO and your continued support in our work.

Desta A. Tiruneh

NAVIGATING CHALLENGES WITH RESILIENCE AND ADAPTABILITY

We navigated the challenges of the Acute Kidney Injury crisis while fighting the COVID-19 pandemic, showing resilience and adaptability in addressing this unexpected health crisis. Our response to the COVID-19 pandemic highlighted our commitment to public health, emphasising community-based strategies and vaccination campaigns.



INTRODUCTION

Nestled within an expanse of 11,300 square kilometers, The Gambia stands as one of the smallest countries in the continental Africa, sharing its borders entirely with Senegal, except for its picturesque 80-kilometer coastline along the Atlantic Ocean to the west. In 2018, the population was estimated at 2.3 million, with projections indicating an anticipated increase to 3.6 million and 4.9 million by mid-2035 and mid-2050 respectively, as outlined by the Population Reference Bureau (2020).

This nation's vitality emanates from its youthful population, with median ages of 17.8 years for males and 18.6 years for females, underscoring the prominence of adolescents aged 15-24 years and youth aged 15-35 years, comprising 21.4% and 38.5% of the 2013 population. A marked concentration of inhabitants, particularly in the Greater Banjul Area, renders The Gambia one of the most densely populated countries on the African continent. Urban sprawl is a consequence of rural-urban migration, as demonstrated by over 50% of the populace residing in the western regions, notably Banjul, Kanifing, and Brikama.

Notwithstanding the challenges posed by its population dynamics, The Gambia is dedicated to ensuring the fundamental right of all its citizens to access healthcare services. This commitment

is embedded in the 1997 Constitution, affirming the state's responsibility to provide clean water, healthcare, shelter, nourishment, and security. Aligned with this constitutional ethos, strategic frameworks such as the National Health Sector Policy (NHSP) 2021-2030, the National Health Sector Strategic Plan (NHSSP) 2021-2025, and the National Development Plan (2023-2027) prioritize the delivery of quality healthcare services. The successes thus far, especially in enhancing access to basic healthcare services through the Primary Health Care (PHC) strategy, signify a collective effort towards a healthier nation.

The Gambia's journey in healthcare is marked by improvements in life expectancy, from 59.2 years in 2000 to an average of 65.5 years in 2019, accompanied by progress in healthy life expectancy (HALE). This three-tiered healthcare delivery system comprises the Ministry of Health (MoH) at the central level, responsible for formulating policies and mobilizing resources; the seven Regional Health Directorates (RHDs) at the regional level overseeing program implementation; and primary healthcare services at the grassroots level, led by village health workers and minor health centers. While these strides have led to reduced mortality rates and improved healthcare services, challenges remain, particularly in addressing neonatal mortality, infant mortality,

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and maternal mortality, inequality in healthcare access, and low contraceptive prevalence.

While The Gambia has made substantial strides in healthcare access and delivery, it is critical to address disparities between urban and rural areas. The concentration of healthcare facilities in urban regions underscores the need for equitable distribution to ensure comprehensive health services reach all corners of the nation.

As we delve deeper into this report, we will explore the multifaceted dimensions of The Gambia's healthcare landscape. We will assess the progress made, identify persistent challenges, and outline strategies to navigate the intricate path towards achieving Universal Health Coverage (UHC) and fostering a healthier, more resilient population. Through continued dedication, collaboration, and strategic interventions, The Gambia is poised to overcome obstacles and further elevate its healthcare system to new heights.



A COLLECTIVE EFFORT TOWARDS A HEALTHIER NATION

The Gambia's journey in healthcare is marked by improvements in life expectancy, from 59.2 years in 2000 to an average of 65.5 years in 2019, accompanied by progress in healthy life expectancy.



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1. IMPROVED ACCESS TO QUALITY ESSENTIAL SERVICES

1.1 Health Governance

In the past year, remarkable strides have been made in advancing healthcare in The Gambia. A pivotal achievement was our unwavering commitment to aiding the nation's recovery from the throes of the COVID-19 pandemic. Our resolute collaboration with the Ministry of Health (MoH) culminated in the development of a meticulously costed new National Health Sector Strategic Plan (2021-2025). This visionary plan is anchored in the ideals of resilience, Universal Health Coverage (UHC), and strategic initiatives to combat major diseases. The innovative use of the One Health Tool (OHT) facilitated a comprehensive costing of the strategic plan, thereby illuminating critical resource and financial requirements. A cohort of 20 MoH staff were trained in the adept use of OHT, spearheading the formulation of the National Health Strategic Plan. The resounding finalization of this costed plan serves as a formidable asset for advocating sustainable UHC financing in The Gambia.

Enhanced mutual accountability was a notable triumph achieved through the collaborative vehicle of the Joint Annual Review (JAR) and accompanying annual report. Our support empowered the MoH together with other partners to convene a pivotal JAR in July 2022. Among the recommendations engendered, the following emerged as pivotal focal points for action in the years to come: the acceleration of the new insurance scheme implementation, heightened UHC awareness among policy makers, bolstered regional empowerment, amplified health worker training and deployment, enhanced sectoral coordination, and the consummation of public health and other pertinent frameworks.

To augment internal and external coordination mechanisms, we enabled the MoH's strategic evolution through vital reforms. WHO availed the services of an expert to review and strengthen the health sector coordination. The scoping exercise has unfurled avenues for heightened efficacy and stewardship role of the Ministry of Health. We convened monthly Health Partners Group meetings – which consists of key development partners supporting the healthcare sector in The Gambia. The forum is serving as platform for sharing information on the support being provided to the Government and to promote better partnerships for health development in the country.

Notwithstanding these accomplishments, challenges have beset our path. The limitation of human resources and budgetary constraints has cast shadows over the advancement of certain programs. This hurdle resonates both within our organization and within the echelons of the MoH. However, the road ahead is illuminated by firm resolve and strategic intent. Our foremost priority is to foster completion of ongoing support for internal and external coordination mechanisms within the MoH. Through this, we aspire to cultivate an environment of seamless collaboration and operational efficiency. Building on the successes of the past, another pivotal Joint Annual Review for the sector in 2023 is imminent. We are committed to further elevating the impact of Health Partners Group meetings by invigorating their interface with the MoH, nurturing an ecosystem of synergistic partnership that is primed to usher in transformative change.

1.2 Service Delivery and Primary Healthcare

In the realm of Gambian healthcare, there has been notable progress, yet considerable challenges persist. While the national standards indicate that only approximately 50% of the villages in Gambia have been integrated into the Primary Health Care (PHC) networks, it is important to recognize the triumphs that have been achieved amidst these difficulties. Notably, the delivery of Primary Health Care services has been effectively extended to all secondary and tertiary health facilities, showcasing the commitment to comprehensive healthcare provision.



RECOVERY FROM THE THROES OF COVID-19

A noteworthy achievement was materialising the National Health Sector Strategic Plan (2021-2025) in collaboration with the Ministry of Health. This visionary plan demonstrates WHO's unwavering commitment to aiding the nation's recovery from the throes of the COVID-19 pandemic. Significant accomplishments have been witnessed in the augmentation of resource allocation, operational efficiency, and prioritization of PHC. A pivotal step was taken by creating an array of data points to assess the inequality in PHC service coverage. By supporting the Ministry of Health in conducting the Health Inequality Analysis for UHC report, this venture illuminated the socioeconomic disparities within healthcare. This report, in turn, played a guiding role in shaping decisions concerning the national insurance benefit package, where equity was among the fundamental criteria. The collaboration extended further to enhancing the training curricula for Community Health Workers, bolstering the foundation of the healthcare workforce.

Furthermore, the empowerment of Primary Health Care supervision came to fruition with our support. Through partnering with the Ministry of Health, nationwide supervision was conducted, reaching 25 PHC units and thereby ensuring the quality and efficacy of healthcare delivery. This endeavor harmonized with the aim of elevating the quality of PHC Performance Review through the Technical Working Group. The findings of the PHC Performance Review report were validated, aligning the nation's efforts with pursuit of for excellence.

Despite these achievements, challenges linger. The under-resourced state of Gambia's PHC Revitalization plan stands as a persistent hurdle, accentuated by the absence of robust community health systems. To forge ahead, a resilient and strategic approach is essential. The path forward entails the formulation of a new, succinct, and pragmatic PHC Investment plan tailored for Gambia. This revised plan should be both achievable and effective, cultivating a more promising landscape for healthcare development. Concurrently, there is a pressing need to intensify advocacy efforts, rallying for augmented resources to fortify the foundations of PHC.

1.3 Building Oxygen Self-Sufficiency in The Gambia

During the initial stages of the COVID-19 pandemic in The Gambia, the absence of medical oxygen in public hospitals and limited training for health workers posed a significant challenge. With nearly one-infive COVID-19 patients requiring hospitalization and oxygen treatment, the country had to heavily rely on costly imports from Senegal and private companies to address the oxygen system deficit. Aiming to address this urgent need, WHO, in collaboration with partners, facilitated the installation of an oxygen plant. The new Oxygen Plant, jointly procured by the World Bank, UNDP, and WHO, was erected in July 2022. In collaboration with technical assistance from WHO AFRO and WHO HQ teams, WCO team conducted an independent inspection of the newly installed Pressure Swing Adsorption (PSA) system. The engineers engaged in on-site discussions with the PSA suppliers and provided comprehensive written feedback. The commissioning of the plant commenced in October 2022, with full operationalization expected in 2023. In an effort to enhance the maintenance and utilization of oxygen plants, WHO and its partners (US ADS and Global Funds) are preparing to support the country in conducting an evaluation of the three available oxygen plants in 2023. The plant, a first of its kind in Gambian hospitals, emphasizes the importance of oxygen in healthcare and aligns with WHO's commitment to supporting the health sector in The Gambia by providing a sustainable and cost-effective solution to meet the daily oxygen requirements of multiple health facilities across the country.



2. HUMAN RESOURCES FOR HEALTH (HRH)

The Gambia, like its counterparts, has confronted a pressing challenge in the form of a scarcity and unequal distribution of its health workforce. The recently adopted HRH strategy (2022-2026) exposes a glaring disparity: the country's skilled health workers per 1,000 people stand at a modest 1.33, falling short of the WHO benchmark. The situation is compounded by a skewed allocation of health professionals towards urban and semiurban regions, leaving remote areas in a dearth of medical expertise.

Amid these adversities, a series of commendable achievements deserve recognition. A pivotal milestone was reached through the validation and costing of the HRH Strategic Plan (2022 – 26), a feat made possible by the instrumental support of the WHO. Over GMD 4.8 million is needed over the five years to realize the dream of a robust workforce in the Gambia. The assessment of staffing norms demonstrated progress, with hospitals that are inching closer to the norms while minor health centers and primary healthcare facilities faced notable challenges. This assessment report's wide dissemination further bolsters accountability.

However, challenges persist. The MoH's endeavor to secure funding for in-service training plan met hurdles, hampering strategic advancement to address workforce shortages. Furthermore, the scarcity of up-to-date data on health workforce distribution, both geographically and across variables, exacerbates these challenges. To navigate this complex landscape, a proactive approach is imperative moving forward. Prioritizing data quality enhancement through Health Workforce Account and Health Market Labor Analysis is pivotal, necessitating dedicated technical and financial support. Continuing health facility monitoring against minimum standards



155929492949294medical human resources
in The Gambia by regions
(Source: National Health
Plan)



3. COMMUNICABLE DISEASES

3.1 Malaria

In recent years, there has been a commendable reduction in malaria incidence, underscoring the government's and partners' dedication to combat this disease. Notably, amidst the challenges encountered, we made substantial progress in 2020. The reported rise in cases during that year was attributed to the dual impact of COVID-19 and climate change-induced flooding across various parts of the county. Despite these adversities, our achievements shine brightly.

A cornerstone achievement was the formulation of comprehensive Malaria Surveillance guidelines and Standard Operating Procedures (SoPs). These guidelines, fostered with WCO's support, play a pivotal role in gauging progress toward the country's mission of eliminating malaria in The Gambia. They enable accurate tracking of both the decline in malaria-related morbidity and mortality.

Another noteworthy stride was the formulation of the first Integrated Vector Management plan. Bolstered by WHO's technical expertise and financial support, this plan was meticulously crafted through extensive consultations with stakeholders.

Furthermore, our strides extended to the Therapeutic Efficacy Trial of Antimalarials. Through WCO's backing, MOH successfully equipped the country's Malaria program with essential consumables for Plasmodium Falciparum sequencing. Plasmodium Falciparum sequencing allows researchers to understand the



Figure 2: Malaria Incidence Rate per 1000 in The Gambia (2014 - 2021) (Source: DHIS2, 2021)

genetic makeup of the parasite strains circulating in a specific region. This information is crucial for tracking the transmission dynamics of malaria, identifying potential drug resistance, and designing targeted interventions.

As we reflect on these achievements, we acknowledge the challenges that persisted. The decline in donor funding emerged as a significant hurdle. This financial constraint impeded the implementation of comprehensive case-based surveillance and hindered our ability to ensure optimal coverage of Indoor Residual Spraying (IRS) and Seasonal Malaria Chemoprevention (SMC). Our trajectory forward is both promising and determined. A pivotal aspiration is to secure funding for the implementation of the Malaria Vaccine RTS,S in the Upper River Region (URR).

3.2 Tuberculosis

In The Gambia, significant strides have been made in the battle against tuberculosis (TB). Notably, there has been a 12% reduction in TB incidence from 2015 to 2022, showcasing our commitment to combatting this disease. However, the unfortunate rise of 10% in TB-related deaths within the same period reminds us of the challenges that persist.

RISING ABOVE CHALLENGES

In 2020, despite dual challenges (COVID-19 and climate change-induced flooding), we successfully achieved in formulating the Malaria Surveillance Guidelines and Standard Operating Procedures that helped gauge progress toward eliminating malaria in The Gambia. Despite progress, the burden of TB remains substantial, with cases decreasing from 174 per 100,000 people in 2015 to 149 per 100,000 people in 2021, yet still posing a significant challenge. The COVID-19 pandemic further impacted our efforts, leading to a 14% decrease in annual TB case notifications.

Our partnership with the MOH has yielded remarkable achievements. Foremost, the comprehensive endterm review of the TB strategic plan 2018-2022, backed by the country office's financial and technical support, facilitated a comprehensive evaluation of the progress and areas for refinement. Another milestone is the initiation of a new National TB Strategic Plan for 2023-2027, marking a crucial step towards soliciting funding from the Global Fund and reinforcing our commitment to sustained advancement. Our dedication was palpable during the commemoration of World Tuberculosis Day, where WCO's support enabled public awareness creation activities, including press conferences and TV/radio panel discussions, all echoing the theme 'Invest to End TB. Save Lives.'

Additionally, we bolstered the capabilities of our MoH partners in managing multidrug-resistant TB (MDR-TB) cases, guided by WHO's technical expertise. This programmatic enhancement focused on surveillance, detection, and management, furthering our commitment to addressing evolving challenges.

Yet, challenges remain on our path. Microscopy still dominates TB diagnosis, and requires a change in strategic approach to encourage use of GeneXpert. A concerning diagnosis rate of 6% for childhood TB highlights the imperative to bolster healthcare workers' capacity in this area. Moreover, limited access to follow-up Culture and Drug Susceptibility



Figure 3: TB incidence rate per 100,000 in The Gambia (2000-2021) (source: dhis2, 2021)

SIGNIFICANT STRIDES MADE IN THE BATTLE AGAINST TB

In The Gambia, there has been a 12% reduction in tuberculosis incidence from 2015 to 2022. We have bolstered the capabilities of our MoH partners in managing multidrug-resistant TB cases, guided by WHO's technical expertise.

Testing (DST) services underscores a gap in our current strategy. To navigate the road ahead, we are committed to strategic solutions. Leveraging the potential of GeneXpert for TB diagnosis can enhance accuracy and expediency. The introduction of WHOrecommended point-of-care tests for childhood TB diagnosis is a pivotal step to address an unmet need. Meanwhile, the establishment of a two-way referral system between the DR-TB treatment center and referring facilities will facilitate seamless patient management and care continuity.

3.3 HIV/AIDS and Hepatitis

In the year 2020, The Gambia maintained a low overall prevalence of HIV, with a prevalence rate of 1.5% among individuals aged 15-49, as reported by twelve sentinel surveillance sites. This achievement signifies the country's concerted efforts in managing HIV. Nonetheless, a noteworthy challenge persists: the disproportionate prevalence of HIV among key populations. Female sex workers (FSW) exhibit an 11% prevalence, while among men who have sex with men (MSM), the rate soars to 35.5%, reflecting the need for targeted interventions.

In 2021, the HIV landscape encompassed 26,000 individuals living with HIV, including 15,000 women aged 15 and above and 1,400 children under 15 years. The primary mode of transmission remains sexual, followed by mother-to-child transmission. In



Photo: A lab technician conducts HIV screening test.

tackling these issues, The Gambia faces hurdles in its HIV/AIDS Response, most notably in the realm of HIV testing. Despite escalated outreach endeavors, only 36% of people living with HIV (PLHIV) are aware of their status, indicating a critical testing coverage gap.

Within this context, several achievements are notable. The WCO provided crucial support, resulting in significant advancements, including the revision and updating of the National HIV and AIDS Policy, the formulation of a study protocol for the verification of the HIV Algorithm, and the creation of differentiated service delivery guidelines tailored to address the inadequacies in treatment coverage for PLHIV. However, challenges loom. Inadequate funding impedes the realization of the National Hepatitis strategy, limiting comprehensive health efforts. The uptake of HIV counseling and testing services remains disappointingly low, and the stigma associated with key affected populations and MSMs obstructs treatment coverage.

Moving forward, a multi-faceted approach is essential. Advocacy for funding to propel Hepatitis activities is imperative to bridge financial gaps. Collaborative engagement with community organizations and volunteers can play a pivotal role in raising awareness and encouraging widespread HIV testing. Additionally, the implementation of the Differentiated Service Delivery model emerges as a solution to augment treatment coverage among key affected populations, addressing both health needs and stigmatization concerns. Through these concerted endeavors, The Gambia aims to not only sustain its low HIV prevalence but also amplify its impact on public health, ensuring the well-being of its citizens.

SERIES OF PROGRESS MADE IN THE BATTLE AGAINST NTDS

The Gambia stands out as one of the pioneers with a complete and comprehensive data set for NTD indicators, and the new roadmap to eliminate NTDs by 2030 showcases the nation's adaptability and commitment to long-term success.

3.4 Neglected Tropical Diseases (NTDs)

In the year under review, The Gambia has made significant strides in its efforts to combat neglected tropical diseases (NTDs), particularly focusing on its 14 priority NTDs. The nation has strategically outlined various approaches and targets for addressing each of these diseases. Notably, a pivotal moment came in 2015 with the completion of a Nationwide mapping survey for Preventive Chemotherapy-NTDs (PC-NTDs), which unveiled a combined prevalence of schistosomiasis (SCH) and soil-transmitted helminthiasis (STH) at 6.8%. Furthermore, the survey highlighted that 38% of districts across the country were co-endemic for both STH and SCH.

Since this milestone, there has been a concerted effort, bolstered by WHO's support, to enhance the fight against NTDs. A comprehensive NTD Master Plan was developed, setting the stage for strategic interventions. The impact of this collaborative initiative is evident in the accomplishment of four successful mass drug administration (MDA) targeting PC-NTDs.

A series of noteworthy achievements mark the progress made in The Gambia's battle against NTDs. The country's dedication is apparent through its NTD scorecard, which was integrated into an online dashboard for real-time tracking of progress. Notably, The Gambia stands out as one of the pioneers with a complete and comprehensive data set for NTD indicators. Additionally, the revision of the NTD Master Plan based on the new roadmap to eliminate NTDs by 2030 showcases the nation's adaptability and commitment to long-term success.

However, these achievements are accompanied by certain challenges. A crucial hurdle lies in the absence of dedicated domestic funding for the implementation of the NTD program. The need for adequate human resources to fully execute the NTD Master Plan also presents a significant challenge.

Looking ahead, The Gambia is charting a clear path forward to build on its achievements and address the challenges. There is a need for advocating for the allocation of sustainable domestic funding to ensure the continuous success of NTD management initiatives. Moreover, addressing the shortage of Human Resources by deploying additional staff dedicated to the NTD program is worth exploring. Through such strategic measures, The Gambia will be ready to further its progress in the fight against neglected tropical diseases, safeguarding the health and well-being of its population.

4. NON-COMMUNICABLE DISEASES (NCDS)

In the face of a rising prevalence of non-communicable diseases (NCDs) and their associated risk factors, compounded by constraints in human and resource capacity, as well as an underdeveloped infrastructure for managing NCDs, significant challenges persist in addressing these health concerns within the country. As we navigate the path forward, the achievements outlined in this report serve as a solid foundation upon which we can build, ensuring the continuation of efforts in health promotion, water resource enhancement, survey readiness, and NCD prevention.

Throughout the year, WHO provided steadfast support to the Ministry of Health in readiness for the upcoming WHO STEPS Survey in 2023. Our technical expertise played a pivotal role in facilitating the development of survey tools and protocols. This collaborative effort involved the WHO Country Office, the African Regional Office (AFRO), and Headquarters (HQ), collectively imparting valuable skills to the country team for comprehensive survey planning and execution. Furthermore, WHO actively participated in the launch of the National Multi-Sectoral Strategy and Costed Action Plan for the prevention and control of Non-Communicable Diseases (NCDs) in The Gambia, spanning the period of 2022-2027. This engagement underscores WCO's commitment to combating NCDs, aligning our efforts with national priorities and the global health agenda.

While the accomplishments of the year showcase the outcomes of collaborative endeavors and substantial progress in various health-related domains, persistent challenges necessitate steadfast objectives in The Gambia's ongoing pursuit of improved public health and well-being. Moving forward, we are committed to intensifying our efforts to strengthen the health system, particularly through the implementation of the WHO Package of Essential Noncommunicable Disease Interventions (WHO-PEN), aiming to bolster capacity in NCD management at the primary health care level.



Figure 5: The burden of NCDs on the Population of Gambia

5. SEXUAL, REPRODUCTIVE, MATERNAL, AND CHILD HEALTH

TRAINING OF HEALTH WORKERS FOR THE CARE OF SICK YOUNG INFANTS

A remarkable outcome of the collaboration between WCO and the Ministry of Health was the successful training of 25 health workers from Primary Health Care facilities in the Integrated Management of Neonatal and Childhood Illnesses principles.

In the year's accomplishments, significant strides were made in enhancing healthcare provision of sexual, reproductive, maternal, and child health. Notably, the training of health workers emerged as a key achievement, with a focused effort on updating management guidelines for the care of sick young infants (SYI) aged 0 to 59 days. This endeavor received commendable support from the WCO, both technically and financially, in collaboration with the Ministry of Health. A remarkable outcome was the successful training of 25 health workers hailing from Primary Health Care (PHC) facilities in the principles of Integrated Management of Neonatal and Childhood Illnesses (IMNCI). However, these achievements were not without their challenges. Ensuring comprehensive coverage and effective dissemination of the newly acquired knowledge posed some hurdles. Additionally, aligning the training efforts with existing healthcare systems required careful navigation. While the progress has been commendable, it's clear that a continuous effort is required to surmount these challenges.

As we look ahead, a promising path unfolds. In the upcoming months, a key focus will be on leveraging the expertise gained from the training sessions. The georeferenced master list of health facilities, an outcome of collaborative efforts, will serve as a valuable resource. Sharing and utilizing this comprehensive list hold immense potential for informed decision-making and improved healthcare accessibility. This step marks a strategic leap towards enhancing healthcare infrastructure and services, ensuring that the momentum built this year serves as a foundation for even greater achievements in the future.

6. REDUCED NUMBER OF PEOPLE SUFFERING FINANCIAL HARDSHIPS

In the realm of health financing in The Gambia, a notable reliance on donor assistance for healthcare systems has been evident. As per the NHA 2019 report, government expenditures accounted for 33% of the total health expenditure in 2019, followed by contributions from donors at 27%, and out-ofpocket expenses at 11%.

While strides have been taken in crafting policy and strategic documents like the Health Financing Policy

and Health Financing Strategic Plan 2019 – 2024, aimed at propelling progress towards Universal Health Coverage (UHC), the implementation of recommended reforms has encountered varied momentum. The year 2022 marked a significant breakthrough as the MoH embarked on groundwork for the launch of a novel national health insurance initiative.



The Gambia's Total Health Expenditure (THE) has consistently remained three to four times below the recommended levels for achieving Sustainable Development Goals (SDGs). Persisting over the past three decades, THE has hovered below \$30, constituting merely 9% of the total public expenditure. This underscores the potential to augment the share of public funding, thereby bolstering THE. In terms of achievements, data availability has been fortified to drive further advocacy and informed decisions. Completion and accessibility of National Health Accounts reports for the fiscal years 2018 and 2019, supported by WHO and the Global Fund, have served as a critical diagnostic tool to assess the nation's health expenditure status. The reports reveal a consistent low THE and substantial external fund influx.

Furthermore, the fairness and efficiency of the nascent health insurance scheme have been enhanced. The establishment of the National Health Insurance Scheme and formulation of a comprehensive benefits package were facilitated by technical input from WHO. These efforts have paved the way for a progressive rollout of the insurance scheme. A Health Budget study in 2021, also supported by WHO, examined the allocation, disbursement, and accountability of national budget in the health sector, exploring the link between expenditure patterns and policy directions.

However, amidst these achievements, challenges persist. Despite the promising initiation of the National Health Insurance Agency, a critical need remains to strengthen coordination between the agency and the MoH's Health Care Financing Unit. In the months to come, it is crucial to facilitate key studies such as NHA and assessments of Willingness to Pay. Technical support should continue to underpin the successful launch of the insurance scheme and foster the institutional growth of the newly established National Health Insurance Agency. This collaborative approach will pave the path for improved health financing in The Gambia and contribute to the realization of Universal Health Coverage.



Figure 7: Per Capita Health Expenditure In USD For The Gambia (2013-2019) (Source: National Health Accounts, 2021)

7. IMPROVED ACCESS TO ESSENTIAL MEDICINES FOR PRIMARY CARE

In the year 2022, The Gambia faced an unprecedented and tragic situation with a significant loss of lives due to contaminated medicines, leading to Acute Kidney Injury (AKI) among children. However, this distressing incident prompted the nation to undertake vigorous efforts in response. Through systematic investigations and robust public health measures, the outbreak of AKI caused by contaminated medicines was detected and eventually halted.

Amidst these challenges, the health sector in The Gambia confronted several obstacles, including a high level of stock shortages and ongoing developmental efforts in regulatory capacity. Additionally, a severe shortage of pharmacy professionals in the country compounded these issues, requiring immediate attention and action.

In the midst of these adversities, several noteworthy achievements marked the year's progress. A strategic document was developed, outlining the future investments in medicines and medical products, thereby guiding impactful advancements. The validation of the new Medicine's Policy and Strategic Plan stood as a significant accomplishment, achieved with technical and financial support from WHO. These documents proposed crucial reforms aimed at enhancing the efficiency of the Central Medical Store and the procurement system. The emphasis on bolstering regulatory capacity, expanding access to quality supplies through increased health workforce deployment, and improved supply was particularly pronounced. Collaborative efforts involving consultants and stakeholders contributed to the development and refinement of these documents.

Moreover, pivotal steps were taken in revising the Essential Medicines List, Standard Treatment Guideline, and crafting a new Medical Device List. These revisions aligned with the strategic priorities of the new health policy and strategic plan. The drafted documents further informed the selection of benefit packages for the upcoming health insurance scheme. Notably, the guidelines for Emergency Approval at the Medicine Control Authority were finalized, streamlining processes for efficient drug approval.

A significant focus was also placed on enhancing the quality of blood services. Onsite support was provided to 11 healthcare facilities currently offering blood transfusions. The review of clinical guidelines for blood transfusion, along with the training of 100 prescribers, demonstrated WHO's commitment to enhancing blood services' quality. In the face of the AKI outbreak, collaborative efforts between the Ministry of Health (MoH) and external partners



helped to tackle the issue. Investigations were supported, and the recall of suspected products from households was conducted, specifically addressing DEG-contaminated medicines. Additionally, WHO supported the conduct of a Risk-Based Survey (RBS) involving international laboratories to evaluate the risk associated with substandard or falsified products across the country.

Despite these achievements, challenges loomed. A significant portion of resources had to be diverted towards addressing the AKI outbreak caused by contaminated medicines, impacting both the WHO

facilities offering blood transfusions. The review of clinical guidelines for blood transfusion and the training of 100 prescribers demonstrated WHO's commitment to enhancing the quality of blood services in the country.

and the Ministry of Health's limited resources. To chart the way forward, various strategies were outlined. The implementation of the new Medicines Policy and Strategy remained a priority, coupled with the integration of technical assistance on healthcare financing with the Essential Medicines List. Strengthened support towards regulatory work by the Medicines Control Agency was planned, as was the support for reforms aimed at granting greater autonomy to the Central Medical Stores.

8. ANTIMICROBIAL RESISTANCE

In The Gambia, significant resistance to antimicrobials has been reported for various diseases, including Tuberculosis, Malaria, Streptococcus pneumonia, among others. Despite these challenges, the country has made remarkable strides in addressing antimicrobial resistance (AMR). One notable achievement is the development of a comprehensive Costed National Plan of Action for AMR. This plan is a direct response to the weaknesses and gaps identified through an in-depth situational analysis of AMR conducted in 2021. The Gambia has also taken a proactive stance by launching an AMR Action Plan and commemorating AMR Awareness Week, thereby fostering greater public understanding.

The commitment to capacity building is evident through the successful training of focal points on the Global Antimicrobial Resistance and Use Surveillance System (GLASS). Additionally, the country has lent its support to the crucial therapeutic efficacy testing of antimalarials, a vital step in combatting resistant strains. These achievements underscore The Gambia's dedication to tackling the multifaceted issue of AMR.

However, amidst these achievements, a significant challenge looms. The availability of a sustainable source of funding for procuring essential equipment and reagents to conduct AMR laboratory surveillance across all three identified sites remains inadequate. This financial constraint threatens the continuity and effectiveness of ongoing efforts. To navigate these challenges and pave the way forward, The Gambia must prioritize several key strategies. One crucial approach is advocating for the allocation of domestic resources to sustain the AMR Action Plan's implementation. This will help ensure the long-term viability of initiatives aimed at combating AMR. Additionally, the country should actively work to secure the necessary funding for procuring equipment and reagents, allowing for the expansion of AMR surveillance to two additional sites. This expansion is vital for comprehensively addressing AMR's scope and impact.

TACKLING THE MULTIFACETED ISSUE OF AMR The Costed National Plan of Action for antimicrobial resistance resulted from an indepth situational analysis of AMR conducted in 2021 that identified weaknesses and gaps. The Gambia has also taken a proactive stance by launching an AMR Action Plan and commemorating AMR Awareness Week, fostering greater public understanding.

9. DATA AND HEALTH MANAGEMENT INFORMATION SYSTEM

In the pursuit of comprehensive healthcare and the achievement of Universal Health Coverage (UHC) and Sustainable Development Goals (SDG) targets, The Gambia remains steadfast in its commitment to monitor and evaluate health services and the well-being of its population. Notably, the nation has made significant strides in this endeavor over the past year. An impressive accomplishment has been the establishment and validation of Gambia's Integrated Annual Health Observatory (iAHO), a testament to the collaborative efforts between the Ministry of Health and the World Health Organization (WHO). To bolster this initiative, the WHO facilitated training healthcare professionals, imparting essential knowledge regarding iAHO concepts, while an additional five individuals were equipped with the skills to upload data onto the iAHO platform. Furthermore, The Gambia has embarked on the Geolocated Health Facility Data (GHFD) initiative, a vital project aimed at managing, updating, sharing, and effectively utilizing a georeferenced master list of health facilities. The launch of GHFD marks a significant stride towards improved healthcare infrastructure and accessibility.

However, the journey towards optimal healthcare data management has not been without its challenges. The fragmentation of Health Information Systems (HIS) and the monitoring of data have posed persistent obstacles, hindering the creation of a truly reliable and efficient data system. In this regard, the Gambia must address these challenges head-on in order to fortify its data infrastructure. Looking ahead, the way forward for The Gambia involves a continuation of its capacity-building efforts, particularly focused on the successful launch and operationalization of the Health Observatory. This encompasses not only the development of knowledge products but also the vital task of institutionalizing iAHO. Furthermore, the nation aims to foster a cohesive approach to its healthcare data by engaging its Senior Management Team (SMT) and executing the roadmap crafted in September of the previous year.



Figure 8: The Gambia's iAHO Dashboard

10. HEALTH EMERGENCY PROTECTION

10.1 Countries Prepared for Health Emergencies

In the year under review, significant achievements were realized in bolstering global health security through the implementation of key initiatives. One pivotal advancement was the adoption and utilization of the State Party Self-Assessment Annual Reporting Tool (SPAR) by States Parties. This tool, designed to evaluate the 15 International Health Regulations (IHR) core capacities essential for identifying, evaluating, notifying, and responding to public health risks, comprised 35 indicators. These indicators, categorized into one to three attributes per capacity, gauged the status of each capacity.

Noteworthy accomplishments were attained on

several fronts. The year witnessed the successful formulation and finalization of The Gambia's National Action Plan for Health Security (NAPHS) 2022-2026, along with a meticulously costed document and a comprehensive resource mapping exercise. This robust plan set a solid foundation for advancing health security strategies. Moreover, the completion and submission of the 2021 and 2022 State Party Annual Reports, facilitated by the WHO using the eSPAR reporting tool, underscored the commitment to transparent and efficient reporting processes.

In a bid to tailor health protocols to local needs, the third edition of the Integrated Disease Surveillance and Response (IDSR) technical guidelines underwent a thorough update, and adapted to The Gambia's context. This endeavor was complemented by the



Figure 9: IHR score per capacity for Gambia, 2022



revision of associated training and participants' manuals, fostering a more precise and effective implementation framework.

The establishment of the One Health Multi Coordination Mechanism (MCM) Operating Team (OT) emerged as another significant stride. The WHO extended both financial and technical support to The Gambia's MoH for the establishment of the One Health Forum, facilitated by a comprehensive Multisectoral Coordination Mechanism (MCM OT). This approach proved instrumental in promoting collaborative approaches to health challenges. Remarkably, a notable cohort of 45 participants underwent training in the One Health Approach, further enhancing the country's capacity in this area.

In tandem with the Africa CDC, the WHO and MoH undertook the adaptation of the Event Based

Surveillance Guidelines to align with The Gambia's unique context. This collaborative effort is expected to enhance preparedness to respond to emerging health threats and a reinforced framework for eventbased surveillance.

Moving forward, it remains imperative to continuously refine the SPAR tool's indicators and attributes to ensure their relevance and effectiveness. Sustainable resource allocation and coordination will be pivotal for the successful launch and execution of the National Action Plan for Health Security, while continued collaboration among sectors will be instrumental in consolidating the gains made in One Health coordination. Additionally, as the global health landscape evolves, ongoing efforts to align strategies and guidelines with emerging health risks will be crucial to maintaining the country's health security preparedness.

10.2 Polio Surveillance

In the year under review, The Gambia has achieved significant milestones in maintaining its poliofree status through the dedicated pursuit of AFP surveillance indicators. The non-polio AFP rate and Stool Adequacy rate have been consistently upheld, thereby preserving the sensitivity of the AFP surveillance at certification standards. The vigilance in surveillance activities has been instrumental in safeguarding The Gambia's polio-free status. Notably, the non-AFP rate remained low at 1.9, while the timely transportation of stools reached 100%, with 89% stool adequacy rate. In the face of a target population of 1,079,642 under 15 years of age, a commendable twenty AFP cases were reported from all seven regions, constituting 80% coverage.

The achievements of the year encompass several commendable efforts. A remarkable total of 897 Integrated Supportive Supervision and Active Cases Searches were carried out by Surge Officers across the country's health facilities in all seven regions and 42 districts. Out of an expected 25 AFP cases, 22 were reported, accompanied by a national NPENT rate of 17%. The strengths that contributed to these accomplishments include the active involvement and coordination of governmental bodies and partners within the Global Polio Eradication Initiative (GPEI). This collaboration saw the deployment of nine GPEI surge officers at various levels, fortifying outbreak response and surveillance activities. Furthermore, the introduction of a direct payment system via mobile payment streamlined processes, and regular coordination meetings ensured preparedness.

In the realm of Immunization Activities, the second round of the Supplemental Immunization Activity (SIA) aimed at combatting the cVDPV2 epidemic was executed with success. With the support of the WCO, the government conducted the campaign from 19th to 22nd March 2022. Spanning 42 districts and all 7 regions, the initiative targeted 382,908 children aged 0 to 59 months across the country. Impressively, the polio vaccination coverage reached 86% in round 1 and an even more robust 104% in round 2, demonstrating an enhancement in campaign quality. This progress was attributed to strengthened stakeholder engagement, improved

Region	Target population	Total vaccinated		Differences between R1 and R2
		R1	R2	Additional vaccinate in R2
Western 1	154,674	122,737	161,823	39,086
Western 2	85,464	58,201	79,664	21,463
Lower River	13,998	14,288	15,094	806
North bank East	20,840	20,396	22,146	1,750
North Bank West	20,931	20,837	22,698	1,861
Central River	41,268	45,688	47,893	2,205
Upper River	45,733	48,211	51,455	3,244
Total	382,908	330,358	400,773	70,415

Figure 10: Polio Vaccination Coverage by region (Source: EPI Annual Report, 2022)
communication, technical reinforcement, logistics optimization, and enhanced payment procedures, leading to an outstanding 70,415 children vaccinated in round 2.

Nonetheless, challenges were encountered in the journey. The presence of a considerable number of newly onboarded surveillance officers who lacked formal training posed a hurdle. In addition, the absence of clear case definitions, information and communication technology materials, and guidelines for AFP and Vaccine Preventable Diseases at surveillance focal sites presented obstacles.

To propel forward, a comprehensive strategy has been outlined. The plan includes incorporating national and cascaded surveillance training within the 2023 budget. The AFP guidelines will undergo a thorough review, with a focus on updating and printing case definitions. An initiative for quarterly review meetings with surveillance officers is set to enhance oversight. Additionally, engagement with community key informants, such as bone setters and traditional healers, will be intensified to strengthen community involvement.



70,415 CHILDREN VACCINATED

The second round of the Supplemental Immunization Activity aimed at combatting the cVDPV2 epidemic spanned 42 districts and all 7 regions, targetting 382,908 children aged 0 to 59 months across the country. During round two of the polio vaccination coverage, 70,415 children were vaccinated.

Photo: A child receives her polio vaccine at a local facility during WHO-sponsored campaign.

10.3 Measles

In the past year, notable achievements have been realized in the realm of measles surveillance. The non-measles and non-rubella rash rate reached 4.4 per 100,000 population, exceeding the initial target of 2. Additionally, a significant milestone was reached as all districts reported at least one case, surpassing the 80% target. This progress was accompanied by the identification of 200 suspected measles cases, with 26% of them being laboratoryconfirmed for measles.

A pivotal initiative during this period was the Measles and Rubella vaccination campaign, supported by the World Health Organization (WHO) in collaboration with The Gambia's Ministry of Health. Held in October 2022, the campaign's primary objective centered on vaccinating all children aged 9-59 months. This comprehensive effort aimed to enhance immunity among susceptible cases that missed their initial Measles Rubella (MR) vaccine doses. This included children who did not receive the first dose during routine services, those who missed the second MR dose in their second year of life, and those who did not seroconvert. Concurrently, the campaign provided an avenue to bolster coverage for various routine antigens, such as OPV, Penta, PCV, IPV, Rota, Yellow Fever, and DPT booster, alongside vitamin A supplementation and de-worming for the eligible population.

Regrettably, the administrative data revealed that of the 341,446 children aged 9-59 months targeted for MR vaccine administration, only 180,506 (52.8%) were successfully vaccinated. Furthermore, a mere 9 out of 42 (21.4%) of the districts achieved the desired coverage threshold of at least 95%, revealing a shortfall in reaching the intended population. Challenges also arose, evident in a wastage rate of 5.2%. While 53.05% of targeted children received mebendazole and 34.4% (6-11 months) as well as 60.2% (9-59 months) received vitamin A supplements, these figures underscore the need for improved coverage.

Region	Target	2017	2018	2019	2020	2021	2022
CRR	≥2	3.3	4.1	4.0	1.2	0.0	2.2
LRR	≥2	7.1	19.8	3.4	5.7	7.9	18.8
NBER	≥2	7.5	2.4	4.7	0.8	0.0	5.1
NBWR	≥2	2.5	6.4	2.4	0.0	0.0	3.7
URR	≥2	0.4	3.3	2.9	1.4	0.3	5.3
WR1	≥2	2.5	0.9	0.5	2.9	0.3	5.3
WR2	≥2	2.1	1.1	1.8	1.9	0.0	2.6
National	≥2	2.7	2.7	1.9	2.2	0.5	4.4

Figure 11: Measles Surveillance Sensitivity (Source: EPI Annual Report, 2022)

The MR campaign was held amidst the backdrop of an Acute Kidney Injury outbreak. Unfortunately, this engendered misinformation and vaccine hesitancy, which had a wide-ranging impact on the campaign's effectiveness. This crisis necessitates a multifaceted approach moving forward, encompassing strategies to address misinformation, enhance vaccine acceptance, and fortify communication efforts. Collaboration and coordination among key stakeholders, including the Ministry of Health, UNICEF, Gavi, CDC, the National Nutrition Agency, and the Ministry of Education, is essential to overcoming these challenges and achieving comprehensive immunization coverage. Through continued readiness assessments, coldchain evaluations, microplanning training, robust data management, and vigilant monitoring and evaluation, the groundwork can be laid for a more successful and impactful campaign.

MISINFORMATION AND VACCINE HESITANCY

Only 180,506 (52.8%) were successfully vaccinated despite a critical measles and rubella vaccination campaign supported by WHO in collaboration with The Gambia's Ministry of Health in October 2022 to vaccinate all children aged 9-59 months. Misinformation and vaccine hesitancy greatly impacted the campaign's effectiveness, necessitating a multifaceted approach to address misinformation, enhance vaccine acceptance, and fortify communication efforts.

Photo: Child receives his measles vaccine during a WHO-sponsored event.

11. HEALTH EMERGENCIES RAPIDLY DETECTED AND RESPONDED

11.1 Acute Kidney Injury (AKI) Emergency

Introduction

Between July 4 and December 31, 2022, The Gambia faced a significant challenge in the form of acute kidney injury (AKI) cases affecting young children aged one month to seven years. During this period, the country reported a total of 84 confirmed AKI cases, sadly resulting in 72 fatalities, leading to a distressing case fatality rate of 85.7%. These cases were distributed across six out of seven regions, with the highest concentration, 86%, in three regions: Western Region 1, Western Region 2, and Upper River Region. Among the confirmed AKI cases, 33 cases (or 39%) were females. In response to this alarming situation, the WHO supported MoH in five thematic areas: coordination, epidemiology and surveillance, community engagement and psychosocial support, medicines and pharmacology, and case management.

Coordination

The WHO Country Office (WCO) personnel provided the initial response efforts to AKI outbreak. Soon WHO assessed and classified the AKI emergency as Grade 2 that enabled WHO AFRO to deploy Incident Manager & serge team and release USD460,000 from its Central Emergency Fund to fund the AKI emergency response plan.



Figure 12: AKI Epidemiological Curve (Source: AKI SITREP, 2022)

As part of its response, WCO assembled a team of 15 experts to cover various thematic areas of the response, such as coordination, medicines and pharmacology, surveillance, case management, community engagement, and psychosocial support. WHO, in collaboration with the MoH, formulated a response plan to address the AKI emergency. In addition, WHO also took an active role in co-chairing coordination meetings at the national level.

Medicines and Pharmacology

In a groundbreaking initiative, WHO collaborated with the Medicines Control Agency (MCA) to conduct toxicological tests on 40 suspected pediatric syrups at WHO prequalified laboratories in Ghana, France, and Switzerland. Out of these, four pediatric medicines were found to be contaminated with diethyl glycol (DEG) and ethyl glycol (EG), colorless solvents known for their nephrotoxic effects.

Furthermore, WCO facilitated the recall of these contaminated pediatric syrups, initially targeting the regions most affected by the emergency and later extending the recall effort. This resulted in a significant reduction in reported cases of acute kidney injury (AKI) and eventually led to the cessation of AKI cases in the communities. Out of the 50,000 suspected contaminated pediatric syrups imported into the country, approximately 42,000 were recalled from suppliers, 267 from households, with 7,733 bottles remaining unaccounted for.

In addition, WCO supported the Ministry of Health (MoH) in conducting a risk-based survey and testing 123 medicine samples at the USP laboratory in Ghana. Two of these tested medicines were found to be contaminated with DEG and EG. To ensure the availability of safe essential pediatric medicines in The Gambia, WHO procured 78,000 bottles of

TIMELY RESPONSE EFFORTS

In 2022, acute kidney injury (AKI) cases affected young children aged one month to seven years in The Gambia. The WHO Country Office (WCO) took an active role in assessing the health emergency. It helped facilitate WHO AFRO to release USD460,000 from its Central Emergency Fund to fund the AKI emergency response plan.

paracetamol syrup and delivered them to the Central Medical Stores (CMS). Moreover, WHO's support extended to capacity-building efforts, including the training of twelve inspectors from MCA, Food & Drug Authorities, and the Pharmacy Council of The Gambia on the processes of risk-based survey (RBS) for pediatric medicines.

Epidemiology and Surveillance

WCO convened international and national independent experts, including Nephrologists, Pharmacologists, and Clinical Pathologists, to investigate the causes of the AKI emergency. Findings from the causality assessment committee reports, based on 56 confirmed cases with complete documentation, revealed that 22 cases (39%) were very likely due to DEG/EG poisoning from oral pediatric formulations, 30 cases (54%) had no other identified cause of AKI with incomplete evidence of DEG & EG ingestion, and 30 cases were suspected poisoning with uncertain/unknown exposure. The remaining 4 cases (7%) had possible alternative diagnoses, such as COVID-19, malaria, and abscess, with incomplete evidence of DEG & EG ingestion. Additionally, WCO supported a community-based case cohort study in 7 regional health directorates in The Gambia, involving 64 cases and 258 controls. The study found a causal association between AKI in children and the consumption of adulterated medicine, with children who consumed adulterated medicines having nearly double the odds of developing AKI compared to those who did not.

Furthermore, WCO provided training and capacity building in epidemiology and surveillance for various personnel involved in the AKI response. This included 185 individuals from the seven Regional Health Directorates, seven WHO surge team members for AKI emergency response, 355 community volunteers for community-based surveillance (CBS), and 290 health workers, including doctors, nurses, data clerks, public health officers, and midwives, across all regions of the country.

Community Engagement and Psychosocial Support Risk communication and community engagement played a critical role in managing the emergency. WCO assisted the dissemination of key AKI emergency messages, providing an overview of the AKI emergency and response activities. There were also ten media chat sessions to inform the public about government efforts to control the AKI emergency. WHO further organized psychosocial support and awareness meetings involving various stakeholders, including Regional Governors, Technical Advisory Committee members, District Chiefs, National Assembly Health Select Committee, religious leaders, Traditional communicators, community drama groups, Traditional healers, women councilors, Women Groups representatives, and AKI Victims' Association members.

Additionally, WHO supported the training of 40 multi-disciplinary facilitation teams (MDFT) members, 24 public health officers (PHOs), and 266 community health workers (CHWs) in compassionate communication for the AKI emergency. Finally, WHO conducted verbal autopsies to better understand the causes, and through extensive visits funded by WHO, risk communication messages reached all corners of the nation.

Case Management

WHO collaborated closely with the Edward Francis Small Teaching Hospital (EFSTH) to enhance its capacity in managing AKI cases. This involved training healthcare workers, deploying international Emergency Medical Teams (2 pediatricians, 5 nurses/ midwives, and 1 pharmacist), and acquiring essential equipment, including two pediatric hemodialysis machines with water filtration, a Picolo Biochemistry Analyzer, and hospital supplies. Additionally, WHO facilitated the training of 10 health workers on operating the NIPRO hemodialysis pediatric machine.

In the face of adversity, The Gambia and WHO worked extensively to mitigate the impact of the AKI emergency. The WHO support has helped to establish a foundation for improved preparedness and response mechanisms in the future.



GROUNDBREAKING INITIATIVE TO INVESTIGATE THE CAUSES OF THE AKI EMERGENCY

WHO collaborated with the Medicines Control Agency to conduct toxicological tests on 40 suspected pediatric syrups—four were found to be contaminated with diethyl glycol (DEG) and ethyl glycol (EG), known for their nephrotoxic effects. WCO facilitated the recall of approximately 42,000 contaminated pediatric syrups from suppliers, significantly reducing reported cases and ceasing AKI cases in the communities.

Photo: One of daily WHO-led briefings during the AKI crisis.

11.2 COVID-19 Outbreak in The Gambia

RESPONSE TO THE COVID-19 PANDEMIC

In collaboration with WHO, the Ministry of Health developed the annual COVID-19 response plan and report. WHO convened weekly coordination meetings with UNICEF, the Global Alliance for Vaccination and Immunization, and the Expanded Program on Immunization to discuss COVID-19 vaccination coordination to guarantee synchronized effort. WHO led and supported the COVID-19 CoVDP Africa CDC high-level mission to support COVID-19 vaccination in The Gambia.

Introduction

In the year 2022, The Gambia demonstrated a commendable response to the COVID-19 pandemic by promptly responding to 732 cases of COVID-19 in the country, which was a marked decrease compared to previous years. The MOH has implemented recommended response strategies, notably epidemiological and laboratory surveillance, and several rounds of vaccination campaigns with the support WHO and other partners. Over the period from March 17, 2020, to December 31, 2022, a cumulative count of 12,586 confirmed COVID-19 cases were recorded, resulting in a 3% (372) case fatality rate and 410 (3.3%) health worker's infections including 5 deaths. The reported cases have declined significantly and the vaccination coverage has stagnated around 22%, following the removal of COVID19 test requirement by many countries around the world. Amid the achievements, the challenges remained apparent, including the need

for enhanced community engagement, coordination, and improved vaccine uptake.

WHO contributed technical, financial, logical, and operational support to the COVID-19 response and all health partners in delivering crucial medical supplies and equipment to the country to combat the virus.

Coordination, Planning, Financing and Monitoring

The year's accomplishments were accompanied by vigorous coordination, meticulous planning, and monitoring. The Ministry of Health (MoH) in collaboration with WHO accomplished the development of the annual COVID-19 response plan and report. WHO took the lead in convening weekly coordination meetings and sub-committee gatherings including COVID-19 Partnership (CoVDP) weekly meetings with UNICEF, Gavi, and EPI to discuss COVID-19 vaccination coordination, ensuring the synchronization of efforts among various stakeholders.

Seven consultants, encompassing an incident manager, three epidemiologists, an anthropologist, a demand generation officer, and a data manager, were deployed to support the COVID-19 response. Recommendations from high-level missions, including improved planning and data utilization, were embraced by the government for future endeavors.

WHO led and supported the high level COVID-19 CoVDP Africa CDC (ACDC) high level mission to support COVID-19 vaccination in The Gambia. Keys recommendations that were followed up with government included (i) Inter-agency Coordination Committee reactivation and regular National Immunization Technical Advisory Group meetings, (ii) finalization of COVID-19 integration strategy into the routine immunization services) and improved planning process for vaccination campaigns and routine delivery (iii) Implementation of anthropological study findings for community engagement and (iv) improvement of data management and use of data to guide decision making.

Risk Communication, Community Engagement (RCCE)

Efforts to enhance vaccine acceptance were significantly aided by effective risk communication and community engagement. The WCO played a pivotal role in bolstering the platform for communicators, involving religious leaders, professional organizations, and community-based mobilizers to garner support for vaccine uptake. Additionally, WCO worked alongside the MoH to conduct an anthropological study, investigating the reasons behind the low COVID-19 vaccine uptake, even in the presence of vaccines and funding. The study identified a lack of engagement with community structures, particularly Civil Society Organizations (CSOs).

The findings from this study were shared and disseminated to WHO, MoH, and TANGO (The Association of Non-Governmental Organizations), GaFNA (Gambia Food and Nutrition Association). As a direct outcome of these findings, WHO supported the mapping of CSOs and collaborated with TANGO and MoH to develop strategic planning approaches aimed at enhancing coordination and collaboration to improve partnership and the planning process for COVID-19 vaccine uptake in the country. Building upon the insights from the anthropological study, WHO, in partnership with the MoH, facilitated the identification and orientation of five targeted groups, namely TANGO, HePDO (Health Promotion Development Organization), the Medical & Dental Council of The Gambia, and GFPA (Gambia Family Planning Association), regarding strategies for promoting vaccine uptake. This initiative aimed to encourage community ownership and the active participation of stakeholders during routine and vaccination campaign activities.

Furthermore, various other stakeholders were engaged in this effort, including the National Assembly Committee for Health in Parliament, 62 health workers who received training on countering misinformation and disinformation related to COVID-19 vaccines, 120 Community Based Mobilizers (CBM), and vaccinators for COVID-19 vaccination campaigns, as well as 28 participants involved in the development of communication messages and graphic design.

Surveillance

In the field of surveillance and outbreak investigation, the World Health Organization (WHO) played a vital role in enhancing preparedness. WHO facilitated the adaptation and validation of crucial strategic and policy documents, which included the 3rd Edition of the Integrated Disease Surveillance and Response (IDSR) Technical Guidelines, standard operating procedures (SOP) for the transportation and delivery of samples to laboratories, and technical guidelines for Adverse Events Following Immunization (AEFI). Furthermore, WCO employed these guidelines to provide training and capacity-building for health workers, enabling them to effectively implement these guidelines. This training effort encompassed 166 health workers for AEFI surveillance at the regional level and 48 health workers for Event-Based Surveillance (EBS). WCO also supported the



Figure 13: Epi-curve of COVID-19 cases in The Gambia (Source: COVID-19 SITREP, 2022)

production and dissemination of AEFI guidelines, with a specific emphasis on encouraging health workers to report AEFI cases. This approach was geared towards promoting the safe use of vaccines and building public trust in vaccination programs. The epidemiological curve presented in Figure 9 illustrates the distribution of confirmed COVID-19 cases in The Gambia from March 2020.

Notably, the fourth wave emerged in early December 2021 and extended into early February 2022. Subsequently, the fifth wave began in the second week of July 2022 and persisted until the second week of November 2022, although the reported case numbers were lower compared to the earlier four waves. This data underscores the ongoing challenges in managing COVID-19 in the region.

Points of Entry, International Travel and Transport, and Mass Gatherings

WCO played a crucial role in enhancing the oversight of points of entry, international travel, transport, and mass gatherings, bringing about important improvements. WCO provided valuable assistance in the adjustment of entry requirements for international travelers, and it also made contributions to the refinement of quarantine periods. Specifically, revisions were made to the Amber Code List, which established new entry requirements for international travelers arriving from Omicron variant transmission hotspots. These measures were pivotal in managing the risks associated with international travel and new variants.

Moreover, WCO extended its technical support to the Ministry of Health (MoH) in revising Standard Operating Procedures (SOPs) for Points of Entry (PoEs). This collaborative effort received support from the International Organization on Migration (IOM). This comprehensive approach was essential in ensuring the safety and effective management of points of entry and international travel, contributing significantly to public health and safety.

Laboratories and Diagnostics

Laboratories and diagnostic capabilities received substantial support to bolster the country's testing capacity, primarily through the procurement of essential materials, costing millions of Dalasis. WCO's involvement in this endeavor was instrumental



ENHANCING VACCINE UPTAKE

WHO collaborated with The Association of Non-Governmental Organizations and the Ministry of Health to develop strategies for promoting vaccine uptake. By enhancing coordination and collaboration, 62 health workers received training on countering misinformation and disinformation, 120 Community-Based Mobilizers and vaccinators were mobilized for vaccination campaigns, and 28 participants were involved in developing communication messages. By the end of 2022, 21.8% of the total population had completed the full primary COVID-19 vaccination series.

Photo: WHO conducts routine community engagement efforts to promote community participation in public health efforts.

in strengthening the healthcare infrastructure. The acquired COVID-19 sequencing reagents, equipment, and laboratory supplies comprised a comprehensive list, such as filter tips, centrifuge tubes, PCR plates, cryo-tubes, and absolute alcohol, all of which were vital for COVID-19 testing. These provisions significantly enhanced the laboratory and testing capabilities, ensuring comprehensive support for COVID-19 diagnostics.

Furthermore, WHO facilitated a critical genome sequencing mission to enable the National Public Health Laboratory (NPHL) to initiate wholecell genome sequencing. These included the establishment of a technical group dedicated to genomic surveillance, responsible for coordinating and monitoring the implementation of a strategic roadmap. Additionally, the mission called for the development of Standard Operating Procedures (SOPs) aimed at improving community testing efforts. This multifaceted approach underscored WHO's commitment to enhancing the country's diagnostic and genomic surveillance capabilities.

Case Management/Infection Prevention and Control

WCO made notable contributions to capacity building and healthcare infrastructure enhancement in collaboration with the Ministry of Health (MoH). Initially, WHO sponsored the participation of five MoH clinicians in the Basic Emergency Care (BEC) training program held in Accra, Ghana. This training was a significant step towards improving emergency medical care in the country. Subsequently, WCO continued its support by facilitating three rounds of BEC training sessions conducted within the country. These sessions involved 75 clinicians and were led by facilitators from the African Federation of Emergency Medicine (AFEM). This comprehensive approach aimed to equip a considerable number of clinicians with essential emergency care skills and knowledge, further strengthening the healthcare system.

Vaccination

In the domain of COVID-19 vaccination, The Gambia achieved remarkable progress since the rollout of vaccinations in March 2021. This progress was the result of a comprehensive approach that included outreach to reach remote communities, local leader mobilization, regional campaigns, widespread public communications, and door-to-door activities. By the end of 2022, 21.8% of the total population had completed the full primary COVID-19 vaccination series, reflecting a 34.3% coverage among adults aged 18 and older who received at least one vaccine dose. This marked significant improvement over the course of 2022 compared to earlier stages of the vaccination effort. WCO supported the government in conducting four cycles of COVID-19 vaccination during 2022. Furthermore, WCO deployed 9 polio surge officers to support routine immunization and COVID-19 vaccinations, as well as surveillance efforts. A rapid assessment revealed missed opportunities to integrate COVID-19 vaccines with other healthcare services, with civil registration exercises being a competing priority.

Additionally, WCO supported community engagement meetings on COVID-19 vaccination, routine immunization, surveillance, and AKI emergency response activities. In terms of infrastructure, WHO partnered with the Ministry of Health (MoH) and other partners in installing Ultra Cold Chain (UCC) equipment for storing COVID-19 vaccines that require sub-zero temperatures. WCO also contributed to the development of several guidelines, including those related to Adverse Events Following

DISASTER RESPONSE

WHO collaborated with the Ministries of Health and Water Resources during the devastating floods of 2022 that affected 40,501 individuals to deliver antimalarial medicines and Oral Rehydration Salts to contain diarrheal diseases. Continued collaboration with government entities, and other stakeholders is essential for sustainable recovery and fortifying community resilience against future calamities.

Immunization (AEFI) surveillance and guidelines for COVID-19 vaccine booster doses. Furthermore, WHO facilitated the costing the National Deployment and Vaccination Plan (NDVP). This comprehensive support was instrumental in advancing COVID-19 vaccination efforts in the country.

Data Management

WHO made significant contributions to enhance COVID19 data reporting and management. In 50 out of 76 (66%) health facilities, WHO provided quarterly internet subscriptions to data clerks, ensuring timely COVID-19 data reporting into the DHIS2 (District Health Information System 2) tracker. Furthermore, We supported the printing and distribution of essential documents, including Standard Operating Procedures (SOPs) and Terms of Reference (ToRs) for COVID-19 data management. To further strengthen data management, an international data manager was deployed for a three-month period to assist the Directorate of Planning and Information (DPI) in maintaining the electronic database. Moreover, 78 data clerks, from peripheral health facilities, received training on new data management approaches. These initiatives significantly enhanced data reporting and management efficiency, ultimately leading to more informed decision-making.

Response to Humanitarian Crisis

In the year 2022, WHO played a pivotal role in aiding the health sector's response to the devastating flooding disaster managed by the Government of The Gambia (GoTG). This calamity resulted in the destruction of vital infrastructure, including health facilities and educational institutions, as well as the disruption of transportation systems. According to the National Disaster Management Agency (NDMA), the flood's impact was particularly harsh, affecting 40,501 individuals, among them 8,466 young children under the age of 5. Additionally, 2,609 pregnant and breastfeeding women were affected, along with approximately 10,125 women of reproductive age (ranging from 15 to 49 years) and elderly individuals above the age of 60.

In the face of these challenges, WHO collaborated closely with the Ministries of Health and Water Resources. With concerted effort of different partners, the Government was able to extended the supply of antimalarial medicines and Oral Rehydration Salts (ORS) to contain diarrheal diseases in the affected population.

While significant achievements were made in alleviating the health-related repercussions of the flooding disaster, numerous challenges still lay ahead. Rebuilding critical infrastructure, restoring access to healthcare and education, and fortifying the community's resilience against future calamities remain pressing tasks. Looking forward, continued collaboration between WHO, government entities, and other stakeholders will be essential to forge a path toward sustainable recovery and preparedness for any potential future emergencies.

12. HEALTHIER POPULATION

12.1 Mental Health

In the past year, significant strides were made in the field of mental health, marked by notable achievements that underscore our commitment to promoting well-being. Working closely with the Ministry of Health (MoH), we successfully spearheaded the development of comprehensive guidelines aimed at fostering mental health awareness within school environments. This crucial initiative paves the way for a more supportive and nurturing educational atmosphere.

A pivotal achievement during this period was the robust enhancement of the national mental health capacity. This endeavor materialized through the

Mental Disorders	OPD Cases				Inpatient cases			
	Male	Female	Total	Percent	Male	Female	Total	Percent
Epilepsy	5,082	5000	10082	44.1%	68	33	103	18.6
Schizophrenia	3,618	2673	6291	27.5	88	21	109	19.7
Drug induced psychosis	2,874	133	3,007	27.5	285	0	285	51.5
Organic psychosis	933	616	1,549	6.8	17	6	23	4.2
Anxiety disorder	181	399	580	2.5	0	1	1	0.2
Phobia	107	326	433	1.9	1	0	1	0.2
Depression	163	222	385	1.7	8	11	19	3.4
Dementia the elderly	82	149	231	1.0	3	3	6	1.1
Mania	43	43	86	0.4	2	0	2	0.4
Other mental disorders	27	56	83	0.4	0	0	0	0.0
Childhood mental Disorders	37	33	70	0.3	0	0	0	0.0
Malaria related mental disorder	21	25	46	0.2	2	1	3	0.5
Pregnancy related mental disorders		17	17	0.1		1	1	0.2
Total	13,168	9,692	22,860	100.0	474	79	553	100.0

Figure 14: A summary of common mental, neurological and substance use disorders (Source: HMIS Health Service Statistics, 2020)

intensive training of 25 healthcare professionals on the adept application of the WHO mhGAP Intervention Guide hailing from all seven health regions of the country. Notably, we assisted in printing and dissemination of WHO mhGAP Intervention Guide, facilitating its accessibility and utilization nationwide.

Furthermore, WCO proudly contributed to the refinement of the WHO guidelines pertaining to the integration of mental health considerations into maternal and child health programs. This advancement acknowledges the crucial interplay between mental well-being and maternal-child health, reinforcing our holistic approach to healthcare delivery.

However, alongside these accomplishments, WCO acknowledges the existence of challenges that beckon our attention and concerted efforts. A significant hurdle remains in the form of a shortage of adequately trained mental health professionals, a factor that is exacerbated by the noticeable attrition among those who are trained. Addressing this attrition and expanding our pool of skilled mental health practitioners will be a paramount challenge in the journey ahead as the burden of mental disorders increases across the country. Guided by our achievements and the insights gained from our challenges, our trajectory is clear. The way forward necessitates an intensified focus on strengthening our national capacity concerning the implementation of the WHO mhGAP Intervention Guide. This entails a collaborative effort, calling for increased support and resources directed towards training initiatives, fostering a sustainable foundation upon which mental health services can thrive.

12.2 Tobacco Control

Throughout the year, significant achievements have been made in the realm of tobacco control, demonstrating our commitment to fostering a healthier society. One of the standout accomplishments involved our collaboration with the Ministry of Health (MoH) to forge a comprehensive national tobacco control strategy for the years 2022-2026. This strategy, which underwent meticulous development and validation, is poised to set the stage for substantial advancements in tobacco control governance. Alongside this strategy, WCO diligently formulated a tobacco control communication plan and a meticulously detailed work plan for the National Tobacco Control Committee, collectively aimed at fortifying the infrastructure for effective tobacco control measures.

In tandem with strategic planning, WCO devoted considerable effort to evaluating the strides taken in executing the tobacco control act. This assessment included a meticulous review of the implementation progress, bolstered by a comprehensive training initiative targeting members of the multi-sectoral tobacco control committee and other key stakeholders. The training focused on equipping these stakeholders with profound insights into critical tobacco control issues, thereby enhancing their capacity to drive impactful change. Integral to our endeavors was the formulation of a robust communication strategy for tobacco control. This initiative stands as a testament to ensuring that our message reaches every corner of society, fostering awareness and encouraging positive behavioral shifts. As part of our commitment to building a knowledgeable and informed body of stakeholders, the country office actively supported the Ministry of Health in providing comprehensive



orientations to the members of the national tobacco control committee. These orientations encompassed an in-depth understanding of the provisions delineated in the tobacco control act of 2016, coupled with a keen awareness of the latest advancements in tobacco control both within our country and across the African Region.

While celebrating these remarkable progress, it is essential to acknowledge the challenges that have emerged along the way. Navigating complex regulatory landscapes, countering the influence of vested interests, and fostering widespread behavioral change remain formidable tasks. However, fueled by our accomplishments, we are emboldened to confront these challenges head-on. Looking ahead, WCO will continue to forge alliances with stakeholders, leveraging our accomplishments as steppingstones toward a future characterized by healthier communities and a diminishing prevalence of tobacco-related harms. The path forward entails sustaining the momentum of our achievements, consistently updating strategies in response to evolving challenges, and redoubling our efforts to actualize the vision of a tobacco-free society.

COMMITTED TO FOSTERING A HEALTHIER SOCIETY

We successfully spearheaded several developments in promoting well-being, including comprehensive guidelines for schools on mental health awareness, intensive training of 25 healthcare professionals on the adept application of the WHO mhGAP Intervention Guide from all seven health regions of the country and a comprehensive national tobacco control strategy to foster awareness and positive behavioral shifts.

12.3 Road Safety Governance, Injury Prevention and Road Safety Promotion

In the year that has passed, WCO has achieved significant milestones in our efforts to enhance road safety nationwide. Collaborating closely with the Ministry of Transport, our focus on strengthening the national road safety working group has yielded commendable results. Through the revival of various technical working groups, WCO successfully formulated comprehensive terms of reference for diverse road safety sub-committees, setting a solid foundation for future endeavors.

In the same vein, WCO also played a pivotal role in devising the annual road safety workplan for 2022, along with a strategic roadmap to guide its effective implementation. This strategic approach ensures that our efforts are streamlined and impactful, moving us closer to our road safety objectives. Support was extended to develop a national road safety action plan, aimed at expediting the implementation of the national road safety strategy. This action plan is vital for effectively addressing the mounting challenge of road accidents, which has become an increasingly significant public health concern for a small country like The Gambia.

Education and awareness have been paramount to our achievements. Our dedication to educating the community led us to organize training sessions for 30 journalists, fostering their ability to report on road safety matters and promote awareness within the 44 junior and senior secondary schools. Further, our commitment to imparting knowledge continued as WCO trained 60 administrators and drivers on diverse road safety facets, ranging from road safety management and promotion to safe driving practices and vehicle management.

The country office reached out to the wider public through a series of engaging panel discussions broadcasted on radio and television platforms. These discussions effectively conveyed crucial road safety practices, raising awareness and fostering a safer environment for all road users. Addressing the health aspect of road safety, WCO collaborated with the Ministry of Health to develop a comprehensive national trauma and injury plan. This plan reflects WCO's dedication to tackling the aftermath of road traffic crashes, ensuring comprehensive support and care for those affected.

One of WCO's notable achievements involved facilitating a thorough road traffic crash assessment and road safety promotion on a countrywide scale. This assessment was pivotal in understanding the root causes of road traffic crashes within The Gambia, allowing WHO to strategize effectively for future prevention measures.

Amidthesenotableachievements, WCOacknowledges the forthcoming challenges. Key challenges include the impact of urbanization on road safety, the growing prevalence of motor vehicles, and the enforcement of national road safety regulations. Despite these hurdles, our country office maintains a strong commitment to advancing the mission of road safety promotion and awareness. We are

ADDRESSING ROAD SAFETY

The national road safety action plan will effectively address the mounting challenge of road accidents, which has become an increasingly significant public health concern for a small country like The Gambia.



dedicated to enhancing road safety governance by providing support for the modernization of outdated motor traffic regulations. WCO is also firmly committed to strengthening collaborations, improving education, and sustaining engagement with communities to instill a culture of road safety. By drawing from the lessons we've learned and building upon successes so far, WHO is determined to making roads safer for all, with a resolute focus on this vital mission.

12.4 Addressing Social Determinants of Health

Throughout the year, significant accomplishments have been achieved in the realm of health promotion and development in The Gambia. Notably, robust efforts were directed towards the formulation of **PROMOTING FOOD SAFETY AND QUALITY** We provided technical and financial support to the food safety and quality authority in developing and validating a comprehensive national food safety policy. To create a safer and more resilient food environment for The Gambia, vigilance, continued collaboration and staying attuned to emerging food safety concerns are imperative.

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various health promotion frameworks, including a draft school health policy, a health promoting school strategy, a healthy workplace strategy, and a healthy city strategic framework. Collaboratively with the Ministry of Health (MoH), progress was made in the establishment of these frameworks, replacing expired policies and paving the way for more comprehensive and effective health promotion strategies.

Moreover, the involvement of the World Health Organization (WHO) has been instrumental in catalyzing health-related events and initiatives. One remarkable event was the participation of the WHO Country Office (WCO) in the Walk4 Health annual anniversary. This event served as a platform to bring together individuals from diverse backgrounds within the Greater Banjul Area, fostering a sense of unity through a collective long walk while promoting a healthy lifestyle. Furthermore, the commitment to improving water resources and sanitation in the country was exemplified through collaboration with the Ministry of Water Resources. WHO lent support to the Ministry in conducting the UN-Water Global Analysis and Assessment of Sanitation and Drinking Water (GLAASS) Country Survey. The subsequent validation of the survey's report underscores the shared dedication to enhancing water and sanitation conditions for the Gambian population.

12.5 National Food Safety Governance

In the year 2022, we have achieved significant milestones in the field of food safety and quality. One of our major accomplishments was the provision of both technical and financial support to the food safety and quality authority for the development and validation of a comprehensive national food safety policy. This policy serves as a crucial framework to ensure the highest standards of food safety across the country.

Furthermore, our efforts extended to the establishment and inauguration of a national multi-sectoral platform dedicated to coordinating efforts in the realm of food safety and quality. This collaborative platform brings together various stakeholders, fostering a more holistic approach to addressing challenges and enhancing the overall food safety landscape within our nation.

In 2022, we supported in commemorating World Food Safety Day. Our support facilitated a successful series of public awareness initiatives and a symposium centered around food safety. These events played a pivotal role in raising awareness among the public and relevant stakeholders about the importance of safe food practices.

Despite these achievements, we encountered challenges that continue to shape our path forward. Ensuring consistent adherence to the validated national food safety policy remains a challenge that demands ongoing vigilance and collaboration. Moreover, sustaining the momentum of the multisectoral platform requires concerted efforts to maintain engagement and cooperation among diverse stakeholders.

Looking ahead, our focus remains on building upon these achievements and addressing challenges head-on. We are committed to further refining and implementing the national codex manual in alignment with WHO guidelines, as demonstrated by our active participation in a national forum aimed at sensitizing policy makers on the importance of Codex Alimentarius. The primary goal of Codex Alimentarius is to ensure food safety and promote fair practices in the international trade of food products. It achieves this by developing and adopting internationally recognized standards and guidelines for food quality, safety, and hygiene, as well as for labeling and packaging. These standards cover a wide range of food products, including fruits, vegetables, dairy products, meat, fish, cereals, and processed foods. By fostering continued collaboration and staying attuned to emerging food safety concerns, we aim to create a safer and more resilient food environment for our nation.

12.6 Strengthening Public Health Governance

In the year under review, significant accomplishments have been achieved in the realm of public health, marked by a dedicated focus on enacting crucial legislation. Notably, robust support has been extended towards the review and finalization of a new public health bill, demonstrating a commitment to enhancing the nation's public health framework. Another noteworthy achievement involves the formulation of a comprehensive alcohol control policy. Collaboratively with the Ministry of Health (MoH), substantial strides have been taken to review and shape the draft alcohol control policy. Although this collaborative effort is still ongoing, the anticipated outcome is the finalization of the policy by the year 2023, underscoring the commitment to addressing alcohol-related concerns effectively. The pursuit of holistic health policies has been exemplified by the endeavor to establish a Health in All Policies (HiAP) country framework. As part of this initiative, considerable support has been provided to draft a comprehensive country framework for implementing HiAP in The Gambia. This impending framework, poised to be finalized soon, holds the potential to bolster health promotion governance, thereby catalyzing actions toward addressing the social determinants of health.

The theme of fostering healthy environments resonates through the successful creation of strategic frameworks. With dedicated technical support and catalytic funding from the WCO, the Directorate of Health Promotion and Education has crafted pivotal frameworks for healthy settings. In 2023, further collaborative efforts are poised to finalize these frameworks, indicating a resolute push towards creating conducive environments for health in various domains.

In the face of mounting environmental challenges, including climate change, strides have been taken to bolster the capacity to address these determinants of health. Notably, preparatory work has been initiated for the development of a Health National Adaptation Plan (HNAP), strategically embedded within a climateresistant health system framework. The World Health Organization's (WHO) invaluable guidance has been channeled through the development of the initial concept note, showcasing a collaborative drive to address environmental concerns effectively.

Despite these noteworthy accomplishments, challenges persist on the horizon. Navigating the legislative landscape and ensuring successful enactment of the public health act remains a complex endeavor. Moreover, the need to finalize the drafted policies and frameworks underscores the ongoing efforts required to translate intentions into tangible actions. It is imperative to continually channel collective expertise and resources to overcome these challenges and forge ahead.

Looking ahead, the trajectory is defined by a continued commitment to achieving significant milestones. Efforts will be focused on successfully passing the public health bill into act, finalizing the alcohol control policy, and solidifying the Health in All Policies country framework. Additionally, endeavors will persist in refining the strategic frameworks for healthy settings, furthering capacities to address environmental determinants of health, and fostering resilience in the face of climate change. By embracing these goals and surmounting challenges collectively, the path forward entails a holistic enhancement of public health in The Gambia.



While navigating the legislative landscape and ensuring the successful enactment of the Public Health Act remains a complex endeavor, we look forward to overcoming these challenges and forging ahead to attaining significant milestones:

- Passing the public health bill into act
- Finalizing the alcohol control policy
- Solidifying the Health in All Policies Country Framework

13. A MORE AGILE, VERSATILE, AND TRANSPARENT WHO

13.1 Strengthened Strategic Health Leadership and Governance

In the year under review, the coordination and alignment of health development partners' interventions were of paramount importance, although the outcomes yielded a mix of results. WHO office has continuously strengthened the collaboration with other agencies, and other Unite to ensure strategic coherence, complementarity and coordination among UN entities (UNSDCF). The significance of cohesive engagement among development partners in the health sector was underscored by evidence from the region, emphasizing the need for integrated efforts to amplify collaborative impact. Responding to this imperative, the World Health Organization (WHO) took the initiative to establish a "Health Partners Group," convening monthly sessions that attempt to harmonized and coordinate financial and technical support from health sector development partners. These efforts were driven by the guiding principles of the Health Compact.

Amid these achievements, several challenges emerged on the horizon. Crisis management endeavors were integral, witnessed through the participation of WHO's regional office (WCO) in two Crisis Management Team meetings. The discourse encompassed vital information pertaining to political security and emergencies. Similarly, the collaboration within the Health Partners Group (HPG) thrived, with WHO steering three meetings to deliberate on overarching health-sector matters and the HPG's contributions to the Ministry of Health (MoH). The United Nations Country Team (UNCT) Coordination meetings, UN health partners' engagements, and COVID-19 response coordination were platforms that fortified synergies in the health arena.

Engaging with stakeholders was a focal point for WHO, exemplified by a meeting with the Honorable Minister of Health, solidifying commitment to cooperation. Notably, WHO's involvement extended to global platforms, as demonstrated by its support for the 75th World Health Assembly (WHA) participation by the MoH. Despite these accomplishments, further undertakings beckoned, including addressing non-communicable diseases and mental health, fortifying communication strategies, and enhancing the capacity of WHO staff. Navigating these challenges and triumphs, WHO's senior management remained actively involved, fostering dialogue through meetings with program managers, coordinating technical staff and general staff sessions, and engaging in diverse outreach endeavors. Amid a spectrum of



community-level governance structures as part of the national dialogue for crafting The Gambia's new United Nations Sustainable Development Cooperation Framework. Our country office also took on the role of co-chair in the UN health partners' fortnightly meeting and led a high-level COVID-19 mission involving the Africa CDC from December 5 to December 9, 2022.

Photo: Development partners engagement with Minister of Health.

activities, WHO upheld its responsibility to navigate the complexities of the COVID-19 pandemic, vaccine coordination, and broader health issues. As the year progressed, WHO's dedication persisted, evidenced by its participation in seminars, consultations, health events, and oversight meetings.

In 2022, our country office actively contributed to several vital initiatives. First, we engaged in nationwide consultations with community-level governance structures to identify priorities and challenges for sustainable development as part of the national dialogue for crafting the new United Nations Sustainable Development Cooperation Framework (UNSDCF) for The Gambia. Additionally, we participated in the review of output indicators for the United Nations Development Assistance Framework (UNDAF) for the period 2017 to 2021. This review was prompted by the extension of the UNDAF until the end of 2022, aligning with the national planning cycle adjustment. Consequently, new agency-based indicators were updated in the UNDAF reporting format and in the UNINFO portal. Our country office took on the role of co-chair in the UN health partners' fortnightly meeting, where we discussed COVID-19 response activities. In collaboration with UNICEF, we worked to boost COVID-19 vaccine uptake through campaigns in regions with lower vaccination coverage. These efforts were further strengthened by additional support from partners like the World Bank and USAID, as well as the integration of COVID-19 activities into routine immunization programs.

Lastly, WCO led and provided support for a highlevel COVID-19 mission involving the Africa CDC (ACDC) from December 5 to December 9, 2022. This mission had several key objectives, including advocating for COVID-19 vaccination, discussing plans to expedite COVID-19 vaccination efforts, identifying areas for support to address supply and demand issues, and refining collaboration and coordination between the COVID-19 Vaccines Global Access (COVAX) Delivery Partners (CoVDP) and the Expanded Program on Immunization (EPI) partners. Notably, recommendations included finalizing an integration strategy for COVID-19 vaccinations into routine immunization, strengthening Risk Communication and Community Engagement (RCCE), and enhancing coordination mechanisms and data management for more effective use of data. These initiatives collectively demonstrate our commitment to enhancing healthcare and sustainable development in The Gambia.

Looking ahead, the imperative remains to solidify the coordinated engagement of development partners, ensuring a unified approach that leverages collective efforts for a more impactful health sector collaboration. Adapting to changing circumstances, WHO's continued commitment to fostering partnerships, enhancing communication, and navigating challenges positions it as a pivotal actor in advancing health and well-being.

13.2 Development of Country Cooperation Strategy (CCS)

In 2022, WHO initiated the development of a new Country Cooperation Strategy (CCS), commencing in May. The process involved recruiting a consultant, establishing technical working teams, and mobilizing the Ministry of Health and various technical and financial partners. In this reporting period, the completion of Phases 1 and 2 marks progress in the planned five phases of CCS development. The comprehensive development process involves the following stages: (i) evaluation of the previous CCS, (ii) situational analysis for the new CCS, (iii) stakeholder dialogue, (iv) drafting of the new CCS document, and (v) validation/launch.

The CCS evaluation utilized a participatory approach, involving diverse stakeholders such as the Ministry of Health, relevant government institutions, the private sector, civil society organizations, training and research institutions, development partners, UNCT team, and other key stakeholders. A comprehensive situational analysis aligned with the 13th General Programme of Work's results framework has been completed, with reports validated and submitted to the regional office. In the upcoming year, extensive engagement with ministry personnel, partners, and other stakeholders will drive CCS dialogue, and the document will be drafted, reviewed, and validated in collaboration with MOH colleagues.



focal points facilitate training sessions. Twenty-two staff members, including consultants, received training as part of the WCO Gambia #NoExcuse campaign. During this reporting period, no incidents of abusive conduct were reported, underlining the effectiveness of our prevention measures.

Photo: WHO staff participate in PRSEAH training.

13.3 Preventing and Responding to Sexual Exploitation, Abuse, and Harassment (PRSEAH)

In addressing issues related to Preventing and Responding to Sexual Exploitation, Abuse, and Harassment (PRSEAH), our country office remains firmly committed to the global and regional efforts to combat sexual abuse and exploitation while fostering a safe and respectful work environment for our staff. To this end, several actions were undertaken throughout the year: Firstly, we dedicated ourselves to enhancing knowledge and awareness regarding SEAH prevention and reporting, emphasizing adherence to the 'zero tolerance culture.' Our efforts included conducting several awareness briefings led by the representative, as well as training sessions facilitated by PRSEAH focal points. In total, twenty-two staff members, including consultants, received training as part of the WCO Gambia #NoExcuse campaign.

Additionally, our staff participated in at least one PRSEAH seminar on a quarterly basis, conducted at the global level. Furthermore, WHO conducted comprehensive PRSEAH training for 69 individuals, comprising WHO staff, cleaners, security guards, hired drivers, and various healthcare professionals. We also nominated two WCO focal points for PRSEAH, actively building their capacity to ensure easy access to PRSEAH resources and programs. It's worth noting that, during this reporting period, no incidents of abusive conduct were reported, underlining the effectiveness of our prevention measures. Additionally, we acquired essential materials, including the PRSEAH 'DOS AND DON'Ts' guidelines and the WHO code of conduct, which were printed, distributed, and prominently displayed at strategic locations within the WCO premises and during WHO key events. This approach aimed to sustain knowledge and promote the prevention of sexual misconduct across all our programming efforts.

13.4 Strategic Communications

DEMONSTRATED ONLINE COMMUNITY ENGAGEMENT AND OUTREACH

In times of crisis, such as during the devastating floods in 2022, we used the power of social networking sites to reach out to communities. WHO Gambia's digital platforms proactively disseminated public education, health tips and safety strategies.

Photo: WHO Gambia's X (formerly Twitter) Page.

Throughout the year, WHO Gambia achieved significant milestones in communication and publication, contributing to its visibility. WHO Gambia's digital communication actions demonstrated engagement and outreach. The WCO's X (formerly Twitter) account remained active, with frequent tweets highlighting the organization's initiatives. Impressions, profile visits, and followers notably increased, bolstering the platform's impact. However, challenges arose with



the closure of the Facebook page due to technical difficulties. Despite this setback, the team focused on X (formerly Twitter) growth and engagement. The "Measles and Rubella" vaccination campaign was promoted on X (formerly Twitter), and the Gambia WR's interview garnered local media attention.

Policy work also flourished, as WHO Gambia's efforts were featured in AFRO's "Universal Health Coverage Day Newsletter," showcasing collaboration with our MoH counterparts. High-level missions, including a visit from our key partners at Gavi, reinforced partnerships and promoted vaccine uptake, notably for COVID-19. The team successfully orchestrated various events, ranging from vector management and AKI causality assessment to mental health training and community mobilization. In times of crisis, WHO Gambia's digital platforms were leveraged for public education. After floods, the team disseminated health tips and safety strategies, demonstrating a proactive approach to community health. Collaborating with UN Gambia and other agencies during Monsoon floods further highlighted the organization's commitment to disaster response.

Looking ahead, WHO Gambia's way forward involves strengthening digital communication strategies, reestablishing its Facebook presence, and rekindling relationships with government counterparts. The commitment to transparency, collaboration, and impactful initiatives will continue to shape WHO Gambia's trajectory, ensuring the nation's health and well-being remain at the forefront of its efforts.

13.5 Transparency and Accountability

In terms of compliance with rules and regulations, delegation of authority, standard operating procedures, and internal controls within the four clusters of the WCO, WHO Gambia has maintained full compliance. These essential aspects have been diligently adhered to, ensuring a robust operational framework. However, it's essential to acknowledge that while WHO Gambia is committed to upholding these standards, the execution of WHO's actions is not immune to potential risks that may impact the achievement of anticipated results.

In 2022, the Local Compliance and Risk Management Committee (CRMC) welcomed new members in line with a decision from the Regional CRMC. Access rights were requested and granted to these new committee members, and Conflict of Interest agreements were duly signed. The risk register underwent a comprehensive review, leading to updates in five existing risks that remain open. Additionally, one new risk was introduced, categorized under staff systems and structures, as well as political/governance. These risks were evaluated as having a moderate level of potential impact, and corresponding mitigation actions have been delineated to effectively manage and address them. One notable new risk identified pertains to the possibility that RMNCAH technical support provided by MCAT may not fully meet the needs of the Ministry of Health (MoH) and its partners, potentially leading to incomplete or non-implementation of the 2022-2023 program budget.

WCO ensures a clear segregation of duties and a well-functioning coordination mechanism, diligently following delegation of authority and reporting lines. These practices align seamlessly with WHO's established rules, regulations, policies, and standard operating procedures, serving as the cornerstone of daily operations. Importantly, any potential operational irregularities are subject to investigation, further enhancing the integrity of the organization's operational framework.

13.6 External Relations and Resource Mobilization

In the past reporting year, the WCO achieved significant milestones through its active engagement in various initiatives. A noteworthy accomplishment was its participation in monthly meetings organized by the AFRO Regional team. These meetings played a crucial role in fostering cross-border collaboration among WHO AFRO country programs, facilitating dialogue, and identifying opportunities for cooperation. Notably, WHO Gambia capitalized on this platform to explore innovative sources of funding as outlined in Output 4.2. The result of these endeavors was the establishment of fresh contacts and the exploration of potential funding avenues, even reaching out to previously untapped donors like USAID.

The diligent communication between regional offices and country programs also yielded a promising opportunity for collaboration with USAID in Senegal. Following extensive discussions and negotiations, the WCO received a remarkable proposal from USAID, earmarking up to \$500k USD to support the MoH with strengthening healthcare system in The Gambia. This grant aligns with the shared health and development objectives of both USAID and WHO. The infusion of funds aims to bolster population health and enhance the resilience of public health services in The Gambia, addressing gaps in the COVID-19 response and fortifying the healthcare system. The development of a Scope of Work (SOW) marked a pivotal step forward, leading to the approval and subsequent implementation of the grant, which will be ongoing until December 2023.

The year also witnessed proactive steps from the country team, evident in their submission of a \$100k USD proposal to the Japanese Embassy in Senegal. This proposal aimed to enhance Gambia's emergency response mechanism against potential outbreaks of viruses like m-pox and Marburg. Although the proposal did not yield the desired outcome, the WCO's persistent efforts were commendable in their pursuit of broadening partnerships and securing additional funding sources.

Additionally, collaboration with the International Organization for Migration (IOM) Gambia resulted in a joint proposal submission for the United Nations Trust Fund for Human Security (UNTFHS). The UNTFHS seeks to empower vulnerable individuals and communities facing threats to their well-being

FOSTERING CROSS-BORDER COLLABORATION The diligent communication between regional offices and country programs yielded a promising opportunity for collaboration with USAID in Senegal. The WCO received a remarkable proposal from USAID, earmarking up to USD 500k to support the MoH towards strengthening the healthcare system in The Gambia. and dignity. Despite the collective effort, the project unfortunately did not proceed as planned due to a shift in the scope of work.

In the face of challenges, the WCO's commitment to exploring novel funding avenues, fostering crossborder collaboration, and proactively engaging with potential partners remains steadfast. Looking ahead, these achievements serve as a foundation to overcome hurdles and continue driving impactful initiatives that strengthen public health and address emergent health concerns in the region.

13.7 Program Management

In the pursuit of enhancing operational efficiency and achieving GPW13 results, the country office has placed a renewed emphasis on the vital function of programme management. This multifaceted role encompasses strategic and operational planning, budget management, monitoring and evaluation, and support to governing bodies. Throughout the year, several noteworthy achievements have been accomplished, driving progress while acknowledging the challenges ahead.

In a concerted effort to accelerate the attainment of the Triple Billion targets and health-related Sustainable Development Goals (SDG3), the country office successfully identified areas for focused efforts. This endeavor involved a comprehensive threephase approach, commencing with an intra WCO analysis to establish a unified understanding of the process. Through this collaborative initiative, the focus efforts for achieving the targets were outlined, culminating in a submission of outcomes to the WHO Regional Director after an inclusive dialogue with the Ministry of Health. A significant milestone was achieved in the realm of strategic planning, specifically pertaining to the programme budget 2024-2025 (PB 24-25). This process was meticulously executed in alignment with WHO Gambia's objectives, bolstering the country's readiness to tackle health-related challenges. Moreover, the development of an integrated outbreak crisis and response (OCR) 2023 operational plan stood as a testament to the country office's dedication to global health emergencies, including the COVID-19 crisis. This operational plan was meticulously aligned with the 2023 Global Health emergency Appeal and the GPW13, positioning WHO Gambia to respond adeptly to unforeseen health crises.

A remarkable utilization rate of 85% and a flawless IATI compliance rate were realized through the conscientious development and updating of WCO work plans. This achievement underscores the office's commitment to judiciously utilizing available resources for optimal impact. In a parallel effort, monitoring and evaluation processes were invigorated, bolstered by rigorous oversight of key performance indicators (KPI) and their subsequent coordination. The completion of performance assessments (SAM-1) and Mid-term review further reinforced the accountability framework, nurturing a culture of results-based management and reporting. However, as with any journey towards excellence, challenges persist on the horizon. The year ahead presents opportunities to fine-tune processes, enhance collaborative dialogue with governing bodies, and navigate the complexities of evolving health landscapes. By building upon the achievements of this year, the country office is steadfastly committed to charting a course forward that not only addresses these challenges but also elevates its role in improving global health outcomes.

13.8 Country Support

Finances

In the year 2022, significant achievements marked the commencement of the 2022-2023 biennial plan. The allocated budget of (US\$9,569,425) for the year encompassed a diverse range of program activities. Notably, (US\$6,912,416) amounting to 55% of the budget was secured. The utilization of these funds resulted in a total expenditure of US\$3,812,587. This expenditure was divided between the various program activities and staff costs, constituting 71% and 29% respectively.

The year's accomplishments were underpinned by various factors. Particularly noteworthy was the rapid response and support provided for Acute Kidney Injury Emergency cases, a surge that emerged in the final quarter. Additionally, the successful execution of routine immunization efforts for COVID-19 and the MR vaccination campaign significantly contributed to the year's progress. However, it is important to acknowledge that these endeavors also diverted attention from the implementation of other essential activities, thus influencing the overall execution rate of 55%.

EFFICIENTLY TACKLING GLOBAL HEALTH EMERGENCIES

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Developing an integrated Outbreak Crisis and response 2023 operational plan is a testament to the country office's dedication to global health emergencies. This operational plan meticulously aligns with the 2023 Global Health Emergency Appeal and the GPW13, positioning WHO Gambia to respond adeptly to unforeseen health crises. Looking ahead, the challenges and opportunities identified in this year serve as valuable insights for the future. Maintaining a balance between addressing emergent health crises and upholding the continuity of essential initiatives remains a pivotal challenge. Strategic planning will be required to navigate such scenarios effectively. Furthermore, optimizing the execution rate and ensuring a holistic focus on all program activities will be imperative to achieve comprehensive progress in the remainder of the biennial plan.

Human and Administrative Resources

The team comprised a total of 15 dedicated staff members, with a diverse composition including 3 Internationally recruited Professional staff, 2 NPOs, and 10 GS staff. This composition was a result of a deliberate effort to adapt to changing circumstances, including the retirement of 3 staff members during the year and the execution of a comprehensive functional review exercise. This review led to the restructuring of certain roles, to reduce the impact and enhance operational efficiency. However, amidst these achievements, certain challenges emerged.

The limited capacity of human resources posed a significant hurdle, resulting in delays in providing crucial support to the Ministry for the seamless execution of the action plan. This constraint not only impacted the operations of WCO but also reverberated within the Ministry of Health, hampering progress in both spheres. In light of these circumstances, a forward-looking strategy has been devised. The roadmap for the future includes steadfastly continuing the support for the implementation of the Plan of Action (POA) activities in the year 2023. To bolster the team's capabilities, there is a proactive plan in place for

Project Number	Planned Cost	Award Budget	Utilization as % of Planned costs	Utilization as % of Award budget	Expenditure as % of Planned Cost	Expenditure as % of Award budget
UHC	1,939,780	1,247,971	18%	28%	18%	28%
HEM	689,000	335,564	5%	10%	5%	10%
НРО	224,000	190,245	18%	21%	18%	21%
CSU	959,500	957,365	17%	17%	16%	16%
Salary Workplan	2,530,062	2,109,851	37%	44%	37%	44%
COVID-19	3,854,000	3,256,538	24%	28%	24%	28%
Polio Outbreak	715,000	702,983	78%	79%	78%	79%
ESPEN	237,000	11,000				
AKI	875,000	392,419	41%	91%	41%	91%
Country Office Total	12,023,342	9,203,936	28%	36%	28%	36%

Figure 15: Financial resources of the 2022-2023 biennium at December 31, 2022



Figure 16: Implementation of the WHO Gambia budget at the end of 2022

the recruitment of personnel to fill vacant positions. Furthermore, a focus on capacity building through targeted training programs for the newly onboarded staff members is paramount.

Recognizing the importance of inclusivity and ethical considerations, a strategic emphasis will be placed on strengthening gender mainstreaming. Additionally, concerted efforts will be dedicated to the prevention and response to issues of sexual exploitation, abuse, and harassment (PRSEAH). By addressing these challenges head-on and proactively pursuing the outlined initiatives, WCO Gambia is poised to build on its achievements, surmount obstacles, and continue to positively impact the Health Sector's endeavors in the years ahead.



With 15 dedicated staff members, in the face of challenges, we remain resolute in advancing healthcare and well-being in The Gambia, and we fervently recognize the significance of diversity and inclusion initiatives as core components of our organization's ethical framework.





THE GAMBIA TEAM



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Dr. Victor Paul Immunization Officer



Mustapha Sanyang Data Manager



Dr. Makawa-sy Makawa Programme Management Officer



Momodou Gassama Health Promotion/Social Determinants Officer



Aziza Amina Sahid Demand Generation Officer



Oumie Kulsum Faye Nyang Sr. Management Office Assistant



Surma Bajaha Operations Assistant



Foday Ceesay Finance Assistant



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