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Ministry of Health & Social Welfare Directorate of Planning & Information



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Introduction

Annual Health Service Statistics are produced by the Ministry of Health and Social Welfare to provide an overview of the health sector performance. The report makes available data on services provided to the population. This report is divided into chapters, namely introduction, health workforce, health facilities, hospital beds, expenditure, completeness, services utilization, morbidity, mortality, immunization, village health services and specialized interventions. The specialized interventions include national data on tuberculosis, HIV & AIDS and Reproductive and Child Health.

This report aims to demonstrate key statistics in the health sector in a concise and easily understandable structure to ensure all stakeholders utilize it without much difficulty. The report includes data from public, private, NGO health facilities, Community clinics, referral hospitals and the village health services. Morbidity and mortality data from EFSTH is not included in the report. Getting data from the EFSTH is a major challenge faced by the HMIS unit as multiple attempts were undertaken but to no avail.

Every quarter, the HMIS unit conduct supportive supervision and data verification exercise at the health facilities and regional health directorates. The objectives of the data verification are to compare data reported by the health facilities and data verified by the HMIS team, to conduct data audit exercise in all the seven health regions, to provide mentorship and coaching guidance to the data managers and data entry clerks and to identify challenges data managers and data entry clerks have in executing their functions.

During the monitoring visits, opportunities are taken to discuss with the health workers and the regional health directorates on issues affecting data quality. Following the aggregation of the data the HIS technical team will review it prior to the publication of the data in the HMIS quarterly bulletin for information sharing and dissemination with our development partners and all stakeholders.

Health Work Force

Health workers are "all people engaged in actions whose primary intent is to enhance health" (World Health Report 2006). Human resources for health are identified as one of the core building blocks of a health system. Health workforce includes all those that provide health services such as physicians, doctors, dentist, nurses, midwives, public health officers, pharmacy personnel, laboratory personnel, radiology personnel, physiotherapy personnel, other allied health personnel, community health workers, social health workers and other health care providers, as well as health management, hospital managers, administrators and support personnel such as, ambulance drivers, security and cleaners. Those who may not deliver services directly but are essential to effective health system functioning, including health services managers, medical records and health information technicians, health economists, health supply chain managers, medical secretaries and others.

The field of health human resources deals with issues such as planning, development, performance, management, retention, information and research on human resources for the health care sector. In recent years, raising awareness of the critical role of HRH in strengthening health system performance and improving population health outcomes has placed the health workforce high on the global health agenda.

The World Health Organization estimates a shortage of almost 4.3 million physicians, midwives, nurses and support workers worldwide. The shortage is most severe in 57 of the poorest countries, especially in sub-Saharan Africa. The situation was declared on World Health Day 2006 as a "health workforce crisis". This is a result of decades of underinvestment in health worker education, training, wages, working environment and management.

Workers in health systems around the world are experiencing increasing stress and insecurity as they react to a complex array of forces. Ageing population, new diseases as well as increasing burden of current diseases, escalating conflicts and violence, are all challenges to which the workforce must be prepared to respond. The distinctive imperative is to strengthen the workforce so that health systems can tackle crippling diseases and achieve national and global health goals. A strong human infrastructure is fundamental to closing today's gap

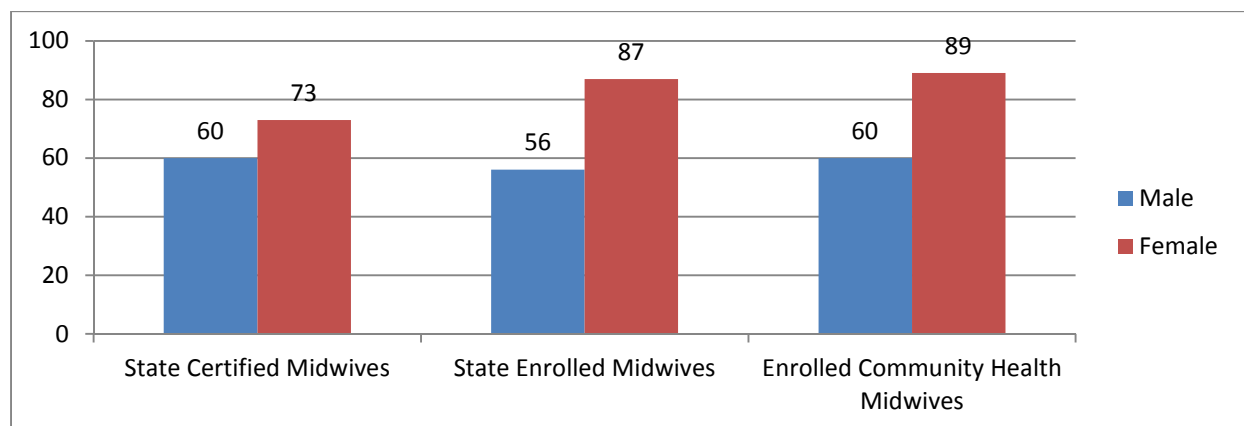
between health promise and health reality and anticipating the health challenges of the 21st century.

Table 1. Proportion of health personnel per 10,000 Population in 2015

Health Personnel	Number	Proportion H/W per 10,000 population
Medical Officer	213	1.1
State Certified Midwives	133	0.7
State Enrolled Midwives	143	0.8
Enrolled Community Health Midwives	149	0.8
Registered Nurse	300	1.6
State Enrolled Nurse	297	1.6
Community Health Nurse	237	1.3
Public Health Officers	172	0.9
Midwives	425	2.3
Nurses	834	4.5

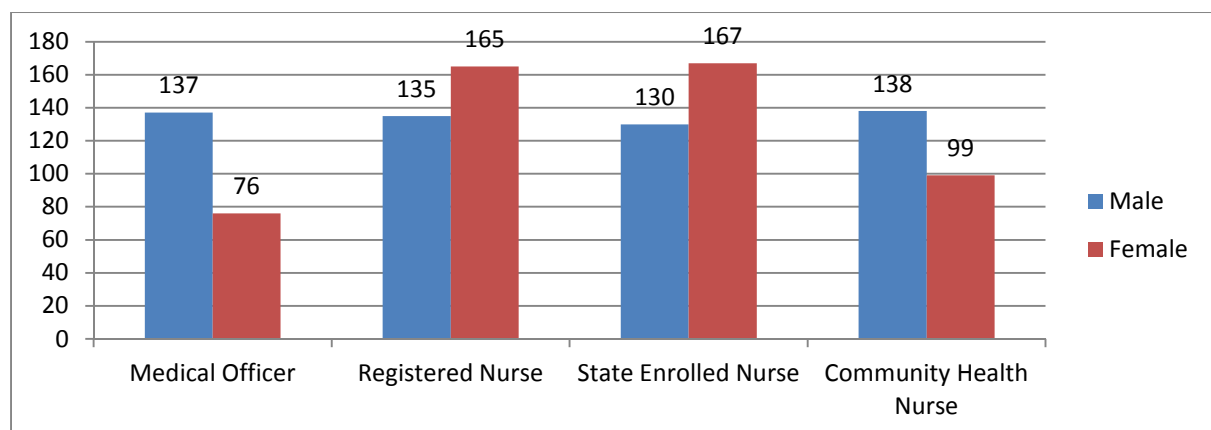
Source: HMIS, 2015

Figure 1. Number of Midwives (Public and Private) in 2015



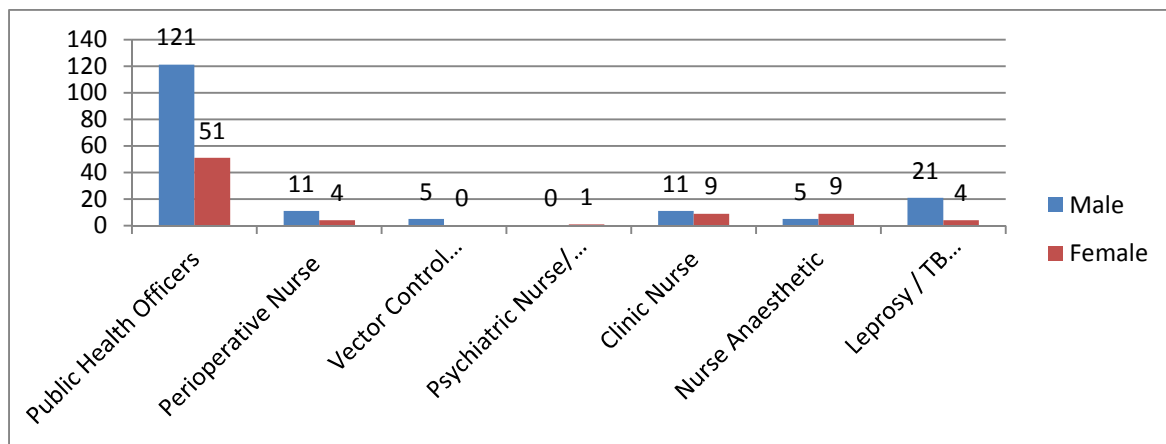
Source: HMIS, 2015

Figure 2. Number of Clinicians (Public and Private) in 2015



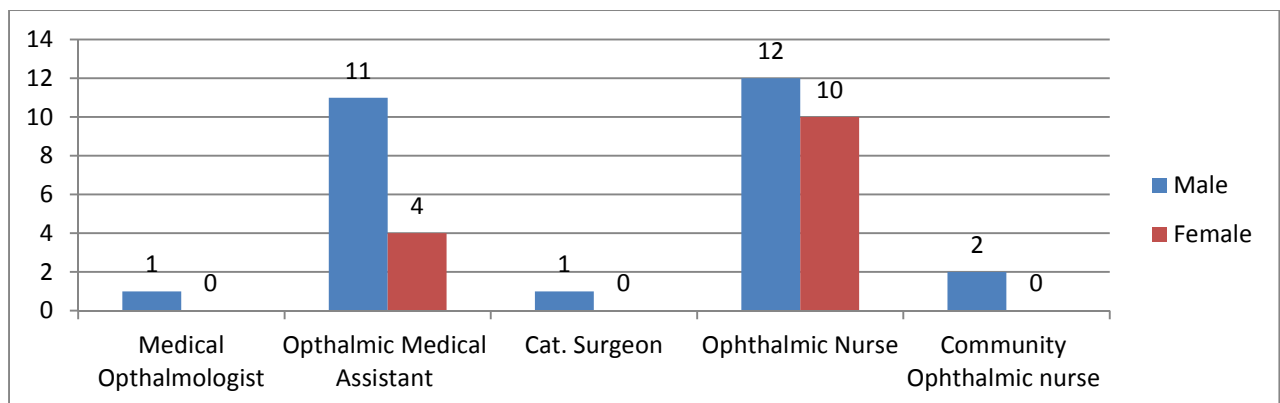
Source: HMIS, 2015

Figure 3. Number of other specialized staff (Public and private) in 2015



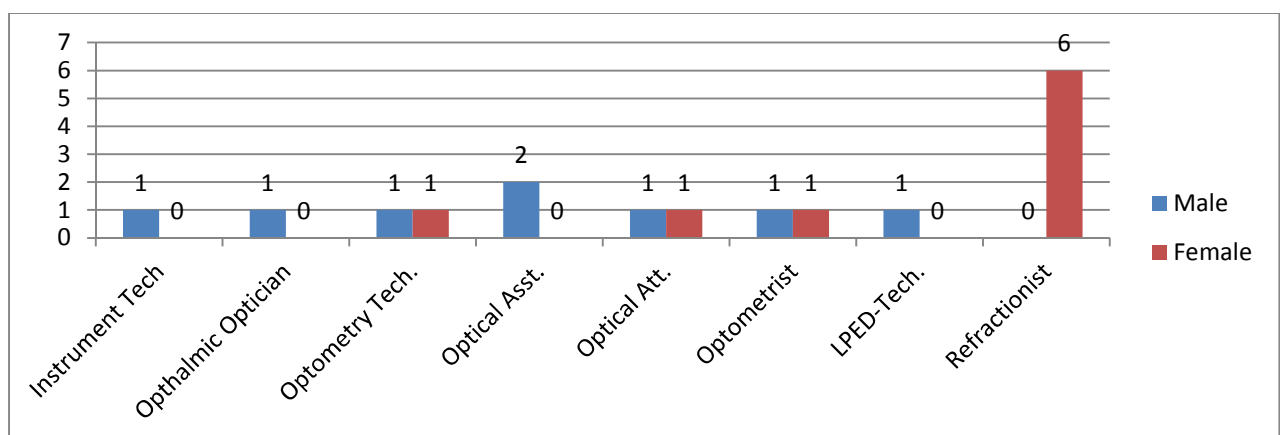
Source: HMIS, 2015

Figure 4. Number of Ophthalmic Personnel in 2015



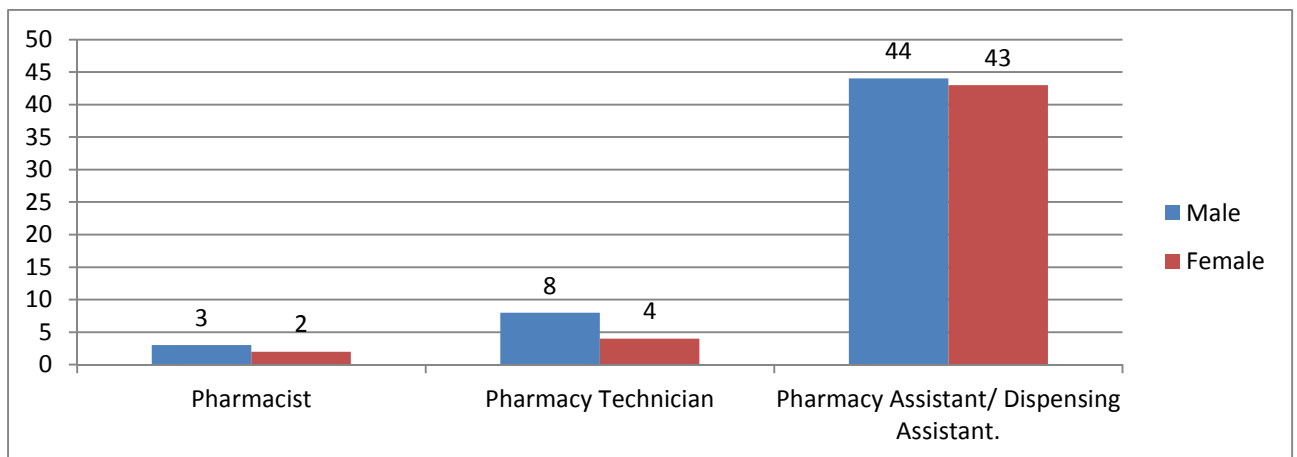
Source: HMIS, 2015

Figure 5. Number of Optometry Personnel in 2015



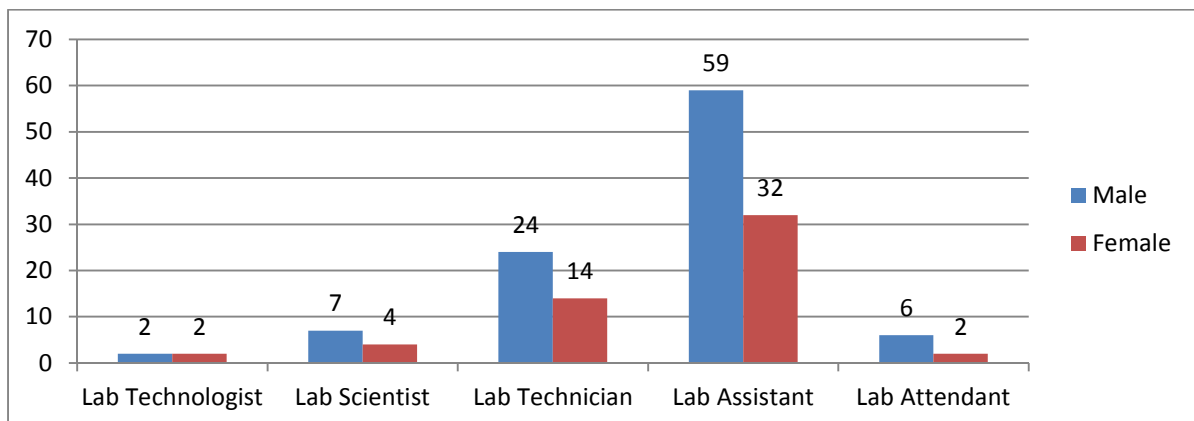
Source: HMIS, 2015

Figure 6. Number of Pharmacy personnel in 2015



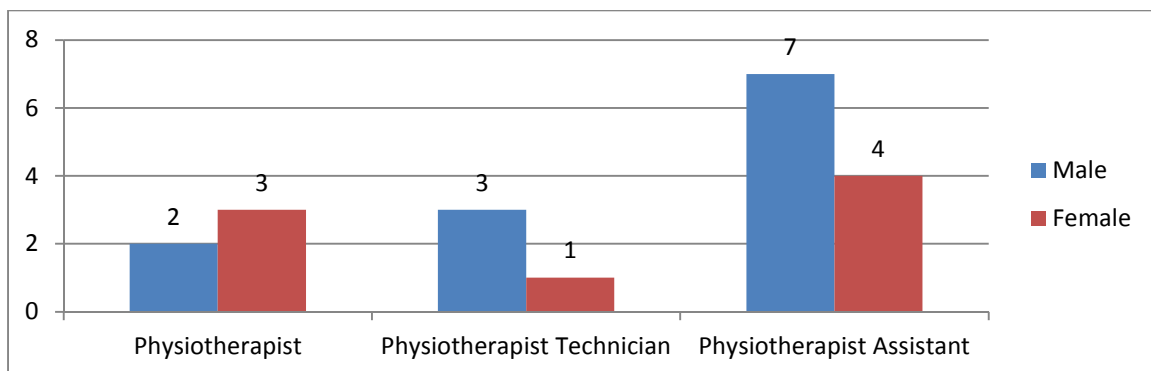
Source: HMIS, 2015

Figure 7. Number of Laboratory personnel in 2015



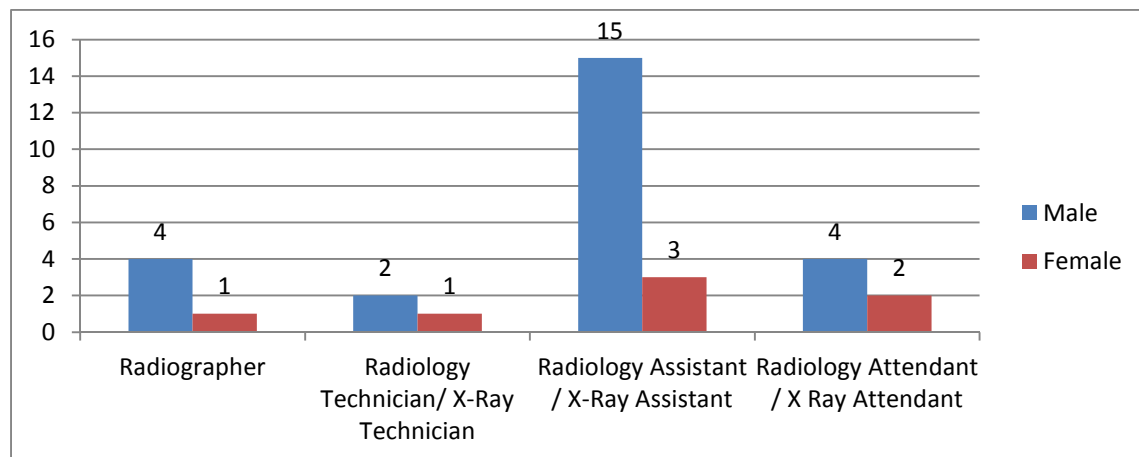
Source: HMIS, 2015

Figure 8. Number of Physiotherapy personnel in 2015



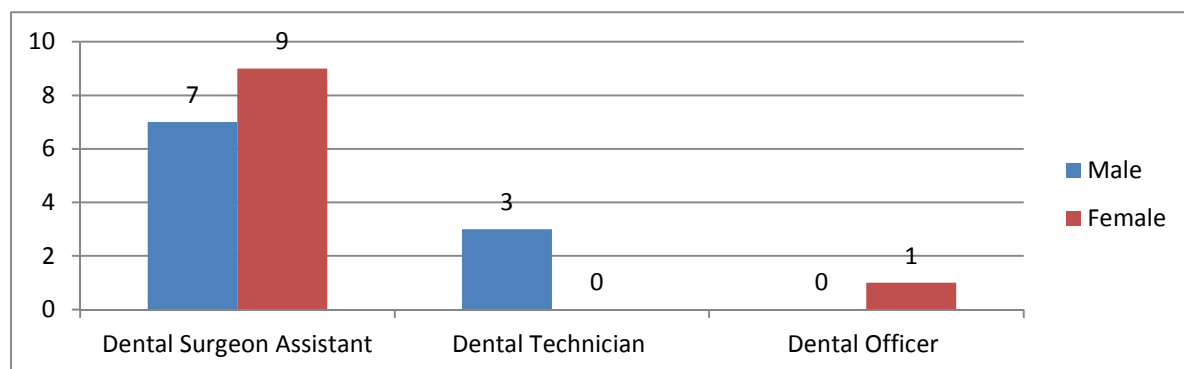
Source: HMIS, 2015

Figure 9. Number of Radiology Personnel in 2015



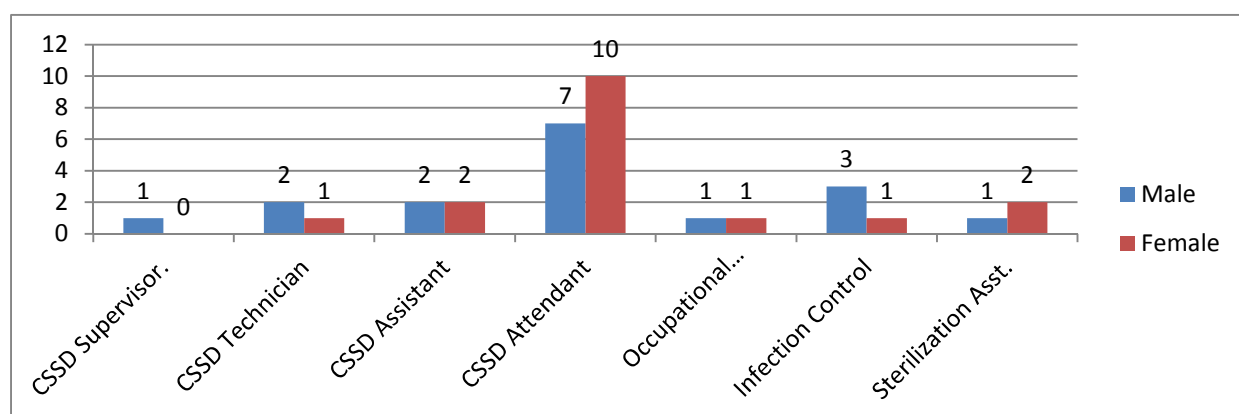
Source: HMIS, 2015

Figure 10. Number of Dental Personnel in 2015



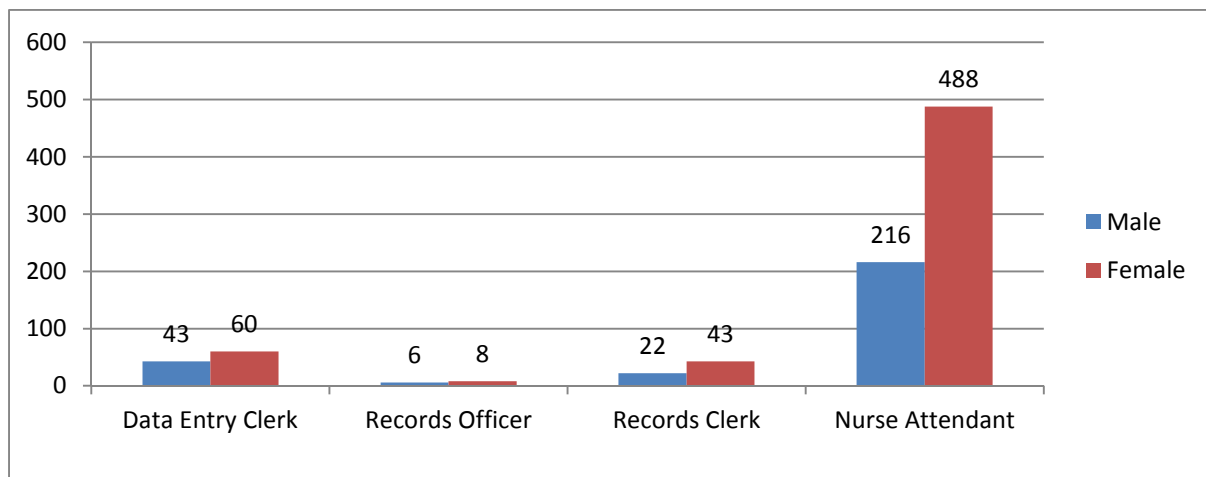
Source: HMIS, 2015

Figure 11. Number of CSSD Personnel in 2015



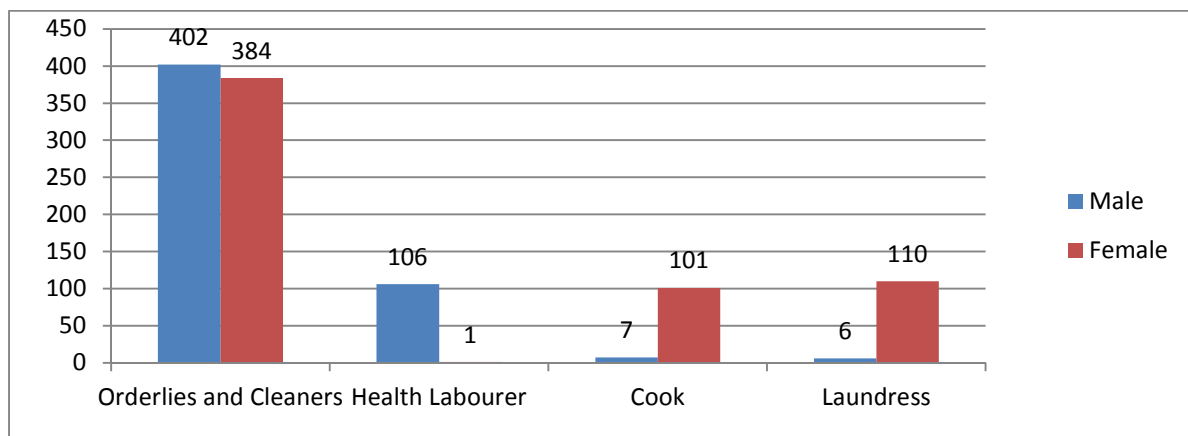
Source: HMIS, 2015

Figure 12. Number of support staff in 2015



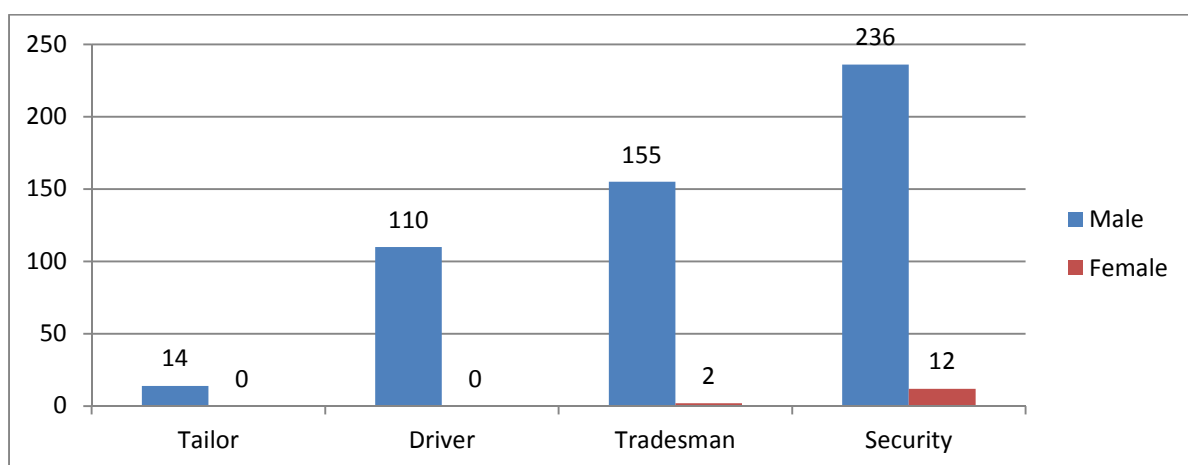
Source: HMIS, 2015

Figure 13. Number of Ancillary staff in 2015



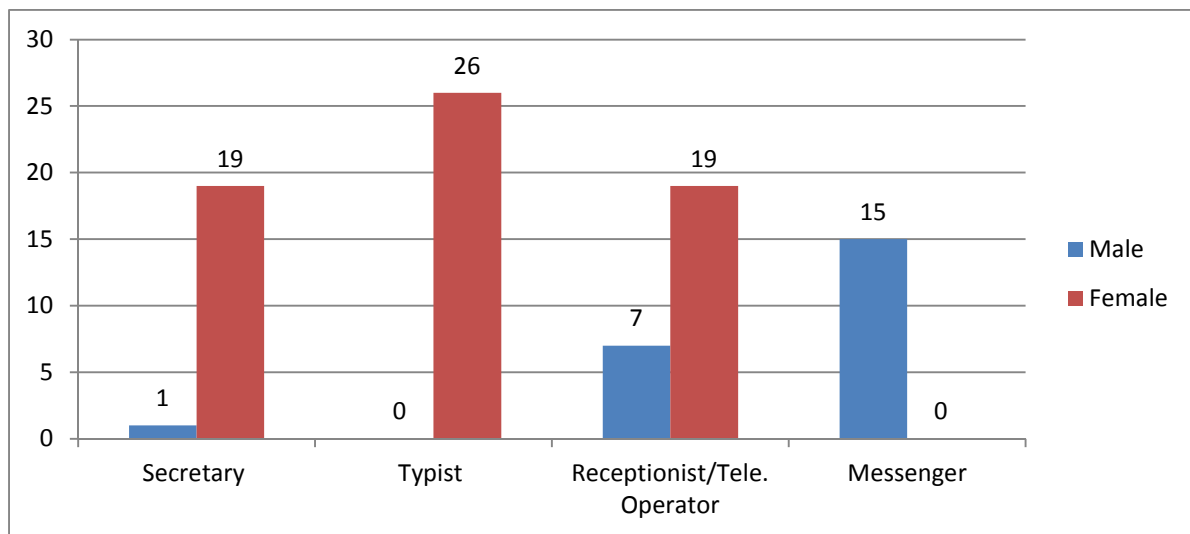
Source: HMIS, 2015

Figure 14. Number other professionals in 2015



Source: HMIS, 2015

Figure 15. Number of other support staff in 2015



Source: HMIS, 2015

Health Facilities

Health facility is any premises where healthcare services are provided. Health facilities range from small clinics and doctor's offices to urgent care centres and large hospitals with elaborate emergency rooms and trauma centres. The number and quality of health facilities in a country or region is a common measure of the area's prosperity and quality of life. In many countries, health facilities are regulated to some extent by law. Licensing by a regulatory agency is often required before a facility may open for business. Health facilities may be owned and operated by governments, for-profit businesses, non-profit organizations and in some cases by individuals.

The workload of a health facility is often used to indicate its size. Large health facilities are those with a greater patient load. For instance, in Australia the workload of a health facility is used to determine the level of government funding provided to that facility.

Health facilities in the Gambia are categorized into hospitals, Major health centres, minor health centres, NGO clinics, Private clinics, community clinics and health posts. Currently there are one Teaching hospital, one regional Eye care centre and five hospitals. Five of the hospitals are concentrated in WHR1 and WHR2. Whereas, NBER and CRR has one hospital each respectively. URR, LRR and NBWR have no hospital.

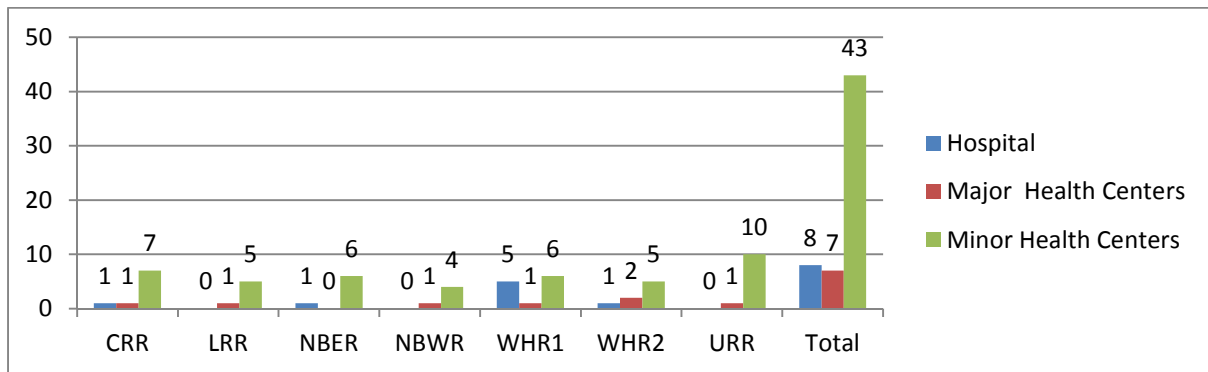
There are seven major health centres nationally. The Major health centres provides comprehensive EMOC services. Only NBER has no major centre among all the regions. The total number of minor health centres is forty three distributed within the regions. The minor health centres provide basic EMOC and reproductive and child health services.

There are thirty NGO health facilities across the country and almost half of the clinics are concentrated in WHR2. Currently, there are twenty five private health facilities in the country and 60% of them are in WHR1. The community clinics are forty seven with WHR2 having fourteen and CRR ten respectively.

Two hundred and sixty nine RCH outreach clinics and two hundred and thirty six RCH base clinics are provided by the health facilities. CRR provided the highest number of RCH outreach services of seventy one, followed by URR with sixty one. However, WHR1

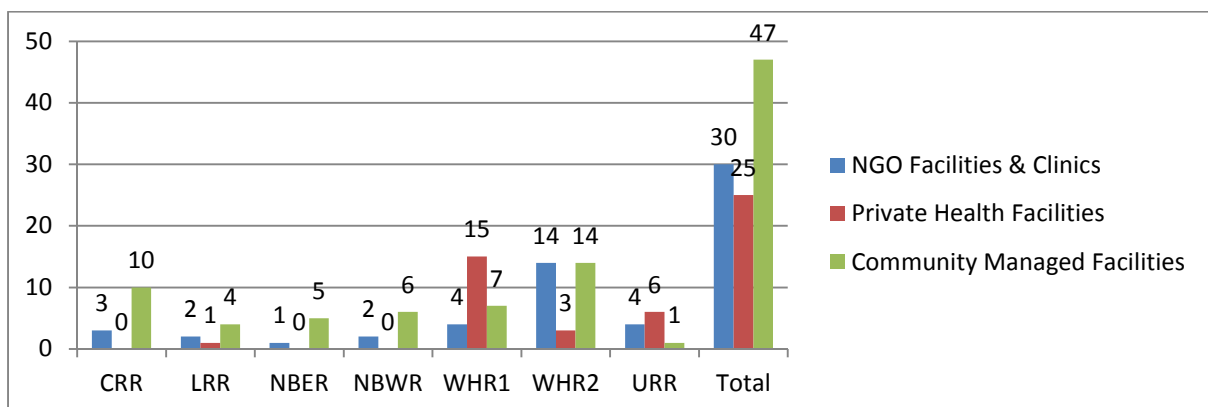
provides the highest number of RCH base clinics one hundred and fifty three, followed by WHR2 with thirty one. In total there are one thousand, four hundred and fifty six service delivery points across the country. Nationally, CRR has the highest service delivery points of 23.7% compared to WHR2 with 14.4%.

Figure 16. Distribution of hospitals, major and minor health centres by region in 2015.



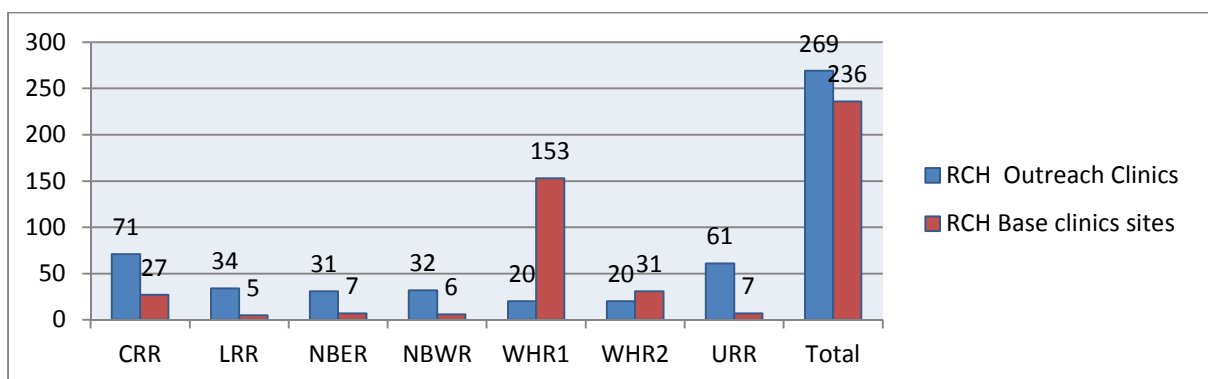
Source: HMIS, 2015

Figure 17. Distribution of NGO, Private and Community Clinics by region in 2015.



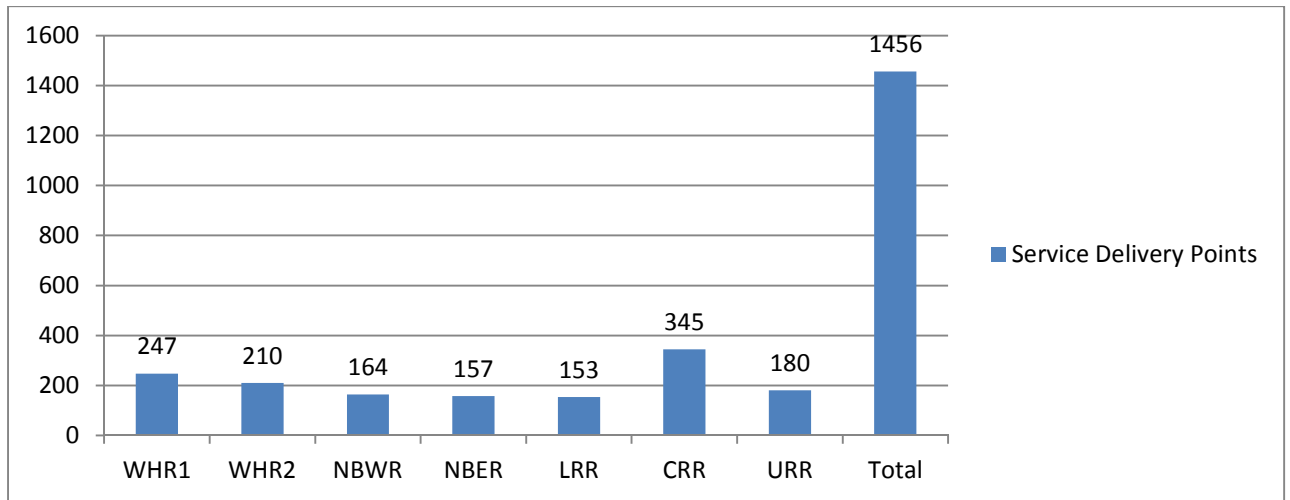
Source: HMIS, 2015

Figure 18. Distribution of RCH Outreach and Base Clinics by region in 2015.



Source: HMIS, 2015

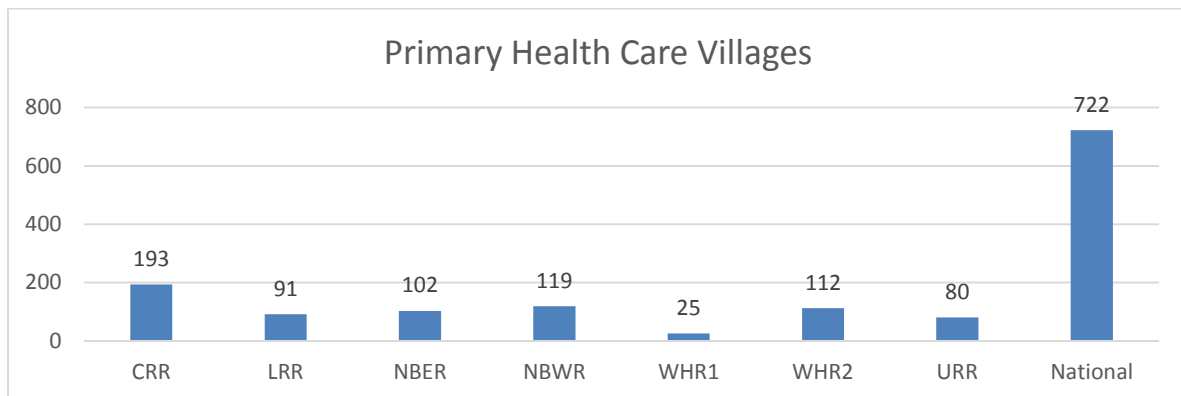
Figure 19. Total number of Service Delivery Points by region



Source: HMIS, 2015

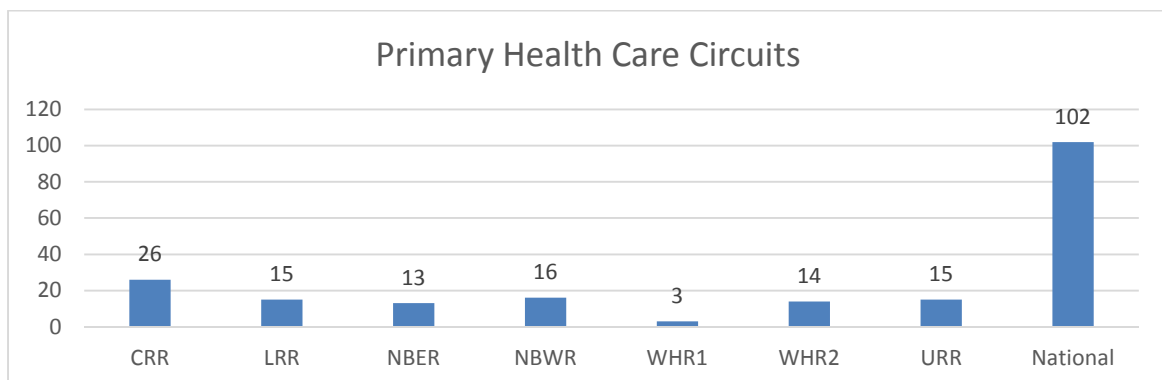
PHC Villages and Circuits

Figure 20. Number of PHC villages per region



Source: HMIS, 2015

Figure 21. Number of PHC circuits per region



Source: HMIS, 2015

Hospital Beds

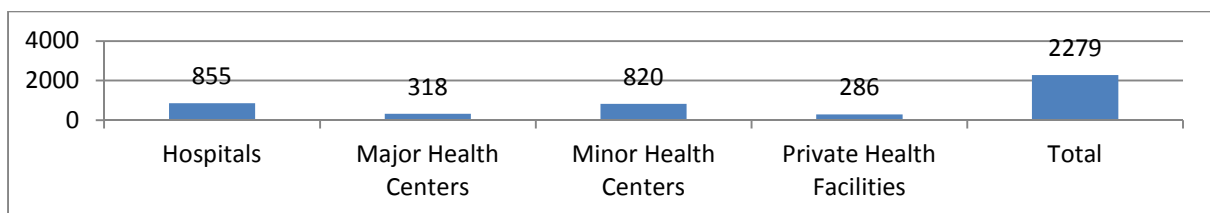
A hospital bed or hospital cot is a bed specially designed for hospitalized patients or others in need of some form of health care. These beds have special features both for the comfort and well-being of the patient and for the convenience of health care workers. Common features include adjustable height for the entire bed, the head, and the feet, adjustable side rails, and electronic buttons to operate both the bed and other nearby electronic devices.

Hospital beds and other similar types of beds are used not only in hospitals, but in other health care facilities and settings, such as nursing homes, assisted living facilities, outpatient clinics and in home health care. While the term "hospital bed" can refer to the actual bed, the term "bed" is also used to describe the amount of space in a health care facility, as the capacity for the number of patients at the facility is measured in available "beds."

In 2015, there were two thousand, two hundred and seventy nine hospital beds are available in the public and private health facilities. 37.5% of the beds are in the hospitals, 36.0% in the minor health centres, 14.0% in the major health centres and 12.5% in the private health facilities.

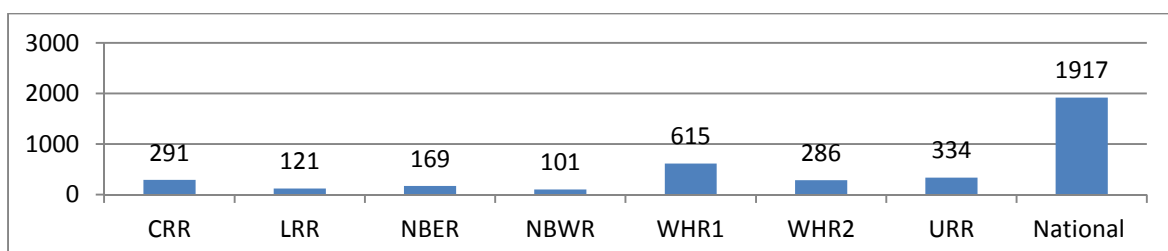
Of the total number of beds, 73.6% are inpatient beds use for admitting patients, 16.8% are ante natal and post natal beds whilst 9.6% are labour and delivery beds.

Figure 22. Distribution of hospital beds in 2015 (public & private health facilities).



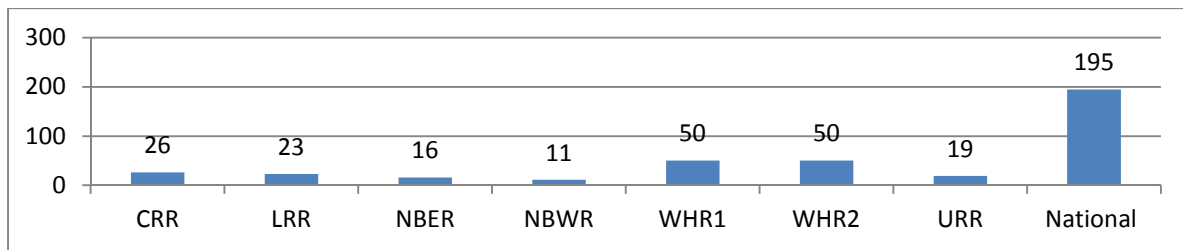
Source: HMIS, 2015

Figure 23. Distribution of Beds by region in 2015



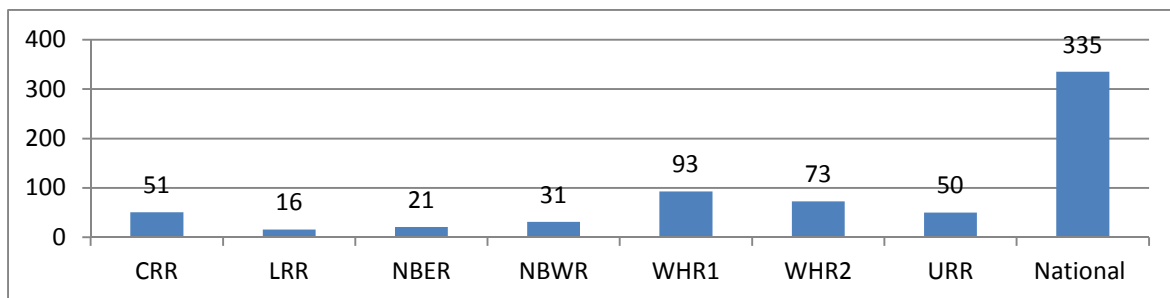
Source: HMIS, 2015

Figure 24. Distribution of Labour Beds by region in 2015



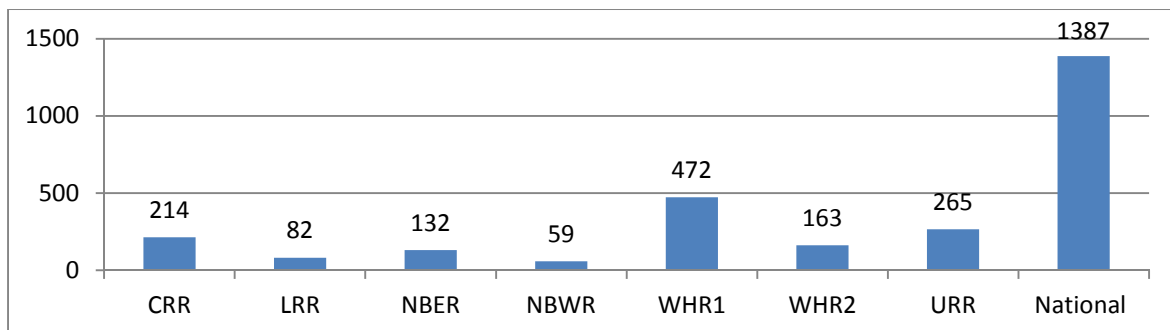
Source: HMIS, 2015

Figure 25. Distribution of Ante natal and Post natal Beds by region in 2015



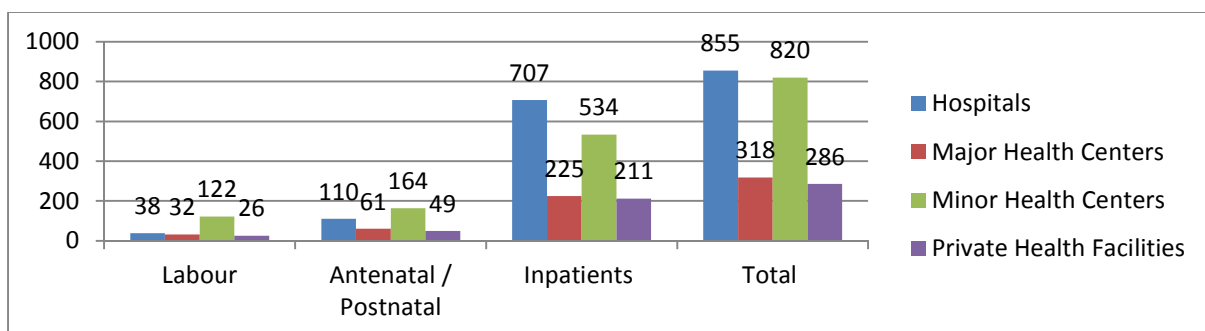
Source: HMIS, 2015

Figure 26. Distribution of Inpatient Beds by region in 2015



Source: HMIS, 2015

Figure 27. Distribution of Beds by Category and Facility Type by region in 2015



Source: HMIS, 2015

Expenditure on Health

Health expenditures are broadly defined as activities performed either by institutions or individuals through the application of medical, paramedical, and/or nursing knowledge and technology, the primary purpose of which is to promote, restore or maintain health. Health expenditures provide the total expenditure on health as a percentage of GDP.

Total health expenditure is the sum of public and private health expenditure. It covers the provision of health services (preventive and curative), family planning activities, nutrition activities, and emergency aid designated for health but does not include provision of water and sanitation.

Table 2. Financial Indicators

	Indicator	Value	Source
1	General government expenditure on health as % of GDP	1.99%	NHA, 2013
2	Total expenditure on health as % of GDP	5.67%	NHA, 2013
3	Percentage of national budget allocated to health.	10.56%	Budget estimates
4	Percentage of total budget released on time to the health sector	45%	IFMIS, 2015
5	Out of pocket expenditure as % of private expenditure on health	30.70%	NHA, 2013
6	External resources on health as % of total expenditure on health	46.7%	NHA, 2013
7	General government expenditure on health as % of total expenditure budget	12.4%	NHA, 2013
8	Per capital government drug expenditure	128	
9	Private sector expenditure on health as % of total expenditure on health	71.9%	NHA, 2013
10	The Per Capita Expenditure on Health as average exchange rate	28.07	NHA,2013
11	Out of Pocket Expenditure on Health	21.2 %	NHA, 2013
12	General government expenditure on health	28.1	NHA,2013

Completeness and Timeliness of Monthly

Monitoring of the completeness and timeliness of the monthly health facility returns and the CHN monthly summary forms are generated by the DHIS 2 database of the HMIS unit. This is an in built system where any time the data managers at the RHDs complete punching a return for a particular reporting facility the system marks it as complete. In addition, the database also indicates if that particular return was punched on time, which is by 10th of the following month to indicate the timeliness of the report. In this particular report, the monthly health facility returns were physically counted for completeness and the log book at the regional health directorates were used to verify the timeliness of the submission. The total number of expected monthly health facilities returns and village health services return in 2015 was two thousand, seven hundred and sixty three. Out of the total number of expected returns, two thousand, four hundred and eighty four were actually received representing 89.9% completeness. One thousand, seven hundred and eighty nine monthly health facility returns were expected in 2015. However, one thousand six hundred and eight returns were actually received representing 89.9%. Nine hundred and seventy four village health services returns were expected in 2015. Eight hundred and seventy six returns were actually received representing 89.9% completeness. While completeness of returns from the facilities is improving significantly, timeliness remains a major challenge.

Table 3. Percentage of completeness of the health facility monthly returns

Region	Expected no of returns	No Actually received	Percentage
CRR	288	287	99.6%
LRR	211	211	100.0%
NBER	168	143	85.1%
NBWR	168	145	86.3%
WHR1	324	299	92.3%
WHR2	468	361	77.1%
URR	162	162	100.0%
National	1789	1608	89.9%

Source: HMIS, 2015

Table 4. Percentage of timeliness of the health facility monthly returns

Region	Expected no of returns	No Actually received on Time	Percentage
CRR	288	287	99.6%
LRR	211	211	100.0%
NBER	168	143	85.1%
NBWR	168	145	86.3%
WHR1	324	299	92.3%
WHR2	468	361	77.1%
URR	162	162	100.0%
National	1789	1608	89.9%

Source: HMIS, 2015

Table 5. Percentage of completeness of the VHS monthly returns

Region	Expected no of returns	No Actually received	Percentage
CRR	236	229	97.0%
LRR	96	95	98.9%
NBER	108	88	81.4%
NBWR	192	168	88.0%
WHR1	36	30	83.3%
WHR2	144	104	72.2%
URR	162	162	100.0%
National	974	876	89.9%

Source: HMIS, 2015

Table 6. Percentage of timeliness of the VHS monthly returns

Region	Expected no of returns	No Actually received on Time	Percentage
CRR	236	229	97.0%
LRR	96	95	98.9%
NBER	108	88	81.4%
NBWR	192	168	88.0%
WHR1	36	30	83.3%
WHR2	144	104	72.2%
URR	162	162	100.0%
National	974	876	89.9%

Source: HMIS, 2015

Service utilizations

Outpatient Services

In 2015 one million, seven hundred and thirty four thousand, one hundred and seventy two outpatient consultation excluding revisits recorded by the health facilities. 43.6% of the consultations were male patients and 56.4% female patients.

Eighty seven thousand, three hundred ninety four were revisit consultations for children under five years of age were recorded. 49.2% of the revisits were male patients and 50.8% female patients.

Table 7. Number and percentage of OPD visits by patients < 5 years of age to the health facilities in 2015.

Regions	< 5 New Visits		< 5 Re-visits	
	Male	Female	Male	Female
CRR	38902 (50.8)	37636(49.2)	1428 (51.3)	1356(48.7)
LRR	15787(50.9)	15205(49.1)	213 (42.4)	289(57.6)
NBER	14682(52.8)	13105(47.2)	1578m (52.3)	1441(47.7)
NBWR	14645(50.6)	14315(49.4)	5486 (49.8)	5540(50.2)
WHR1	48527(49.0)	50582(51.0)	26978 (49.3)	27724(50.7)
WHR2	46226(50.7)	46987 (49.3)	7075 (47.8)	7717 (52.2)
URR	36795(50.6)	35876 (49.4)	275 (48.3)	294 (52.7)
National	215564(50.2)	213706 (49.8)	43033 (49.2)	44361 (50.2)

Source: HMIS, 2015

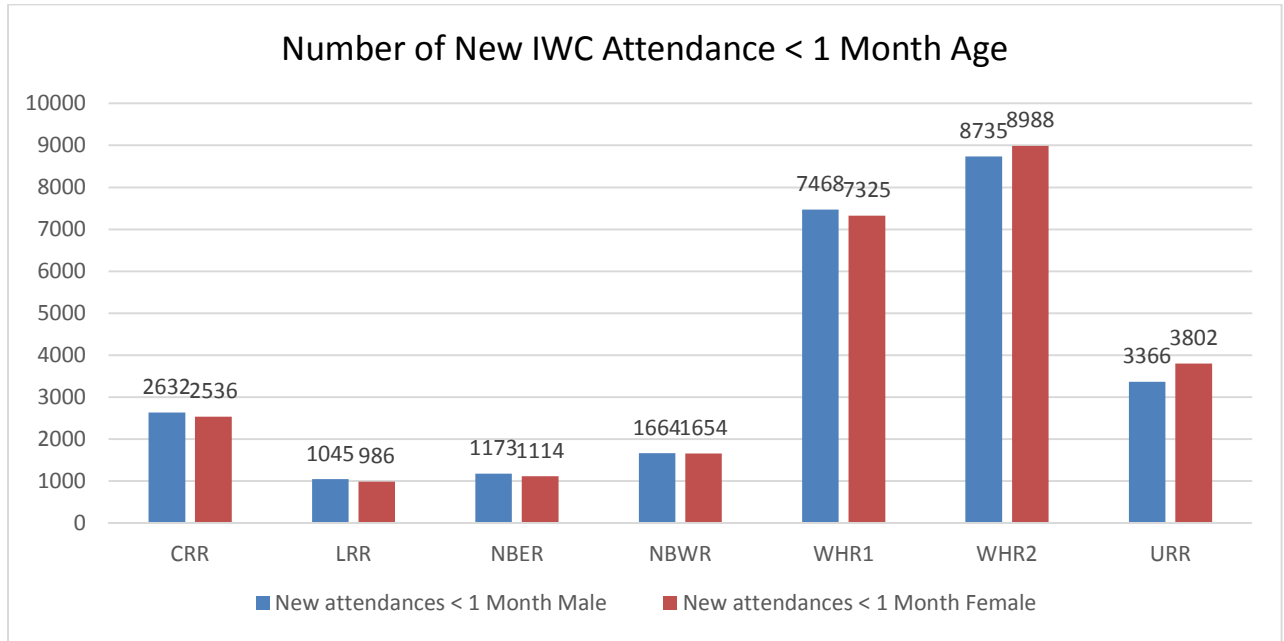
Table 8. Number of OPD visits by patients 5- 14 years and > 14 years of age to the health facilities in 2015.

Regions	5 -14 Years		> 14 years		Total OPD exclude revisits
	Male	Female	Male	Female	
CRR	18406	23068	41946	73629	233587
LRR	8776	16056	17540	32688	106052
NBER	6226	7079	14247	24069	79408
NBWR	10287	19678	27831	44040	130796
WHR1	65322	77334	139545	192214	573524
WHR2	40720	44990	81018	104633	364574
URR	26427	28398	42593	76142	246231
National	176164	216603	364720	547415	1734172

Source: HMIS, 2015

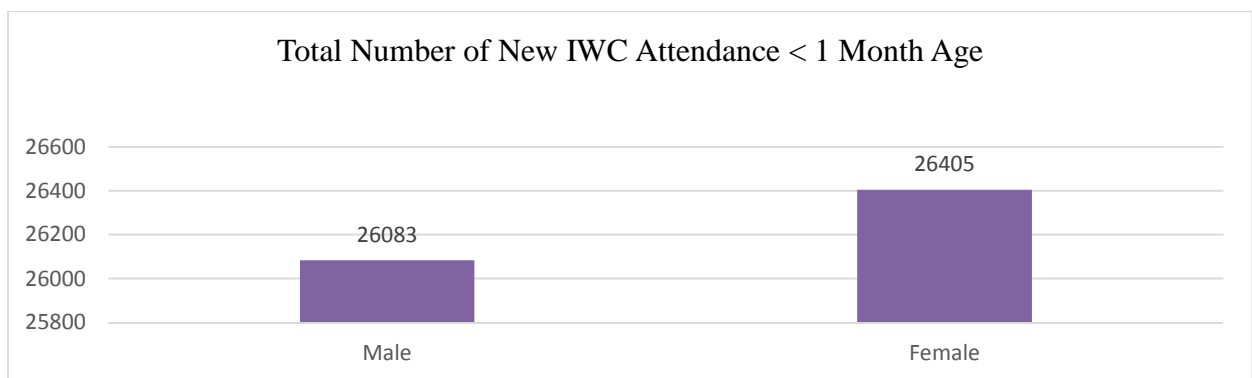
Infant Welfare Clinics

Figure 28. Number of New IWC Attendance < 1 Month Age



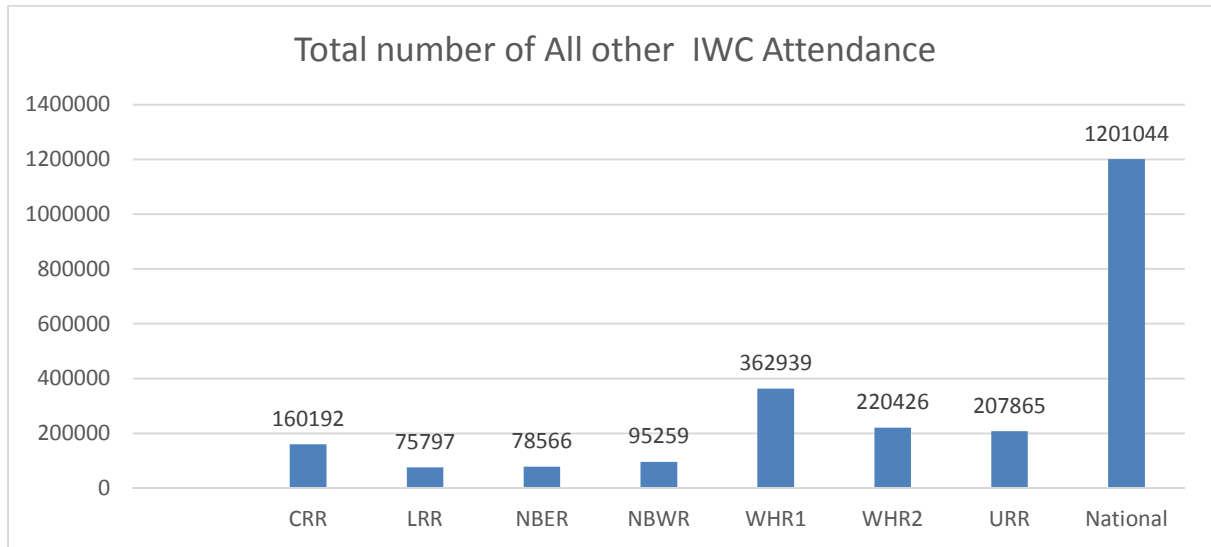
Source: HMIS, 2015

Figure 29. Total number of New IWC Attendance < 1 Month Age registered in 2015



Source: HMIS, 2015

Figure 30. Total number of All other IWC Attendance



Source: HMIS, 2015

Ante Natal Care Services

Seventy one thousand, two hundred and sixty four ante natal women were registered in 2015 throughout the Gambia. 15.8% of the registered antenatal women were age less than 20 years whereas 84.2% were twenty years of age and above.

24.9% of the ante natal women registered in the first trimester of pregnancy nationally.. NBWR has the highest percentage of Ante natal women registering during the first trimester of pregnancy with 35.5%, followed by WHR1 with 33.6%, URR 31.7%, CRR 21.2%, LRR 14.2%, NBER 7.7% and WHR2 6.9%.

Nationally, 48.5% of the ante natal women completed three other scheduled ANC visits. WHR1 has the highest percentage of Ante natal completing three other scheduled visits with 69.8%, followed by CRR with 57.4%, WHR2 50.8%, NBWR 50.6%, LRR 39.5%, URR 16.9% and NBER 10.5%.

Out of the total registered ante natal women, sixty three thousand, two hundred and sixty received first dose of IPT and forty seven thousand, four hundred and eighty received second dose of IPT representing 88.8% and 66.6% respectively.

Twenty seven thousand, five hundred and eighty two anta natal women had Urinalysis in 2015 representing 38.7%. Similarly nine thousand, seven hundred and nine ante natal women had RPR test accounting for 13.6% of the ante natal women. Seventeen thousand, seven hundred and twenty one ante natal women had blood grouping test representing 24.9%. one thousand five hundred and ninety four ante natal women had blood transfusion representing 2.2% of the ante natal women.

Seventy six thousand, six hundred and sixty three HB test was conducted for ante natal women. However, the number is a combination of first and second HB test.

Table 9. Number of ANC attendance, revisits, first trimester visit and completing three schedule visits.

Region	First attendance < 20 years of age	First attendance 20 years of age and above	Re-visits	ANC first trimester visit	ANC Completing 3 other scheduled visits
CRR	1538	8277	20524	2081	5632
LRR	501	2336	5430	403	1120
NBER	781	3697	10481	343	471
NBWR	858	3570	8445	1574	2239
WHR1	3628	20581	54807	8127	16904
WHR2	969	10609	20010	801	5877
URR	3010	10909	19435	4412	2347
National	11285	59979	139132	17741	34590

Source: HMIS, 2015

Table 10. Number and percentage of ante natal first trimester visit and completing three schedule visits

	ANC Bookings	ANC first trimester visit	Percentage	ANC Completing 3 other scheduled visits	Percentage
CRR	9815	2081	21.2	5632	57.4
LRR	2837	403	14.2	1120	39.5
NBER	4478	343	7.7	471	10.5
NBWR	4428	1574	35.5	2239	50.6
WHR1	24209	8127	33.6	16904	69.8
WHR2	11578	801	6.9	5877	50.8
URR	13919	4412	31.7	2347	16.9
National	71264	17741	24.9	34590	48.5

Source: HMIS, 2015

Table 11. Number of Ante natal women who received IPT in 2015

Intermittent Preventative Treatment 1st Dose	63260
Intermittent Preventative Treatment 2nd Dose	47480
Intermittent Preventative Treatment 3RD Dose	89
Intermittent Preventative Treatment 4TH Dose	10

Source: HMIS, 2015

Obstetric/Labour and deliveries

Table 12. Number and Percentage of Obstetric, labour and deliveries conditions in 2015

Conditions	Number	Percentage
Antepartum haemorrhage	568	8.9
Intrapartum Haemorrhage	126	2.0
Pre-existing Hypertension	495	7.7
Pre-Eclampsia	1223	19.1
Eclampsia Obstetric/Labour and deliveries	378	5.9
Abortion	1607	25.1
Delayed or obstructed labour	538	8.4
Retained placenta	85	1.3
Malpresentation	15	0.2
Ruptured uterus	16	0.3
Ectopic pregnancy	145	2.3
Deliveries requiring Interventions	96	1.5
Women who received iron for Anaemia	27	0.4
Anaemia in pregnancy	1081	16.9
Total	6400	100.0

Source: HMIS, 2015

Postnatal Clinic Attendance

Postnatal services are provided to women immediately after delivery and according to the RCH policy, all women must complete three post natal care services within forty two days of delivery.

The services provided to the mother and baby includes: Vital observations for mother – Blood Pressure, Temperature, Pulse, RR, Hb, protein, Lochia (Colour, Quantity and Odour), Uterine Involution (CM), Breast, Perineum and counselling on family planning. Baby – Temperature, Cord Condition, Skin colour/condition, Condition of Eye, Birth defect, Weight and any remark.

Nationally, 33.5% of the registered post natal women completed three post natal care services. In URR 64.5% of the registered post natal women completed three post natal care services, followed by CRR with 48.1%, NBWR 37.4%, NBER 30.2%, WHR2 25.1%, WHR1 23.0% and LRR 17.9%.

74.7% of the total post natal women seen were well and had no complication following the delivery. 5.4% had anaemia, 4.3% had puerperal infection, 3.6% had postpartum hypertension, 3.2% had perineal tear, 1.9% had severe lower abdominal pain, 1.6% had FGM complications and 1.0% had Postpartum haemorrhage.

Table 13. Number of post natal attendance and completing three post natal care services

Region	Post Natal attendance	Completing 3 post natal care Services	Percentage
CRR	2359	1134	48.1
LRR	1478	265	17.9
NBER	1560	471	30.2
NBWR	2955	1106	37.4
WHR1	8147	1874	23.0
WHR2	1336	336	25.1
URR	2550	1646	64.5
National	20385	6832	33.5

Source: HMIS, 2015

Table 14. Number of post natal women seen and conditions.

	< 15 years	15-24 years	> 24 years	Total	Percentage
Well women	9	3532	18683	22224	74.7
Anaemia	1	323	1293	1617	5.4
Hypertension	0	158	916	1074	3.6
Severe lower abdominal pain	0	52	526	578	1.9
Confirmed uncomplicated malaria	0	4	91	95	0.3
Confirmed severe malaria	0	1	99	100	0.3
Oedema	1	27	28	56	0.2
Puerperal Infection	0	138	1140	1278	4.3
Postpartum haemorrhage	1	41	248	290	1.0
FGM complications	0	42	440	482	1.6
Breast abscess	0	23	124	147	0.5
Perineal tear	0	177	789	966	3.2
Septic episiotomy	0	42	91	133	0.4
Puerperal mental disorder	0	1	6	7	0.0
Others	10	40	667	717	2.4
Total	22	4601	25141	29764	100.0

Source: HMIS, 2015

RCH Clinics

In 2015, seven thousand, eight hundred and twenty four RCH clinics were scheduled, out of which 98.6% were held and 1.4% cancelled. Of the total number of clinic cancelled, 96.4% were due to public holidays and 3.6% due vehicle unavailability. Majority of the cancellations were taking place in the NGO and private health facilities.

Table 15. Number of RCH clinics Scheduled, held and cancelled in 2015.

Regions	Clinics Total Scheduled	Clinics Held	Clinics Cancelled
CRR	1094	1092	2
LRR	617	616	1
NBER	555	551	4
NBWR	668	666	2
WHR1	2940	2870	70
WHR2	836	827	9
URR	1114	1092	22
National	7824	7714	110

Source: HMIS, 2015

Table 16. Reasons for the cancellation of the RCH clinics in 2015

Region	Public Holidays	Vehicle Unavailability	Fuel Unavailability	Staff Unavailability	Other reasons
CRR	2	0	0	0	0
LRR	1	0	0	0	0
NBER	0	4	0	0	0
NBWR	2	0	0	0	0
WHR1	70	0	0	0	0
WHR2	9	0	0	0	0
URR	22	0	0	0	0
National	106	4	0	0	0

Source: HMIS, 2015

Malaria

In The Gambia, the national malaria policy indicates that all suspected cases of malaria MUST be confirm with blood film or the use of rapid diagnosis test prior initiating treatment. In 2015, two hundred and forty nine thousand, four hundred and thirty three confirmed cases of uncomplicated malaria were recorded in the RCH clinics and outpatient departments. 86.6% of the total confirmed uncomplicated malaria cases were aged more than five years, 12.2% were less than five years of age and 1.2% were pregnant women. 37.3% of all the confirmed uncomplicated malaria was recorded in WHR1, followed by WHR2 with 29.2%, URR 20.9%, CRR 7.1%, LRR 3.1%, NBER 1.5% and NBWR 1.0%.

Five thousand, two hundred and thirty eight admissions due to severe confirmed malaria were recorded by the health facilities in 2015. 70.0% of the admissions due to severe confirmed malaria were aged more than five years, 22.8% were less than five years of age and 6.4% were pregnant women. WHR1 accounts for 37.7% of the total admission due to confirmed malaria, followed by URR with 24.3%, CRR 18.9%, WHR2 11.7%, NBER 3.2%, LRR 2.4% and NBWR 1.7%.

One hundred and seventy six deaths due to severe confirmed malaria were recorded in 2015 by the health facilities. 69.3% of the deaths were age more than five years whereas, 24.4% were aged less than five years and 6.3% were pregnant women. WHR1 recorded 26.1% of the deaths, URR 25.0%, WHR2 23.9%, CRR 11.9%, LRR 8.0%, NBER 3.4% and NBWR 1.7%. The national malaria cases fatality rate in 2015 was 3.4%. However, there are significant variations within the regions. LRR has the highest cases fatality rate of 11.3%, followed by WHR2 with 6.9%, NBWR 6.7%, URR 3.5%, WHR1 2.3%, CRR 2.1% and NBER 1.8%.

Multiple factors may be responsible for the high case fatality rate. Among the factors may include proper case management, availability of clinicians, availability of drugs and other consumables, early treatment seeking. For instance the distribution of medical officer is to the disadvantage of the regions. LRR, NBWR and URR had only one medical officer each as compared to WHR1 with 147.

Table 17. Number of Uncomplicated Confirmed Malaria reported at OPD and RCH Clinics by region. in 2015.

Region	< 5		>5		Pregnancy	Total	Percentage
	Male	Female	Male	Female			
CRR	1071	934	8346	7040	301	17692	7.0
LRR	400	362	3702	3117	134	7715	3.1
NBER	338	243	1703	1438	59	3781	1.5
NBWR	249	173	1054	881	27	2384	1.0
WHR1	5965	6002	40138	39941	1043	93089	37.3
WHR2	5479	4957	30863	30706	760	72765	29.2
URR	2238	2094	23340	23633	702	52007	20.9
National	15740	14765	109146	106756	3026	249433	100.0

Source: HMIS, 2015

Table 18. Number of Admissions due to Severe Confirmed Malaria recorded by the health facilities in 2015 by region.

Region	< 5		>5		Pregnancy	Total	Percentage
	Male	Female	Male	Female			
CRR	135	94	317	394	52	992	18.9
LRR	23	16	43	34	8	124	2.4
NBER	24	10	75	56	5	170	3.2
NBWR	12	9	39	28	1	89	1.7
WHR1	274	230	676	671	126	1977	37.7
WHR2	126	99	193	169	26	613	11.7
URR	70	71	485	531	116	1273	24.3
National	664	529	1828	1883	334	5238	100.0

Source: HMIS, 2015

Table 19. Number of deaths due to Severe Confirmed Malaria reported by the health facilities in 2015 by region.

Region	< 5		>5		Pregnancy	Total	Percentage
	Male	Female	Male	Female			
CRR	4	0	7	10	0	21	11.9
LRR	3	2	3	6	0	14	8.0
NBER	0	1	1	1	0	3	1.7
NBWR	1	0	4	1	0	6	3.4
WHR1	3	10	19	13	1	46	26.1
WHR2	6	7	11	9	9	42	23.9
URR	3	3	15	22	1	44	25.0
National	20	23	60	62	11	176	100.0

Source: HMIS, 2015

Pneumonia

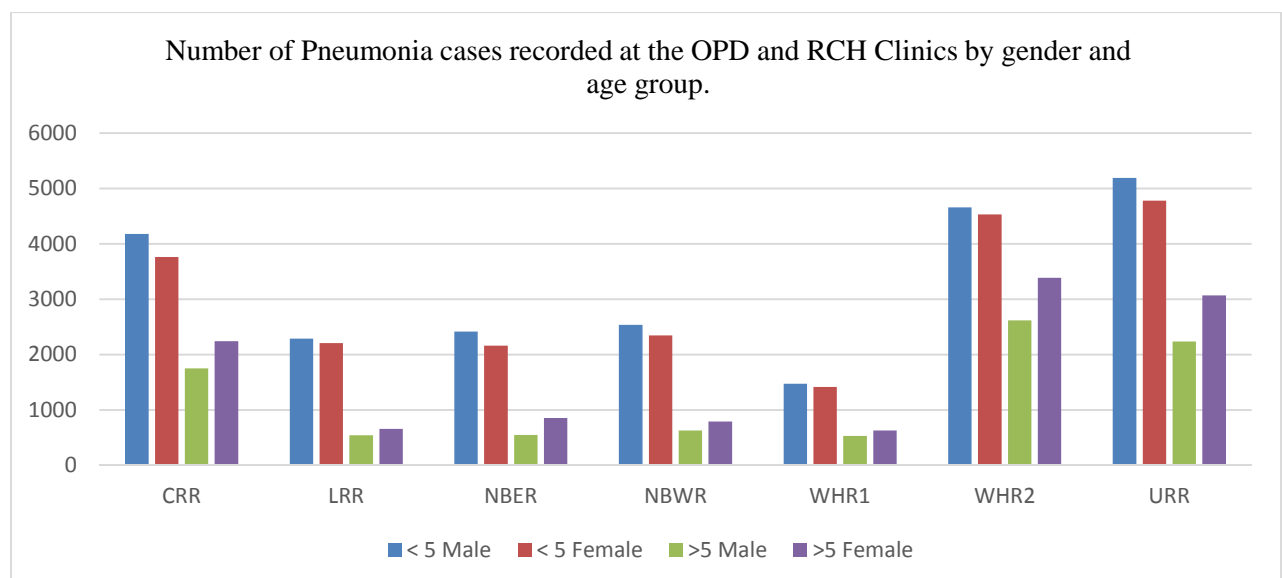
Pneumonia contributes to major leading cause of morbidity and mortality among infant and young children in the Gambia. Out of the total number of OPD recorded cases of pneumonia in the country for children less than five years of age, the highest is recorded in URR of 5188(52.0%) males and 4779(48.0 %) females ; WHR2, 4657(51.0%) males and 4533(59.0%) females and in CRR, 4177(52.6%) males and 3760(47.4) females respectively.

Admission due to severe pneumonia is higher in male children less than 5 years of age in all the health administrative region and the highest is recorded in URR, males 1072 (55.6%) and females 857(44.4%); followed by CRR, male 596(60.9%) and female 383(39.1%).

However, more female children less than five years of age died of severe pneumonia 53(51.0%) compare to male children less than five years of age 51(49.0%). On the other hand, among children less than five years of age more deaths occurred in male 42(51.2 %) than in female 40 (48.8%).

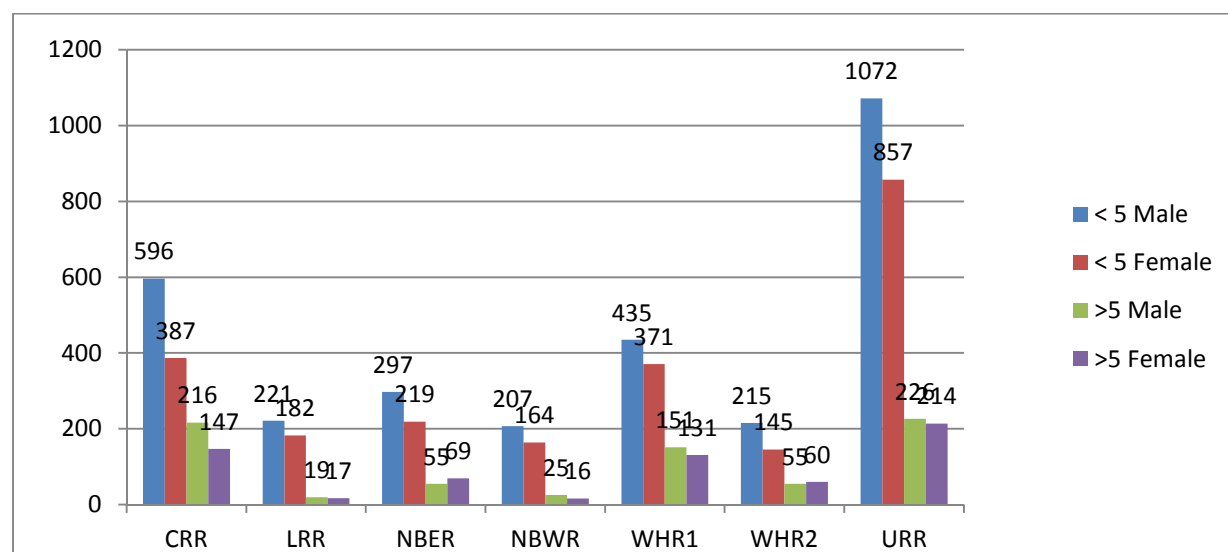
Pneumonia remains the most significant cause of all admission and deaths among children less than five years of age

Figure 31. Number of Pneumonia cases recorded at the OPD and RCH Clinics by gender and age group.



Source: HMIS, 2015

Figure 32. Number of Admission due to Severe Pneumonia recorded by gender and age group



Source: HMIS, 2015

Table 20. Number and percentage of Pneumonia cases recorded at the OPD and RCH Clinics by region

Region	<5		>5		Total	Percentage
	Male	Female	Male	Female		
CRR	4177	3760	1754	2242	11933	18.5
LRR	2288	2209	547	663	5707	8.9
NBER	2419	2161	550	854	5984	9.3
NBWR	2540	2348	633	793	6314	9.8
WHR1	1476	1416	534	632	4058	6.3
WHR2	4657	4533	2618	3389	15197	23.6
URR	5188	4779	2236	3067	15270	23.7
National	22745	21206	8872	11640	64463	100.0

Source: HMIS, 2015

Table 21. Number and percentage of Admission due to Severe Pneumonia recorded at the health facilities by region

Region	< 5		>5		Total	Percentage
	Male	Female	Male	Female		
CRR	596	387	216	147	1346	19.9
LRR	221	182	19	17	439	6.5
NBER	297	219	55	69	640	9.5
NBWR	207	164	25	16	412	6.1
WHR1	435	371	151	131	1088	16.1
WHR2	215	145	55	60	475	7.0
URR	1072	857	226	214	2369	35.0
National	3043	2325	747	654	6769	100.0

Source: HMIS, 2015

Table 22. Number and percentage of Deaths due to Severe Pneumonia recorded at the health facilities by region

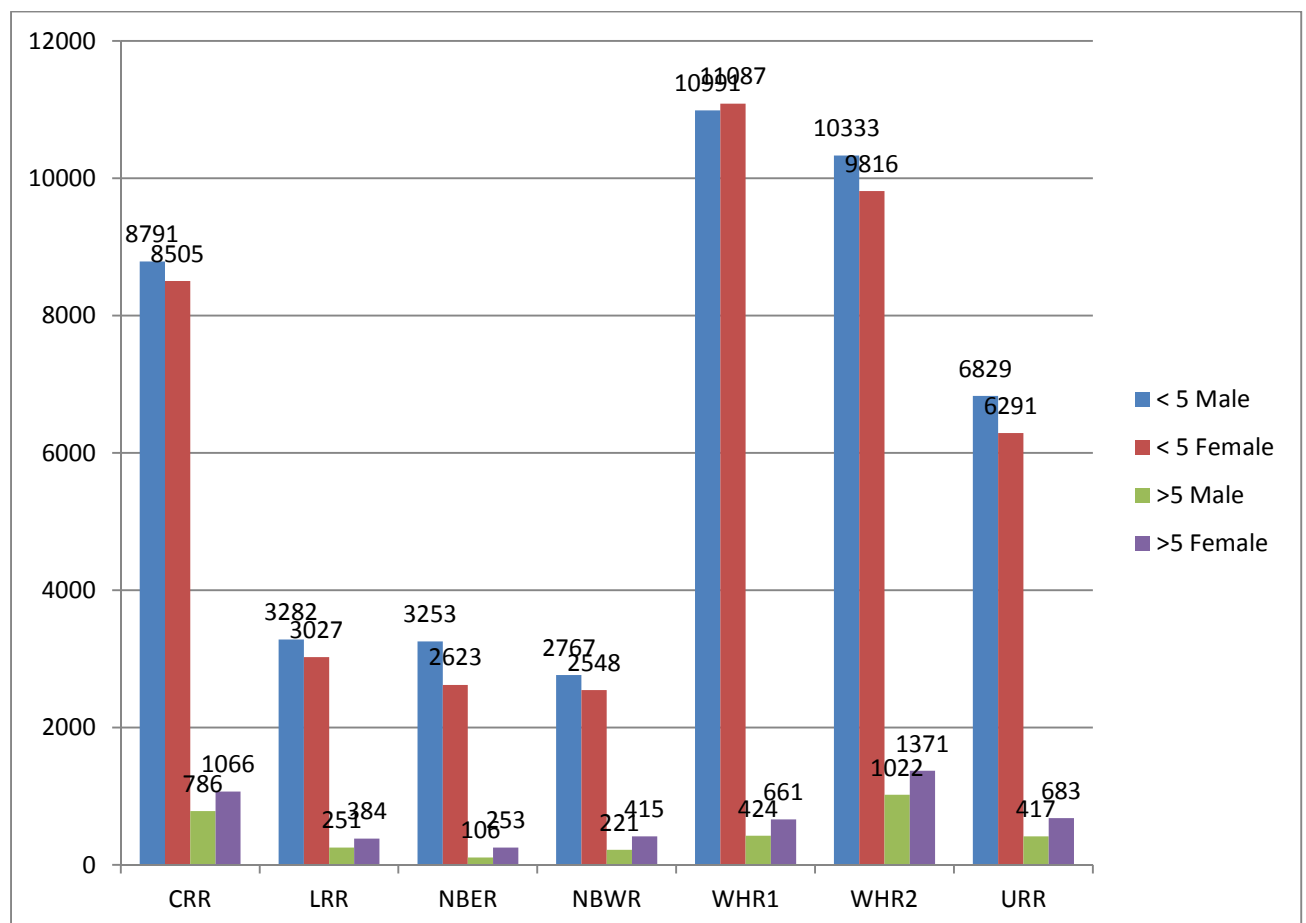
Region	< 5		> 5		Total	Percentage
	Male	Female	Male	Female		
CRR	7	7	12	8	34	18
LRR	7	4	0	0	11	6
NBER	7	11	5	6	29	16
NBWR	2	4	3	3	12	6
WHR1	9	8	10	10	37	20
WHR2	4	8	5	9	26	14
URR	15	11	7	4	37	20
National	51	53	42	40	186	100

Source: HMIS, 2015

Diarrhoeal Diseases

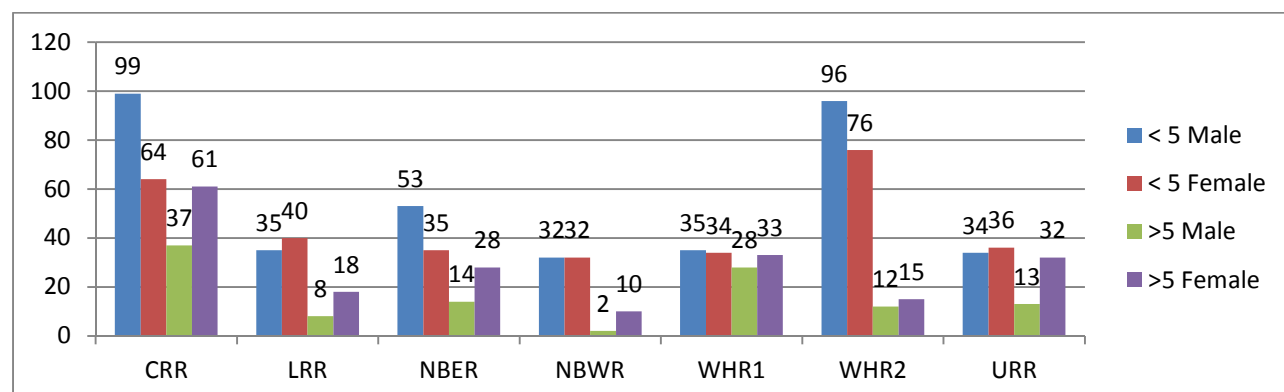
Diarrheal diseases thought highly preventable still account for a major disease burden among children in the country. In 2015 like pneumonia, more male children are seen in OPD and RCH clinics with diarrheal diseases than female, where as female children more than five years of age were more seen with diarrheal diseases 4833(50.0%) than their male counter part 3227 (40.0%). Diarrhea with severe dehydration is the fourth leading cause of under fives' admission 1071(11.4%) and death 35 (11.1%) in 2015. Again, in terms of gender difference in admission and death among under five, more males children were admitted 280 (57.7%) and died 18(51.4%) than female children admitted 205 (42.3%) and died 17(48.6%).

Figure 33. Number of Diarrhoeal Diseases recorded at the OPD and RCH Clinics by gender and age group.



Source: HMIS, 2015

Figure 34. Number of Admission due to Severe Diarrhoeal Disease recorded by gender and age group.



Source: HMIS, 2015

Table 23. Number and percentage of Diarrhoeal Disease cases recorded at the OPD and RCH Clinics by region

Region	< 5		>5		Total	Percentage
	Male	Female	Male	Female		
CRR	8791	8505	786	1066	19148	19.5
LRR	3282	3027	251	384	6944	7.1
NBER	3253	2623	106	253	6235	6.3
NBWR	2767	2548	221	415	5951	6.1
WHR1	10991	11087	424	661	23163	23.6
WHR2	10333	9816	1022	1371	22542	23.0
URR	6829	6291	417	683	14220	14.5
National	46246	43897	3227	4833	98203	100.0

Source: HMIS, 2015

Table 24. Number and percentage of Admission due to Severe Diarrhoeal Disease recorded at the health facilities by region

Region	<5		>5		Total	Percentage
	Male	Female	Male	Female		
CRR	99	64	37	61	261	25.8
LRR	35	40	8	18	101	10.0
NBER	53	35	14	28	130	12.8
NBWR	32	32	2	10	76	7.5
WHR1	35	34	28	33	130	12.8
WHR2	96	76	12	15	199	19.7
URR	34	36	13	32	115	11.4
National	384	317	114	197	1012	100.0

Source: HMIS, 2015

Table 24. Number and percentage of Deaths due to Severe Diarrhoeal Disease recorded at the health facilities by region

Region	<5		>5		Total	Percentage
	Male	Female	Male	Female		
CRR	7	3	2	0	12	22.2
LRR	5	5	0	2	12	22.2
NBER	3	2	1	1	7	13.0
NBWR	1	1	0	0	2	3.7
WHR1	4	2	1	0	7	13.0
WHR2	3	7	0	0	10	18.5
URR	1	0	0	3	4	7.4
National	24	20	4	6	54	100.0

Source: HMIS, 2015

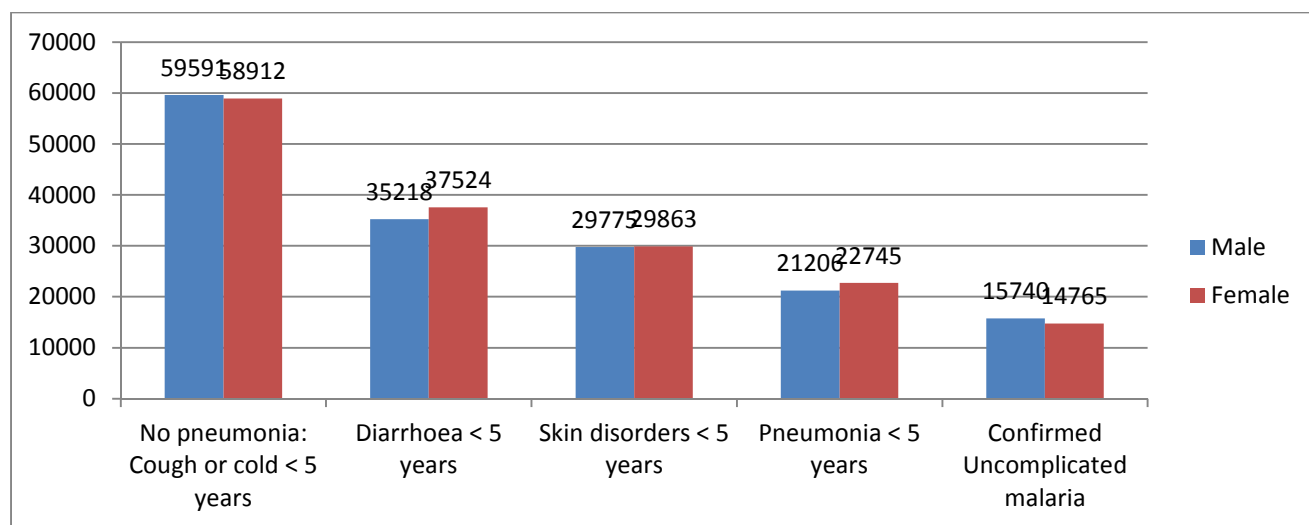
IMNCI

In 2015, three hundred and eighty five thousand, five hundred and fifty four less than five years of age cases were recorded at the RCH and OPD services. Out of the number, 49.9% were male and 50.1% female.

Nine thousand, three hundred and eighty four children less than five years of age were admitted, male accounting for 55.9% and female 44.1%.

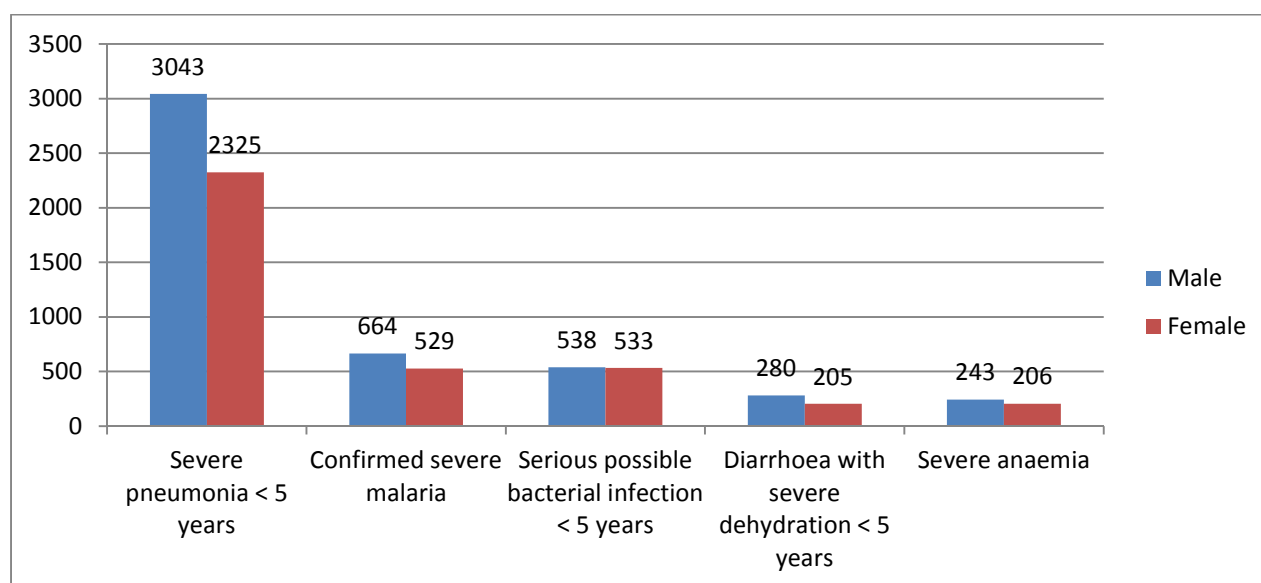
Out of the total number of children under five admitted, three hundred and sixteen children died. Male representing 50.3% and female 49.7% of the death.

Figure 35. Five leading causes of under five years of age morbidity in 2015



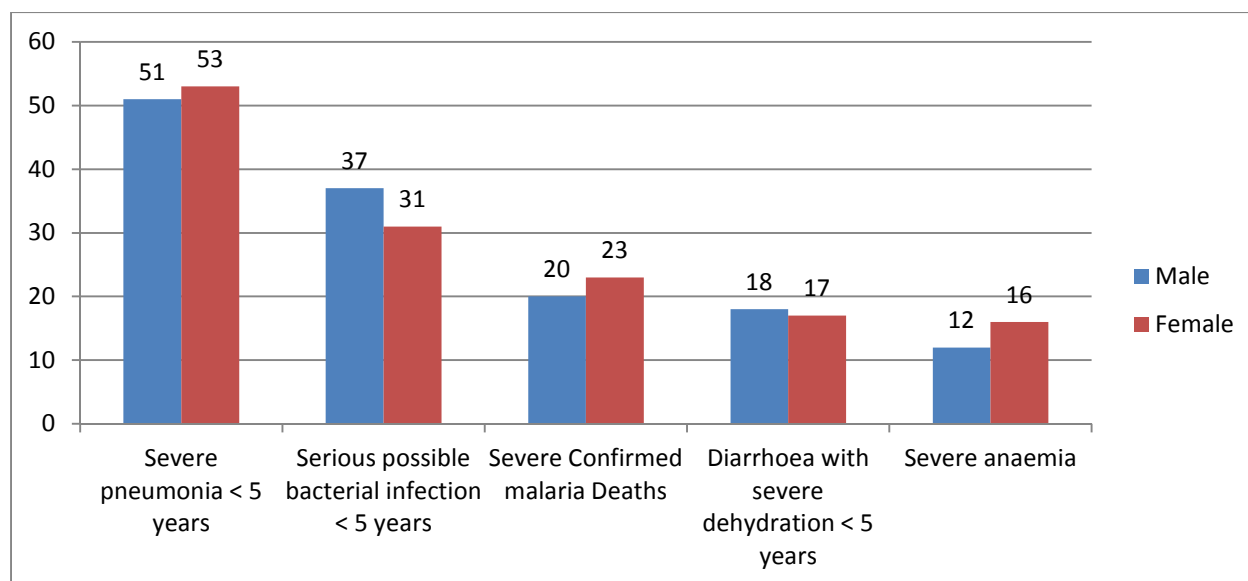
Source: HMIS, 2015

Figure 36. Five leading causes of under five years of age admissions in 2015



Source: HMIS, 2015

Figure 37. Five leading causes of under five years of age Deaths recorded in the health facilities in 2015.



Source: HMIS, 2015

Table 26. Leading causes of under five years of age morbidity in 2015 (RCH and OPD cases)

OPD	Male	Female	Total	Percentage
No pneumonia: Cough or cold < 5 years	59591	58912	118503	30.7
Diarrhoea < 5 years	35218	37524	72742	18.9
Skin disorders < 5 years	29775	29863	59638	15.5
Pneumonia < 5 years	21206	22745	43951	11.4
Confirmed Uncomplicated malaria	15740	14765	30505	7.9
Serious possible bacterial infection < 5 years	5960	5698	11658	3.0
Diarrhoea with blood/mucus (Dysentery) < 5 years	4899	5056	9955	2.6
Anaemia < 5 years	4087	3995	8082	2.1
Acute ear infection < 5 years	3223	3602	6825	1.8
Eye infection < 5 years	3240	3326	6566	1.7
Diarrhoea with some dehydration < 5 years	2373	2396	4769	1.2
Moderate acute Malnutrition < 5 years	2022	1573	3595	0.9
Persisten diarrhoea < 5 years	1407	1270	2677	0.7
Chronic ear infection < 5 years	824	781	1605	0.4
Neonatal syphilis < 5 years	771	809	1580	0.4
Measles with eye or mouth complications < 5 years	551	561	1112	0.3
Severe acute malnutrition < 5 years	951	27	978	0.3
Low weight with anaemia < 5 years	410	403	813	0.2
Total	192248	193306	385554	100.0

Source: HMIS, 2015

Table 27. Leading causes of under five years of age admissions in 2015.

Admission	Male	Female	Total	Percentage
Severe pneumonia < 5 years	3043	2325	5368	57.2
Confirmed severe malaria	664	529	1193	12.7
Serious possible bacterial infection < 5 years	538	533	1071	11.4
Diarrhoea with severe dehydration < 5 years	280	205	485	5.2
Severe anaemia	243	206	449	4.8
Skin disorders < 5 years	114	73	187	2.0
Severe malnutrition with anaemia < 5 years	104	76	180	1.9
Severe persistent diarrhoea < 5 years	75	69	144	1.5
Anaemia < 5 years	64	45	109	1.2
Diarrhoea with blood/mucus (Dysentery) < 5 years	40	32	72	0.8
Measles with eye or mouth complications < 5 years	33	23	56	0.6
Low weight with anaemia < 5 years	19	11	30	0.3
Eye infection < 5 years	7	10	17	0.2
Acute ear infection < 5 years	7	1	8	0.1
Chronic ear infection < 5 years	4	3	7	0.1
Severe acute malnutrition < 5 years	3	1	4	0.04
Neonatal syphilis < 5 years	3	1	4	0.04
Total	5241	4143	9384	100.0

Source: HMIS, 2015

Table 28. Leading causes of under five years of age Deaths recorded in the health facilities in 2015.

Deaths	Male	Female	Total	Percentage
Severe pneumonia < 5 years	51	53	104	32.9
Serious possible bacterial infection < 5 years	37	31	68	21.5
Severe Confirmed malaria Deaths	20	23	43	13.6
Diarrhoea with severe dehydration < 5 years	18	17	35	11.1
Severe anaemia	12	16	28	8.8
Severe malnutrition with anaemia < 5 years	10	10	20	6.3
Diarrhoea with blood/mucus (Dysentery) < 5 years	3	3	6	1.9
Low weight with anaemia < 5 years	2	1	3	0.9
Severe persistent diarrhoea < 5 years	3		3	0.9
Skin disorders < 5 years	1	2	3	0.9
Measles with eye or mouth complications < 5 years	1	1	2	0.6
Severe acute malnutrition < 5 years	1	0	1	0.3
Total	159	157	316	100.0

Source: HMIS, 2015

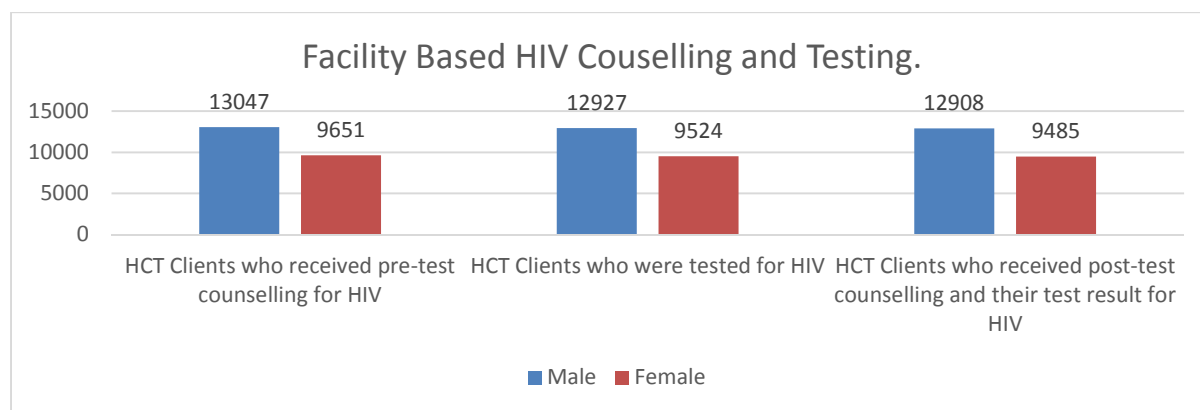
Sexually Transmitted Infections

Table 29. Number of STI reported by health facilities in 2015

	OPD		Inpatient		Deaths	
	Male	Female	Male	Female	Male	Female
Urethral discharge	4678	0	93	0	7	0
Vaginal discharge	0	15415	0	227	0	9
Lower abdominal pain in pregnancy	0	15918	0	185	0	17
Lower Abdominal Pain In NON-Pregnant Woman	0	716	0	29	0	0
Genital ulcer	344	647	14	2	1	0
Other sexually transmitted infections	2295	4471	58	82	10	1

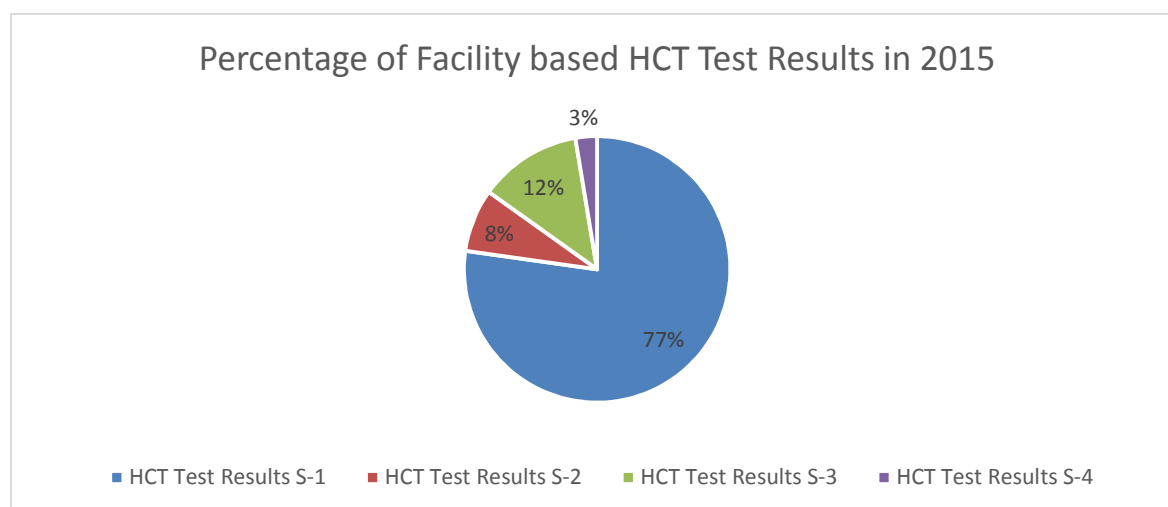
Source: HMIS, 2015

Figure 38. Number of Facility based HCT Counselling and Testing in 2015.



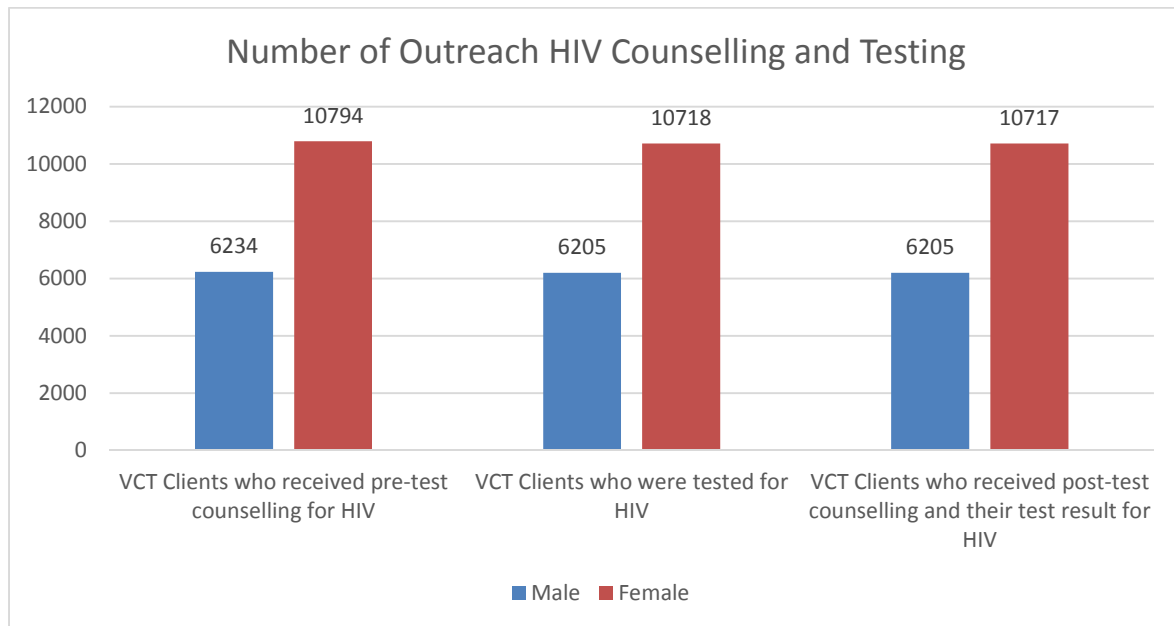
Source: HMIS, 2015

Figure 39. Percentage of Facility Based HCT Test Results in 2015



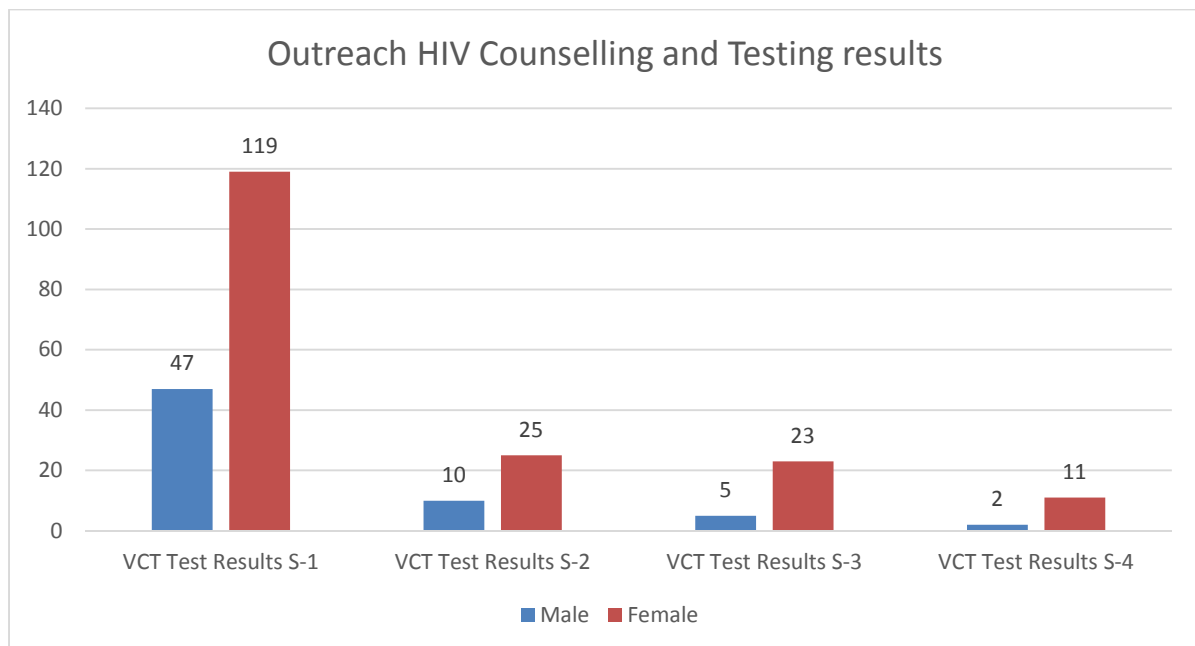
Source: HMIS, 2015

Figure 40. Number of Outreach HCT Counselling and Testing in 2015.



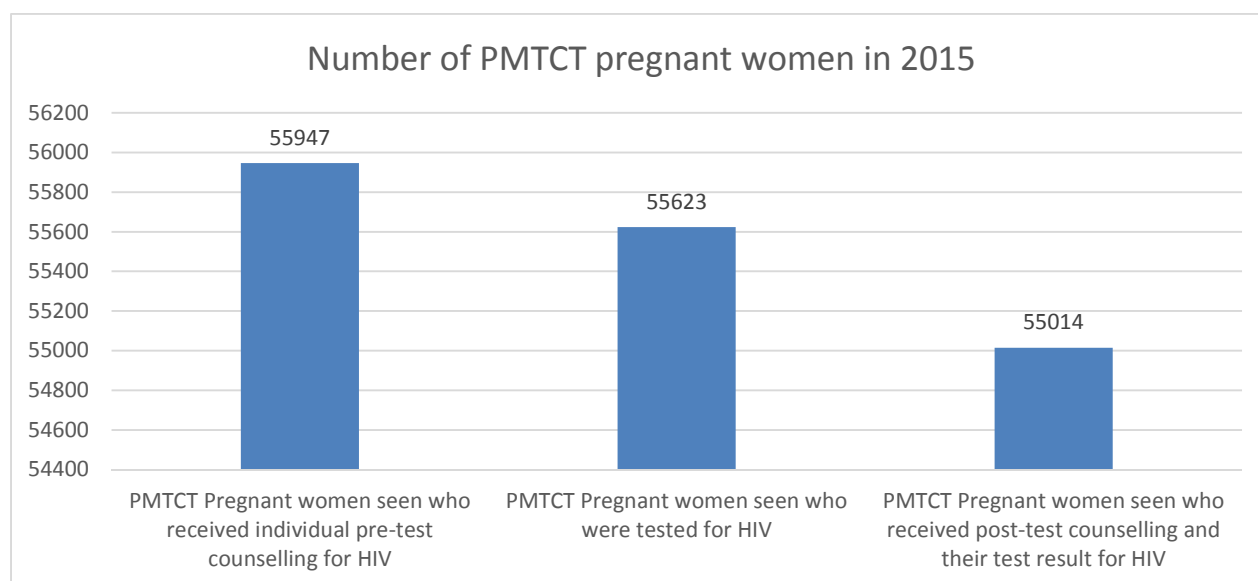
Source: HMIS, 2015

Figure 41. Number of Outreach HCT Test Results in 2015



Source: HMIS, 2015

Figure 42. Number of PMTCT facility based and outreach pregnant women in 2015



Source: HMIS, 2015

Table 30. NAS Indicators in 2015

Number of adults and children currently receiving antiretroviral therapy among all adults and children living with HIV	5022(25%)
< 15	438
15+	4584
Male	1418
Female	3604
Number and percentage of women and men aged 15+ who received an HIV test and know their results	45148(4.6%)
Number and percentage of pregnant women who know their HIV status	59608(59.3%)
PMTCT pregnant women who received triple combination therapy for the first time	743
Number of infants born to HIV positive mothers who were tested at 18 months	75
Number of infants born to HIV positive mothers tested positive for HIV	25
Number of infants born to HIV positive mothers aged 2 months who received Cotrimoxazole prophylaxis this month	464

NAS, 2015

Non-communicable diseases, major conditions

In 2015, one hundred and eighty three thousand, three and fifty five episodes of non-communicable diseases were recorded in the RCH and outpatient department. 38.0% of the patients were male as compared to 62.0% female. WHR1 accounted for 29.8% of the patients, followed by CRR 23.7%, URR 15.9%, WHR2 14.9%, LRR and NBER 5.3% each and NBWR 5.1%.

Hypertension accounted for 35.5% of all the non-communicable diseases episodes, followed by Diabetes 8.1%, Asthma 5.4%, other non-communicable diseases 48.7%, Cardiac disorder 0.8%, and Sickle cell 0.7%

Table 31. Number of non-communicable diseases episodes recorded by the health facilities in 2015

	National		CRR		LRR		NBER	
	Male	Female	Male	Female	Male	Female	Male	Female
Hypertension	2912	6346	3686	6521	1903	3835	1798	3471
Diabetes	561	1051	513	647	267	279	305	262
Renal failure	10	18	13	5	3	3	8	1
Cardiac disorder	112	111	76	59	85	77	34	39
Liver Cancer (liver/Hep)	15	28	97	67	1	1	10	8
Women screen for cervical cancer	0	103	0	2	0	1	0	0
Cervical Cancer	0	10	0	4	0	1	0	0
Women manage for cervical cancer	0	90	0	2	0	0	0	0
Breast Cancer	0	0	0	0	0	0	0	0
Prostrate Cancer	0	0	0	0	0	0	0	0
Lung Cancer	6	10	5	2	0	0	0	0
Other Cancer	0	3	0	0	0	0	2	3
Sickle cell	118	162	43	67	101	112	16	21
Asthma	550	628	762	751	289	318	337	543
Other non-communicable diseases	4013	6715	11626	18570	1024	1385	1040	1483
Total Episodes	8297	15275	16821	26697	3673	6012	3550	5831

Source: HMIS, 2015

Table 32. Number of non-communicable diseases episodes recorded by the health facilities in 2015

	NBWR		WHR1		WHR2		URR	
	Male	Female	Male	Female	Male	Female	Male	Female
Hypertension	1106	2735	6645	13055	4449	8340	2358	5177
Diabetes	316	451	3802	6190	559	766	183	327
Renal failure	1	2	57	56	17	16	0	1
Cardiac disorder	15	7	311	474	147	116	24	37
Liver Cancer (liver/Hep)	1	0	49	82	4	0	0	0
Women screen for cervical cancer	0	0	0	699	0	31	0	0
Cervical Cancer	0	2	0	54	0	6	0	0
Women manage for cervical cancer	0	0	0	82	0	4	0	0
Breast Cancer	0	1	0	0	0	1	0	3
Prostrate Cancer	0	0	0	27	0	0	0	0
Lung Cancer	1	5	9	0	0	1	0	0
Other Cancer	0	0	11	7	4	5	0	0
Sickle cell	17	25	272	341	99	128	20	20
Asthma	187	321	1438	1720	904	990	535	749
Other non-communicable diseases	1939	2565	7833	11342	4535	6258	7747	11957
Total Episodes	3583	6114	20427	34129	10718	16662	10867	18271

Source: HMIS, 2015

Accidents

Table 33. Number of accidents patients recorded in 2015 by the health facilities

	OPD cases		Inpatient cases		Inpatient death	
	Male	Female	Male	Female	Male	Female
Road traffic Crashes	387	227	21	4	2	0
Other injuries	2211	1324	10	5	1	0
Dog bites	90	67	0	1	0	0
Snake bites	25	18	1	4	0	0
Other bites	127	151	0	0	0	0
Fracture	32	12	4	2	0	0
Fall from height	214	132	1	0	1	0
Ingestion of harmful substances	35	43	0	2	0	0
Burns	265	216	18	10	0	0
Drowned	5	4	0	0	0	0

Source: HMIS, 2015

Eye Conditions

Table 34. Number of eye conditions recorded by health facilities in 2015.

	RCH & OPD		Inpatients	
	Male	Female	Male	Female
Cataracts	518	503	89	103
Trachoma	12	24	3	4
Conjunctivitis	2152	2170	157	315
Ophthalmia neonatium	33	37	0	0
Glaucoma	88	39	4	0
Refractive error	109	140	0	0
Other eye conditions	958	1129	26	12

Source: HMIS, 2015

Oral Disorders

Table 35. Number of oral disorders recorded by the health facilities in 2015

	RCH & OPD		Inpatient	
	Male	Female	Male	Female
Toothache	1281	1706	0	0
Oral thrust/ulcer	624	930	0	0
Gingivitis	213	171	0	0
Dental abcess	520	575	8	3
Other oral disorders	808	1102	0	0

Source: HMIS, 2015

Mental Disorders

Table 36. Number of mental disorders recorded by the health facilities in 2015

	Outpatient cases		Inpatient cases	
	Male	Female	Male	Female
Mania	3	8	0	0
Depression	21	54	0	0
Drug induced psychosis	227	14	0	0
Organic psychosis	60	51	0	0
Epilepsy	387	370	1	0
Schizophrenia	135	102	0	0
Phobia	8	17	0	0
Anxiety disorder	23	39	0	0
Pregnancy related mental disorders	0	5	0	0
Child mental Disorder	0	1	1	0
Malaria related mental disorders	0	0	0	0
Dementia the elderly	3	4	0	0
Other mental disorders	1	1	0	0

Source: HMIS, 2015

Deliveries

Deliveries conducted at Health Facilities

In 2015, the MOHSW has shifted its policy toward deliveries and advocating for all deliveries to be conducted at the health facilities with the assistance of skilled personnel. With the implementation of the MCNHRP, deliveries by skilled personnel are indicators that the project is buying from the implementing health facilities.

Forty-two thousand, two hundred and seventy-two deliveries were recorded in the health facilities. 51.7% were male and 48.3% female. Out of the total deliveries, 94.8% were normal deliveries, 2.1% were CS, 1.6% Breech, 0.6% Vacuum delivery and 0.9% other delivery. 83.2% of the deliveries were live birth more than 2.5Kg, 12.9% were live birth less than 2.5Kg, 1.2% Fresh Still Birth less than 2.5Kg, 0.8% Fresh Still Birth more than 2.5Kg, 1.3% Macerated Still Birth less than 2.5Kg and 0.6% Macerated Still Birth more than 2.5Kg.

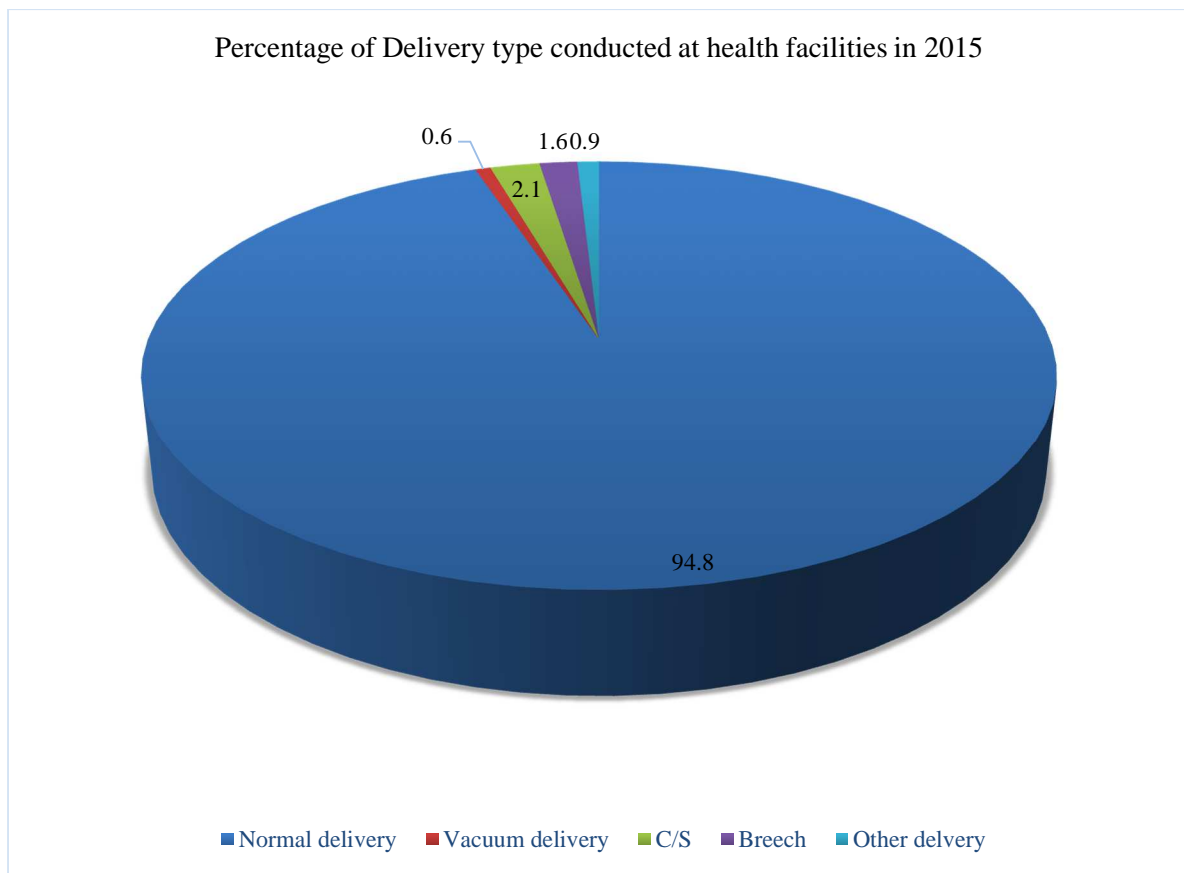
With the deliveries taking place at the health facilities, 83.4% were conducted by skilled personnel whereas, 16.6% were attended by non-skilled personnel. LRR has the highest percentage of deliveries conducted by skilled personnel of 92.3%, followed by URR with 91.8%, NBWR 89.3%, CRR 86.3%, WHR2 83.0%, WHR1 79.2% and NBER 76.2%.

WHR2 has the highest percentage of live birth more than 2.5Kg of 85.2% whereas CRR has the lowest percentage of 78.7%. Similarly, CRR has the highest percentage of live birth less than 2.5Kg of 15.0% while LRR has the lowest percentage of 9.8%.

CRR has the highest fresh stillbirth less than 2.5Kg of 1.9% though NBWR has the lowest of 0.7%. However, URR has the highest fresh still birth rate of 1.4% and WHR1 has the lowest with 0.4%.

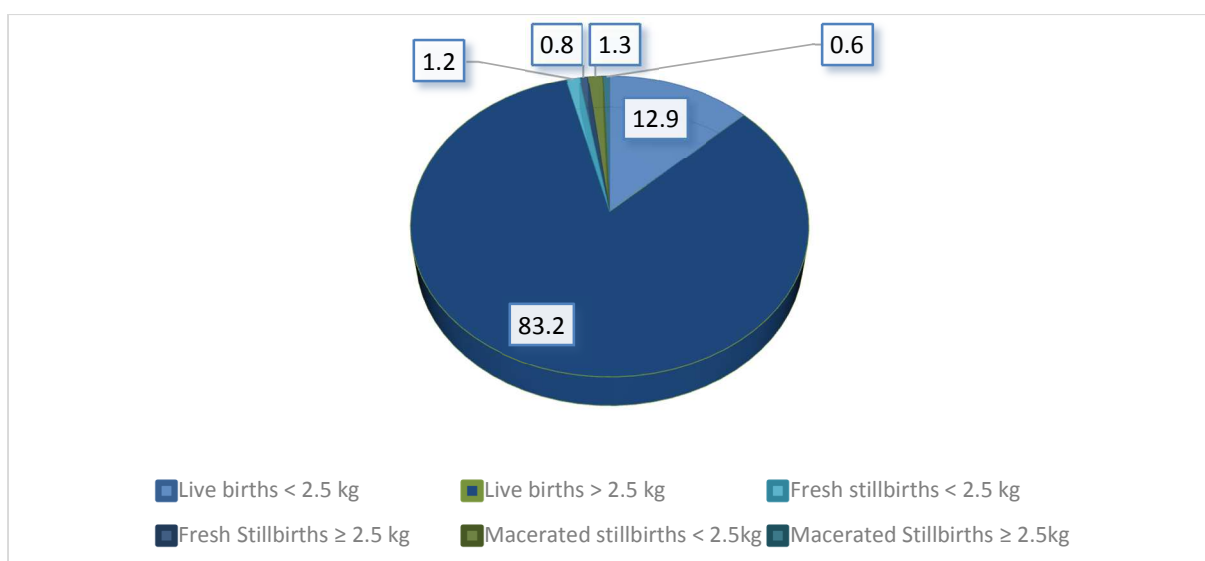
CRR has the highest percentage of Macerated still birth of 2.5% whereas NBER and WHR1 have the lowest percentage of 0.9%. Similarly, NBER has the highest percentage of Macerated still birth more than 2.5Kg of 1.2% while WHR1 has the lowest percentage of 0.4%.

Figure 43. Percentage of Deliveries type conducted at the health facilities in 2015.



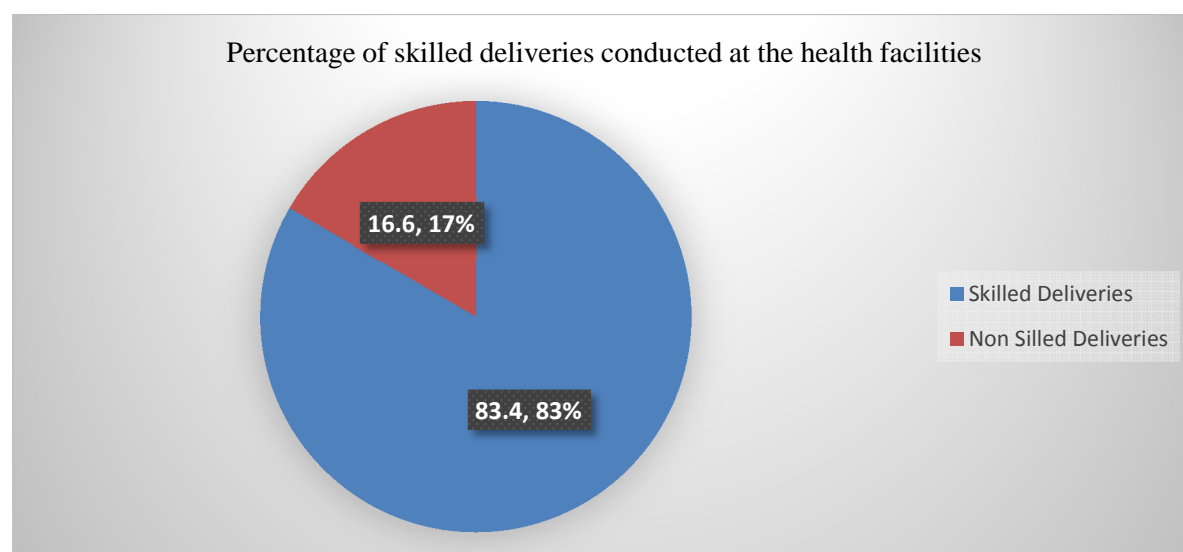
Source: HMIS, 2015

Figure 44. Percentage of Delivery outcomes conducted at the health facilities in 2015



Source: HMIS, 2015

Figure 45. Skilled Deliveries conducted at the health facilities in 2015



Source: HMIS, 2015

Table 37. Number of Deliveries recorded by the health facilities.

Regions	Total deliveries			Skilled deliveries			
	Male	Female	Total	Male	Female	Total	Percentage
CRR	2907	2655	5562	2498	2300	4798	86.3
LRR	805	789	1594	785	686	1471	92.3
NBER	907	780	1687	680	606	1286	76.2
NBWR	1520	1440	2960	1339	1304	2643	89.3
WHR1	9165	8601	17766	6787	7290	14077	79.2
WHR2	3931	3715	7646	3236	3110	6346	83.0
URR	2606	2451	5057	2292	2352	4644	91.8
National	21841	20431	42272	17617	17648	35265	83.4

Source: HMIS, 2015

Table 38. Number and percentage of live births attended by the health facilities.

Regions	Live births < 2.5 kg				Live births > 2.5 kg			
	Male	Female	Total	Percentage	Male	Female	Total	Percentage
CRR	407	428	835	15.0	2323	2057	4380	78.7
LRR	62	94	156	9.8	707	650	1357	85.1
NBER	119	121	240	14.2	743	612	1355	80.3
NBWR	181	216	397	13.4	1286	1164	2450	82.8
WHR1	1115	1140	2255	12.7	7837	7225	15062	84.8
WHR2	371	482	853	11.2	3414	3099	6513	85.2
URR	324	388	712	14.1	2127	1936	4063	80.3
National	2579	2869	5448	12.9	18437	16743	35180	83.2

Source: HMIS, 2015

Table 39. Number and percentage of Fresh stillbirths conducted by the health facilities

Regions	Fresh stillbirths < 2.5 kg				Fresh Stillbirths ≥ 2.5 kg			
	Male	Female	Total	Percentage	Male	Female	Total	Percentage
CRR	54	51	105	1.9	40	32	72	1.3
LRR	13	12	25	1.6	15	6	21	1.3
NBER	18	20	38	2.3	8	9	17	1.0
NBWR	10	12	22	0.7	7	10	17	0.6
WHR1	67	71	138	0.8	44	35	79	0.4
WHR2	48	41	89	1.2	28	26	54	0.7
URR	48	35	83	1.6	42	29	71	1.4
National	258	242	500	1.2	184	147	331	0.8

Source: HMIS, 2015

Table 40. Number and percentage of Macerated stillbirths attended by the health facilities

Regions	Macerated stillbirths < 2.5kg				Macerated Stillbirths ≥ 2.5kg			
	Male	Female	Total	Percentage	Male	Female	Total	Percentage
CRR	69	70	139	2.5	14	17	31	0.6
LRR	5	12	17	1.1	3	15	18	1.1
NBER	7	9	16	0.9	12	9	21	1.2
NBWR	23	31	54	1.8	13	7	20	0.7
WHR1	73	91	164	0.9	29	39	68	0.4
WHR2	44	48	92	1.2	26	19	45	0.6
URR	41	40	81	1.6	24	23	47	0.9
National	262	301	563	1.3	121	129	250	0.6

Source: HMIS, 2015

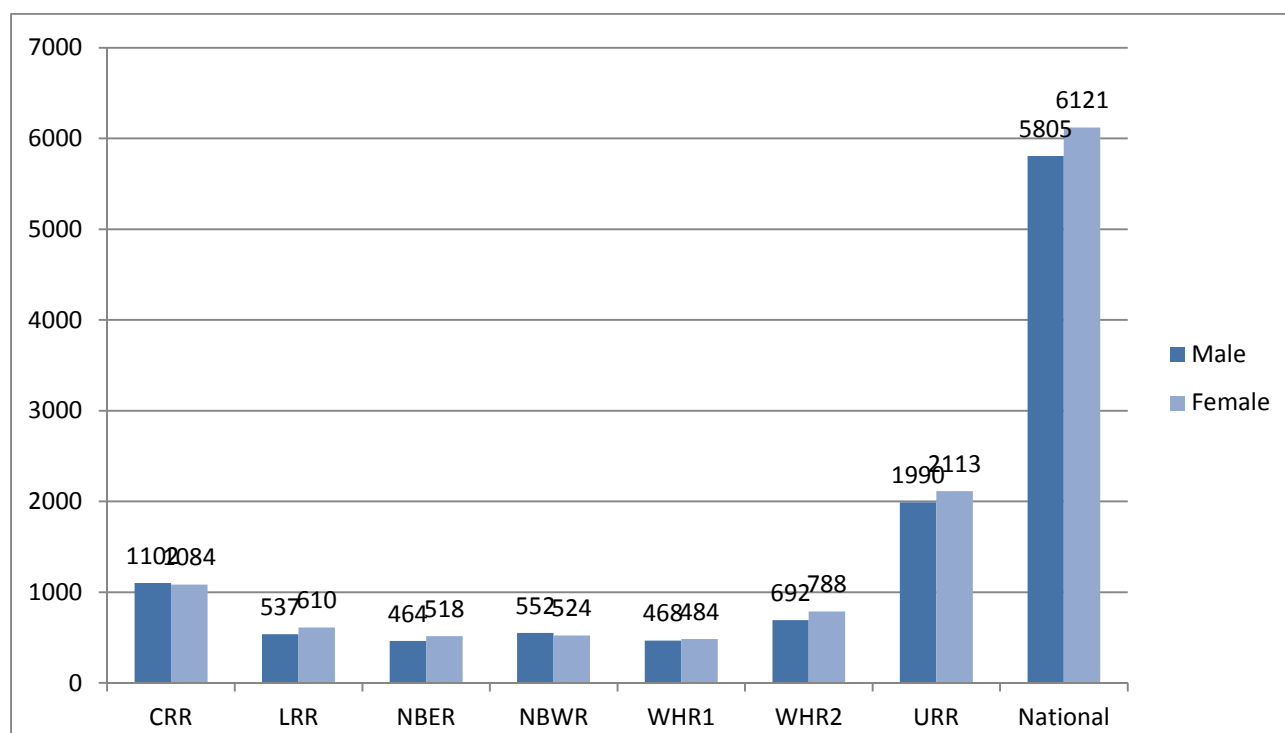
Deliveries conducted at the village Health Services

At the village health services, the traditional birth attendant provides delivery services to the ante natal women in the villages despite the shift of policy by the MOHSW for all deliveries to be attended to by skilled personnel. In 2015, eleven thousand, nine hundred and twenty six live births were conducted by the traditional birth attendants. Male accounted for 48.7% and female 51.3% of the total deliveries.

98.2% of the deliveries outcome at the village health services was live birth as compare to 1.8% still births. Throughout the regions, the outcome of live birth was from 94.4% to 99.3% in the village health services.

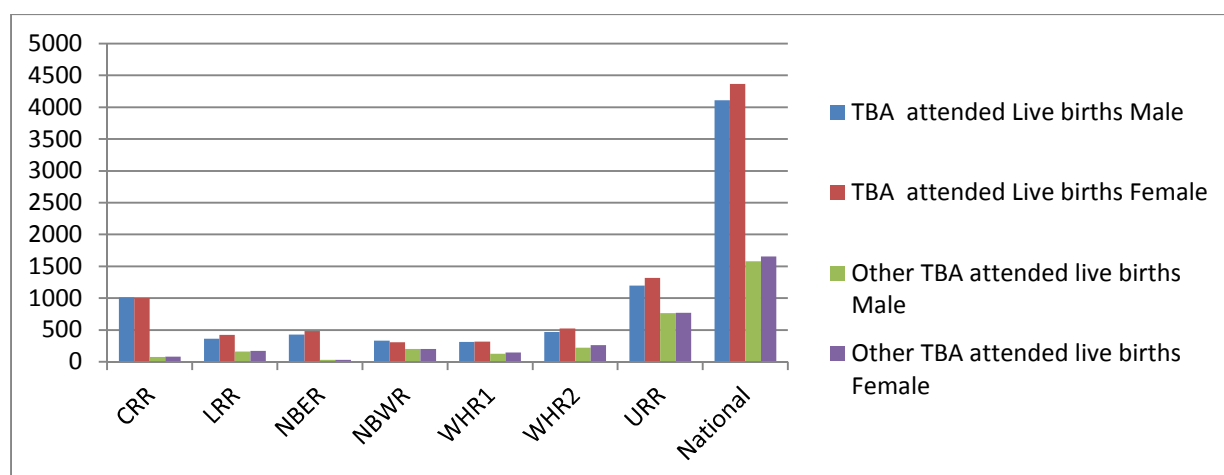
The traditional birth attendants conducted 72.3% of the total births at the village health services as compared to 27.7% by other traditional birth attendants. NBER has the highest percentage of TBA attended deliveries of 93.8% whereas; NBWR has the lowest percentage of 60.8%. Conversely, NBWR has the highest percentage of Other TBA attended deliveries of 39.2% whilst NBER has the lowest percentage of 6.2%

Figure 46. Number of Deliveries conducted by the village health services in 2015



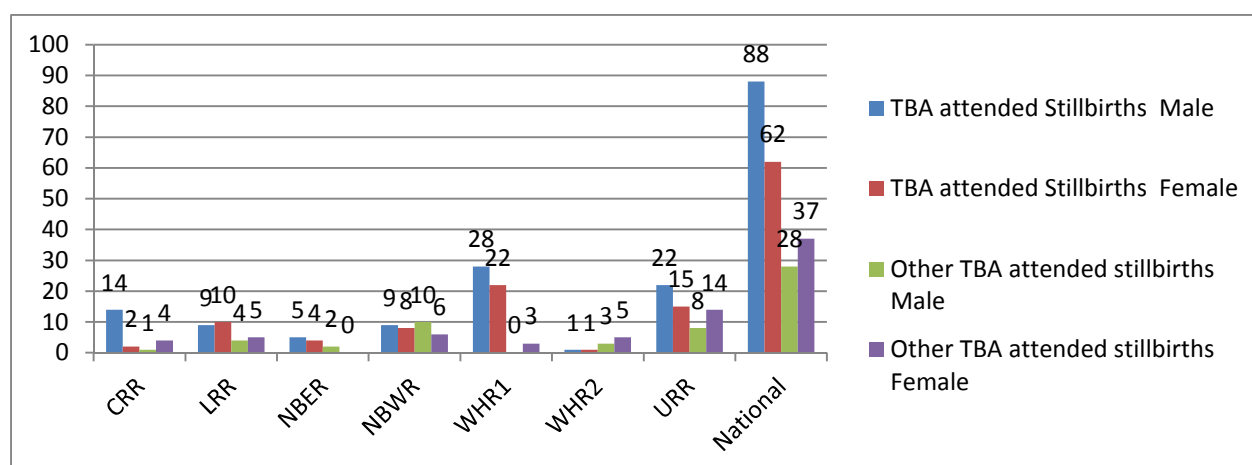
Source: HMIS, 2015

Figure 47. Live birth outcome by sex and attendant



Source: HMIS, 2015

Figure 48. Stillbirth's outcome by sex and attendant



Source: HMIS, 2015

Table 41. Birth outcomes at the village health services.

Region	Live Births		Still Births	
	Number	Percentage	Number	Percentage
CRR	2165	99.0	21	1.0
LRR	1119	97.6	28	2.4
NBER	971	98.9	11	1.1
NBWR	1043	96.9	33	3.1
WHR1	899	94.4	53	5.6
WHR2	1470	99.3	10	0.7
URR	4044	98.6	59	1.4
National	11711	98.2	215	1.8

Source: HMIS, 2015

Table 42. Number of deliveries conducted by TBAs and other TBAs in the communities.

Region	TBA attended deliveries		Other TBA attended deliveries	
	Number	Percentage	Number	Percentage
CRR	2027	92.7	159	7.3
LRR	807	70.4	340	29.6
NBER	921	93.8	61	6.2
NBWR	654	60.8	422	39.2
WHR1	679	71.3	273	28.7
WHR2	990	66.9	490	33.1
URR	2548	62.1	1555	37.9
National	8626	72.3	3300	27.7

Source: HMIS, 2015

Table 43. Number of deliveries conducted by the village health services

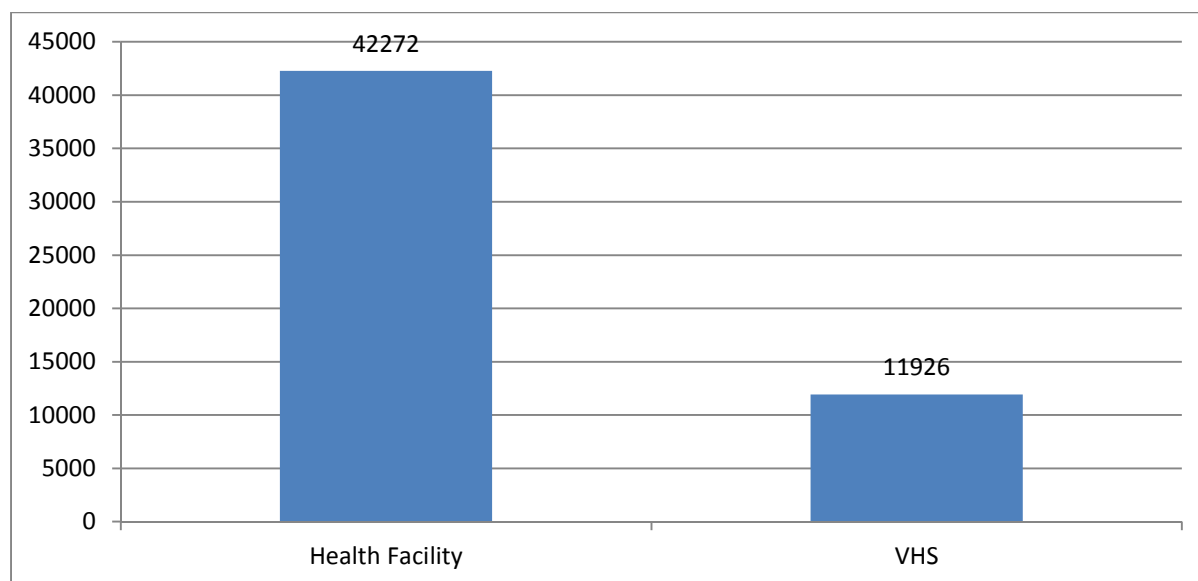
Region	Total Deliveries		TBA attended Live births		Other TBA attended live births		TBA attended Stillbirths		Other TBA attended stillbirths	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
CRR	1102	1084	1012	999	75	79	14	2	1	4
LRR	537	610	364	424	160	171	9	10	4	5
NBER	464	518	428	484	29	30	5	4	2	0
NBWR	552	524	330	307	203	203	9	8	10	6
WHR1	468	484	314	315	126	144	28	22	0	3
WHR2	692	788	466	522	222	260	1	1	3	5
URR	1990	2113	1195	1316	765	768	22	15	8	14
National	5805	6121	4109	4367	1580	1655	88	62	28	37

Source: HMIS, 2015

Total Deliveries Health Facilities and Village Health Services

The total deliveries reported by the health facilities and village health services in 2015 were fifty four thousand, one hundred and ninety eight. Male representing 51.1% whilst female 48.9%. 78.0% of the total deliveries reported in 2015 were institutional deliveries

Figure 49. Number of deliveries by category.



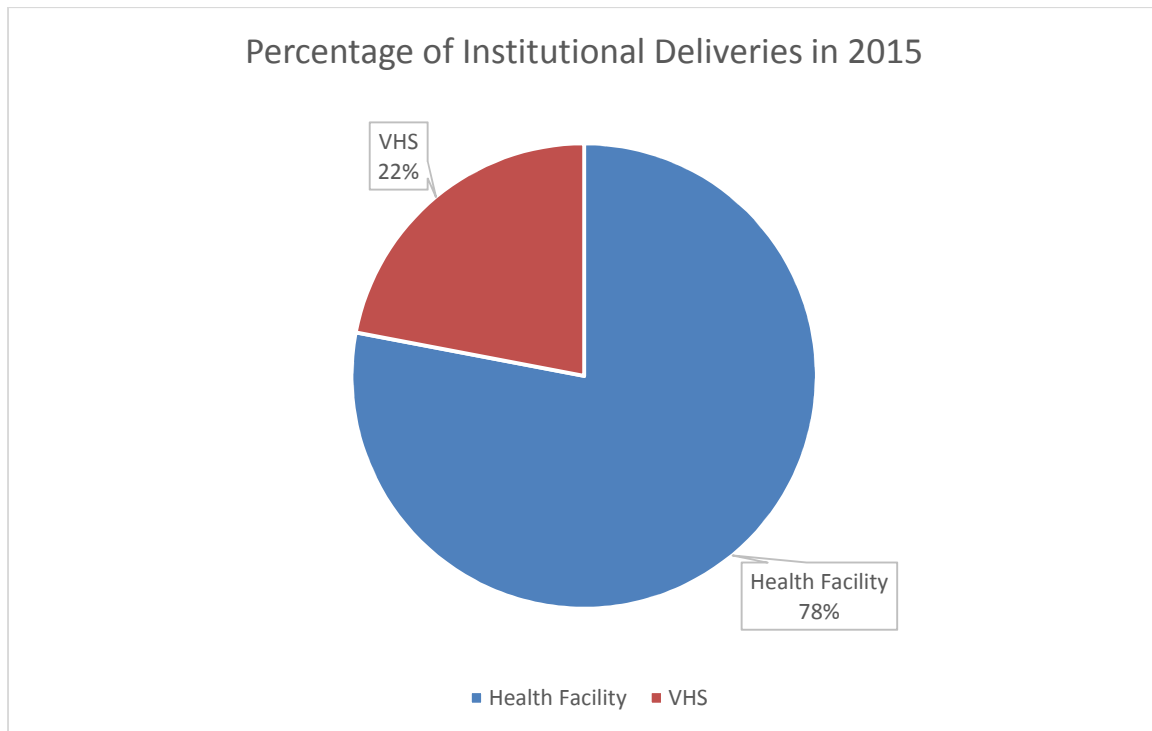
Source: HMIS, 2015

Table 44. Total number of deliveries by region.

Regions	Total deliveries HF&VHS		
	Male	Female	Total
CRR	4009	3739	7748
LRR	1342	1399	2741
NBER	1371	1298	2669
NBWR	2072	1964	4036
WHR1	9633	9085	18718
WHR2	4623	4503	9126
URR	4596	4564	9160
National	27646	26552	54198

Source: HMIS, 2015

Figure 50. Percentage of Institutional Deliveries in 2015



Source: HMIS, 2015

Referral out

In 2015, twelve thousand, eight hundred and forty four patients were referred from a lower level to a higher level of the health care system for appropriate case management.

Table 45. Leading causes of referral out in 2015 by the health facilities.

Disease and conditions	Number of referral out	Percentage
Skin disorders	3470	27.0
Anaemia	672	5.2
Hypertension	667	5.2
Anaemia in Pregnancy	666	5.2
Road Traffic Crashed	614	4.8
Severe Pneumonia	572	4.4
Others NCDs	482	3.7
Severe Malaria	456	3.5
Other Injuries	468	3.6
PIH / Pre-Eclampsia	427	3.3
Delayed or Obstructed Labour	422	3.3
Antepartum Haemorrhage	258	2.0
Neonates referred for complications	256	2.0
Abortion	253	2.0
Eclampsia	206	1.6
FGM/C Complication	167	1.3
Severe malnutrition	142	1.1
Total	10198	79.3

Source: HMIS, 2015

Family Planning Services

In 2015, fifty four thousand, two hundred and nineteen new acceptors of family planning were registered throughout the network of RCH clinics across the country. Out of the new acceptors, condom accounted of 44.5% of the commodities utilized. This was followed by Depo Provera with 24.2%, Microgynon 11.5%, Implanon 7.0%, Jadelle Implant 4.6%, Noristat 2.3% and Norigynon 2.2%.

Eighty one thousand, seven hundred and eighty six revisits were recorded. Emergency Contraceptives (Norlevo) accounted for 35.7% of the revisits, followed by male condom 32.3%, Microgynon 19.7%, Norigynon 3.9%, Noristat 3.6%, Microlut 1.4% and Neogynon 1.0%.

Table 46. Number and percentage of Family Planning (New acceptors and Revisits) in 2015.

Family Planning Method	New acceptors	Percentage	Revisits	Percentage
Microgynon	6232	11.5	16092	19.7
Neogynon	325	0.6	785	1.0
Marvelon	6	0.0	0	0.0
Emergency Contraceptives (Norlevo)	287	0.5	204	0.2
Depo	13105	24.2	29173	35.7
Jadelle implant	2478	4.6	398	0.5
Microlut	567	1.0	1132	1.4
Noristat	1230	2.3	2928	3.6
Male condom	24147	44.5	26454	32.3
Bilateral Tubal Ligation	20	0.0	107	0.1
Vasectomy	87	0.2	0	0.0
Female condom	77	0.1	59	0.1
Foam	200	0.4	0	0.0
IUCD	314	0.6	36	0.0
Implanon	3771	7.0	35	0.0
VSC	53	0.1	41	0.1
Norigynon	1208	2.2	3183	3.9
Other	112	0.2	1159	1.4
New acceptors	54219	100.0		
Current users			81786	100.0

Source: HMIS, 2015

Deaths

Deaths on arrival at the health facility

Table 47. Number of Deaths on arrival at the health facilities recorded in 2015

	Male	Female	Total
Maternal death on arrival	0	6	6
Other deaths on arrival	107	45	152

Source: HMIS, 2015

Brought in dead to health facility

Table 48. Number of Brought in dead to the health facilities recorded in 2015

	Male	Female	Total
Maternal brought in dead	0	31	31
Other brought in dead	273	271	544

Source: HMIS, 2015

Deaths at the health facility

Table 49. Number of Deaths recorded at the health facilities in 2015

	Male	Female	Total
Maternal death at facility	0	48	48
Neonatal death at facility	230	261	491
Infant death at facility	73	77	150
Deaths Child < 5 years	103	104	207
Deaths Child 5-14 years	61	50	111
Deaths Over 14 years	390	363	753

Source: HMIS, 2015

Inspection

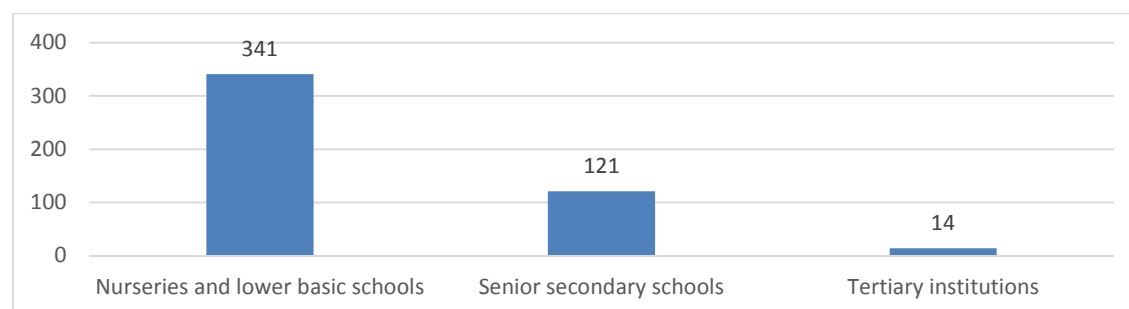
Table 50. Number of premises inspected by the Public Health Officer in 2015

Premises	Number
Food handling and service establishments	2502
Entertainment establishments	160
Residences	3290
Health and other institutions	361
Hotels and boarding houses	110
Inspection public conveniences	303
Building plans	34
Others	208

Source: HMIS, 2015

School Inspection

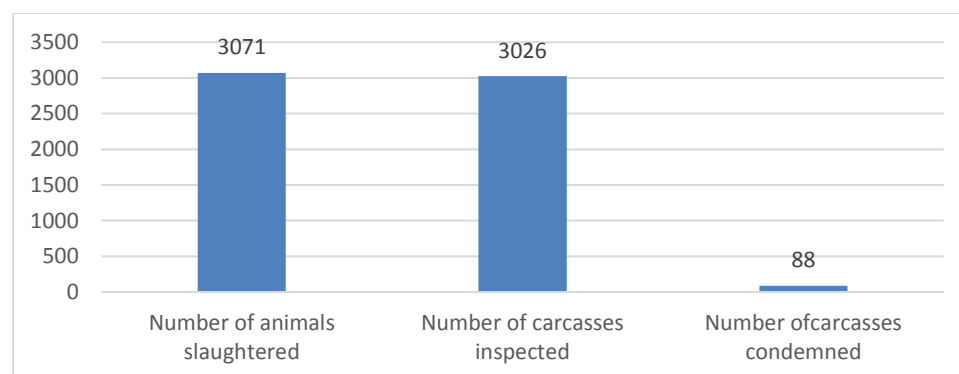
Figure 51. Number of schools inspected by the Public Health Officer in 2015



Source: HMIS, 2015

Meat Inspection

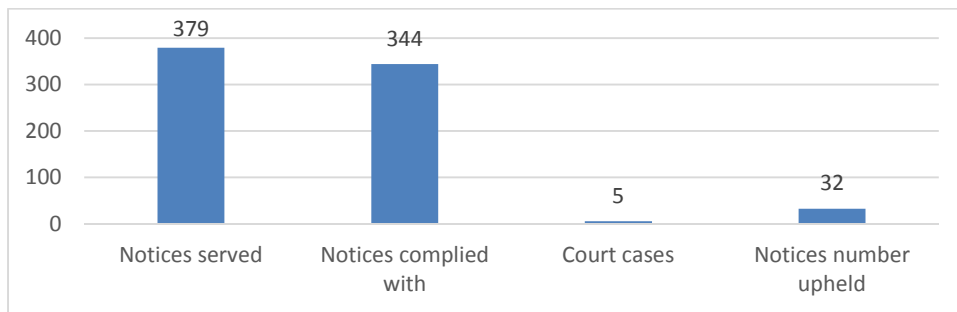
Figure 52. Number of Meat inspection conducted by the Public Health Officer in 2015



Source: HMIS, 2015

Abatement notices

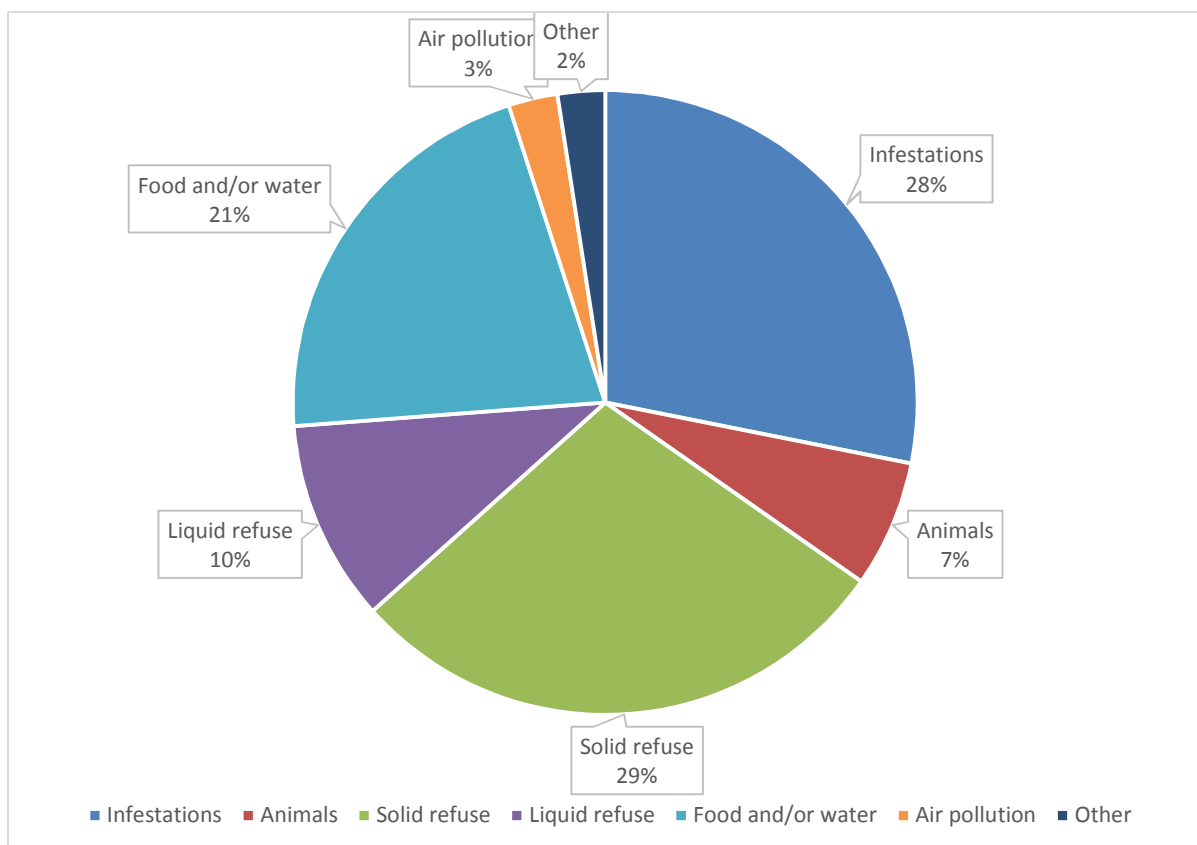
Figure 53. Number of Abatement notices served by the Public Health Officers in 2015



Source: HMIS, 2015

Complaints

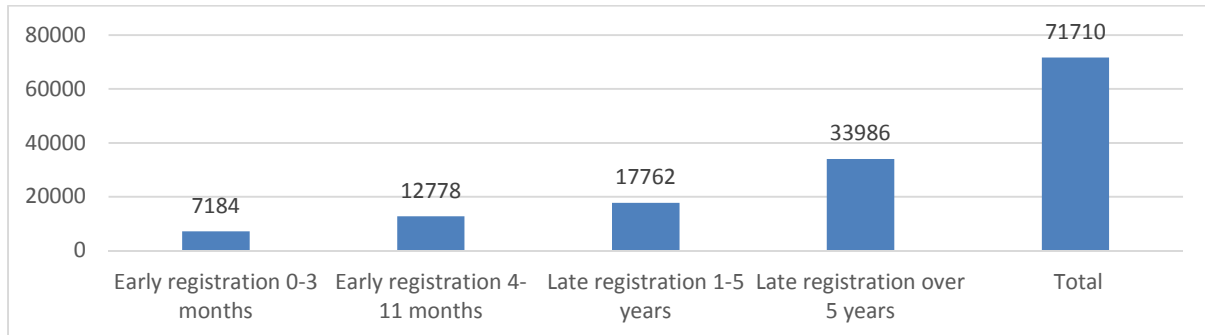
Figure 54. Percentage of complaints recorded by the Public Health Officers in 2015



Source: HMIS, 2015

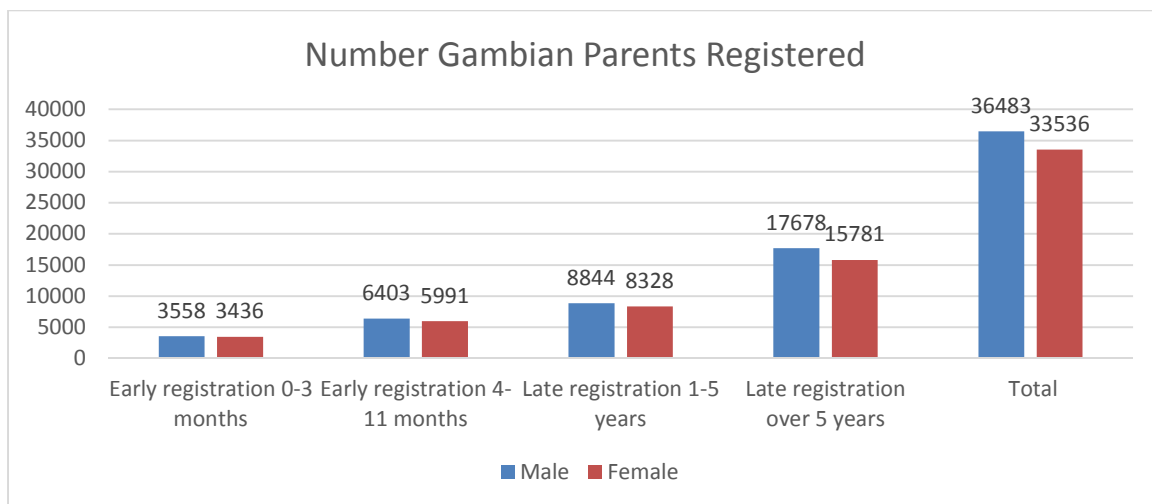
Birth and Death Registration

Figure 55. Number of Births registered at health facilities in 2015



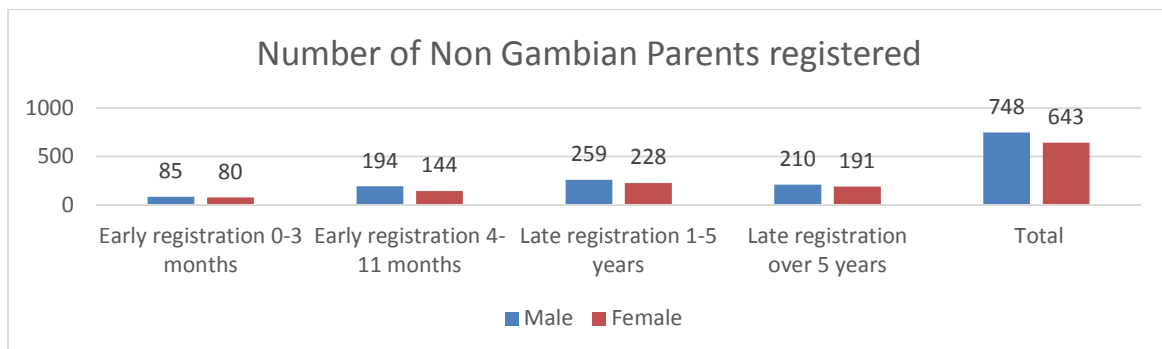
Source: HMIS, 2015

Figure 56. Number of Gambian Parents Birth registered at health facilities in 2015



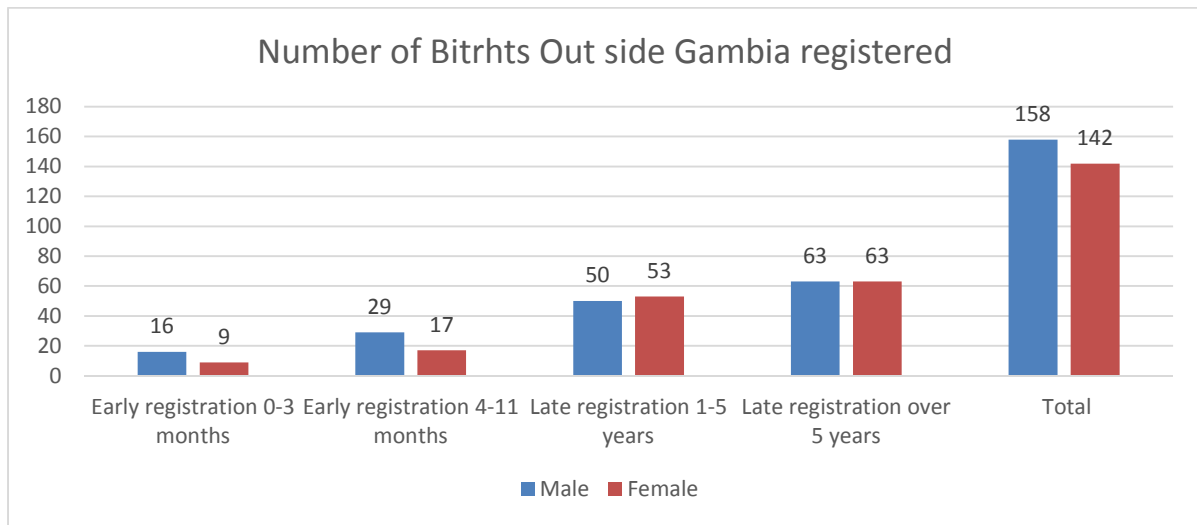
Source: HMIS, 2015

Figure 57. Number of Non-Gambian Parent Births registered at health facilities in 2015



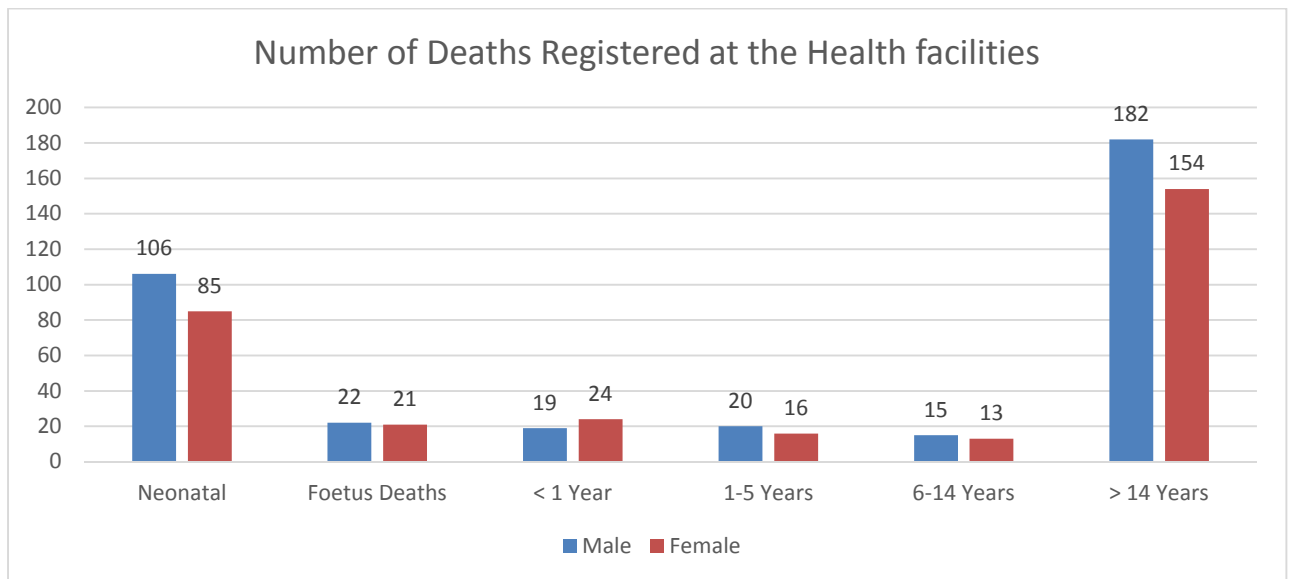
Source: HMIS, 2015

Figure 58. Number of Births outside Gambia registered by the health facilities



Source: HMIS, 2015

Figure 59. Total number of deaths registered at the health facilities in 2015



Source: HMIS, 2015

Laboratory Services

Table 51. Number of laboratory services provided in CRR in 2015

	ANC	< 5 years		> 5 years		Total Tested
	Female	Male	Female	Male	Female	
HB Test	11021	1056	1107	4100	8291	25575
Urinalysis	547	90	115	1106	2425	4283
Blood film	231	1556	1431	2311	4386	9915
Blood film positive	234	930	913	2093	3001	7171
Blood film negative	166	1925	1826	3452	6793	14162
Sickle cell	17	11	16	31	52	127
Sickle cell positive	103	3	9	10	21	146
RPR	143	0	0	187	738	1068
TPHA	0	0	0	4	19	23
Stool microscopy	0	1	23	25	88	137
No. of cases tested for AFB	0	34	27	514	414	989
No. of AFB positive	0	10	1	69	29	109
Blood grouping	428	66	170	609	519	1792
No. blood donation	38	112	19	1026	307	1502
No. blood transfused	390	81	140	151	505	1267

Source: HMIS, 2015

Table 52. Number of laboratory services provided in LRR in 2015

	ANC	< 5 years		> 5 years		Total Tested
	Female	Male	Female	Male	Female	
HB Test	3764	2212	2203	2412	4456	15047
Urinalysis	1144	374	337	834	1744	4433
Blood film	442	227	234	431	738	2072
Blood film positive	200	63	52	123	196	634
Blood film negative	569	1147	1054	1360	2045	6175
Sickle cell	25	100	75	53	82	335
Sickle cell positive	0	7	7	5	1	20
RPR	55	0	0	1	8	64
TPHA	90	1		53	107	251
Stool microscopy	1	123	107	62	187	480
No. of cases tested for AFB	5	1	1	166	232	405
No. of AFB positive	2	0	0	22	27	51
Blood grouping	626	31	25	296	217	1195
No. blood donation	1	0	0	253	27	281
No. blood transfused	96	26	21	51	58	252

Source: HMIS, 2015

Table 53. Number of laboratory services provided in NBER in 2015

	ANC	< 5 years		> 5 years		Total Tested
	Female	Male	Female	Male	Female	
HB Test	6262	2040	1619	3758	4751	18430
Urinalysis	883	11	9	206	967	2076
Blood film	29	131	120	201	304	785
Blood film positive	15	80	63	268	298	724
Blood film negative	31	518	449	1170	1622	3790
Sickle cell	3	7	10	27	33	80
Sickle cell positive	0	5	6	4	7	22
RPR	35	0	0	0	0	35
TPHA	0	00	0	0	0	0
Stool microscopy	9	3	1	15	39	67
No. of cases tested for AFB	10	0	0	203	193	406
No. of AFB positive	0	0	0	21	17	38
Blood grouping	1503	30	13	1037	169	2752
No. blood donation	0	0	0	748	13	761
No. blood transfused	379	49	83	95	156	762

Source: HMIS, 2015

Table 54. Number of laboratory services provided in NBWR in 2015

	ANC	< 5 years		> 5 years		Total Tested
	Female	Male	Female	Male	Female	
HB Test	5298	562	508	1083	2867	10318
Urinalysis	1399	1	1	81	149	1631
Blood film	9	88	84	80	84	345
Blood film positive	4	51	38	70	85	248
Blood film negative	203	196	183	227	235	1044
Sickle cell	872	22	16	68	71	1049
Sickle cell positive	23	0	2	0	3	28
RPR	194	0	0	3	44	241
TPHA	0	0	0	0	1	1
Stool microscopy	0	0	0	26	57	83
No. of cases tested for AFB	0	0	0	14	29	43
No. of AFB positive	0	0	0	1	3	4
Blood grouping	15	13	6	174	253	461
No. blood donation	0	0	0	189	47	236
No. blood transfused	2	8	6	34	116	166

Source: HMIS, 2015

Table 55. Number of laboratory services provided in WHR1 in 2015

	ANC	< 5 years		> 5 years		Total Tested
	Female	Male	Female	Male	Female	
HB Test	30997	24642	26396	55309	83209	220553
Urinalysis	20100	709	733	9650	22664	53856
Blood film	1438	8940	9639	16299	24435	60751
Blood film positive	553	3187	3229	14699	15915	37583
Blood film negative	4644	24630	27099	44271	66802	167446
Sickle cell	5946	266	332	752	958	8254
Sickle cell positive	936	35	29	64	102	1166
RPR	8301	3	21	735	561	9621
TPHA	671	4	5	84	180	944
Stool microscopy	3	55	59	359	340	816
No. of cases tested for AFB	54	0	4	2452	1823	4333
No. of AFB positive	11	0	0	392	174	577
Blood grouping	12083	53	50	2124	3764	18074
No. blood donation	66	0	0	2370	24	2460
No. blood transfused	92	21	15	754	2746	3628

Source: HMIS, 2015

Table 56. Number of laboratory services provided in WHR2 in 2015

	ANC	< 5 years		> 5 years		Total Tested
	Female	Male	Female	Male	Female	
HB Test	11980	8977	11691	14880	23859	71387
Urinalysis	2881	24	21	785	2019	5730
Blood film	336	1066	1106	1578	3471	7557
Blood film positive	125	336	299	768	1272	2800
Blood film negative	746	5024	5698	5101	11173	27742
Sickle cell	174	270	259	389	565	1657
Sickle cell positive	1	3	3	1	2	10
RPR	826	0	139	35	526	1526
TPHA	47	0	0	0	0	47
Stool microscopy	0	1	0	0	0	1
No. of cases tested for AFB	21	16	8	861	902	1808
No. of AFB positive	5	5	2	154	119	285
Blood grouping	2974	39	58	588	690	4349
No. blood donation		428	5	966	113	1512
No. blood transfused	565	36	201	554	524	1880

Source: HMIS, 2015

Table 57. Number of laboratory services provided in URR in 2015

	Female	< 5 years		> 5 years		Total tested
		Male	Female	Male	Female	
HB Test	7341	803	1594	2305	4526	16569
Urinalysis	628	84	269	524	1913	3418
Blood film	0	129	291	190	506	1116
Blood film positive	1	117	27	168	176	489
Blood film negative	7	99	372	763	1355	2596
Sickle cell	104	6	12	36	49	207
Sickle cell positive	1	3	2	16	47	69
RPR	155	6	42	22	180	405
TPHA	0	0	0	3	3	6
Stool microscopy	0	0	3	33	71	107
No. of cases tested for AFB	0	44	29	226	219	518
No. of AFB positive	9	4	5	86	71	175
Blood grouping	92	63	396	242	884	1677
No. blood donation	0	114	23	531	76	744
No. blood transfused	70	75	190	148	476	959

Source: HMIS, 2015

Table 58. Number of laboratory services provided nationally in 2015

	ANC	< 5 years		> 5 years		Total Tested
	Female	Male	Female	Male	Female	
HB Test	76663	40292	45118	83847	131959	377879
Urinalysis	27582	1293	1485	13186	31881	75427
Blood film	2485	12137	12905	21090	33924	82541
Blood film positive	1132	4764	4621	18189	20943	49649
Blood film negative	6366	33539	36681	56344	90025	222955
Sickle cell	7141	682	720	1356	1810	11709
Sickle cell positive	1064	56	58	100	183	1461
RPR	9709	9	202	983	2057	12960
TPHA	808	5	5	144	310	1272
Stool microscopy	13	183	193	520	782	1691
No. of cases tested for AFB	90	95	69	4436	3812	8502
No. of AFB positive	27	19	8	745	440	1239
Blood grouping	17721	295	718	5070	6496	30300
No. blood donation	105	654	47	6083	607	7496
No. blood transfused	1594	296	656	1787	4581	8914

Source: HMIS, 2015

Immunization

Table 59. Projected Population, Monthly Live Births & Surviving Infants 2015

Region	Total Population	Monthly Live Births	Monthly Surviving Infants
CRR	215509	12881	11967
LRR	80707	6088	5615
NBER	84876	5816	5386
NBWR	109458	12559	11644
WHR1	750434	13384	12302
WHR2	318296	4318	4000
URR	223484	86280	79922
National	1,782,764	141,326	130,836

Source: EPI, 2015

Table 60. Number of Children Vaccinated against BCG, Hepatitis B and Polio 0 in 2015

Region	BCG Vaccination	Hepatitis B Vaccination	Polio 0 Vaccination
CRR	13210	12313	11368
LRR	5579	5502	5547
NBER	5682	5633	5632
NBWR	11636	11414	11488
WHR1	12680	13218	13250
WHR2	4043	4025	4037
URR	84902	82885	83802
National	137732	134990	135124

Source: EPI, 2015

Table 61. Number of Children Vaccinated against PENTA 1, Polio 1, PCV1 and Rota 1 in 2015

Region	PENTA 1 Vaccination	Polio 1 Vaccination	PCV1 Vaccination	Rota 1 Vaccination
CRR	11647	11728	11701	11715
LRR	5247	5196	5300	5300
NBER	5326	5207	5166	5200
NBWR	11627	11474	11203	10884
WHR1	12579	12637	12699	12749
WHR2	3918	3786	3893	3928
URR	78826	79130	79241	78541
National	129170	129158	129203	128317

Source: EPI, 2015

Table 62. Number of Children Vaccinated against PENTA 2, Polio 2, PCV2 and Rota 2 in 2015

Region	PENTA 2 Vaccination	POLIO 2 Vaccination	PCV 2 Vaccination	Rota 2 Vaccination
CRR	11517	11499	11787	11649
LRR	5450	5417	5292	5787
NBER	5150	4757	5210	5246
NBWR	11424	11583	11803	11552
WHR1	12765	12270	12667	12654
WHR2	3636	3650	3654	3640
URR	77942	77257	78402	77349
National	127884	126433	128815	127877

Source: EPI, 2015

Table 63. Number of Children Vaccinated against PENTA 3, Polio 3, PCV3 and Rota 3 in 2015

Region	PENTA 3 Vaccination	POLIO 3 Vaccination	PCV 3 Vaccination	ROTA 3 Vaccination
CRR	11673	11426	11512	11503
LRR	5463	5240	5271	5267
NBER	5189	4808	4938	4972
NBWR	11506	11418	11621	11377
WHR1	12271	12213	12522	12160
WHR2	3807	3736	3673	3660
URR	77774	77033	77822	77319
National	127683	125874	127359	126258

Source: EPI, 2015

Table 64. Number of Children Vaccinated against Polio 4, Measle 1, Measle 2 and Yellow Fever in 2015

Region	POLIO 4 Vaccination	Measle 1 Vaccination	Measle 2 Vaccination	Yellow Fever Vaccination
CRR	17026	11585	8836	11880
LRR	4871	5185	4133	5345
NBER	7044	4886	4169	4964
NBWR	11864	10986	8251	11705
WHR1	12545	12408	10816	11463
WHR2	3561	3620	2984	3741
URR	94582	77184	61189	77423
National	151493	125854	100378	126521

Source: EPI, 2015

Table 65. Number and Percentage of Children Vaccinated against IPV and DPT in 2015

Region	IPV Vaccination	DPT Vaccination	IPV Coverage	DPT Coverage
CRR	8327	4185	70%	35%
LRR	4060	2408	72%	43%
NBER	3829	2175	71%	40%
NBWR	8760	3689	75%	32%
WHR1	9438	4246	77%	35%
WHR2	2968	1237	74%	31%
URR	57082	27926	71%	35%
National	94464	45866	72%	35%

Source: EPI, 2015

Antigen coverage in 2015

Table 66. Percentage of BCG, Hepatitis B and Polio 0 Antigen Coverage in 2015

Region	BCG Coverage	Hepatitis B Coverage	Polio 0 Coverage
CRR	103%	96%	95%
LRR	92%	90%	99%
NBER	98%	97%	105%
NBWR	93%	91%	99%
WHR1	95%	99%	108%
WHR2	94%	93%	101%
URR	98%	96%	105%
National	97%	96%	103%

Source: EPI, 2015

Table 67. Percentage of PENTA 1, Polio 1, PCV1 and Rota 1 Antigen Coverage in 2015

Regions	PENTA 1 Coverage	POLIO 1 Coverage	PCV 1 Coverage	Rota 1 Coverage
CRR	97%	98%	98%	98%
LRR	93%	93%	94%	94%
NBER	99%	97%	96%	97%
NBWR	100%	99%	96%	93%
WHR1	102%	103%	103%	104%
WHR2	98%	95%	97%	98%
URR	99%	99%	99%	98%
National	99%	99%	99%	98%

Source: EPI, 2015

Table 68. Percentage of PENTA 2, Polio 2, PCV2 and Rota 2 Antigens Coverage in 2015

Region	PENTA 2 Coverage	POLIO 2 Coverage	PCV 2 Coverage	ROTA 2 Coverage
CRR	96%	96%	98%	97%
LRR	97%	96%	94%	103%
NBER	96%	88%	97%	97%
NBWR	98%	99%	101%	99%
WHR1	104%	100%	103%	103%
WHR2	91%	91%	91%	91%
URR	98%	97%	98%	97%
National	98%	97%	98%	98%

Source: EPI, 2015

Table 69. Percentage of PENTA 3, Polio 3, PCV3 and Rota 3 Antigens Coverage in 2015

Region	PENTA 3 Coverage	POLIO 3 Coverage	PCV 3 Coverage	ROTA 3 Coverage
CRR	98%	95%	96%	96%
LRR	97%	93%	94%	94%
NBER	96%	89%	92%	92%
NBWR	99%	98%	100%	98%
WHR1	100%	99%	102%	99%
WHR2	95%	93%	92%	92%
URR	97%	96%	97%	97%
National	98%	96%	97%	97%

Source: EPI, 2015

Table 70. Percentage of Polio 4, Measle 1, Measle 2 and Yellow Fever Antigens Coverage in 2015

Region	POLIO4 Coverage	Measle 1 Coverage	Measle 2 Coverage	Yellow Fever Coverage
CRR	142%	97%	74%	99%
LRR	87%	92%	74%	95%
NBER	131%	91%	77%	92%
NBWR	102%	94%	71%	101%
WHR1	102%	101%	88%	93%
WHR2	89%	91%	75%	94%
URR	118%	97%	77%	97%
National	116%	96%	77%	97%

Source: EPI, 2015

Table 71. Number and Percentage of Ante natal women Vaccinated against TT1 and TT2+ in 2015

Region	TT 1 Vaccination	TT2+Vaccination	TT1 Coverage	TT2+ Coverage
CRR	9534	10335	74%	80%
LRR	4842	4691	80%	77%
NBER	4527	4567	78%	79%
NBWR	9814	10538	78%	84%
WHR1	11170	10856	83%	81%
WHR2	3432	3144	79%	73%
URR	66479	70387	77%	82%
National	109798	114518	78%	81%

Source: EPI, 2015

Vitamin A Prevention and Treatment

Table 72. Number of doses of Vitamin A for Prevention administered in 2015.

	Vitamin A 6-11 Months	Vitamin A 12-59 Months	Post Partum Mothers
CRR	10144	21846	7925
LRR	4575	11435	4193
NBER	3880	14066	4141
NBWR	8207	20624	8729
WHR1	10455	21992	11251
WHR2	2874	7096	2741
URR	60306	137326	61666
National	100441	234385	100646

Source: EPI, 2015

Table 73. Number of doses of Vitamin A for Treatment administered in 2015.

	Male	Female	Total
Vitamin A (Treatment) 6-11 months	444	405	849
Vitamin A (Treatment) 12-59 months	268	182	450

Source: HMIS, 2015

Mebendazole Prevention

Table 74. Number of doses of Mebendazole administered to children in 2015.

	Male	Female	Total
Mebendazole 500 mg prevention 12-59 months	39530	39046	78576

Source: HMIS, 2015

Gender Base Violence

Table 75. Number of gender based violence recorded by the health facilities in 2015

Gender Base Violence		
	Male	Female
Rape	0	13
Assault	548	383
Child Abuse	3	2

Source: HMIS, 2015

Suspected Cases of Priority Diseases

Table 76. Number of suspected case based priority diseases reported by health facilities in 2015.

	RCH cases		OPD cases		Inpatient cases	
	Male	Female	Male	Female	Male	Female
Schistosomiasis	0	0	57	24	0	0
Meningitis	0	0	0	6	4	2
Yellow fever	0	0	0	0	0	0
Other viral haemorrhagic fevers	0	0	0	0	0	0
Human influenza (H1N1)	0	0	0	0	0	0
Acute flaccid paralysis (Polio)	0	0	1	1	0	0
SARS	0	0	0	0	0	0
Chikungunya	0	0	0	0	0	0
Smallpox	0	0	0	0	0	0
Anthrax	0	0	0	0	0	0
Dracunculiasis	0	0	0	0	0	0
Lymphatic filariasis	1	2	0	0	0	0
Measles	0	0	9	9	2	5
Neonatal tetanus	0	0	0	0	0	0
Diphtheria	0	0	0	0	0	0
Hepatitis A	0	0	1	0	0	0
Hepatitis B	0	0	0	0	0	1
Pertusis	0	0	0	0	0	0
Cholera	0	0	0	0	0	0
Ebola	0	0	0	0	0	0
Onchocerciasis	0	0	0	0	0	0

Source: HMIS, 2015

Village Health Services

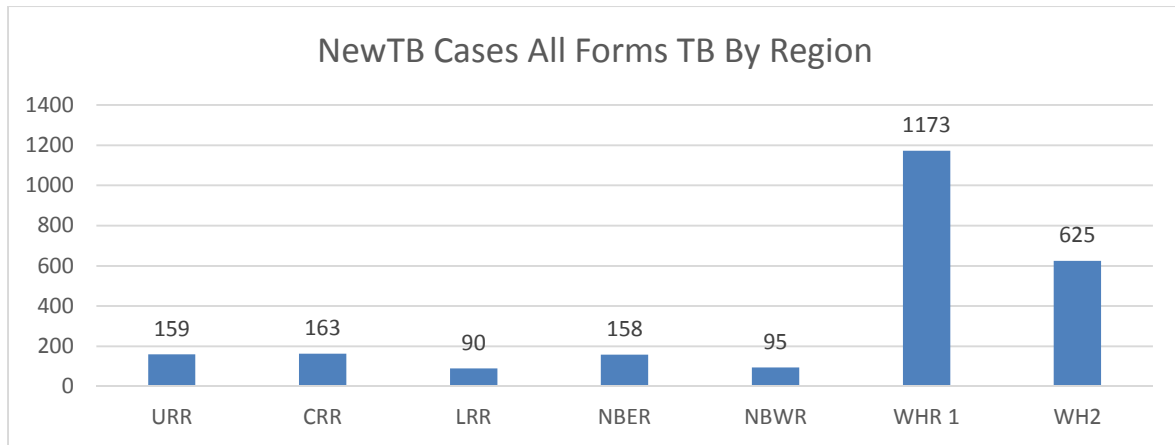
Table 77. Total Number of Patients seen by the VHWs in 2015

	Male	Female	Total
CRR	10312	9518	19830
LRR	2696	2328	5024
NBER	7076	6586	13662
NBWR	10450	9780	20230
WHR1	7	14	21
WHR2	851	770	1621
URR	7317	7516	14833
National	38709	36512	75221

Source: HMIS, 2015

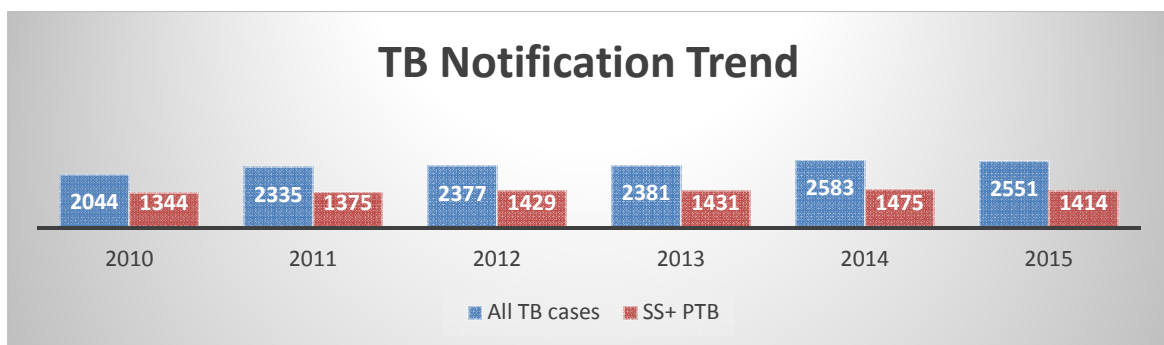
Tuberculosis

Figure 60. Number of new TB cases all forms TB reported by region in 2015



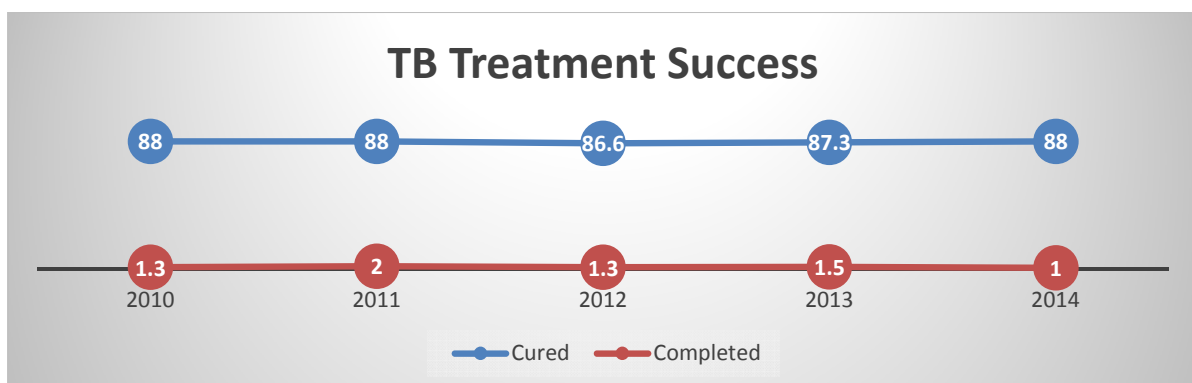
Source: NLTP, 2015

Figure 61. Tb notification trend from 2010 to 2015 nationally



Source: NLTP, 2015

Figure 62. Tb Treatment Success rate from 2010 to 2015.



Source: NLTP, 2015

Drug Consumption

Table 78. Consumption of Essential Medicines by the Public Health and NGOs Facilities in 2015

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
Artemether-lumefantrine 20/120 mg (6 tabs).	4515	2719	7727	43286	58247
Artemether-lumefantrine 20/120 mg (12 tabs).	2510	2109	10089	45622	60330
Artemether-lumefantrine 20/120 mg (18 tabs).	2031	1175	7702	24082	34990
Artemether-lumefantrine 20/120 mg (24 tabs).	5698	3698	23422	134322	167140
Rapid Diagnostic Test kits (RDT).	55967	54405	172127	347540	630039
Quinine Sulphate 300mg tab.	15982	11127	27504	93064	147677
Quinine Sulphate 300mg / 2ml(AMP).	7278	1508	4504	19875	33165
Paracetamol 500 mg tabs.	1976235	1990811	2857980	3656532	10481558
Paracetamol 100mg tab.	815730	867444	1191357	998290	3872821
Sulphadoxine+Pyrimethamine 500+25mg tab.	57759	54045	85744	143061	340608.5
Ferrous Sulphate+Folic Acid 200mg tab.	1457798	1492464	1600658	1368804	5919724
Oral Rehydrated Salts (SHT).	11162	8613	23426	16696	59897
Magnesium sulphate injection 50% Amp.	7100	3468	4177	8873	23618
Oxytocin 10IU/ML Amp.	9993	7774	9435	11212	38414
Cotrimoxazole 480mg tab.	226749	204454	330142	720856	1482201
Amoxicillin 250mg cap.	90769	46336	289123	269467	695695
Benzylpenicillin Sodium 1mu (Vial).	12025	14187	12364	9256	47832
Mebendazole 500MG tab.	34938	40155	40293	50535	165921
Tetracycline Eye Oint 1% (TUBE).	1056	603	482	719	2860

Source: LMIS, 2015

Table 79. Consumption of ARV Medicines by public health facilities in 2015

ARV medicines	First Quarter	Second Quarter	Third Quarter	Fourth Quarter	Total
Abacavir + Lamivudine + Zidovudine 300+150+300(Tab)	55730	56395	59520	64094	235739
Didanosine 250mg (Tab)	11133	3360	1290	400	16183
Efavirenz (EFV) 600mg (TAB)	11392	10624	26280	26303	74599
Lamivudine (3TC) 10mg/ml oral solution (BOTTLE)	340	358	462	435	1595
Lamivudine +Zidovudine+Nevirapine 150+300+200(Tab)	388768	506227	524596	555681	1975272
Lamivudine 30mg+ Nevirapine50mg+Zidovudine 60mg	15660	19460	17720	17220	70060
Lopinavir 200mg+Ritonavir 50mg (TAB)	175849	167172	475160	489860	1308041
Nevirapine (NVP) 200mg (TAB)	17956	20928	25939	37520	102343
Nevirapine (NVP) 50mg/5ml oral suspensio (BOTTLE)	290	303	311	321	1225
Tenofovir (TDF) 300mg (TAB)	2696	5345	4288	5200	17529
Tenofovir Disprovil Fumarate 300mg + Lamivudine 300mg	17986	20123	32055	23107	93271
Zidovudine (AZT) 10mg/ml syrup (BOTTLE)	335	365	373	414	1487
Zidovudine 300mg+ Lamivudine 150mg (Tab)	104114	108423	113397	146733	472667

Source: LMIS, 2015