

THE REPUBLIC



REPUBLIC OF THE GAMBIA

OF THE GAMBIA

DEPARTMENT OF STATE FOR HEALTH AND SOCIAL WELFARE

DIRECTORATE OF PLANNING AND INFORMATION

NATIONAL HEALTH MANAGEMENT INFORMATION SYSTEM

SERVICE STATISTICS REPORT 2005

JULY 2006

Table of content

1. Introduction	3
2. Background information	4
3. The Gambia Health System	5
4. HMIS unit	9
5. Service Statistic 2005	10
6. Immunization data 2005	19
7. Achievement	20
8. Constraints	20
9. Recommendation	21
10. Conclusion	21
annex	
11. Disease trend in the Gambia 2001 to 2005	22
12. Trend of services in the Gambia 2001 to 2005	31
13. Annex 1 Demographic data of the Gambia	34

Introduction

The HMIS report 2005 presents data and information on the following services both at the facility and the primary level:

1. Out patient
2. Infant welfare
3. Antenatal services
4. Immunization
5. Deliveries
6. Admissions
7. Human resources
8. Financial resources
9. Drug inventory supplies
10. Family planning
11. Mortality data
12. Integrated Disease Surveillance and Response (IDSR)
13. Vital Registration (Births and Deaths)

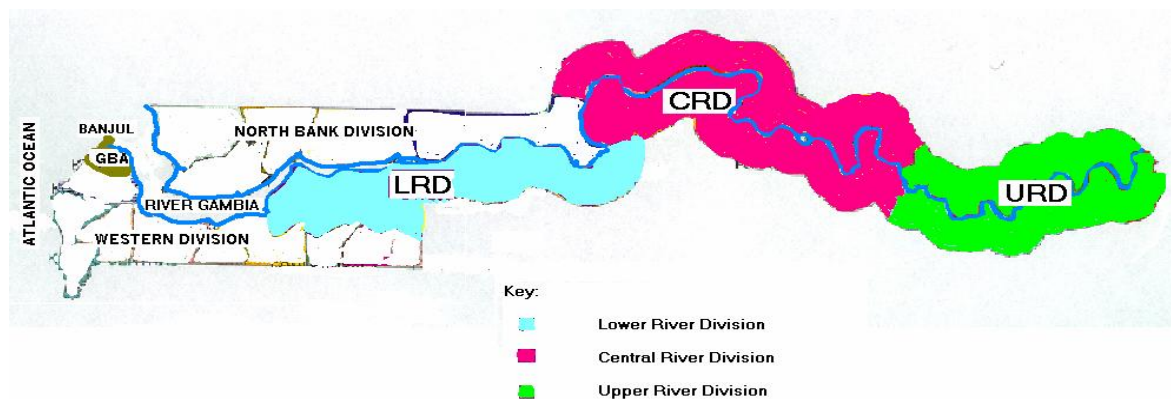
PURPOSE

- To provide information on health service statistics.
- To identify strengths and gaps in Data Management.
- To recommend a way forward for the constraints identified.

BACKGROUND INFORMATION

Location, site and climate

The Republic of The Gambia is located on the west coast of Africa and extends about four hundred (400) kilometres inland following the River Gambia with a width varying from twenty-four to thirty two (24-32) kilometres. The Gambia has a land area of ten thousand, six hundred and eighty nine (10,689) square kilometres and is bordered on the east, north and south by the Republic of Senegal and on the west by the Atlantic Ocean. It lies between latitudes 13.03 and 13.49 north and longitudes 13.47 and 16.48 west. The land is generally low lying with the highest point less than fifty meters above sea level. It has a tropical semi-arid or Sahelian climate characterized by two seasons (a five months wet seasons from mid June to mid October, with a rainfall highest in August and seven months dry season the rest of the year. Drought conditions have been experienced in the 1980s, but the rainfall pattern had shown improvement in recent years.



The Gambia is divided into eight local government administrations: Two municipalities (Banjul and Kanifing) headed by Mayors, and five Divisions headed by Governors. The divisions are sub-divided into districts headed by District chiefs. There are forty eight Districts in the country. The alkalos are the village heads who assist the chief and Governors in the administration of the Division.

ADMINISTRATIVE SETUP

Table 1. Showing the distribution of districts in the Gambia

WESTERN DIVISION	LOWER RIVER DIVISION	NORTH BANK DIVISION	CENTRAL RIVER DIVISION	UPPER RIVER DIVISION
Kombo North	Kiang West	Lower Niumi	Fulladu West	Fulladu East
Kombo South	Kiang Central	Upper Niumi	Janjang-bureh	Kantora
Kombo Central	Kiang East	Jokadu	Lower Saloum	Wuli East
Kombo East	Jarra West	Sabach Sanjal	Niamina Dankunku	Wulli West
Foni Brefet	Jarra Central	Upper Baddibu	Niamina East	Sandu
Foni Bintang Karanai	Jarra East	Lower Baddibu	Niamina West	Jimara
Foni Kansala		Central Baddibu	Niani	Tumana
Foni Bondali			Nianija	
Foni Jarrol			Sami	
			Upper Saloum	

THE HEALTH SYSTEM

The health service delivery system is a three-tier system, based on the strategy of Primary Health Care (PHC). There are presently four hospitals, forty health facilities comprising of major and minor health centres at the secondary level and four hundred and sixty village health post at the primary level. This is further complimented by a number of private and NGO's clinic providing health services.

Health Care Delivery service is provided primarily by the Government of The Gambia, non-government organizations (NGOs) and private institutions. In addition, there are a large number of private pharmacies, drug sellers, and traditional medical practitioners.

Primary Level

The Primary level is the lowest level of health care delivery system and consists of 492 villages. At this level health services are provided by the Village Health worker (VHW) and Tradition Birth Attendant (TBA). The VHW provides outpatient care, make home visits, provides essential drug supply and conduct health talks. The TBA conducts deliveries, provide family planning services, identify and refer at risk mothers. The TBAs and VHWs are supervised by Community Health Nurses who in turn are supervised by the basic health facilities

Table 2. Showing the number of village health workers, traditional birth attendance, and Cuban clinics by health divisions at the primary level of health care delivery

DHT	NUMBER OF PHC VILLAGE	NUMBER OF VHW	NUMBER OF TBA	NUMBER OF CUBAN/VILLAGE CLINIC
URD		69	176	4
CRD		83	101	10
LRD		62	82	6
NBD EAST		54	67	5
NBD WEST		79	136	2
WESTERN		93	174	11
TOTAL		440	716	38

Source: DOSH / HRH 2005

The Gambia is divided into six health divisions called Divisional Health Teams (DHT). The administration of the health service at this level is the responsibility of the DHT. The DHT is multi disciplinary in nature comprising of the Divisional Health Officer (DHO) as the officer in charge, Divisional Public Health Nurse (DPHN) Divisional Public Health officer (DPHO), Divisional Administrative Officer (DAO), and CHN Tutor all of whom are with public health background. The team also has a Divisional Accountant, Divisional Pharmacy Assistant and other support staff.

Secondary Level

Six major health centres, thirty-four minor health centres, and 5 other clinics (including a Polyclinic, a Maternity Clinic and 3 RCH Clinics) and four newly constructed minor health centres due to be operational in late 2006 provide health care delivery at this level. Major health centres are staffed by Doctors, Midwives, Anaesthetic nurses, registered nurses, enrolled nurses, community health nurses, health officers, laboratory and dispensing assistants, and other support staff. Minor health centres have similar staff composition but are without laboratory and dispensing assistants.

Table 3. Showing the number of Major health centres, Minor health centres, Bamako Initiatives facilities, RCH clinics and RCH trekking and base clinics by health divisions at the secondary level of health care delivery

DHT	NO. OF MAJOR HEALTH CENTRE	NO. OF MINOR HEALTH CENTRE	NO. OF BI FACILITIES	RCH CLINICS
URD	1	6	3	0
CRD	1	7	2	1
LRD	1	3	3	0
NBD EAST	0	6	4	1
NBD WEST	1	4	3	0
WESTERN	2	8	3	1
Total	6	34	18	3

Source: DOSH / HRH 2005

NB four minor health centres to be operational in late 2006

Table 4. The different categories of professional health and support staff providing health care delivery service at the secondary level.

	DESIGNATION	NUMBER
01	Public Health Officers	36
02	Pharmacy staff	11
03	Laboratory staff	09
04	Nurse Attendants	146
05	Support Staff	172
06	Orderlies	145
07	Leprosy/ TB Officer	13
08	Registered Nurse Midwife	26
09	Registered Nurse General	21
10	Registered Nurse Opth.	4
11	Enrolled Nurse Mid wife	41
12	Enrolled Nurse General	42
13	Enrolled Nurse Opth.	31
14	Community Health Nurse Midwife	57
15	Community Health Nurse General	72
16	Community Health Nurse Opth.	67

Source: DOSH / HRH 2005

Tertiary Level

Services at this level are provided by 4 referral hospitals namely Royal Victoria Teaching Hospital (RVTH) in Banjul, Bansang Hospital, the AFPRC hospital in Farafenni, Sulayman Junking General Hospital and Serekunda General hospital due for operation in late 2006. Most of the country's trained Physicians and Nurses are based in these referral hospitals

Table 5. showing the number of teaching and general hospitals by health divisions at the tertiary level of health care delivery system

DHT	NUMBER OF TEACHING HOSPITAL	NUMBER OF GENERAL HOSPITAL
URD	00	00
CRD	00	1
LRD	00	00
NBD EAST	00	1
NBD WEST	00	00
WESTERN	1	2
TOTAL	1	4

Source: DOSH / HRH 2005

Table 6. The health work force at the tertiary level

Hospitals	PHO		Pharmacy	Laboratory		Orderlies	Nurse Attendant	Support Staff
	APHO	PHO		MD	Others			
AFPRC	0	0	5	0	6	79	47	36
BANSANG	0	0	9	0	10	44	45	31
JFP	1	0	1	0	1	7	24	11
RVTH	0	0	30	2	38	128	160	104
SJGH	0	0	1	0	9	22	16	28
TOTAL	1	0	46	2	64	280	292	210

Source: DOSH / HRH 2005

Table 7. showing the distribution of nurses at the tertiary level

Hospital	Registered Nurses				Enrolled Nurses				Community Health Nurses			
	MW	Gen	Oph.	Others	MW	Gen	Oph.	Others	MW	Gen	Oph.	Others
AFPRC	15	22	3	7	12	12	2	0	1	0	0	0
BANSANG	28	17	1	6	11	23	4	0	0	0	0	0
JFP	4	0	0	0	3	4	0	0	2	2	1	0
RVTH	54	47	8	24	40	50	8	0	0	0	0	0
SJGH	13	7	1	0	3	10	1	0	0	0	0	0
Total	114	93	13	37	69	99	15	0	3	2	1	0

Source: DOSH / HRH 2005

Table 8. showing the number of various specialists at the Tertiary level.

MEDICAL DOCTORS						
SPECIALISTS	AFPRC	BANSANG	JFP	RVTH	SJGH	TOTAL
Haematologist	0	0	0	1	0	1
Pathologist	0	0	0	1	0	1
Obst. / Gynae.	1	1	0	7	3	12
Physicians	0	1	0	5	3	9
Surgeons	0	1	0	7	3	11
Anaesthetists	0	0	0	3	0	3
Paediatricians	1	3	1	5	3	13
Radiologists	0	1	0	2	0	3
Dental Surgeons	0	0	0	6	0	6
Ophthalmologists	0	0	0	4	0	4
Psychiatrists	0	0	0	1	0	1
ENT	0	0	0	1	0	1
General Medicine	0	0	2	10	0	12
Acc. & Emerg.	0	0	0	6	0	6
Total	2	7	3	60	12	83

Source: DOSH / HRH 2005

Table 9. showing the hospital administration and specialized units at the tertiary level

HOSPITALS	ADMINSTRATION				SPECIALISED UNITS				
	MD	CEO	Others	Total	Consultant	Doctors	Matron	PNO	Other
AFPRC	0	1	20	21	0	2	0	1	28
BANSANG	0	1	17	18	0	8	0	1	25
RVTH	2	0	43	45	7	48	9	0	91
JFP	0	0	2	2	0	3	0	1	2
SJGH	0	1	9	10	0	12	0	1	28
Total	2	3	91	96	7	73	9	4	174

Source: DOSH / HRH 2005

HEALTH MANAGEMENT INFORMATION SYSTEM UNIT

The Statistics Unit was established in 1976 to collect and compile health information. In 1979 the Epidemiology Unit was also established, then merged with the Statistics Unit the following year and called the Epidemiology and Statistics Unit (ESU). Since then the ESU has been responsible for providing information on all health and disease indicators.

A computer system was first set up in 1986 with support from the British Overseas Development Assistance Agency. In 1990 the new Centre for Applied Research on Population and Development (CERPOD) developed new computer software for data entry of Ministry of Health indicators. Coinciding with a set of new health indicators being selected for DOSH&SW a new computer system was introduced in 2000.

The ESU, formerly under the Directorate of Health Services was transferred with effect from February 2001 to the Directorate of Planning and Information (DPI).

Additionally, the National Pharmaceutical Services (NPS), which is responsible for management of drugs and medical supplies, currently has an Inventory Control System that was designed in 1987 and updated in 1997. In 2004 a new software for inventory control was introduced and stores officers were trained on its use. This system is no longer fully functional.

The collection, processing and use of data for the extraction of information is a purposeful activity. Information is indeed the lifeblood of organisation but it is also an expensive commodity to produce. A cost effective information system is an essential prerequisite for evidence based planning and informed decision-making. Information only provides the means of presenting a view about the situation and as such is rarely if ever completely accurate without timeliness and completeness in reporting.

In order to provide maximum benefit, data needs to be complete, timely, consistent, simple and clear. Completeness and timeliness of reporting are the most important elements in any HMIS. These elements cannot be achieved without regular supervisory visits to the field where these data are generated and resources provided for their management. Data generated at the field level needs to be compiled, verified, analysed and use for local decision making.

At the end of the each month, the Divisional Health Teams should send their data to the HMIS Unit in Banjul to compile and process the national data for planning and decision-making. Unfortunately this is not happening as a result of non-functioning computers, lack of tally sheets and forms, trained manpower on data management and supervision both at central and divisional levels.

The Participatory Health Population and Nutrition Project (PHPNP) was providing assistant to the HMIS unit but since the phased out of this project, funding is not forthcoming for data management, which has greatly affected the performance of the HMIS unit as far as complete, timely and accurate data management for planning and decision-making is concern.

HEALTH SERVICE STATISTIC 2005

1. Health Service Utilizations (Attendances)

Health services utilization rate can be calculated by dividing the total number of attendances by the reference population at the various levels and by type of services. This rate cannot be calculated because of difficulties that are often encountered in computing estimates of the reference population and the quality of the data set. The attendance data was disaggregated into type of services, Divisional summaries, National summaries, age and year. Tables and charts are used in presenting the results. Absolute numbers are used in most cases and estimated proportions some times. It is a common knowledge that some of these people consult traditional healers prior to seeking for services at the basic health facilities.

Table 1.1 The number of OPD Attendance at the Basic Health Facilities by Division in 2005

	URD	CRD	LRD	NBDE	NBDW	WESTERN	TOTAL
Under 5 Years of Age	26,141	31,477	6,849	18,210	13,219	81,892	177,788
5 to 14 Years of Age	21,614	15,899	7,411	12,575	12,035	68,725	138,259
Over 14 Years of Age	38,600	22,133	10,979	15,200	20,772	85,656	193,340
Total Outpatient Attendance	86,355	69,509	25,239	45,985	46,026	236,273	509,387

Source: DOSH / HMIS 2005 data Attendance returns

Outpatient services are open to all ages and are provided at all levels of service delivery in the Gambia. It can be used to calculate of health service utilization. The data included both new and old attendance by age. and location.

Table 1.2 The number of IWC Attendance at the Basic Health Facilities by Division in 2005

	URD	CRD	LRD	NBDE	NBDW	WESTERN	TOTAL
New Attendances Under 1 Year of Age	6,459	8,182	4,153	5,716	3,689	28,155	56,354
All Other Attendances	78,054	102,174	52,736	53,410	68,096	254,341	608,811
Total Infant Welfare Clinic Attendance	84,513	110,356	56,889	59,126	71,785	282,496	665,165

Source: DOSH / HMIS 2005 data Attendance returns

Table 1.3 The number of Antenatal Attendance at the Basic Health Facilities by Division in 2005

	URD	CRD	LRD	NBDE	NBDW	WESTERN	TOTAL
First Attendance 15 Years of Age or Under	74	13	517	279	721	1071	2,675
First Attendance Over 15 Years of Age	6,065	8,318	3,697	4,730	4,352	21,824	48,986
Total First Attendance	6,139	8,331	4,214	5,009	5,073	22,895	51,661
All Other Attendances	17,441	17,255	16,618	10,800	10,094	91,168	163,376
Total Antenatal Clinic Attendance	23,580	25,586	20,832	15,809	15,167	114,063	215,037

Source: DOSH / HMIS 2005 data Attendance returns

Antenatal services target pregnant women and are available at all levels of service delivery. Women are expected to register during the first month of pregnancy and to continue visiting the antenatal clinic at least once every month for the entire duration of conception. At these clinics women are screened, treated, immunized and receive health talks.

Table 2.1 showing the number of births, deaths, disease conditions and services reported by Traditional Births Attendance by Division in 2005

	URD	CRD	LRD	NBDE	NBDW	WESTERN	TOTAL
Antenatal Women Visited	5,194	2059	1769	2192	1214	2192	15,193
Live Births Attended	3,420	1565	958	610	1214	3878	11,645
Other Live Births in Village	1,057	57	145	82	276	571	2,188
Stillbirths Attended	169	103	72	7	25	122	498
Other Stillbirths in Village	114	10	13	98	17	20	272
Maternal Deaths	12	37	20	3	28	9	109
Infant Deaths	181	297	121	81	51	132	863
Postnatal Visits Made	26108	9200	5382	5434	10434	13752	70312
Neonatal Conjunctivitis	170	67	44	44	38	75	438
Neonatal Tetanus	44	17	13	13	10	10	107
Motivations Given	1141	792	55	320	302	1195	3805
Referrals for Family Planning	605	268	62	174	179	528	1816
Clients Given Pills	756	603	36	203	215	857	2,670
Cycles of Pills Issued	1,062	704	56	449	532	1854	4,657
Referrals to Health Centre	1,048	441	198	209	354	661	2,911
Supervisory Visits	2,576	1309	1240	911	1377	2068	9,481
MCH Clinics Attended	837	397	305	191	367	415	2,512
At Risk Children Visited	825	241	95	65	120	419	1,765
TB Patients Receiving DOTS in Village	213	47	24	63	46	175	568
Community Meetings Attended	280	109	51	63	93	193	789

Source: DOSH / HMIS 2005 Primary Health Care return

Table 2.2 showing the number of disease conditions reported by Village Health Workers by Division in 2005

	URD	CRD	LRD	NBDE	NBDW	WESTERN	TOTAL
Patients Treated	20,127	20645	5448	7,770	9697	7802	71,489
Measles	22	4	64	4	117	11	222
Fast Breathing	1,518	4014	966	540	890	664	8,592
Diarrhoea	2890	3309	1642	1196	3278	1184	13,499
Child Malaria	7514	6605	2852	2530	1022	4616	25,139
Pregnant women with Malaria	1503	1178	539	487	2954	718	7,379
Other Adults with Malaria	5706	3786	1839	2277	2047	2595	18,224
Clients given condoms	2083	2886	1002	641	1498	11567	19,677
Home Visits	2754	1626	1503	1607	607	3935	12,032
Referrals to Health Facilities	1267	1479	496	806	238	1622	5,908
Deaths	444	75	240	73	1508	216	2,556

Source: DOSH / HMIS 2005 Primary Health Care return.

The above table shows the total number of illnesses and services reported in the primary health care villages. The most common condition is malaria, although fast breathing and diarrhea are on the increase

Table 2.3 below is showing the number of disease conditions reported in the Basic Health Facilities by Division in 2005

	URD	CRD	LRD	NBDE	NBDW	WESTERN	TOTAL
Sepsis	164	65	3	53	32	202	519
Neonatal Tetanus	1	0	91	61	23	13	189
Conjunctivitis	303	385	2323	558	316	891	4776
Malnutrition	1102	622	396	736	1193	2011	6060
Anaemia Under 5	944	382	807	808	764	2575	6280
Pneumonia Under 5	4531	112278	4287	2387	4807	13268	141559
Ear Infection Under 5	739	289	836	2,743	1,474	1911	7,992
Malaria in pregnancy	4,792	4539	1757	1,856	1,474	8,284	22,702
Pre-eclampsia	754	406	130	361	225	1,629	3,505
Anaemia	1,521	682	1358	505	569	4,470	9,150
STI's	1,964	18,952	27,232	22802	637	2,099	6,441
Uncomplicated Malaria Under 5	605	480	656	21,605	24,490	80,097	189,922
Uncomplicated Malaria Over 5	27913	16865	6548	14,869	20,075	76,147	167,673
Diarrhoea + Blood Under 5	2,028	1681	904	1,875	476	5,575	12,539
Diarrhoea + Blood Over 5	1,458	1127	1066	878	613	3,121	8,263
Other Diarrhoeas Under 5	4,183	7296	2225	3,831	2,837	23,636	44,008
Other Diarrhoeas Over 5	2,844	2131	6806	1,572	938	9,579	18,715
Pneumonia Over 5	6,512	1651	2415	1,449	2,645	8,547	28,374
Hypertension Over 5	2,984	2270	807	1,437	1,982	10,893	20,373
Diabetes Over 5	129	19	36	106	136	361	787
Cataracts Over 5	502	47	131	93	36	511	1,320
Asthma Over 5	717	452	327	599	404	2808	5,307
Scabies Over 5	1953	1055	1767	1397	1062	11741	18,975
Mental & Neurological Disorder	360	166	76	264	363	425	1,654

Source: DOSH / HMIS 2005 data Basic Facility Return

Table 2.4 showing the number of under five Admissions at the Basic Health Facilities by Division in 2005

	URD	CRD	LRD	NBDE	NBDW	WESTERN	TOTAL
Severe Malaria	231	323	204	358	2,094	1,563	4,773
Diarrhoea with Blood	19	80	0	43	53	61	256
Pneumonia	264	128	92	111	491	460	1546
Severe Malnutrition	32	8	14	24	19	62	159
Anaemia	46	1	11	13	187	57	315
Sepsis	81	12	7	11	165	197	473
Prematurity or Low Birth Weight	6	0	7	2	29	64	108
Trauma and Burns	19	7	8	19	88	51	192
Other	142	13	7	46	125	447	780
Total	840	559	350	627	3,251	2,962	8,589

Source: DOSH / HMIS 2005 data Inpatient returns

Table 2.7 showing the number of less than five years of age Referral at the Basic Health Facilities by Division in 2005

	URD	CRD	LRD	NBDE	NBDW	WESTERN	TOTAL
Severe Malaria	12	30	3	25	69	74	213
Diarrhoea with Blood	2	6	1	0	10	2	21
Pneumonia	12	11	2	9	14	53	101
Severe Malnutrition	1	11	13	7	4	15	51
Anaemia	14	11	6	10	36	44	121
Sepsis	8	4	1	3	4	65	85
Prematurity or Low Birth Weight	2	1	0	1	2	28	34
Trauma and Burns	10	5	0	9	25	89	42
Other	10	7	2	25	3	140	187
Total	71	81	28	89	146	435	850

Source: DOSH / HMIS 2005 data Inpatient returns

Table 2.13 showing the number of under five years of age Deaths at the Basic Health Facilities by Division in 2005

	URD	CRD	LRD	NBDE	NBDW	WESTERN	TOTAL
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Severe Malaria	40	19	5	6	13	25	108
Diarrhoea with Blood	0	1	0	0	1	614	616
Pneumonia	6	1	2	0	3	62	74
Severe Malnutrition	5	2	1	0	0	57	65
Anaemia	5	0	1	1	5	197	209
Sepsis	3	0	1	1	3	0	8
Prematurity or Low Birth Weight	1	0	0	1	1	0	3
Trauma and Burns	0	0	0	2	2	0	4
Other	7	0	1	5	3	0	16

Source: DOSH / HMIS 2005 data Inpatient returns

Table 2.5 showing the number of over five years of Age Admission at the Basic Health Facilities by Division in 2005

	URD	CRD	LRD	NBDE	NBDW	WESTERN	TOTAL
Severe Malaria	175	173	76	0	732	1040	2195
Diarrhoea with Blood	7	18	0	28	4	26	83
Pneumonia	90	31	24	28	80	125	378
Hypertension or Stroke	100	19	6	9	81	262	477
Heart Disease	39	4	0	3	5	52	103
Tuberculosis	39	4	0	0	46	24	133
Meningitis	7	0	0	0	0	2	9
AIDS	5	0	0	0	0	53	58
Renal Disease	13	1	0	109	0	29	152
Other	310	30	11	406	164	786	1,707
TOTAL	785	269	117	583	1111	2401	4,683

Source: DOSH / HMIS 2005 data Inpatient returns

Table 2.8 showing the number of over five years of age Referral at the Basic Health Facilities by Division in 2005

	URD	CRD	LRD	NBDE	NBDW	WESTERN	TOTAL
Severe Malaria	3	16	2	28	9	63	121
Diarrhoea with Blood	1	0	0	0	1	1	3
Pneumonia	1	7	0	7	7	33	55
Hypertension or Stroke	7	13	0	5	8	65	98
Heart Disease	9	6	0	6	1	13	35
Tuberculosis	6	7	0	1	0	19	33
Meningitis	0	1	0	0	0	1	2
AIDS	0	0	0	0	0	11	11
Renal Disease	1	0	0	0	33	6	40
Other	38	35	5	23	63	552	716
Total	66	72	7	70	3	764	982

Source: DOSH / HMIS 2005 data Inpatient returns

Table 2.14 showing the number of over five years of age Deaths at the Basic Health Facilities by Division in 2005

	URD	CRD	LRD	NBDE	NBDW	WESTERN	TOTAL
Severe Malaria	1	6	7	4	3	0	21
Diarrhoea with Blood	0	0	0	0	0	0	0
Pneumonia	2	1	0	0	0	0	3
Hypertension or Stroke	13	2	0	0	0	0	15
Heart Disease	2	0	0	0	1	0	3
Tuberculosis	0	0	0	0	11	0	11
Meningitis	0	0	0	0	1	0	1
AIDS	3	0	0	1	0	0	4
Renal Disease	1	2	0	0	1	0	4
Other	8	11	1	0	0	0	20

Source: DOSH / HMIS 2005 data Inpatient returns

Table 2.6 showing the number of Pregnancy related Admission at the Basic Health Facilities by Division in 2005

	URD	CRD	LRD	NBDE	NBDW	WESTERN	TOTAL
Severe Malaria	88	24	21	30	129	267	559
Anaemia	84	14	3	2	25	47	175
Haemorrhage	84	21	2	15	32	160	314
Pre-eclampsia & Eclampsia	66	6	7	9	14	109	211
Sepsis	27	7	0	3	6	64	107
Pelvic Inflammatory Disease	6	6	0	10	0	13	35
Ectopic Pregnancy	8	0	0	2	55	2	67
Other	61	14	6	7	291	482	861
Total	424	92	39	78	390	1144	2167

Source: DOSH / HMIS 2005 data Inpatient returns

Table 2.9 showing the number of Pregnancy related Referral at the Basic Health Facilities by Division in 2005

	URD	CRD	LRD	NBDE	NBDW	WESTERN	TOTAL
Severe Malaria	0	1	0	3	8	12	24
Anaemia	30	19	1	2	29	55	136
Haemorrhage	10	22	2	7	14	254	309
Pre-eclampsia & Eclampsia	7	9	2	3	2	85	108
Sepsis	0	3	0	1	0	18	22
Pelvic Inflammatory Disease	0	2	0	0	0	1	3
Ectopic Pregnancy	2	0	0	1	18	10	31
Other	17	14	0	2	74	234	341
Total	66	64	5	19	145	669	968

Source: DOSH / HMIS 2005 data Inpatient returns

Table 2.15 showing the number of Pregnancy related Deaths at the Basic Health Facilities by Division in 2005

	URD	CRD	LRD	NBDE	NBDW	WESTERN	TOTAL
Severe Malaria	2	0	0	2	0	0	4
Anaemia	5	1	0	6	0	0	12
Haemorrhage	2	2	0	1	0	0	5
Pre-eclampsia & Eclampsia	0	0	0	0	3	0	3
Sepsis	1	0	0	1	0	0	2
Pelvic Inflammatory Disease	0	0	0	0	0	0	0
Ectopic Pregnancy	0	0	0	0	1	0	1
Other	0	1	3	0	0	0	4

Source: DOSH / HMIS 2005 data Inpatient returns

Table 2.10 showing the number of Deliveries at the Basic Health Facilities by Division in 2005

	URD	CRD	LRD	NBDE	NBDW	WESTERN	TOTAL
Total Deliveries	997	1133	435	566	1302	7601	12,034
Deliveries Attended by Midwife	636	646	391	306	1044	5021	8044
Live Births > 2.5 Kg	688	938	227	442	1068	6101	9464
Stillbirths Fresh	37	28	16	13	24	87	205
Stillbirths Macerated	27	14	7	9	22	82	161

Source: DOSH / HMIS 2005 data Inpatient returns

Table 2.11 showing the number of Deaths at the Basic Health Facilities by Division in 2005

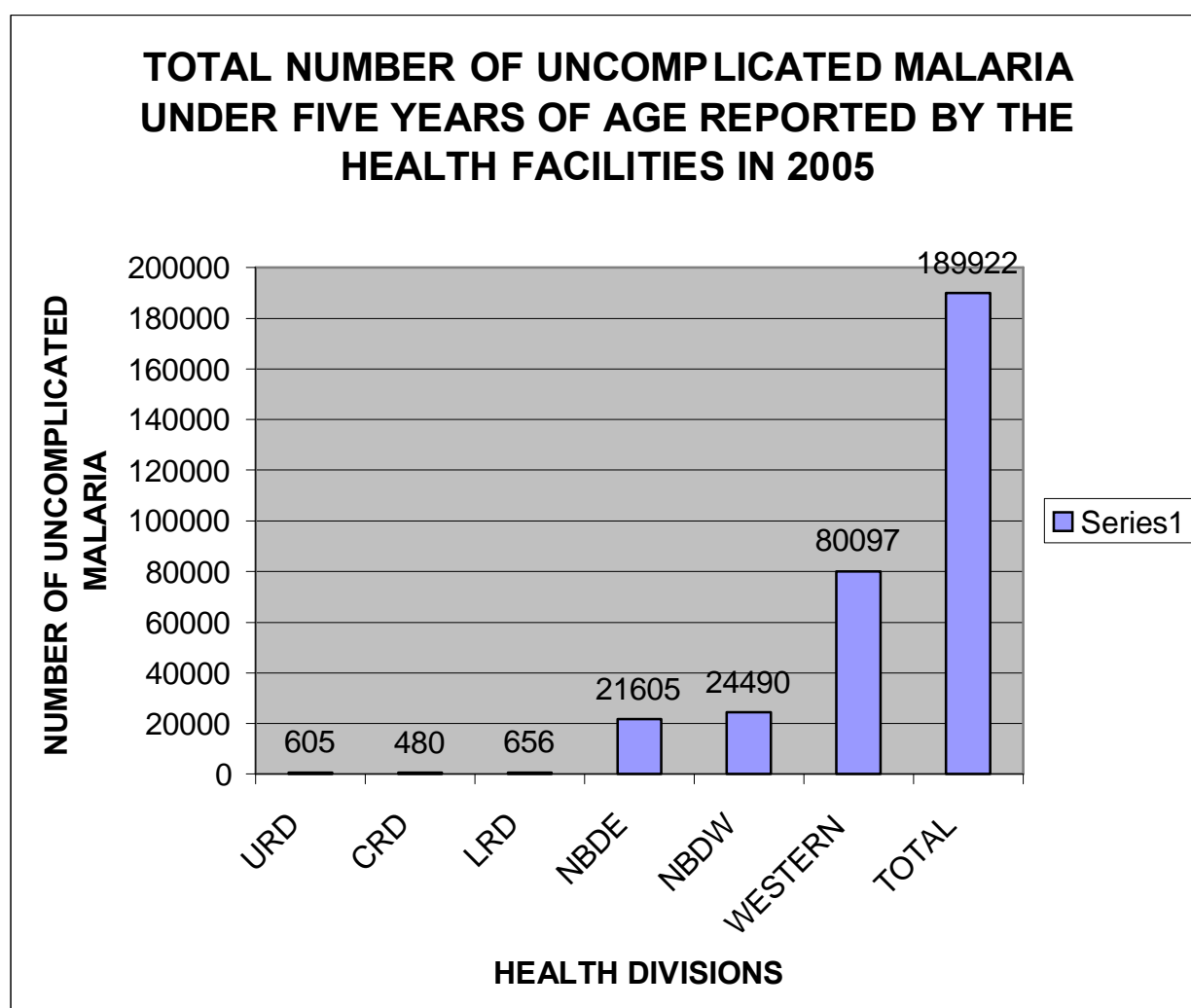
	URD	CRD	LRD	NBDE	NBDW	WESTERN	TOTAL
Dead on Arrival at Facility	4	19	0	4	6	24	57
Maternal	10	2	0	2	1	1	16
Neonatal	7	6	6	1	7	10	37
Infant	5	12	8	1	7	7	40
Child < 5 Years	7	15	15	3	12	18	70
Child 5-14 Years	6	3	5	4	5	40	63
Over 14 Years	24	8	7	4	10	80	133
Total Deaths	63	65	41	19	48	180	416

Source: DOSH / HMIS 2005 data Inpatient returns

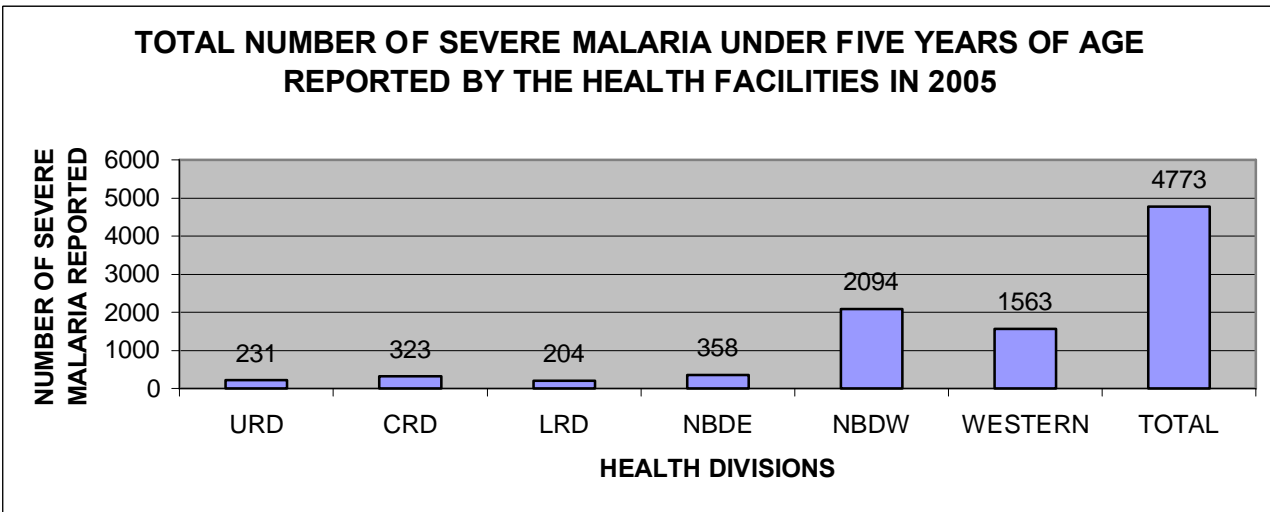
Table 2.12 showing the number of obstetrics Labour, and Deliveries problems at the Basic Health Facilities by Division in 2005

	URD	CRD	LRD	NBDE	NBDW	WESTERN	TOTAL
Antepartum Haemorrhage	35	30	11	11	39	144	270
Intrapartum or Postpartum Haemorrhage	14	26	9	16	34	96	195
Pre-eclampsia & Eclampsia	50	47	39	11	14	66	254
Abortion	144	42	18	14	53	10	251
Delayed or Obstructed Labour	23	23	12	7	26	64	155
Retained Placenta	15	10	0	10	6	0	41
Malpresentation	22	17	3	20	13	0	75
Ruptured Uterus	0	0	0	1	0	123	124
Ectopic Pregnancy	2	4	0	1	17	0	24
Deliveries Requiring Interventions	8	19	8	4	0	0	39

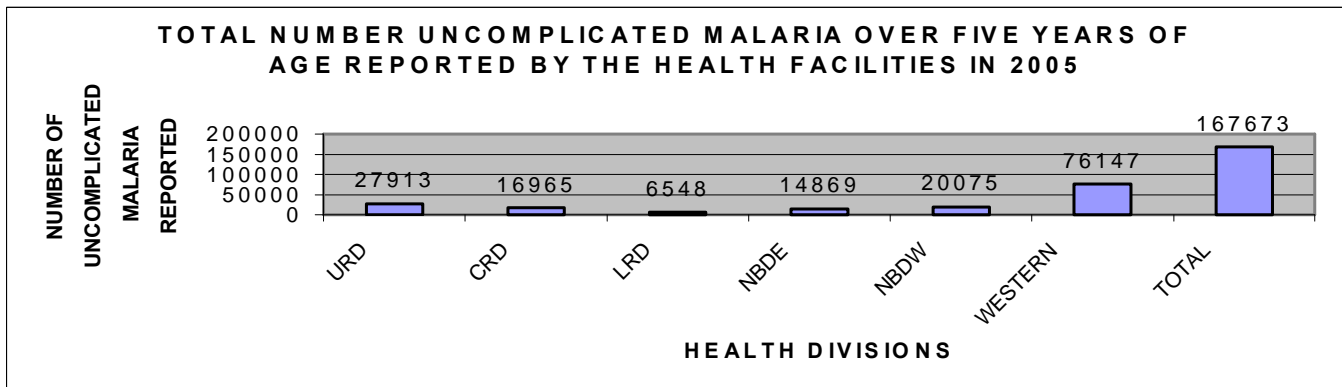
Source: DOSH / HMIS 2005 data Inpatient returns



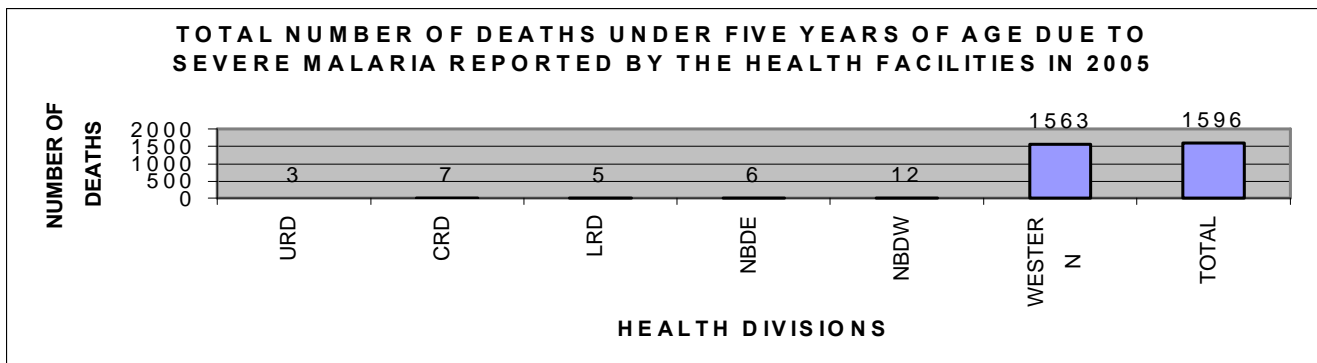
TOTAL NUMBER OF SEVERE MALARIA UNDER FIVE YEARS OF AGE REPORTED BY THE HEALTH FACILITIES IN 2005



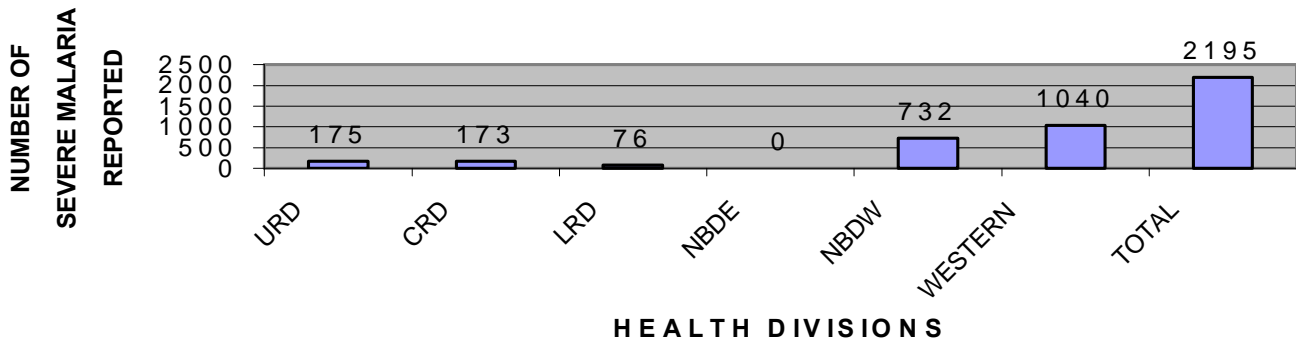
TOTAL NUMBER UNCOMPLICATED MALARIA OVER FIVE YEARS OF AGE REPORTED BY THE HEALTH FACILITIES IN 2005



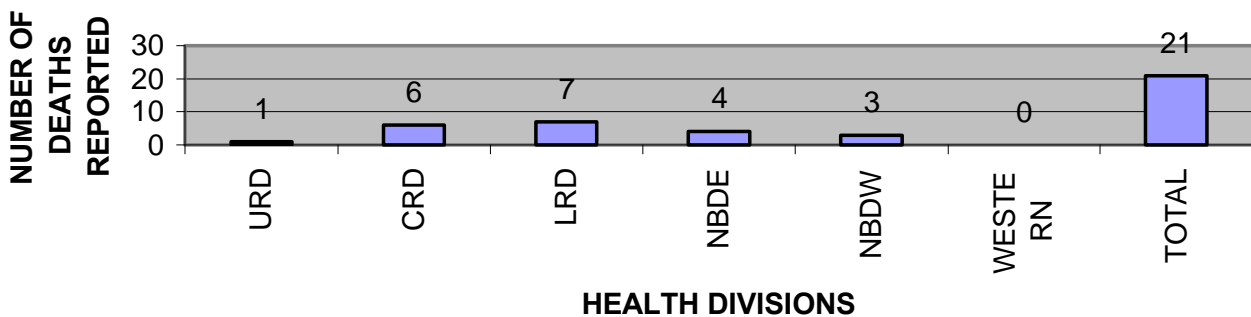
TOTAL NUMBER OF DEATHS UNDER FIVE YEARS OF AGE DUE TO SEVERE MALARIA REPORTED BY THE HEALTH FACILITIES IN 2005



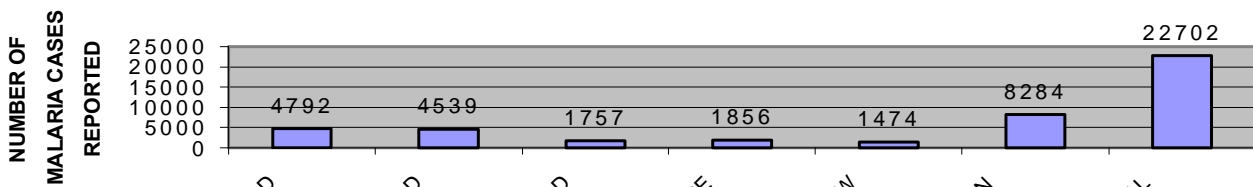
TOTAL NUMBER OF SEVERE MALARIA OVER FIVE YEARS OF AGE REPORTED BY THE HEALTH FACILITIES IN 2005



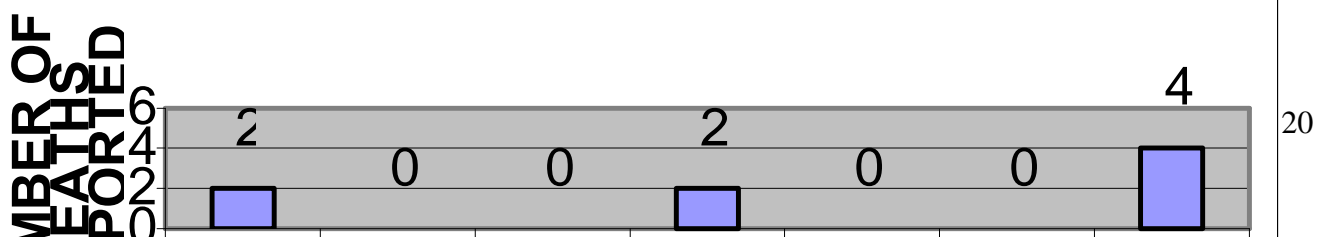
TOTAL NUMBER OF DEATHS DUE TO SEVERE MALARIA OVER FIVE YEARS OF AGE REPORTED BY THE HEALTH FACILITIES IN 2005



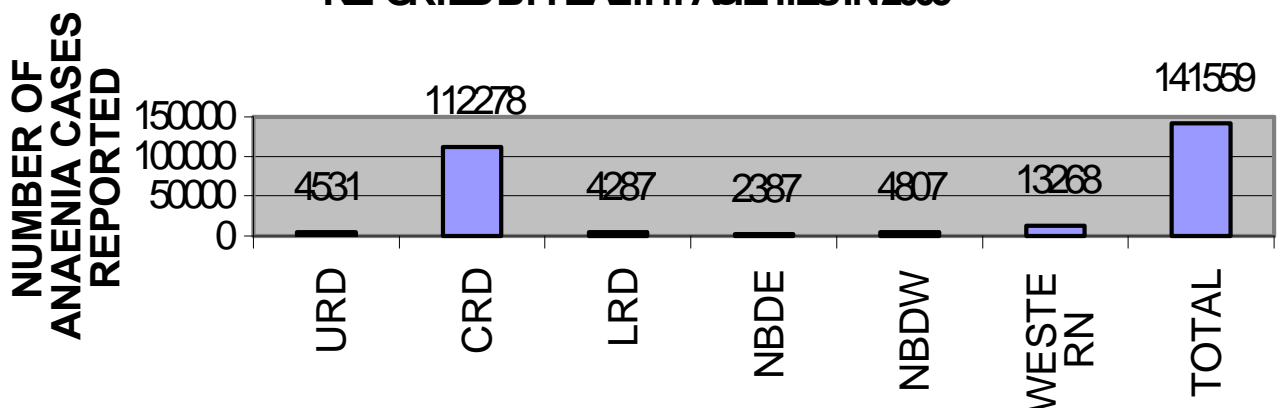
TOTAL NUMBER OF MALARIA CASES IN PREGNANCY REPORTED BY THE HEALTH FACILITIES IN 2005



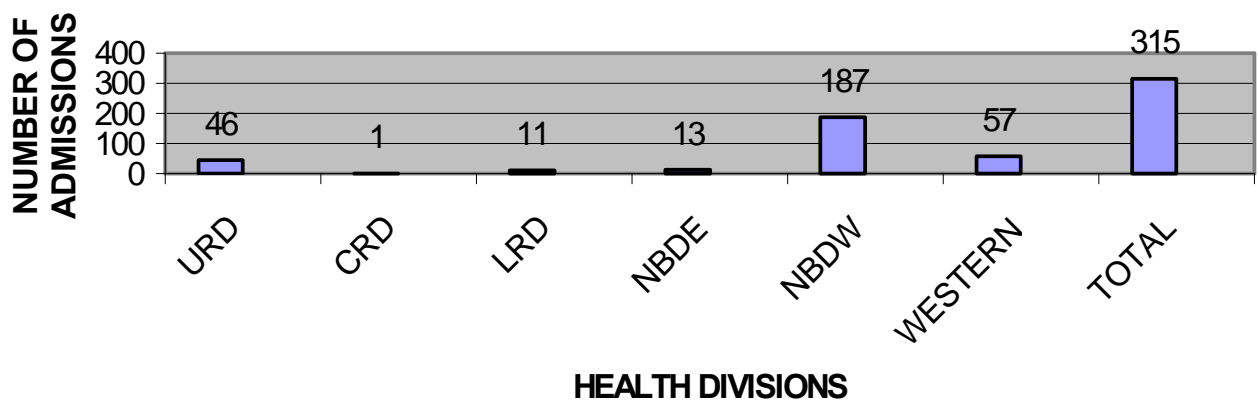
TOTAL NUMBER OF DEATHS IN PREGNANCY DUE TO SEVERE MALARIA REPORTED BY HEALTH FACILITIES IN 2005



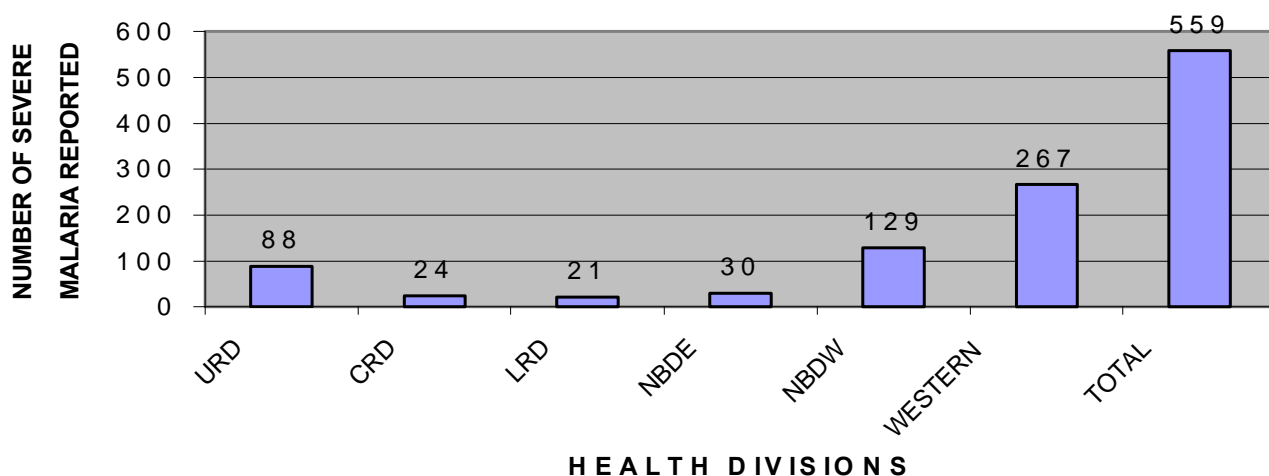
TOTAL NUMBER OF ANAEMIA CASES IN UNDER FIVE YEARS OF AGE REPORTED BY HEALTH FACILITIES IN 2005



TOTAL NUMBER OF ADMISSIONS UNDER FIVE YEARS OF AGE DUE TO ANAEMIA REPORTED BY HEALTH FACILITIES IN 2005



TOTAL NUMBER OF SEVERE MALARIA IN PREGNANCY REPORTED BY HEALTH FACILITIES IN 2005



1. Family planning services

Family planning services are provided at all levels of health service delivery in the Gambia although they differ in type. Counseling and provisions of family planning commodities such as the pill and condom are available at all levels. Others could be obtained from the basic health facilities and hospitals. The tables and figures below show both attendances and utilization of family planning services during 2005.

Table 3.1 showing the number of Family Planning Services provided at the Basic Health Facilities by Division in 2005

	URD	CRD	LRD	NBDE	NBDW	WESTERN	TOTAL
Total Women Seen	910	1964	749	1,640	1143	8961	15,367
Total Men Seen	936	613	530	687	150	2334	5,250
Counselled Only	49	229	71	250	232	809	1640
Pills	137	476	221	398	198	2857	4287
Depo	286	725	405	456	511	3166	5549
Condoms	888	4247	1143	1934	3300	11952	23464
Foam	0	0	10	2	8	41	61
IUCD	1	1	0	0	3	37	42
VSC	0	0	0	0	0	0	0
Total New Acceptors	1312	5449	1779	2790	1050	18053	30433

Source: DOSH / HMIS 2005 Family Planning Returns

Immunization data for 2005

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Completeness & Timeliness:												
Total reports received	6	6	6	6	6	6	6			1	4	
Reports received on time	-	-	-	-	-	-	-			-	-	
Monthly vaccinations given:												
BCG	5,114	5,535	5,722	5,532	4,314	4,478	3,451	3,741	3,432	4,394	5,340	5,757
DTP/Q/P-1	5,514	5,888	5,638	6,200	5,605	5,687	4,310	4,396	3,277	3,758	4,421	5,507
DTP/Q/P-2	4,427	5,360	5,994	5,925	5,623	5,665	4,886	4,910	3,689	4,066	3,738	4,466
DTP/Q/P-3	3,644	4,116	5,065	6,011	5,050	5,429	4,994	5,313	4,157	4,412	3,885	4,153
Polio-0	5,110	5,542	5,511	5,452	4,220	4,300	3,231	3,555	3,162	4,804	5,366	5,966
Polio-1	5,401	5,676	6,024	5,698	5,223	4,897	3,907	3,670	3,152	3,768	4,442	5,472
Polio-2	4,875	5,213	6,024	5,918	5,541	5,525	4,453	4,936	3,281	5,346	3,849	4,661
Polio-3	3,996	4,804	5,697	6,008	5,543	5,603	4,759	4,987	3,907	4,110	3,982	4,242
Measles	3,731	4,129	3,726	3,937	3,403	4,502	4,370	5,528	4,479	4,308	4,317	4,927
YF	3,618	3,969	3,679	3,929	3,490	4,514	4,695	5,553	4,455	4,284	4,193	5,004
TT-1	1,514	1,561	1,485	1,993	1,470	1,730	1,910	2,414	1,601	1,542	2,373	2,137
TT-2+	3,651	3,914	3,702	4,074	3,690	3,794	3,775	4,077	3,339	2,943	4,125	3,975

Couvertures Vaccinales :												
monthly BCG	96%	104%	107%	104%	81%	84%	65%	70%	64%	82%	100%	108%
cumulative BCG	96%	100%	102%	103%	98%	96%	92%	89%	86%	86%	87%	89%
monthly DTP/Q/P-3	68%	77%	95%	113%	95%	102%	94%	100%	78%	83%	73%	78%
cumulative DTP/Q/P-3	68%	73%	80%	88%	90%	92%	92%	93%	91%	90%	89%	88%
monthly Measles	70%	77%	70%	74%	64%	84%	82%	104%	84%	81%	81%	92%
cumulative Measles	70%	74%	72%	73%	71%	73%	75%	78%	79%	79%	79%	80%
monthly YF	68%	74%	69%	74%	65%	85%	88%	104%	84%	80%	79%	94%
cumulative YF	68%	71%	70%	71%	70%	73%	75%	78%	79%	79%	79%	80%
monthly TT-2+	69%	73%	69%	76%	69%	71%	71%	77%	63%	55%	77%	75%
cumulative TT-2+	69%	71%	70%	72%	71%	71%	71%	72%	71%	69%	70%	70%
Abandons & Ecart:												
Dropout DTP-3 / 1	34%	32%	25%	19%	17%	15%	12%	8%	6%	4%	5%	7%
Dropout BCG - Msl	27%	26%	29%	29%	28%	24%	19%	12%	9%	8%	9%	10%
Gap Msl - YF	2%	3%	2%	2%	1%	1%	0%	0%	0%	0%	0%	0%

Source: DOSH / EPI 2005

ACHIEVEMENTS OF THE HMIS UNIT

The major achievements of the HMIS can be enumerated as follows:

1. Health indicators were successfully reviewed, new form were designed introduced into the system.
2. The HMIS component was created and funded by the Participatory, Population and Nutrition project in the later part of 2000.
3. HMIS component coordinator recruited by PHPNP to guide and direct HMIS development

4. The HMIS database was developed at both central and divisional level.
5. The HMIS policy was successfully developed.
6. The HMIS unit created in the Directorate of Planning and Information
7. Data entry clerks were recruited for all the Health Divisions and major health centres.
8. Most health personnel were trained on the uses of HMIS data processing and management skills.
9. The HMIS technical guidelines was developed and distributed to all the Divisional health teams.
10. HMIS staff capacity built.
11. Computers were bought and distributed to all the health divisions and program units at the central level.
12. Local area networking (LANS) for all DHT computers and at DOSH is ongoing and should connect program units at the central level to the main server in the HMIS office.
13. Email and Internet services are available to most DHT offices and at the Department of state for Health and Social Welfare.
14. Annual health indicators data were collected and stored for past five years, 2001 to 2004.
15. www. Dosh.gm website was established and functional

CONSTRAINTS OF THE HMIS UNIT

1. There is no vehicle for the supervision and monitoring of data management at the field.
2. Computers at the DHTs and HMIS unit have served their life span and need replacement.
3. Lack of antivirus software.
4. DOSH website has been deactivated as a result of the non-payment of bills.
5. Inadequate USB chips for the transfer of data from DHTs to the HMIS unit.
6. Lack of photocopiers for the printing of data collection tools.
7. Shortage of stationeries for the production of tally sheets and forms.
8. No staff train to master's level (MSc.) in data management.
9. Lack of drawers and cupboard for the keeping of hard copies at DHTs and HMIS unit.
10. Lack of laptop for the management of data during supervisory trek.
11. The six DHTs Internet facilities have been deactivated as a result of the non-payment of the account by DOSH.
12. Inadequate supervision due to the unavailability of funds.

RECOMMENDATION

1. Provide vehicle to the HMIS unit for the monitoring and supervision of data managers and data entry clerks in the field.
2. Provide twelve new desktop computers, twelve printers and accessories to the DHTs and eight to the HMIS unit to replace the old ones.
3. Provide licence antivirus software to all computers.
4. Pay the DOSH website arrears and made advance payment for five years.

5. Provide twenty-five USB chips for the transfer of data from the DHTs to the HMIS unit and use some as data backup.
6. Provide one heavy-duty photocopier for the production of data collection tools.
7. Provide forty cartons of A4 papers for the production of tally sheets and forms.
8. Train one person to MSC. in data management and design, four data entry clerks to BSC. and two ICT Technicians to BSc.degree.
9. Provide six drawers and cupboard to the DHTs and four to the HMIS unit.
10. Provide three laptops to the HMIS unit for data management.
11. Provide the six DHTs with Internet facilities.
12. Provide funds for monthly trekking to all the Basic health facilities and DHTs for the supervision of data collectors and managers.
13. Provide a server for the storage of health information system data as a back up.
14. Provide one power point projectors to the HMI's unit.

CONCLUSION

The report has revealed some improvement in the health care delivery system. The incidence of malaria has decrease significantly in all the cohorts in 2005 as compare to 2004. Uncomplicated malaria in under fives has decreased from 215533 in 2004 to 189922 in 2005 (88.11 %). Uncomplicated malaria in over five years of age has decreased from 215533 in 2004 to 167673 in 2005 (77.79 %).

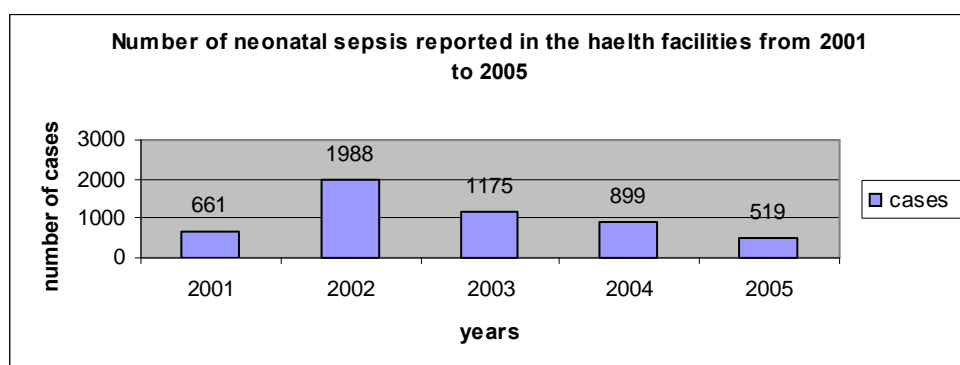
Admission due to severe malaria in over five years of age has decreased from 4726 in 2004 to 2195 in 2005 (46.44 %)

The above achievement could be associated with many factors such as:

- The distribution and use of ITNs.
- The distribution of IPT to pregnant women.
- Environmental sanitation exercises.
- Larviciding of water bodies.
- IEC and advocacy campaign mounted up by DOSH, UNICEF, WHO, Global Fund, CRS, TAYAM, NSGA, GAFNA, GRTS and other partners.

DISEASE TREND IN THE GAMBIA 2001 TO 2005

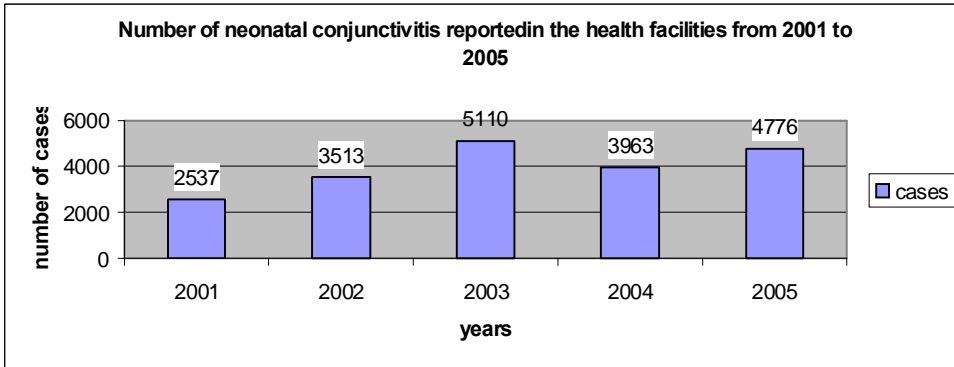
Figure 1. showing the number of neonatal Sepsis from 2001 to 2005



Source: DOSH / HMIS 2005

Neo natal Sepsis has being on the decrease from 2002 to 2005.

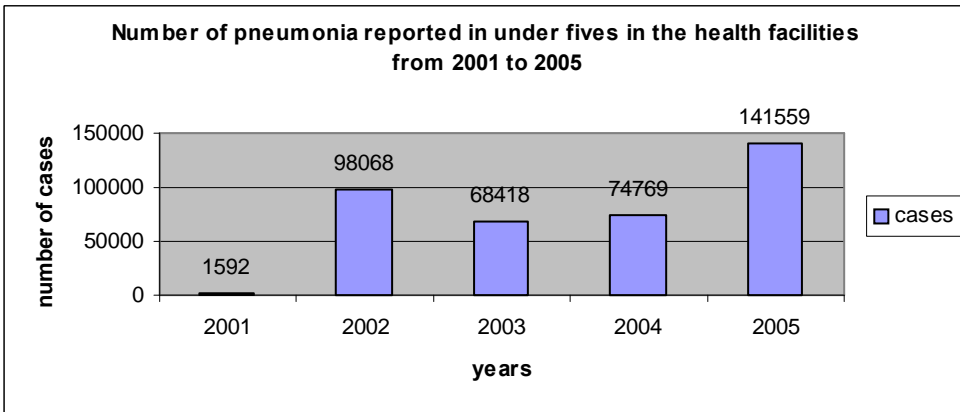
Figure 2. showing the number of neonatal Conjunctivitis from 2001 to 2005



Source: DOSH / HMIS 2005

Neo natal conjunctivitis has being on the increases from 2001 to 2003,declined in 2004 and increase in 2005.

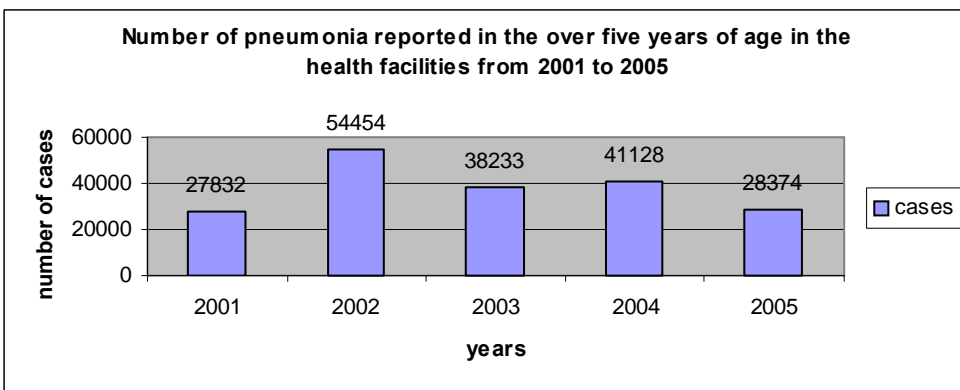
Figure 3. showing the number of Pneumonia reported in under fives from 2001 to 2005



Source: DOSH / HMIS 2005

Pneumonia reported in the under fives has being on the increase from 2003 to 2005.

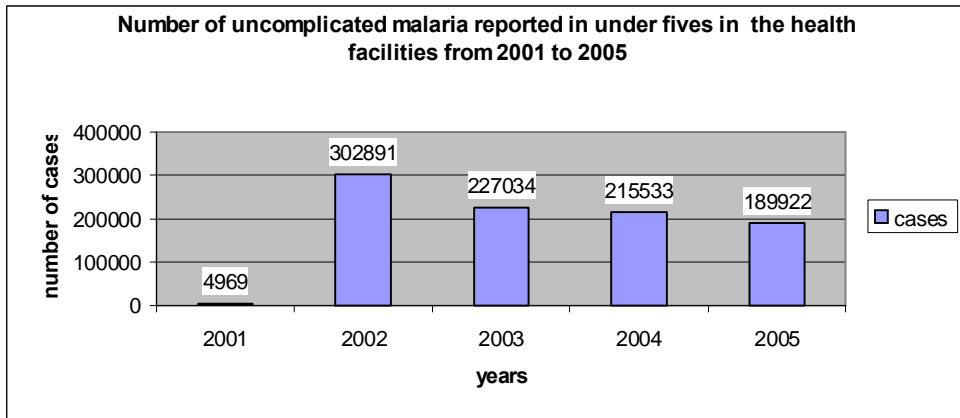
Figure 4. showing the number of pneumonia reported in the over fives from 2001 to 2005



Source: DOSH / HMIS 2005

Pneumonia reported in the over five years of age has decrease in 2005.

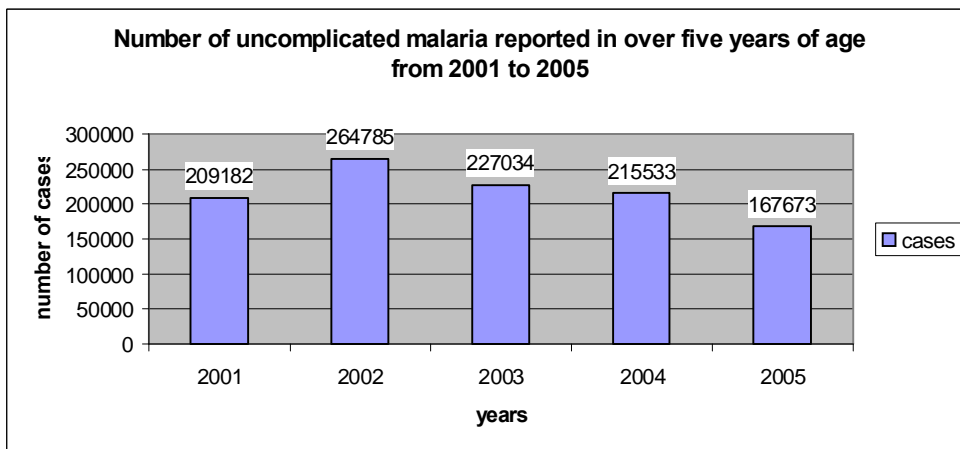
Figure 5. showing the number of uncomplicated malaria reported in under fives from 2001 to 2005



Source: DOSH / HMIS 2005

Uncomplicated malaria reported in under fives has been declining from 2002 to 2005.

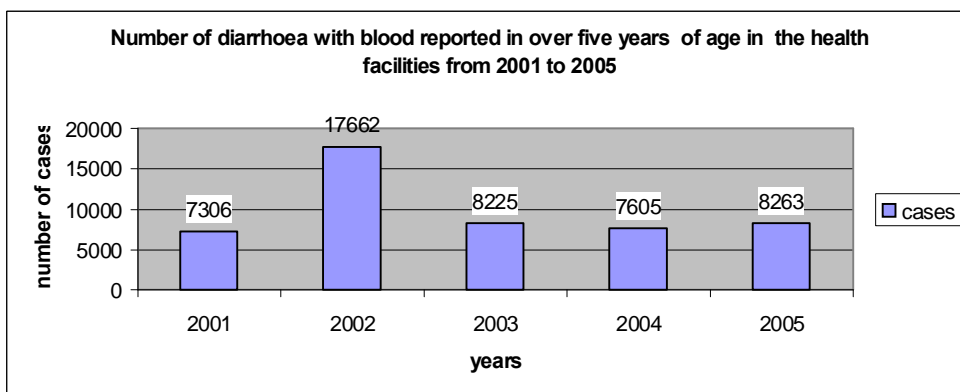
Figure 6. showing the number of uncomplicated malaria reported in the over fives from 2001 to 2005



Source: DOSH / HMIS 2005

Uncomplicated malaria reported in over five years of age has been declining from 2002 to 2005.

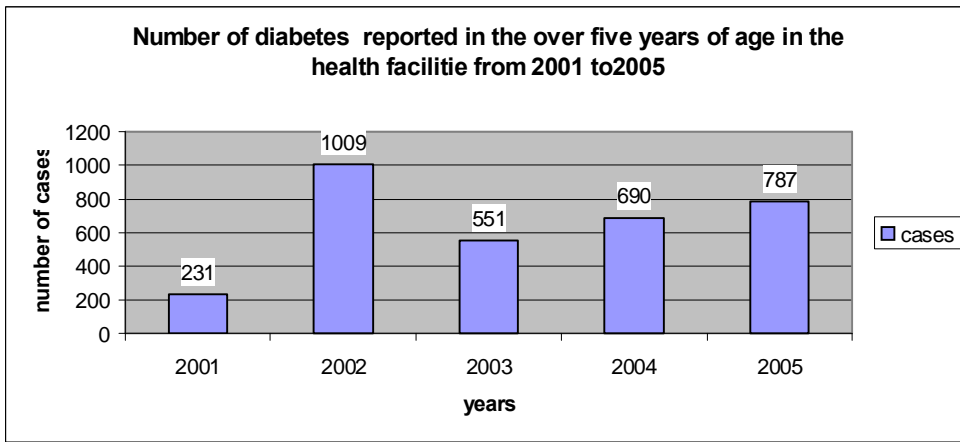
Figure 7. showing the number of diarrhea with blood in the over five years of age from 2001 to 2005



Source: DOSH / HMIS 2005

2002 have the highest number of Diarrhoea with blood reported in the facilities.

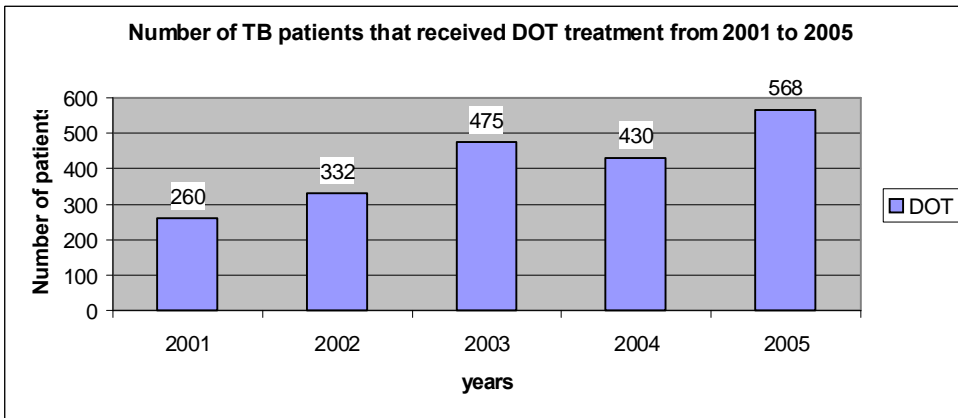
Figure 8. showing the number of Diabetes reported in the over five years of age from 2001 to 2005



Source: DOSH / HMIS 2005

Diabetes has been on the increase from 2003 to 2005.

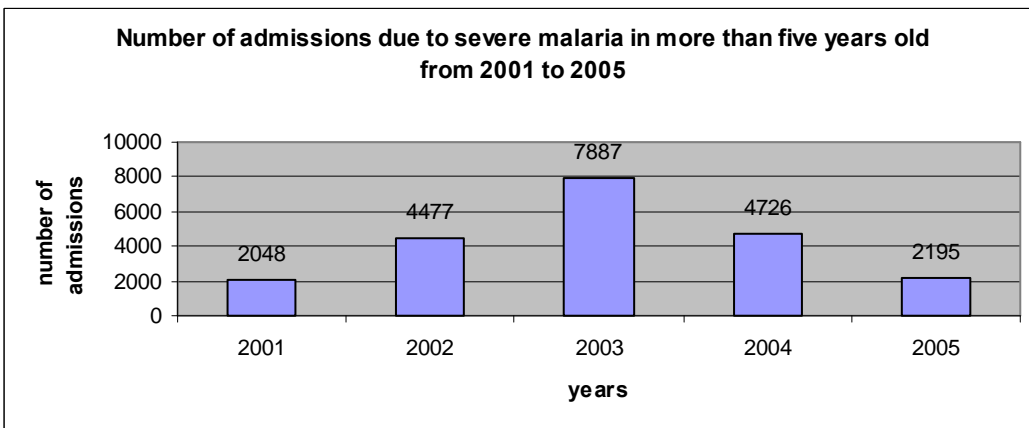
Figure 9. showing the number of TB patients that received the DOTS from 2001 to 2005



Source: DOSH / HMIS 2005

TB patients receiving DOT treatment has been on the increase.

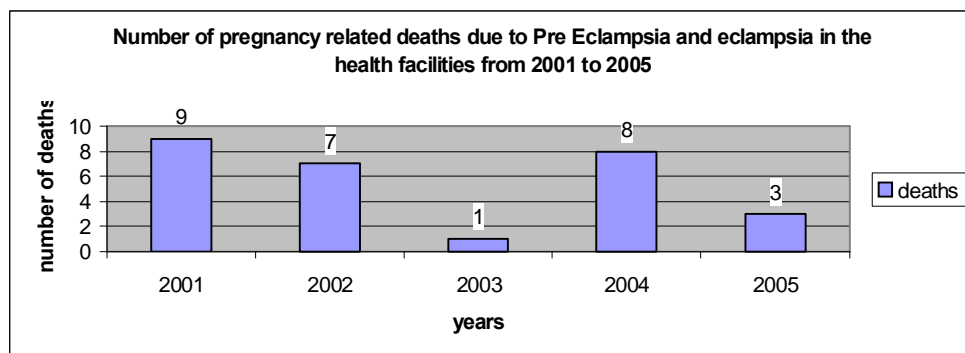
Figure 10. showing the number of admission due severe malaria in more than five years old from 2001 to 2005



Source: DOSH / HMIS 2005

Admission due to severe malaria in more than five years of age is declining from 2003 to 2005.

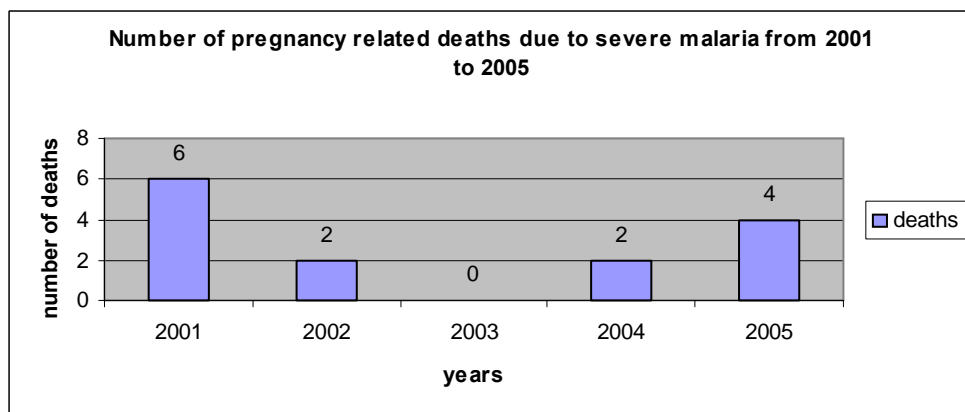
Figure 11. showing the number of pregnancy related deaths due to Pre eclampsia and eclampsia from 2001 to 2005



Source: DOSH / HMIS 2005

Pregnancy related deaths due to pre Eclampsia and eclampsia in the facilities have been declining from 2001 to 2003, increase in 2004 and decline in 2005.

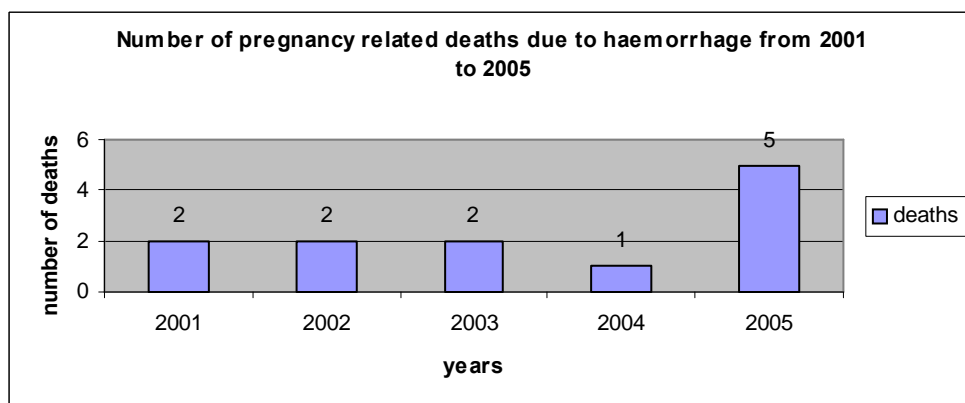
Figure 12. showing the number of pregnancy related deaths due to malaria from 2001 to 2005



Source: DOSH / HMIS 2005

Pregnancy related deaths due to severe malaria have been on the increase from 2003 to 2005.

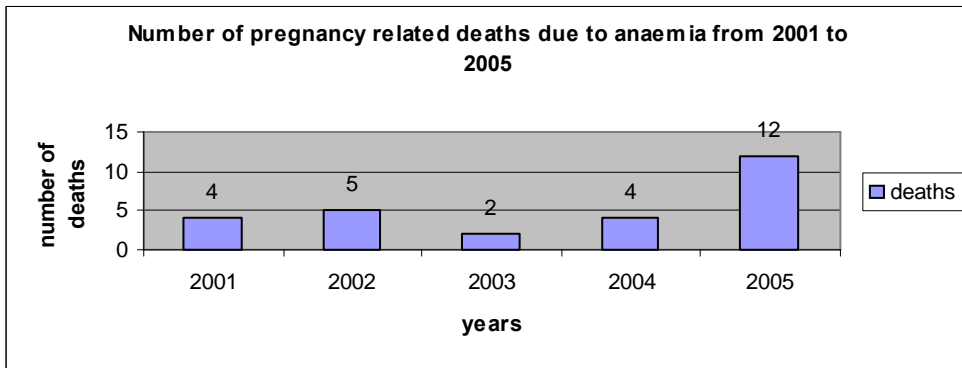
Figure 13. showing the number of pregnancy related deaths due to haemorrhage from 2001 to 2005



Source: DOSH / HMIS 2005

Pregnancy related deaths due to haemorrhage was stabilize from 2001 to 2004 and increase in 2005.

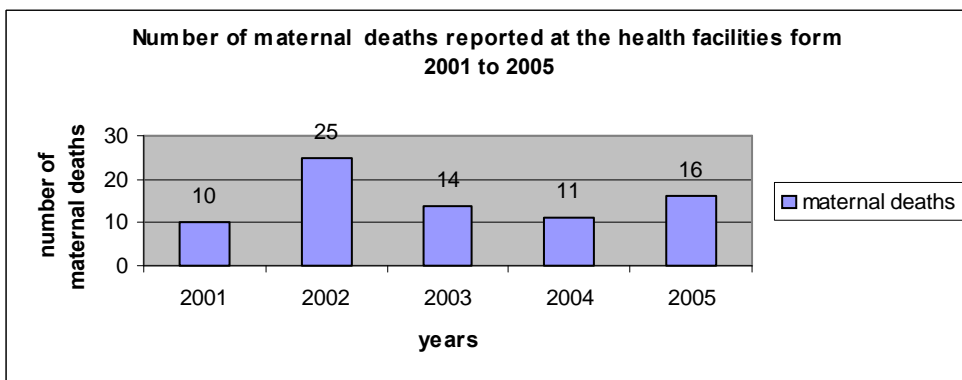
Figure 14. showing the number of pregnancy related deaths due to anaemia from 2001 to 2005



Source: DOSH / HMIS 2005

Pregnancy related deaths due to anaemia have being on the increase from 2003 to 2005.

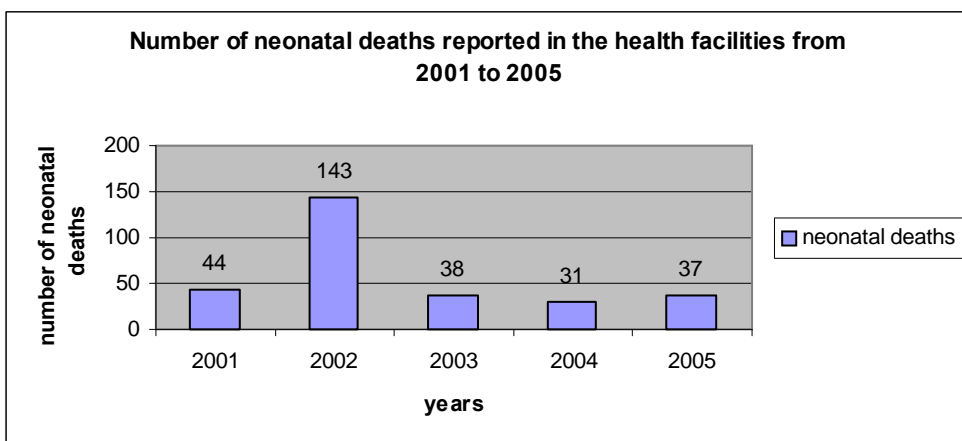
Figure 15. showing the number of maternal deaths reported at the facilities from 2001 to 2005



Source: DOSH / HMIS 2005

2002 reported the highest number of maternal deaths in the facilities

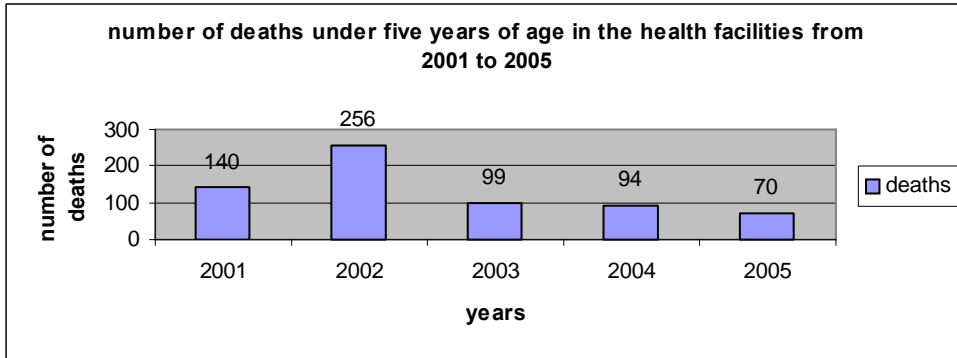
Figure 16. showing the number of neonatal deaths reported in the health facilities from 2001 to 2005.



Source: DOSH / HMIS 2005

2002 reported the highest number of neonatal deaths in the facilities

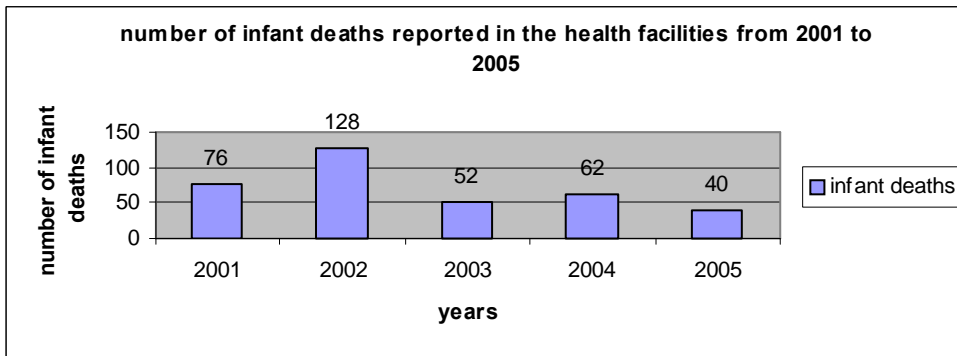
Figure 17. showing the number of deaths under five years of age in the health facilities from 2001 to 2005



Source: DOSH / HMIS 2005

Deaths under five years of age have been on the decrease from 2002 to 2005

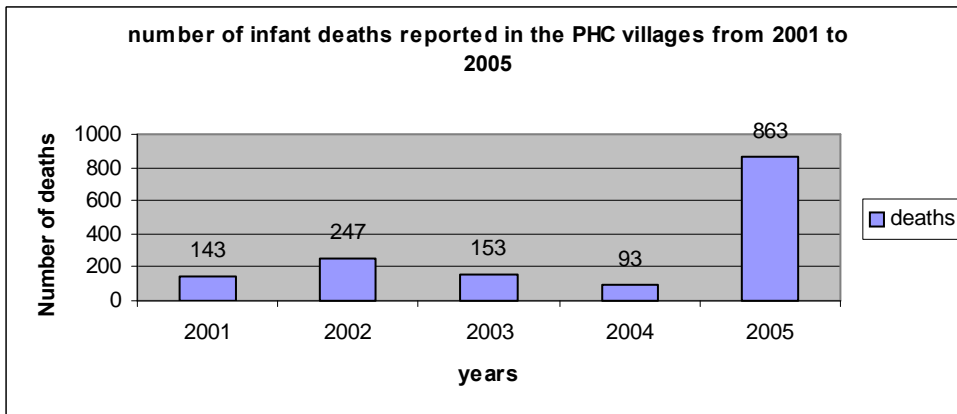
Figure 18. showing the number of infant deaths in the health facilities from 2001 to 2005



Source: DOSH / HMIS 2005

2002 reported the highest number of infant deaths in the facilities.

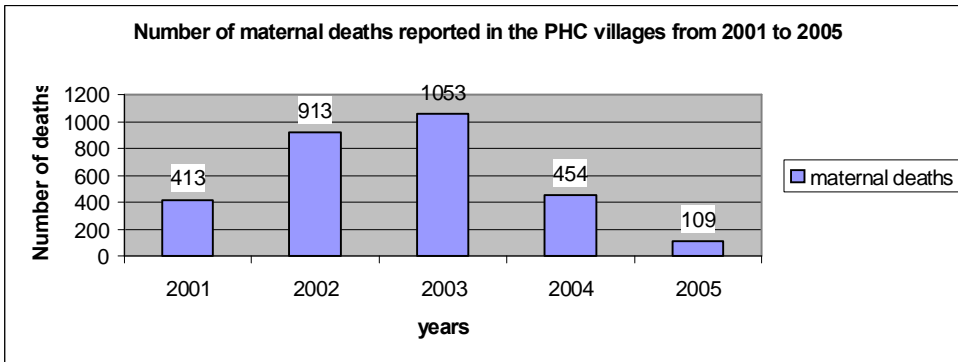
Figure 19. showing the number of infant deaths reported in the PHC villages from 2001 to 2005



Source: DOSH / HMIS 2005

2005 reported the highest number of infant deaths in the PHC villages.

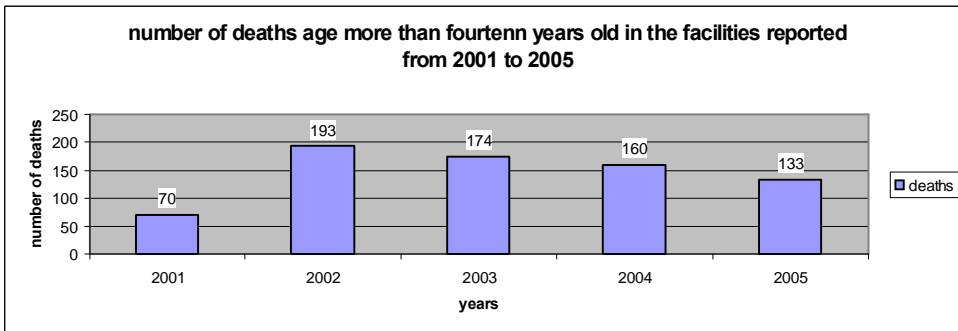
Figure 20. showing the number of maternal deaths reported in the PHC villages from 2001 to 2005



Source: DOSH / HMIS 2005

Maternal deaths have been on the decrease from 2003 to 2005 in the PHC villages

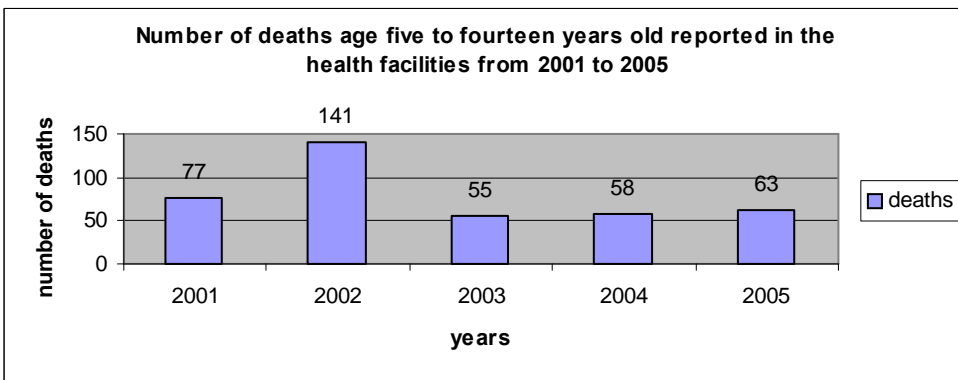
Figure 21. showing the number of deaths more than fourteen years of age in the health facilities from 2001 to 2005



Source: DOSH / HMIS 2005

Deaths age more than fourteen years have been on the decrease from 2002 to 2005

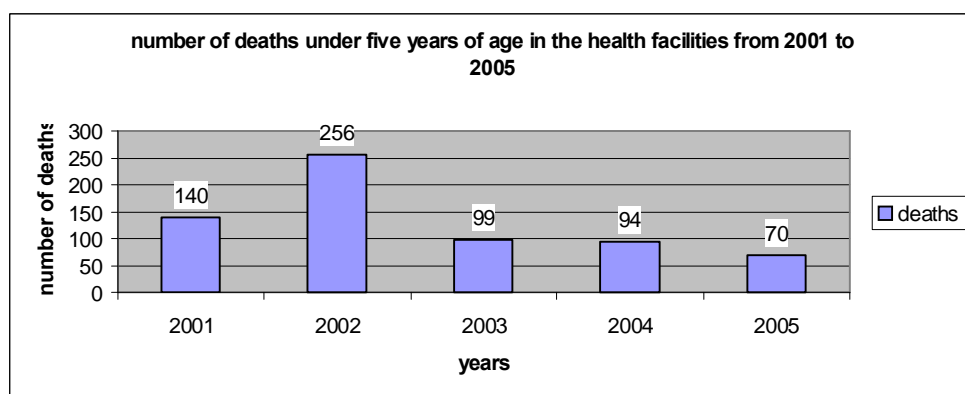
Figure 22. showing the number of deaths age five to fourteen year old from 2001 to 2005



Source: DOSH / HMIS 2005

2002 have the highest number of deaths age five to fourteen years reported in the facilities.

Figure 23. showing the number of deaths under five years of age from 2001 to 2005

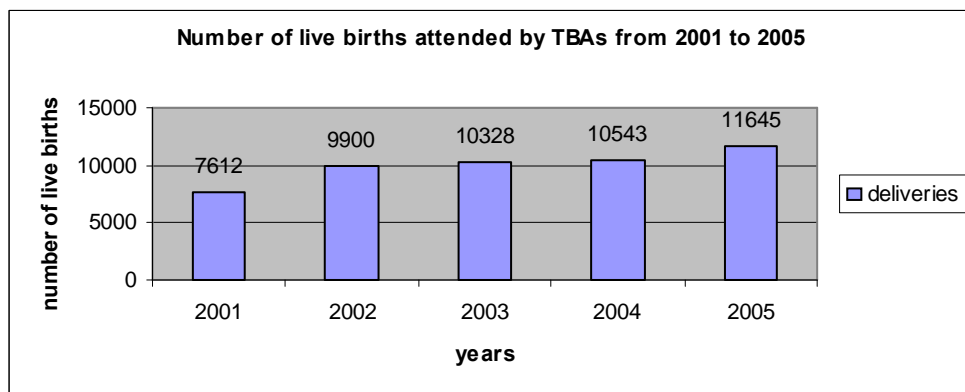


Source: DOSH / HMIS 2005

Deaths under fives in the facilities have been declining from 2002 to 2005.

TREND OF SERVICES IN THE GAMBIA FROM 2001 TO 2005

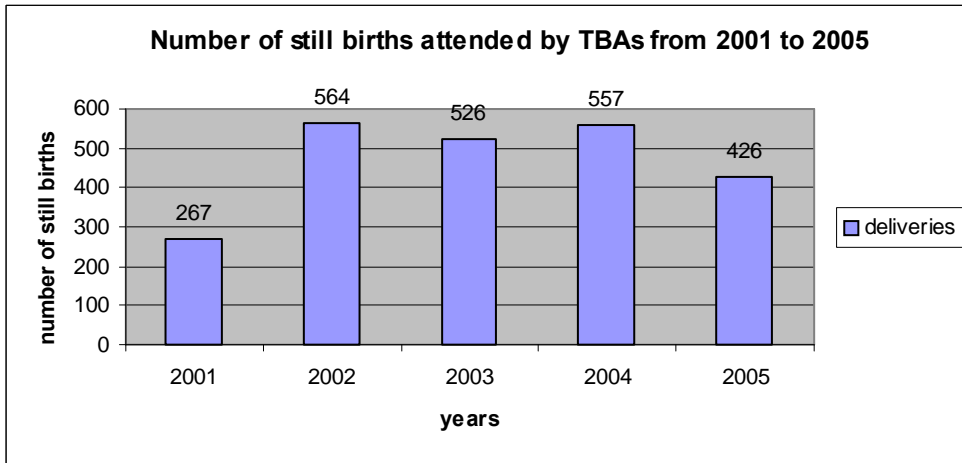
Figure 24. showing the number of live births attended by TBAs from 2001 to 2005



Source: DOSH / HMIS 2005

Births attended by TBAs have been on the increase from 2001 to 2005.

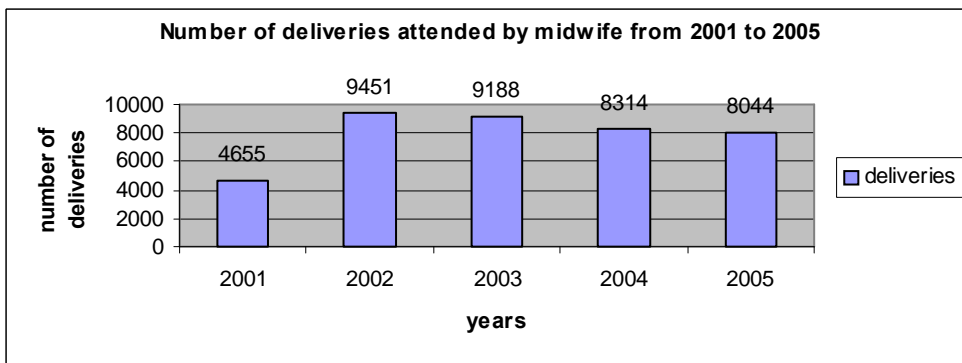
Figure 25. showing the number of stillbirths attended by TBAs from 2001 to 2005



Source: DOSH / HMIS 2005

Stillbirths attended by TBAs have decrease in 2005.

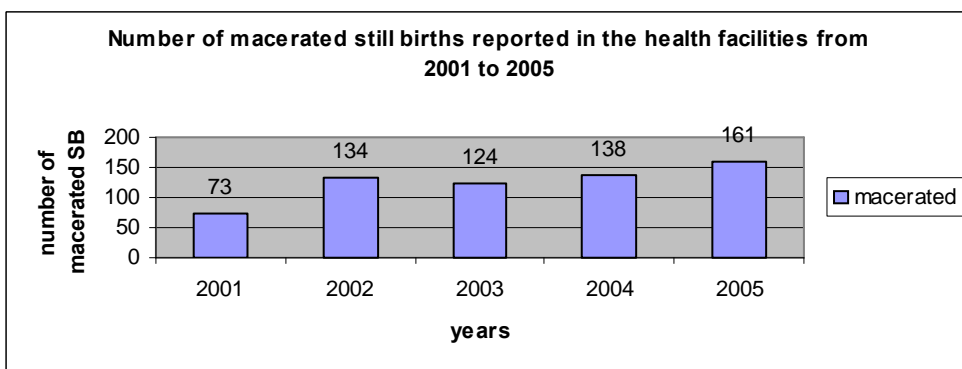
Figure 26. showing the number of live births attended by midwives from 2001 to 2005



Source: DOSH / HMIS 2005

Births attended by midwives have being on the decrease from 2002 to 2005.

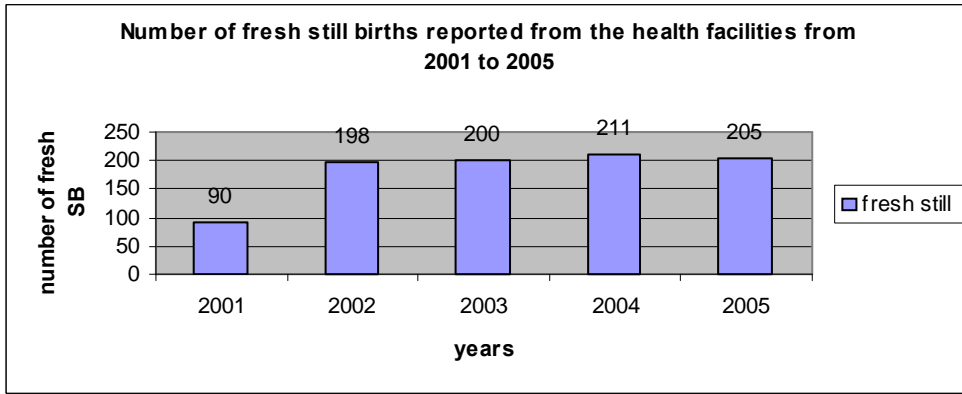
Figure 27. showing the number of macerated reported in the health facilities from 2001 to 2005



Source: DOSH / HMIS 2005

Macerated stillbirths have being increasing in the facilities from 2003 to 2005.

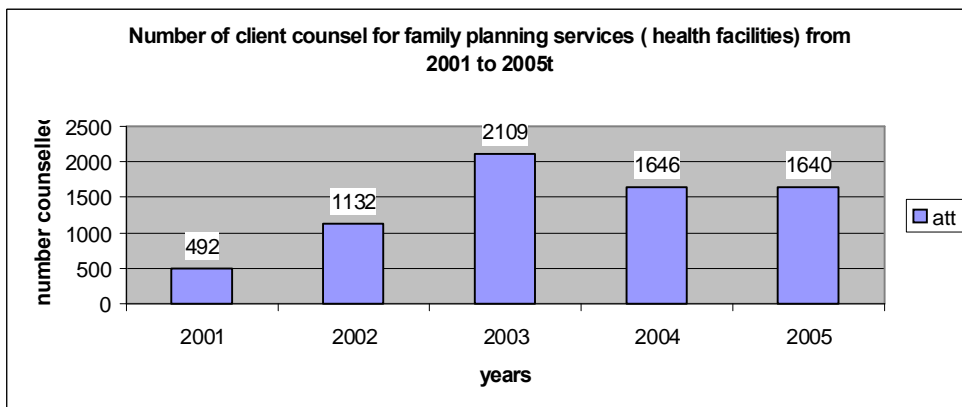
Figure 28. showing the number of fresh stillbirths reported from the health facilities from 2001 to 2005



Source: DOSH / HMIS 2005

Fresh stillbirths have decrease in 2005.

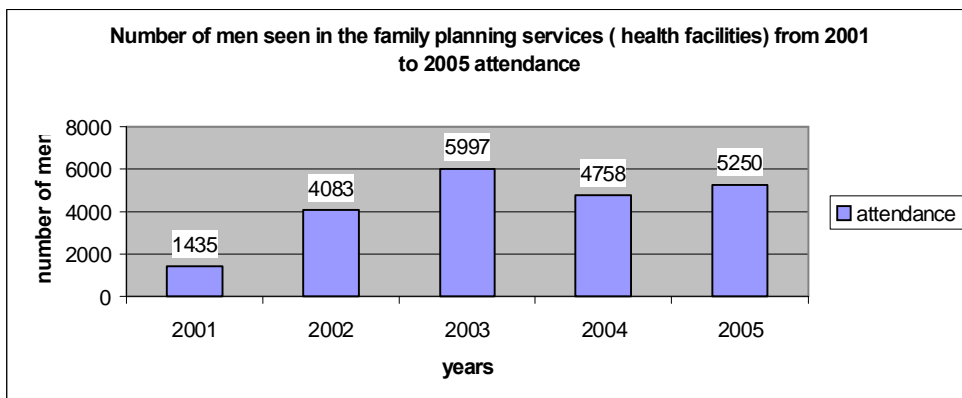
Figure 29. showing the number of clients counsel for family planning services from 2001 to 2005



Source: DOSH / HMIS 2005

Clientsøcounsel for Family Planning have being increasing from 2001 to 2003, decline in 2004 and 2005.

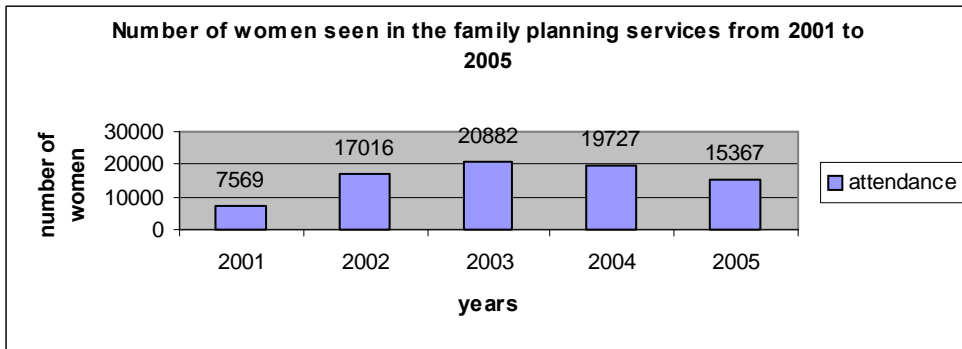
Figure 30. showing the number of men seen in the family planning services from 2001 to 2005



Source: DOSH / HMIS 2005

Men attending family planning services have being increasing from 2001 to 2003, decline in 2004 and increase in 2005.

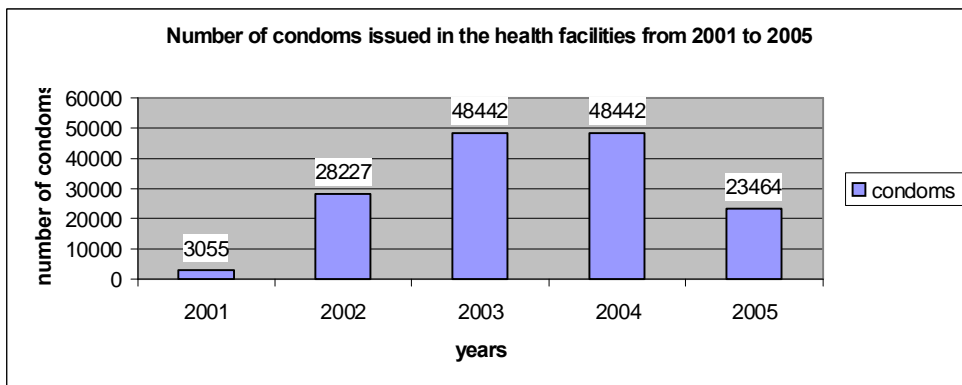
Figure 31. showing the number of women seen in the family planning services from 2001 to 2005



Source: DOSH / HMIS 2005

Women attending family planning services have been increasing from 2001 to 2003, decline in 2004 and 2005.

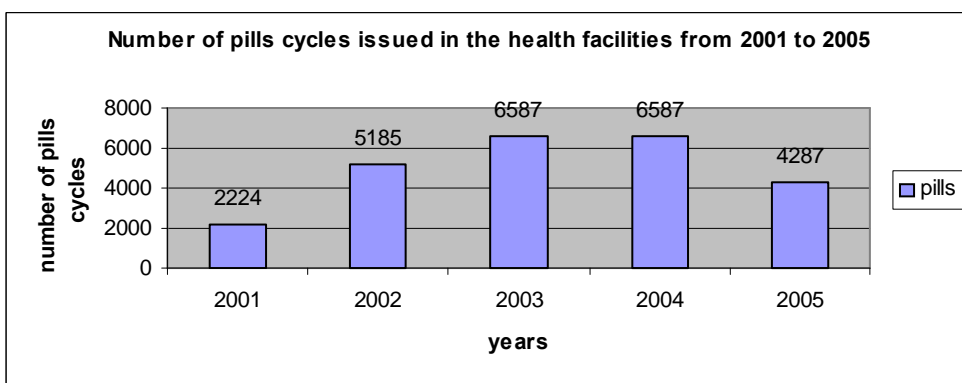
Figure 32. showing the number of condoms issued in the health facilities from 2001 to 2005



Source: DOSH / HMIS 2005

Condom issued in the facilities has been on the increase from 2001 to 2004 and decline in 2005.

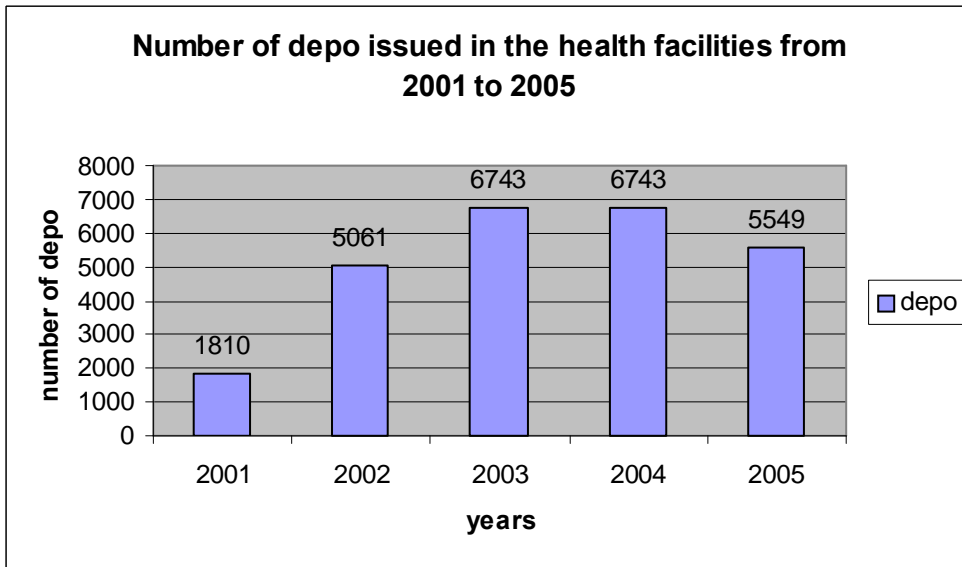
Figure 33. showing the number of pills cycles issued in the health facilities from 2001 to 2005



Source: DOSH / HMIS 2005

Pills issued in the facilities have been on the increase from 2001 to 2004 and decline in 2005.

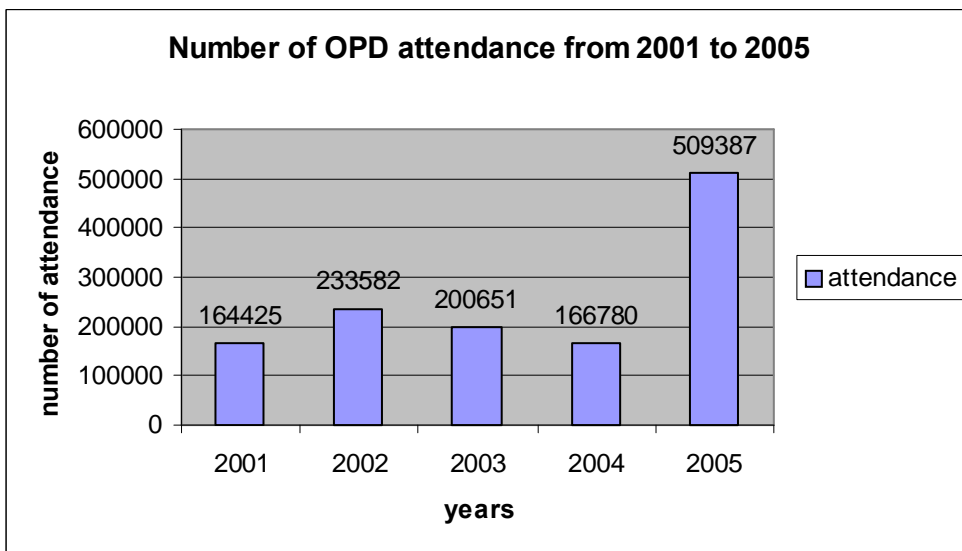
Figure 34. showing the number of depo provera issued in the health facilities from 2001 to 2005



Source: DOSH / HMIS 2005

Depo injections issued in the facilities have been on the increase from 2001 to 2004 and decline in 2005.

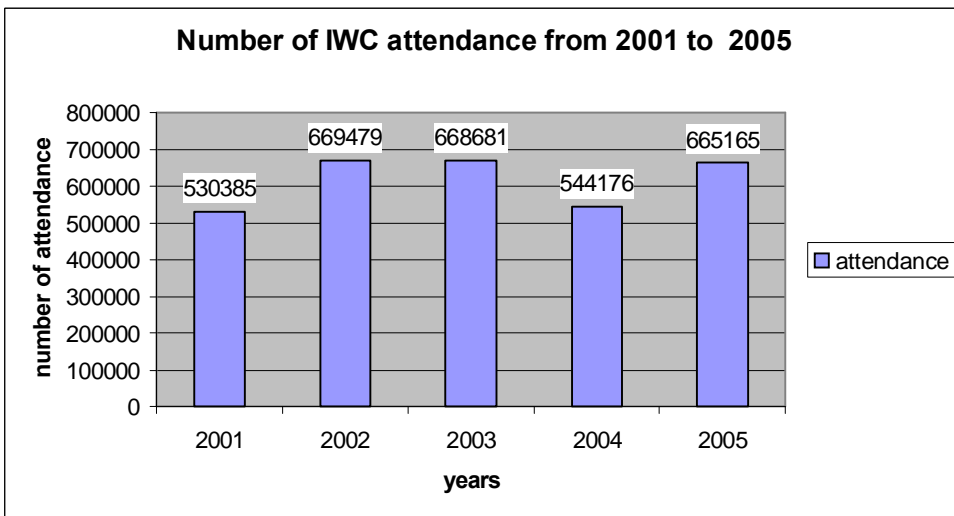
Figure 35. showing the number of OPD attendance from 2001 to 2005



Source: DOSH / HMIS 2005

OPD attendance has been on the decline from 2002 to 2004 and increases sharply in 2005.

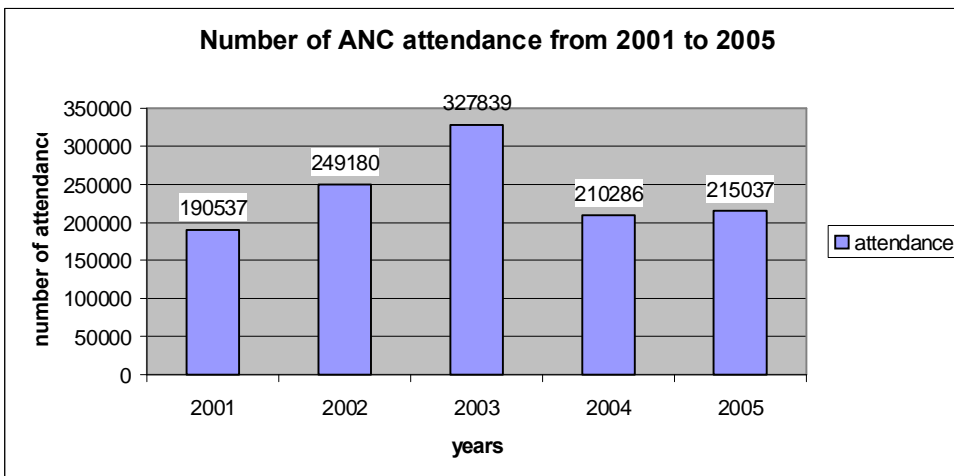
Figure 36. showing the number of IWC attendance from 2001 to 2005



Source: DOSH / HMIS 2005

IWC attendance has been on the decline from 2002 to 2004 and increases in 2005.

Figure 37. showing the number of ANC attendance from 2001 to 2005



Source: DOSH / HMIS 2005

ANC attendance has been on the increases from 2001 to 2003 and decline in 2004.

DEMOGRAPHIC CHARACTERISTICS

Population growth and distribution

Table 1. Showing Population distribution by area, gender and sex

Age group	Gambia		Urban		Rural	
	Both Sex	Female	Both Sex	Female	Both Sex	Female
0-4	193,921	96,341	88,910	44,061	105,011	52,280
5-9	206,204	102,108	89,274	44,913	116,930	57,195
10-19	329,505	167,091	162,668	84,661	166,837	82,430
20-39	403,454	213,284	235,605	114,890	167,849	98,394
40-59	146,578	71,440	74,522	32,984	72,056	38,456
60+	81,019	39,576	35,111	17,042	45,908	22,534
Total	1,360,681	689,840	686,090	338,551	674,591	351,289

Source: CSD, 2003 Preliminary Census estimates

Total population projection

Household size

Table 2. Showing Household size by Local Government Area

LGA	1993	2003
Banjul	6.02	5.16

Kanifing	7.26	6.50
Brikama	9.16	8.66
Mansakonko	7.92	8.56
Kerewan	9.37	9.36
Kuntaur	10.05	11.05
Janjangbureh	9.99	10.43
Basse	13.61	14.70
The Gambia	8.95	8.61

Source: CSD, 2003 Preliminary Census estimates

Table 3. Showing Population and household distribution by Local Govt. Area

Local Government Area	No. of households		Population	
	1993	2003	1993	2003
<i>Banjul</i>	7032	6744	42326	34828
<i>Kanifing</i>	31426	49564	228214	322410
<i>Brikama</i>	25649	45396	234917	392987
<i>Mansakonko</i>	8227	8474	65146	72546
<i>Kerewan</i>	16695	18458	156462	172806
<i>Kuntaur</i>	6744	7155	67774	79098
<i>Janjanbureh</i>	8836	10244	88247	106799
<i>Basse</i>	11392	12454	155059	183033
<i>The Gambia</i>	116001	158489	1038145	1364507

Source: 2003 Population and Housing Census Preliminary Estimates, CSD

Table 4. Showing Population growth rate and % change by Local Govt. Area

Local Government Area	Annual Growth		% Change		Density	
	1983-1993	1993-2003	1983-1993	1993-2003	1983-1993	1993-2003
<i>Banjul</i>	(0.4)	(1.93)	(4.2)	(17.71)	3,461	2,848
<i>Kanifing</i>	8.4	3.52	124.0	41.28	3,021	4,268
<i>Brikama</i>	5.5	5.28	71.2	67.29	133	223
<i>Mansakonko</i>	1.7	1.08	17.9	11.36	40	45
<i>Kerewan</i>	3.4	1.00	39.4	10.45	69	77
<i>Kuntaur</i>	1.6	1.56	17.7	16.71	46	54
<i>Janjanbureh</i>	2.6	1.93	30.0	21.02	62	75

<i>Basse</i>	3.4	1.67	39.2	18.04	75	88
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*Source: 2003 Population and Housing Census Preliminary Estimates, CSD.
Figures in brackets indicate a net loss of population due to migration.*

Table 5. Showing Percentage distribution of households by main source of energy for lighting and area

Area	Main Source of Energy		
	Electricity (NAWEC)	Electricity (Generator)	Solar
Urban	42.8	1.5	0.9
Rural	0.5	1.3	1.4
Both	26.5	1.4	1.1

Source: 2003 Population and Housing Census

Table 6. Showing Percentage distribution of households by main source of energy for lighting and LGA

Area	Main Source of Energy			
	Electricity (NAWEC)	Electricity (Generator)	Solar	Total
Banjul	75.2	0.5	0	100
Kanifing	57.8	1.1	0.3	100
Brikama	11.2	2.1	1.7	100
Mansakonko	10.0	1.1	1.0	100
Kerewan	6.2	1.0	1.4	100
Kuntaur	-	1.1	0.9	100
Janjangbureh	7.3	1.0	0.7	100
Basse	3.2	1.8	2.6	100
Total	26.5	1.4	1.1	100

Source: 2003 Population and Housing Census

Table 7. Showing Mortality Rates by Local Government Area, 2003

Local Government Area	Infant Mortality Rate			Under-Five Mortality Rate		
	Male	Female	Total	Male	Female	Total
Banjul			36			41
Kanifing			51			61
Brikama			71			93
Mansakonko			96			137
Kerewan			81			109
Kuntaur			94			134
Janjanbureh			92			128
Basse			82			110
The Gambia	79	70	75	103	94	99

Source: 2003 Population and Housing Census

Life Expectancy At Birth = 64 Years

Table 8. Showing Sex Ratio At Birth, 2003

LGA	MALE	FEMALE	Total	Sex Ratio
BANJUL	360	365	725	98.6
KANIFING	3616	3455	7071	104.7
BRIKAMA	4914	4831	9745	101.7

MANSAKONKO	741	735	1476	100.8
KEREWAN	2077	1952	4029	106.4
KUNTAUR	803	757	1560	106.1
JANJANBURAY	1048	1014	2062	103.4
BASSE	1877	1715	3592	109.4
THE GAMBIA	15436	14824	30260	104.1

Source: 2003 Population and Housing Census

Table 9. Showing Total population projection 2003 to 2020

BOTH SEXES

The gam~1

2003	1,360,681
2004	1,408,763
2005	1,458,542
2006	1,509,928
2007	1,562,894
2008	1,617,521
2009	1,673,603
2010	1,731,102
2011	1,790,083
2012	1,850,347
2013	1,911,974
2014	1,974,759
2015	2,038,638
2016	2,103,695
2017	2,169,734
2018	2,236,694
2019	2,304,963
2020	2,374,351

Source: 2003 Population and Housing Census

Table 10. Showing Age-Specific Fertility Rates per 1,000 women, Total Fertility Rates (TFR), Crude Birth Rate (CBR), General Fertility Rate (GFR), Mean age at childbearing (m) and percentage changes in TFR by Local Government Areas, 1993 and 2003

1993 Census

Age group	Banjul	Kanifing	Western Division	Lower River Division	North Bank Division	Central River Division (North)	Central River Division (South)	Upper River Division	The Gambia
15-19	81.4	119.4	165.1	208.5	185.4	216.5	206.3	211.3	167.3
20-24	197.3	217.1	270.8	311.3	314.2	310.3	296.4	289.9	271.5
25-29	223.2	230.3	258.9	304.2	315.8	328.0	284.8	289.9	275.9
30-34	181.3	170.0	207.4	261.3	249.8	261.8	233.9	229.3	220.8
35-39	144.3	124.2	153.2	188.5	180.7	195.5	174.4	167.1	159.3
40-44	70.3	59.1	71.3	92.8	75.4	111.5	66.8	77.0	75.4
45-49	32.1	22.9	48.9	35.7	47.1	43.6	39.2	47.5	38.2
TFR	4.65	4.72	5.88	7.01	6.84	7.34	6.51	6.56	6.04
CBR	36.2	39.2	43.5	51.2	49.7	55.4	49.3	50.1	46.2
GFR	148.1	162.5	194.0	226.1	223.6	241.6	216.9	219.5	208.5
M	29.4	28.2	28.4	28.2	28.2	28.4	27.9	28.0	28.3

Source: 1993 Population and Housing Census

**Table 11. Showing Percentage distribution and change of total fertility rates by LGA
2003**

Age group	Banjul	Kanifing	Western Division	Lower River Division	North Bank Division	Central River Division (North)	Central River Division (South)	Upper River Division	The Gambia
15-19	56.4	66.6	89.2	132.6	113.2	129.1	133.2	158.8	102.8
20-24	154.7	160.7	210.1	265.2	253.5	254.2	256.9	270.4	223.2
25-29	192.4	204.7	244.5	285.6	284.2	302.7	283.8	283.6	261.2
30-34	173.0	174.5	211.8	244.9	244.8	244.2	244.1	233.9	223.9
35-39	136.6	117.6	145.9	168.9	167.5	175.2	175.1	167.5	155.9
40-44	46.5	55.0	67.2	80.2	68.4	93.3	70.0	74.1	.69.9
45-49	25.7	22.0	33.0	32.6	35.3	41.1	37.2	50.2	34.2
TFR	3.93	4.01	5.01	6.05	5.83	6.19	6.00	6.19	5.35
CBR	30.6	33.6	37.8	43.0	42.5	45.6	48.3	50.7	41.0
GFR	122.9	130.6	160.7	190.1	185.2	196.6	191.8	199.6	172.3
M	29.7	29.3	29.2	28.7	28.9	29.1	28.8	28.6	29.1
% change 1993/2003	-15.6	-15.0	-14.8	-13.7	-14.7	-15.5	-7.8	-5.6	-11.4

Source: 2003 Population and Housing Census

Gambia has one of the highest fertility rates in the world, but the 2003 population and housing census shows a decline in fertility. The total fertility rate was 6.4 in 1983, declined 6.04 in 1993 and to 5.35 in 2003. The decline in fertility could be due to delay in marriage, increased girls education, and contraceptive use. Across LGAs fertility rates is lowest in Banjul 3.93 and highest in Kuntaur LGA 6.19. Among the age groups, fertility is highest among the female population 25 ó 29 years and lowest among those between the ages 45 ó 49 years. The table also shows a decline in fertility across all LGAs as indicated in the percentage change between 1993/2003.

Table 12. Age-Specific Fertility Rates (per 1000 women) and the Total Fertility Rates and CBR, The Gambia's 2003 Census and Senegal's 2005 DHS

Age Group	2003 Census	2005 DHS ¹
15-19	102.8	101.0
20-24	223.2	212.0
25-29	261.2	248.0
30-34	223.9	226.0
35-39	155.9	169.0
40-44	69.9	75.0
45-49	34.2	21.0
TFR	5.35	5.30
CBR	41.0	39.1

Source: 2003 Population and Housing Census

Table 13. Comparison of Age-Specific Fertility Rates (per 1000 women), Total Fertility Rates and estimated births 1973, 1983, 1993 and 2003 Censuses

Age Group	1973 Census	1983 Census	1993 Census	2003 Census
15-19	199.2	200.1	167.3	103.8
20-24	302.1	293.0	271.5	223.2
25-29	287.7	284.7	275.9	261.2
30-34	212.3	222.4	220.8	223.9
35-39	163.6	160.6	159.3	155.9
40-44	74.3	77.2	75.4	69.9
45-49	40.8	40.4	38.2	34.2
TFR	6.40	6.40	6.04	5.35
CBR	51.4	50.5	46.2	41.0
Estimated births (-000)	25	33	40	49

Source: 1973, 1983, 1993 and 2003 Censuses, Central Statistics Department

Table 14. Showing Comparison of Age-Specific Fertility Rates, Total Fertility Rates by type of Residence, 1993 and 2003 Censuses

Age Group	1993 Census		
	Urban	Rural	Total
15-19	0.1132	0.1789	0.1673
20-24	0.2436	0.3165	0.2715
25-29	0.2817	0.3260	0.2759
30-34	0.2286	0.2717	0.2208
35-39	0.1581	0.2031	0.1593
40-44	0.0800	0.0979	0.0754
45-49	0.0330	0.0560	0.0382
TFR	5.69	7.25	6.04
Age Group	2003 Census		
	Urban	Rural	Total
15-19	0.0758	0.1251	103.8
20-24	0.1814	0.2574	223.2
25-29	0.2275	0.2818	261.2
30-34	0.1970	0.2376	223.9
35-39	0.1323	0.1694	155.9
40-44	0.0603	0.0752	69.9
45-49	0.0251	0.0400	34.2
TFR	4.50	5.93	5.35

Source: 1993 and 2003 Population and Housing Census

¹ Preliminary result

Table 15. Showing Comparisons of percentage distribution of women 15-49 years and over by marital status, 1993, 2003 Censuses and 2005 DHS Senegal

Marital Status, 1993							
Age group	Never Married	Married	Divorced	Separated	Widowed	Total	Number of women
15-19	61.2	37.8	0.6	0.3	0.2	100.0	56,026
20-24	25.2	72.2	1.7	0.5	0.4	100.0	46,626
25-29	9.1	87.8	2.1	0.5	0.6	100.0	47,126
30-34	4.4	91.7	2.3	0.6	1.0	100.0	34,756
35-39	2.7	92.5	2.5	0.7	1.6	100.0	24,529
40-44	2.3	91.3	2.2	0.8	3.5	100.0	20,554
45-49	2.3	88.3	2.3	0.8	6.2	100.0	12,449
Total	22.0	74.6	1.7	0.5	1.2	100.0	242,066
Marital Status, 2003							
15-19	79.6	20.0	0.2	0.1	0.1	100.0	80,610
20-24	40.5	57.5	1.4	0.3	0.3	100.0	70,171
25-29	16.2	80.3	2.2	0.4	0.8	100.0	61,431
30-34	7.0	88.2	2.8	0.6	1.5	100.0	44,884
35-39	4.0	90.7	2.5	0.5	2.3	100.0	35,416
40-44	2.4	89.8	2.8	0.7	4.4	100.0	28,210
45-49	2.1	87.1	2.9	0.7	7.1	100.0	18,219
Total	31.9	64.5	1.8	0.4	1.4	100.0	338,941
Total DHS Senegal	27.0	67.6	4.3 ²	N/A	1.2	100.00	15,587

Source: 1993 and 2003 Population and Housing Censuses

Table 16. Showing Age – Specific percentage change in fertility and TFR, The Gambia and selected African countries

Age Group	Gambia 1993/2003	Ghana 1993/2003	Kenya 1999/2000-03	Senegal 1992-2005	Burkina Faso 1993/2003	Benin 1996/2001	Chad 1996/97-2004	Cameroon 1998/2004
15-19	-38	-36	-20	-20	-15	-11	-4	-3
20-24	-18	-20	-4	-15	-7	-4	-6	0
25-29	-5	-10	-2	-7	-7	-8	-12	-5
30-34	1	-13	6	-7	-7	-10	3	3
35-39	-2	-1	-3	-9	-18	-25	-3	-7
40-44	-7	-20	-2	-24	-5	-13	7	-16
45-49	-11	64	114	-38	-16	-13	0	-20
TFR	-11	-15	-2	-12	-9	-11	-5	-4

Sources:

- 1) Gambia Censuses, 1993 and 2003
- 2) Ghana, DHS, 1993 and 2003
- 3) Kenya, Census, 1999 and DHS, 2000-03
- 4) Senegal, DHS, 1992 and 2005 (Preliminary results)
- 5) Burkina Faso, DHS 1993 and 2003
- 6) Benin, DHS, 1996 and 2001
- 7) Chad, DHS, 1996/97 and 2004
- 8) Cameroon, DHS, 1998 and 2004

² Includes category 'separated' in DHS Senegal

Table 17. Comparison of 1993 and 2003 Economically Active Populations

Activity Characteristics	1993	2003	% Change
Total economically active	345,381	513,410	48.65
Males	207,310	282,440	36.24
Females	138,071	230,970	67.28
Total Employed	332,104	482,439	45.27
Males	198,824	265,390	33.48
Females	133,280	217,049	62.85
Total Unemployed	13,277	30,971	133.27
Males	8,486	17,050	100.92
Females	4,791	13,921	190.57
% economically active employed	96.16	93.97	-2.28
Males	95.91	93.96	-2.03
Females	96.53	93.97	-2.65

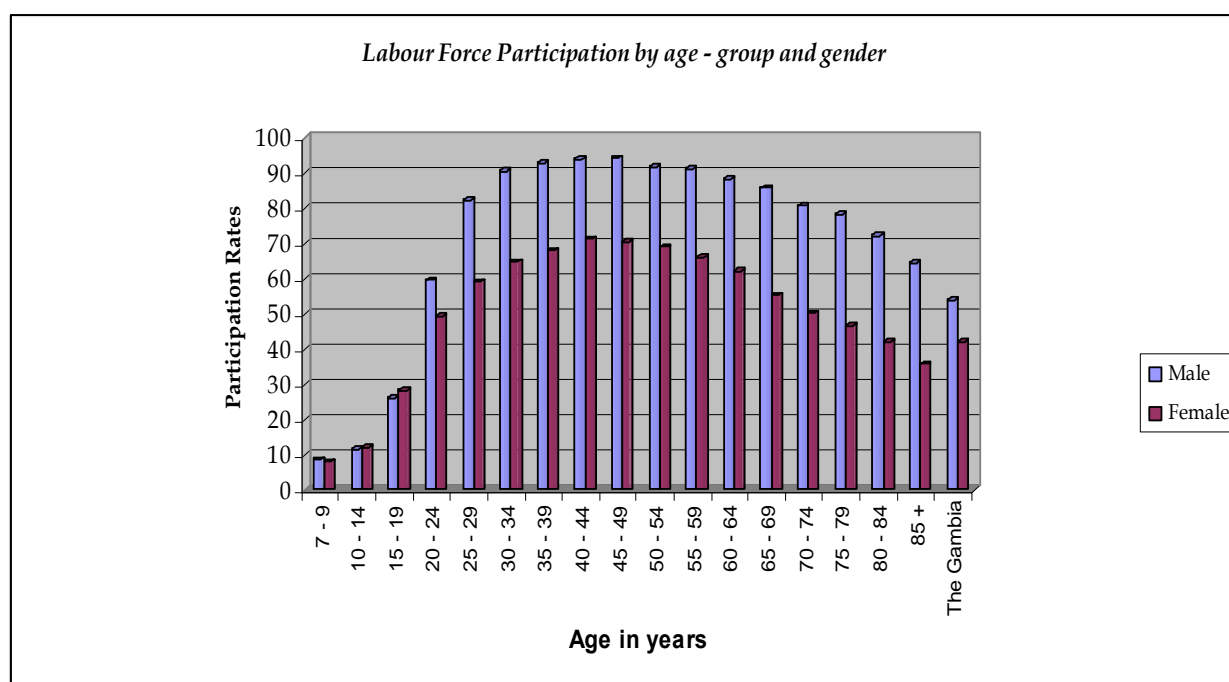
Source: 2003 Population and Housing Census

Table 18. Showing Distribution of Labour Force Participation Rates by Age-group and Gender

Age-group	Male	Female	The Gambia
7 - 9	8.48	7.85	8.17
10 - 14	11.43	11.99	11.71
15 - 19	26.02	28.28	27.18
20 - 24	59.71	49.31	54.29
25 - 29	82.45	59.27	70.04
30 - 34	90.72	64.91	76.90
35 - 39	92.99	68.16	79.97
40 - 44	94.06	71.53	82.29
45 - 49	94.44	70.53	83.10
50 - 54	91.92	69.23	81.88
55 - 59	91.22	66.30	80.58
60 - 64	88.49	62.24	75.82
65 - 69	85.93	55.34	71.80
70 - 74	80.91	50.34	65.58
75 - 79	78.46	46.61	63.23
80 - 84	72.24	42.05	55.32
85 +	64.64	35.73	48.66
The Gambia	53.94	42.27	47.98

Source: 2003 Population and Housing Census

Table 19. Showing labour force participation by age group and gender



Source: 2003 Population and Housing Census

Table 20. Showing Distribution of Economically Active by Age-group and Gender

Age-group	% Economically Active in The Gambia			% Economically Active in Urban Gambia			% Economically Active in Rural Gambia		
	Male	Female	Both Sexes	Male	Female	Both Sexes	Male	Female	Both Sexes
7 - 9	1.84	2.05	1.94	0.32	0.57	0.41	3.67	2.94	3.28
10 - 14	3.45	4.46	3.90	1.27	2.04	1.54	6.09	5.89	5.99
15 - 19	7.11	9.95	8.38	5.89	8.51	6.82	8.59	10.80	9.76
20 - 24	13.73	15.08	14.34	15.82	17.84	16.54	11.18	13.45	12.39
25 - 29	15.68	15.86	15.77	18.42	18.03	18.28	12.37	14.58	13.55
30 - 34	12.59	12.70	12.64	14.53	14.08	14.37	10.25	11.88	11.12
35 - 39	10.64	10.51	10.58	12.03	11.62	11.89	8.95	9.85	9.43
40 - 44	8.64	8.79	8.71	9.16	8.98	9.10	8.02	8.67	8.37
45 - 49	6.80	5.60	6.26	6.94	5.97	6.59	6.64	5.38	5.97
50 - 54	5.83	4.89	5.41	5.51	4.44	5.13	6.21	5.17	5.66
55 - 59	3.64	2.41	3.08	3.27	2.38	2.96	4.08	2.42	3.20
60 - 64	3.66	2.94	3.34	2.82	2.25	2.62	4.69	3.35	3.97
65 - 69	2.09	1.41	1.78	1.57	1.08	1.39	2.72	1.61	2.13
70 - 74	1.84	1.41	1.64	1.11	0.93	1.05	2.71	1.69	2.17
75 - 79	0.99	0.66	0.84	0.62	0.47	0.57	1.43	0.77	1.08
80 - 84	0.78	0.70	0.74	0.38	0.42	0.40	1.26	0.86	1.05
85 +	0.70	0.58	0.64	0.34	0.39	0.35	1.13	0.70	0.90
The Gambia	55.01	44.99	100.00	64.28	35.72	100.00	46.84	53.16	100.00

Source: 2003 Population and Housing Census

Table 21. Showing Proportion of children employed by Age Group, Area Gender/Employed children

Age-group	% Employed in The Gambia			% Employed in Urban Gambia			% Employed in Rural Gambia		
	Male	Female	Both Sexes	Male	Female	Both Sexes	Male	Female	Both Sexes
7 - 9	7.82	7.14	7.48	1.00	0.80	0.90	12.94	12.27	12.61
10 - 14	10.65	11.15	10.90	3.90	2.96	3.41	16.04	18.61	17.29
15 - 19	23.40	25.66	24.56	18.46	12.66	15.44	28.77	40.78	34.82
The Gambia	14.27	15.26	14.77	8.78	6.23	7.46	19.08	23.97	21.49

Source: 2003 Population and Housing Census

Table 22. Showing Distribution of Economically Active by Area of Residence

Age-group	% Economically Active in Urban Gambia			% Economically Active in Rural Gambia		
	Male	Female	Both Sexes	Male	Female	Both Sexes
7 - 9	0.32	0.57	0.41	3.67	2.94	3.28
10 - 14	1.27	2.04	1.54	6.09	5.89	5.99
15 - 19	5.89	8.51	6.82	8.59	10.80	9.76
20 - 24	15.82	17.84	16.54	11.18	13.45	12.39
25 - 29	18.42	18.03	18.28	12.37	14.58	13.55
30 - 34	14.53	14.08	14.37	10.25	11.88	11.12
35 - 39	12.03	11.62	11.89	8.95	9.85	9.43
40 - 44	9.16	8.98	9.10	8.02	8.67	8.37
45 - 49	6.94	5.97	6.59	6.64	5.38	5.97
50 - 54	5.51	4.44	5.13	6.21	5.17	5.66
55 - 59	3.27	2.38	2.96	4.08	2.42	3.20
60 - 64	2.82	2.25	2.62	4.69	3.35	3.97
65 - 69	1.57	1.08	1.39	2.72	1.61	2.13
70 - 74	1.11	0.93	1.05	2.71	1.69	2.17
75 - 79	0.62	0.47	0.57	1.43	0.77	1.08
80 - 84	0.38	0.42	0.40	1.26	0.86	1.05
85 +	0.34	0.39	0.35	1.13	0.70	0.90
The Gambia	64.28	35.72	100.00	46.84	53.16	100.00

Source: 2003 Population and Housing Census

Table 23. Showing Distribution of Economically Active by Nationality and Area of Residence

Age-group	% Economically Active in The Gambia			% Economically Active in Urban Gambia			% Economically Active in Rural Gambia		
	Male	Female	Both Sexes	Male	Female	Both Sexes	Male	Female	Both Sexes
Gambian	83.77	91.44	87.22	76.78	84.30	79.46	92.24	95.68	94.07
Non-Gambian	0.49	0.35	0.43	0.83	0.81	0.82	0.08	0.07	0.07
Not Stated	15.74	8.21	12.35	22.39	14.89	19.71	7.68	4.25	5.86
The Gambia	55.01	44.99	100.00	64.28	35.72	100.00	46.84	53.16	100.00

Source: 2003 Population and Housing Census

Table 24. Showing Percentage distribution of Economically Active Population by LGA, Gender and Age-group

LGA AND GENDER	7 – 9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74
Banjul														
Male	0.15	0.61	4.97	16.23	19.78	15.90	12.24	9.29	6.46	5.29	2.82	2.37	1.48	
Female	0.12	1.15	7.16	17.84	17.59	13.80	11.30	9.28	7.30	5.03	2.89	2.85	1.20	
Both Sexes	0.14	0.78	5.67	16.75	19.07	15.22	11.94	9.29	6.73	5.21	2.84	2.52	1.39	
Kanifing														
Male	0.25	1.09	5.60	16.61	19.72	15.48	12.16	9.02	6.54	5.11	3.01	2.33	1.33	
Female	0.50	2.03	8.99	20.07	19.01	14.36	11.25	8.44	5.38	3.96	2.10	1.65	0.79	
Both Sexes	0.34	1.42	6.79	17.82	19.47	15.09	11.84	8.82	6.13	4.70	2.69	2.09	1.14	
Brikama														
Male	0.53	1.45	5.69	13.97	16.22	12.90	11.78	9.46	7.63	6.06	3.99	3.76	2.14	
Female	0.68	2.00	7.42	15.06	16.82	13.69	11.99	9.36	6.25	5.21	2.89	3.25	1.70	
Both Sexes	0.59	1.67	6.39	14.41	16.46	13.22	11.86	9.42	7.08	5.72	3.55	3.56	1.96	
Mansakonko														
Male	1.28	2.65	5.74	10.40	12.21	10.32	9.74	8.88	7.50	8.04	5.42	6.00	3.09	
Female	1.08	2.84	8.49	13.51	13.64	11.45	10.61	10.02	6.19	6.65	3.05	4.46	2.13	
Both Sexes	1.17	2.76	7.31	12.17	13.03	10.97	10.23	9.53	6.75	7.25	4.07	5.12	2.54	
Kerewan														
Male	2.95	4.78	7.60	11.26	12.50	10.83	9.59	8.51	6.94	6.68	4.12	5.03	2.95	
Female	2.33	5.23	10.63	13.62	14.31	12.01	9.77	9.35	5.78	5.62	2.72	3.42	1.60	
Both Sexes	2.62	5.01	9.17	12.48	13.44	11.44	9.68	8.94	6.34	6.13	3.40	4.19	2.25	
Kuntaur														
Male	6.02	9.43	10.62	10.41	10.79	8.77	7.94	7.39	6.53	5.96	3.79	4.36	2.41	
Female	5.48	8.40	12.88	12.88	13.82	11.12	9.22	7.60	4.80	4.60	1.91	2.61	1.28	
Both Sexes	5.73	8.88	11.82	11.72	12.40	10.02	8.62	7.50	5.61	5.24	2.79	3.43	1.81	
Janjanbureh														
Male	4.79	7.57	9.20	11.48	12.05	10.18	8.60	8.11	5.96	6.03	3.56	4.33	2.41	
Female	3.65	6.79	11.11	13.53	14.45	11.80	9.61	8.66	5.12	4.66	1.93	3.39	1.34	
Both Sexes	4.23	7.18	10.14	12.49	13.23	10.98	9.09	8.38	5.55	5.35	2.76	3.87	1.88	
Basse														
Male	3.89	7.30	11.10	12.63	13.33	10.46	8.27	6.85	5.96	5.32	3.39	3.90	2.31	
Female	3.24	7.21	12.36	13.49	15.21	11.95	9.53	8.06	5.08	4.40	2.03	2.79	1.37	
Both Sexes	3.54	7.25	11.78	13.09	14.35	11.27	8.95	7.51	5.49	4.82	2.66	3.30	1.80	

Source: 2003 Population and Housing Census

Table 25. Showing Percent Distribution of the Employed by Age-group, Area and Gender

Age-group	% Total Employed in The Gambia			% Employed in Urban			% Employed in Rural		
	Male	Female	Both Sexes	Male	Female	Both Sexes	Male	Female	Both Sexes
7 - 9	1.80	1.99	1.89	0.19	0.29	0.22	3.62	2.87	3.22
10 - 14	3.42	4.41	3.87	1.05	1.63	1.25	6.09	5.86	5.97
15 - 19	6.80	9.60	8.06	5.28	7.44	6.03	8.51	10.73	9.70
20 - 24	12.57	14.11	13.26	14.11	15.63	14.63	10.84	13.31	12.16
25 - 29	15.17	15.65	15.39	17.82	17.78	17.81	12.18	14.54	13.44
30 - 34	12.73	12.87	12.79	14.93	14.72	14.86	10.26	11.90	11.13
35 - 39	10.96	10.82	10.90	12.68	12.55	12.64	9.03	9.93	9.51
40 - 44	8.99	9.12	9.05	9.76	9.83	9.79	8.12	8.75	8.46
45 - 49	7.10	5.82	6.53	7.43	6.58	7.14	6.73	5.43	6.04
50 - 54	6.10	5.11	5.66	5.91	4.90	5.56	6.31	5.23	5.73
55 - 59	3.80	2.51	3.22	3.50	2.63	3.20	4.14	2.44	3.23
60 - 64	3.84	3.07	3.50	3.02	2.48	2.84	4.76	3.38	4.02
65 - 69	2.19	1.47	1.87	1.67	1.18	1.50	2.77	1.62	2.16
70 - 74	1.93	1.46	1.72	1.20	1.02	1.13	2.76	1.69	2.19
75 - 79	1.04	0.68	0.87	0.67	0.50	0.61	1.45	0.77	1.09
80 - 84	0.82	0.72	0.77	0.40	0.45	0.42	1.28	0.86	1.06
85 +	0.73	0.59	0.67	0.36	0.40	0.37	1.15	0.69	0.90
% of Total	55.01	44.99	100.00	65.38	34.62	100.00	46.69	53.31	100.00

Source: 2003 Population and Housing Census

Table 26. Showing Percentage distribution of Employed persons by LGA, Gender and Age group

Total Dependency Rates and Ratios by LGA, 2003

LGA	Total	Employed	Dependents (Total - Employed)	Dependency Ratio (Dependents/employed)	Dependency rate (Dependents/Total pop*100)
Banjul	35,061	13,503	21,558.00	1.60	61.49
Kanifing	322,735	103,884	218,851.00	2.11	67.81
Brikama	389,594	116,396	273,198.00	2.35	70.12
Mansakonko	72,167	27,952	44,215.00	1.58	61.27
Kerewan	172,835	65,225	107,610.00	1.65	62.26
Kuntaur	78,491	36,069	42,422.00	1.18	54.05
Janjanbureh	107,212	44,609	62,603.00	1.40	58.39
Basse	182,586	74,801	107,785.00	1.44	59.03
The Gambia	1,360,681	482,439	878,242.00	1.82	64.54

Source: 2003 Population and Housing Census

Dependency ratio is a measure of the proportion of the population, which is composed of dependents (people who are too young or too old to work). The dependency ratio is equal to the number of individuals aged below 15 or above 64 divided by the number of individuals aged 15 to 64, expressed as a percentage. Whist the dependency rate refers to the percentage of dependent persons in the population.

At the national level, 64.54 percent of the population are dependants. This means there is a decrease in the dependency rate by four percent from 68.01% in 1993 to

64.54 I 2003. Regional variations show that Brikama had the highest dependency rate 70.12 % and Kuntaur accounted for the lowest. This means that there are no changes in the dependency rate in Brikama during the intercensal period as it was 70.48% in 1993. With the exception of Brikama, a decline in dependency has been observed in all the other local government areas during the intercensal period. The dependency ratio on the other has increased slightly from 1.54% in 1993 to 1.82% in 2003.

Average household Size in 2003

Average household size in 2003 in the Gambia was 8.5 percent persons per household. In general household size is smaller in the urban areas than in the rural areas. Across districts, districts in Upper River (URD) and Central River Division (CRD) have larger household size than the rest of the country.

Change in household size, 1993 to 2003

At the national level, there is a slight decrease in the average household size from 8.9 to 8.5 persons between 1993 and 2003. Due to the rural urban drift, some districts have experienced an increase in household size whilst in others witnessed a decrease. An urban ó rural comparison shows that household size in the rural areas had increased by 16% while that of the urban areas had decreased by 10%.

Female headed households in 2003

One in five households in the Gambia are headed by a female. Overall Upper River and Central River Divisions had smaller percentage of households headed by females than the rest of the country. Across LGAs, Banjul, Kanifing and Mansakonko had the highest proportion of female-headed households. Across districts, female-headed households are higher in the Kerewan and Mansakonko LGAs. This could be attributed to the fact that men in those communities migrate in large numbers to the urban centres, as migration is both age and sex selective

Tenure of accommodation in 2003

Sixty percent of Gambian households own their accommodation. Ownership is highest in the rural areas 98% and lowest in Banjul and KMC about 21%. Areas of low ownership outside Banjul and neighbouring districts include districts with large proportion of urban population such as Jarra West.

Source of water in 2003

Seventy-six percent of Gambians in 2003 have access to safe water source. Safe water source includes piped water, closed or opened concrete lined wells. Districts in the Komboø have the lowest proportion of their population with access to safe water supply. Many households in the Komboø get their water from hand-dug wells in their compounds. These wells are often shallow and most the time are in close proximity to toilets and domestic waste sites.

Toilet Facilities in 2003

In 2003, only one in five Gambian households had access to safe toilet facilities. Although this figure is higher in urban Banjul, this could be attributed to the launching and Sewage Drainage Project in Banjul about 15 years ago but it is still no more than 50%. Outside Banjul and Kanifing, less than 9 percent of the households have access to safe toilet facilities. Only 16% of households have access to Water Closet (W.C) with over 78% using Pit latrines

Main Cooking Fuel in 2003

Eighty-three percent of all Gambian households reported using firewood as main cooking fuel. Other cooking fuels include Charcoal 4.5%, Liquified Propane Gas 4%, and electricity (**can you site the percentage using electricity**). As can be seen, the later is used in relatively very small quantity due to the high cost of electricity. Firewood is the dominant fuel in all districts including Banjul where about 50 percent of households still use it as the main cooking fuel.

Electricity as main source of light, 2003

About 28 percent, less than one in three Gambian households use electricity as the main source of light. Although this proportion is higher in the urban centres like Banjul 70% and Kanifing 59%. Outside Banjul and Kanifing only 11% of all households use electricity for lighting. Candle is the main source of light as 47% of the population are using them followed by Kerosene 24%. Kuntaur LGA had the lowest proportion of households using electricity as main source of light 2%.