

This document is a compilation of all questions, justifications, and sources used to determine the 2021 Global Health Security Index scores for Gambia. For a category and indicator-level summary, please see the Country Profile for Gambia.

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Category 1: Preventing the emergence or release of pathogens with potential for international concern

1.1 ANTIMICROBIAL RESISTANCE (AMR)

1.1.1 AMR surveillance, detection, and reporting

1.1.1a

Is there a national AMR plan for the surveillance, detection, and reporting of priority AMR pathogens?

Yes, there is evidence of an AMR plan, and it covers surveillance, detection, and reporting = 2, Yes, there is evidence of an AMR plan, but there is insufficient evidence that it covers surveillance, detection, and reporting = 1, No evidence of an AMR plan = 0

Current Year Score: 0

The Gambia is not listed as having a national AMR plan in place on the World Health Organisation (WHO) website, and there is no reference to such a plan on the Ministry of Health website, nor any mention of antimicrobial resistance in the country's strategic health plan. [1,2,3] The Joint External Evaluation report (JEE) for The Gambia, published in September 2017 notes that there is no national action plan for AMR surveillance in animals and humans. There are, however, draft guidelines for laboratory surveillance of AMR and one facility, Edward Francis Small Teaching Hospital, is performing limited AMR surveillance. [4] Neither the national laboratory system, the Directorate of Health Research (the public health research body), nor the Ministry of Agriculture share relevant information via a public website. [2,5]

[1] World Health Organisation (WHO). "Library of National Action Plans". [<http://www.who.int/antimicrobial-resistance/national-action-plans/library/en/>]. Accessed 9 August 2020.

[2] Ministry of Health. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[3] Ministry of Health and Social Welfare. The Gambia National Health Sector Strategic Plan (2014-2020).

[<https://web.archive.org/web/20180712162652/http://www.moh.gov.gm:80/sites/default/files/National%20Health%20Strategic%20Plan%202014-2020.pdf>]. Accessed 9 August 2020.

[4] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

1.1.1b

Is there a national laboratory/laboratory system which tests for priority AMR pathogens?

All 7 + 1 priority pathogens = 2, Yes, but not all 7+1 pathogens = 1, No = 0

Current Year Score: 1

There is evidence that The Gambia has capacity to test for at least one priority antimicrobial resistant (AMR) pathogen which is multi-drug resistant tuberculosis. The Joint External Evaluation report (JEE) for The Gambia, published in September 2017, states that three Gambian laboratories (the Edward Francis Small Teaching Hospital, the National Public Health Laboratory [NPHL] and the Medical Research Council [MRC]) are conducting detection or reporting on some priority pathogens; these are considered sentinel sites. [1] The JEE specifies that the NPHL tests for multi-drug resistant tuberculosis, along with four other hospitals, which the JEE does not name. [1] Neither the country's Ministry of Health and Social Welfare, nor the individual laboratories, publicly provide more specific information on which other types of AMR Gambian laboratories test

for, if any. [2,3] The World Health Organisation's national action plan library on antimicrobial resistance reports that The Gambia does not have a national action plan on antimicrobial resistance. [4]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<https://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1&isAllowed=y>]. Accessed 9 August 2020.

[2] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[3] Medical Research Council, The Gambia Unit. [<http://www.mrc.gm/>]. Accessed 9 August 2020.

[4] World Health Organisation (WHO). "Library of National Action Plans". [<http://www.who.int/antimicrobial-resistance/national-action-plans/library/en/>]. Accessed 9 August 2020.

1.1.1c

Does the government conduct environmental detection or surveillance activities (e.g., in soil, waterways) for antimicrobial residues or AMR organisms?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the Gambian government conducts environmental detection or surveillance activities for antimicrobial-resistant (AMR) organisms. The World Health Organisation reports that The Gambia does not have a national action plan on antimicrobial resistance. [1] Further, neither The Gambia's Ministry of Environment, Climate Change and Natural Resources; its Ministry of Health and Social Welfare; nor its Ministry of Agriculture lists any plan or make any mention of surveillance activities for antimicrobial residues or antimicrobial resistant organisms. [2,3,4] There is no evidence of academic sources or papers on the subject.

[1] World Health Organisation (WHO). "Library of National Action Plans". [<http://www.who.int/antimicrobial-resistance/national-action-plans/library/en/>]. Accessed 9 August 2020.

[2] Ministry of Environment, Climate Change and Natural Resources. [<http://meccnar.gm/>]. Accessed 9 August 2020.

[3] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[4] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August 2020.

1.1.2 Antimicrobial control

1.1.2a

Is there national legislation or regulation in place requiring prescriptions for antibiotic use for humans?

Yes = 2 , Yes, but there is evidence of gaps in enforcement = 1 , No = 0

Current Year Score: 0

There is no evidence that The Gambia has national legislation or a regulation in place that specifically requires prescriptions for antibiotic use for humans. The Gambia's Medicines and Related Products Act (2014), which is the main law regulating drug dispensation, makes no specific mention of antibiotics. [1] Although there is mention of general prescription regulations in the Act, and in other guiding documents, such as The Gambia National Drug Policy (1994), regulation of antibiotic prescription is not specifically described. [2] The Joint External Evaluation report for The Gambia, published in September 2017, notes that there is a National Medicines Policy (2007) that might provide more detailed guidance, but it is not available on the website of the Ministry of Health and Social Welfare, or elsewhere electronically. [3,4] The World Health Organisation reports that The Gambia does not have a national action plan on antimicrobial resistance. [5] The Gambia's Standard Drug

Treatment Guidelines (2001) provide information to prescribers about how to treat specific conditions, but do not make a recommendation about the requirement, in general, of prescriptions for antibiotics. Further, the Guidelines appear to be a reference tool for medical professionals, and not to have the force of a law or regulation. [6] Additionally, a 2017 study published in the Transactions of The Royal Society of Tropical Medicine and Hygiene states that The Gambia "does not have national policies restricting antibiotic use". [7]

- [1] Government of Gambia. 2014. "Medicines and Related Products Act, 2014". [http://bch.cbd.int/database/attachment/?id=18368]. Accessed 9 August 2020.
- [2] Government of The Gambia. 1994. "The Gambia National Drug Policy." [https://web.archive.org/web/20180329065323/http://apps.who.int:80/medicinedocs/documents/s18059en/s18059en.pdf]. Accessed 9 August 2020.
- [3] World Health Organization (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1]. Accessed 9 August 2020.
- [4] Ministry of Health and Social Welfare. [http://www.moh.gov.gm/]. Accessed 9 August 2020.
- [5] World Health Organization (WHO). "Library of National Action Plans". [http://www.who.int/antimicrobial-resistance/national-action-plans/library/en/]. Accessed 9 August 2020.
- [6] Republic of The Gambia, Department of State for Health & Social Welfare. June 2001. "The Gambia Standard Drug Treatment Guide". [https://web.archive.org/web/20160912030946/http://moh.gov.gm/sites/default/files/Standard_Drug_Treatment_Guidelines.pdf]. Accessed 9 August 2020.
- [7] Chaw, Pa Saidou, Kristin Maria Schlinkmann, Heike Raupach-Rosin, André Karch, Mathias W. Pletz, Johannes Huebner, and Rafael Mikolajczyk. 2017. "Knowledge, Attitude and Practice of Gambian Health Practitioners towards Antibiotic Prescribing and Microbiological Testing: A Cross-Sectional Survey." Transactions of The Royal Society of Tropical Medicine and Hygiene 111 [3] : 117-124. [https://pubmed.ncbi.nlm.nih.gov/28633334/]. Accessed 9 August 2020.

1.1.2b

Is there national legislation or regulation in place requiring prescriptions for antibiotic use for animals?

Yes = 2 , Yes, but there is evidence of gaps in enforcement = 1 , No = 0

Current Year Score: 0

There is no evidence that there is a national legislation or regulation in place requiring prescriptions for antibiotic use for animals. Neither the Ministry of Health and Social Welfare, the Ministry of Environment, Climate Change and Natural Resources, nor the Ministry of Agriculture share relevant information via public websites [1,2,3]. The World Health Organization reports that The Gambia does not have an antimicrobial resistance national action plan [4]. The Gambia's Agriculture and Natural Resources (ANR) Policy (2009-2015), the latest such policy available on the website of the Ministry of Agriculture, makes no mention of antibiotics or prescriptions. [5] Additionally, a 2017 study published in the Transactions of The Royal Society of Tropical Medicine and Hygiene states that The Gambia "does not have national policies restricting antibiotic use". While the study specifically reviewed the use of antibiotics among human patients, the statement is consistent with all available evidence on the veterinary use of antibiotics, as well [6]. The Gambia's Standard Drug Treatment Guidelines (2001) provide information to prescribers about how to treat specific conditions, but do not make a recommendation about the requirement, in general, of prescriptions for antibiotics, nor do they mention the use of antibiotics among animals or livestock. Further, the Guidelines appear to be a reference tool for medical professionals, and not to have the force of a law or regulation [7].

- [1] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.
- [2] Ministry of Environment, Climate Change and Natural Resources. [<http://meccnar.gm/>]. Accessed 9 August 2020.
- [3] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August 2020.
- [4] World Health Organization (WHO). "Library of National Action Plans". [<http://www.who.int/antimicrobial-resistance/national-action-plans/library/en/>]. Accessed 9 August 2020.
- [5] Republic of The Gambia. July 2009. "Agriculture and Natural Resources (ANR) Policy (2009-2015)". [https://web.archive.org/web/20151222134346/http://www.moa.gov.gm/sites/default/files/GAMBIA_ANR_Sector_Policy_Final_doc_July_2009_9%20-%20Copy_0.pdf]. Accessed 9 August 2020.
- [6] Chaw, Pa Saidou, Kristin Maria Schlinkmann, Heike Raupach-Rosin, André Karch, Mathias W. Pletz, Johannes Huebner, and Rafael Mikolajczyk. 2017. "Knowledge, Attitude and Practice of Gambian Health Practitioners towards Antibiotic Prescribing and Microbiological Testing: A Cross-Sectional Survey." *Transactions of The Royal Society of Tropical Medicine and Hygiene* 111 [3] : 117-124. [<https://pubmed.ncbi.nlm.nih.gov/28633334/>] Accessed 9 August 2020.
- [7] Republic of The Gambia, Department of State for Health & Social Welfare. June 2001. "The Gambia Standard Drug Treatment Guide". [https://web.archive.org/web/20160912030946/http://moh.gov.gm/sites/default/files/Standard_Drug_Treatment_Guidelines.pdf]. Accessed 9 August 2020.

1.2 ZOOBOTIC DISEASE

1.2.1 National planning for zoonotic diseases/pathogens

1.2.1a

Is there national legislation, plans, or equivalent strategy documents on zoonotic disease?

Yes = 1 , No = 0

Current Year Score: 1

There is evidence that The Gambia has national plans on zoonotic diseases. According to the Joint External Evaluation report for The Gambia, published in September 2017, the country has the National Ebola Virus Disease Preparedness and Response Plan 2014-2015, and the Integrated National Emergency Preparedness and Response Plan for Avian and Human Influenza 2015-2019. [1] The JEE report mentions that "comprehensive multidisciplinary preparedness and response plans already exist for highly pathogenic avian influenza, Ebola viruses and generic health sector emergencies" and it confirms that a relatively stable workforce of veterinary para-professionals does exist at the national and regional level that can be trained to meet the capabilities required by Pathways for Veterinary Services (PVS). [1] The website of the Ministry of Health and Social Welfare confirms the existence of these plans. [2] Further, some of the details of the Ebola preparedness plan are discussed in the Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019. [3] The website of the Ministry of Agriculture makes no mention of zoonotic diseases. [4]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017-61-eng.pdf?sequence=1>]. Accessed 15 March 2021.

[2] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 15 March 2021.

[3] Ministry of Health and Social Welfare. 2017. "Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019". [<http://extwprlegs1.fao.org/docs/pdf/gam184418.pdf>]. Accessed 15 March 2021.

[4] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 15 March 2021.

1.2.1b

Is there national legislation, plans or equivalent strategy document(s) which includes measures for risk identification and reduction for zoonotic disease spillover events from animals to humans?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence of national legislation, plans or equivalent strategy document(s) which includes measures for risk identification and reduction for zoonotic disease spillover events from animals to humans. According to the Joint External Evaluation of IHR Core Capacities published in 2017, The Gambia does have a livestock surveillance plan in place, which includes conducting joint field monitoring of wildlife and livestock, training community actors to detect early warning signs of animal emergencies, training livestock farmers in hygiene and proper handling of livestock and livestock products, and collecting regular data on livestock and sharing it with stakeholders and partners. However, there is no evidence of national legislation, plans or equivalent strategy document which include measures for risk identification and reduction of zoonotic disease spillover events from animals to humans in The Gambia. The Gambia has a Food Safety and Quality Authority maintains a list of priority zoonotic diseases, but there is no evidence of a specific plan to reduce the risk of zoonotic disease spillover events from animals to humans. [1] The Ministry of Health and Social Welfare's Health Sector Emergency Preparedness and Response Plan Related to All Hazards 2017-19 talks about establishing animal disease emergency surveillance but does not include a specific plan to reduce zoonotic disease spillover from animals to humans. [3] There is no evidence of a plan on the Ministry of Agriculture website and no evidence of national legislation addressing zoonotic disease transfer from animals to humans in the Food and Agriculture Organization of the United Nations database. [4,5]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017-61-eng.pdf?sequence=1>]. Accessed 15 March 2021.

[2] Food Safety and Quality Authority, The Gambia. "List of Priority Zoonotic Disease in The Gambia 2019". [<https://www.fsqa.gm/downloads-file/f0ad0757-8874-11e9-8a68-02e599c15748>] Accessed 15 March 2021.

[3] "Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019" [<http://extwprlegs1.fao.org/docs/pdf/gam184418.pdf>]. Accessed 15 March 2021.

[4] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 15 March 2021.

[5] Food and Agriculture Organization of the United Nations [<http://www.fao.org/faolex/country-profiles/general-profile/see-more/en/?iso3=GMB&countryname=Gambia&area=Policy&link=aHR0cDovL2Zhb2xleC5mYW8ub3JnL2NnaS1iaW4veG1sLmV4ZT9kYXRhYmFzZT1mYW9sZGmc2VhcmNoX3R5cGU9cXVlcnkmdGFibGU9YWxsJnF1ZXJ5PUITTTzPHTUIgQU5EIFQ6QUxMIE5PVCBSTzpzIEFORCBaOlAmc29ydF9uYW1lPUBzcG9sJmxhbm9eG1sZiZmb3JtYXRfZmFtZT1AWFNIT1JUJnBhZ2VfaGVhZGVyPUVYTUxIjJmZ2VfZm9vdGVyPUVYTUxG>]. Accessed 15 March 2021.

1.2.1c

Is there national legislation, plans, or guidelines that account for the surveillance and control of multiple zoonotic pathogens of public health concern?

Yes = 1, No = 0

Current Year Score: 0

There is not enough publicly available evidence to confirm that The Gambia has national plans, guidelines, or laws that account for the surveillance and control of multiple (i.e., at least three) zoonotic pathogens of public health concern. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, notes that The Gambia has a National Ebola Virus Disease Preparedness and Response Plan (2014-2015), and an Integrated National Emergency Preparedness and

Response Plan for Avian & Human Influenza (AHI) (2015-2019). The JEE also notes that The Gambia has a rabies vaccination scheme (which presumably does not include provisions for surveillance and control). [1] However, there is no documentation of these plans on the website of the Ministry of Health and Social Welfare or elsewhere on the internet. [2] The Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019 lays out plans for animal health emergencies; it separately discusses rabies, Ebola, and Avian and Human Influenza. However, the links between these themes are not emphasized. [3] The Ministry of Agriculture does not provide any relevant information via a public website. [4]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[2] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[3] Ministry of Health and Social Welfare. "Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019".

[<https://web.archive.org/web/20180713113603/http://www.moh.gov.gm:80/sites/default/files/HSEPRP%202017-2019.pdf>]. Accessed 9 August 2020.

[4] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August 2020.

1.2.1d

Is there a department, agency, or similar unit dedicated to zoonotic disease that functions across ministries?

Yes = 1 , No = 0

Current Year Score: 0

There is no publicly available evidence that The Gambia has a department, agency or similar unit dedicated to zoonotic disease that functions across ministries. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, cites activities related to zoonotic disease prevention performed by the Ministry of Health and Social Welfare, and by the Ministry of Agriculture's Department of Livestock Services (DLS), which monitors rabies in livestock but not in humans. However, the JEE notes that information is not formally shared across ministries. [1] Further, there is no mention of DLS zoonotic disease activities on the website of the Ministry of Agriculture, nor is there any mention of a dedicated national, cross-ministerial department or unit for zoonotic diseases on the website of the Ministry of Health and Social Welfare. [2,3]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[2] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August 2020.

[3] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

1.2.2 Surveillance systems for zoonotic diseases/pathogens

1.2.2a

Does the country have a national mechanism (either voluntary or mandatory) for owners of livestock to conduct and report on disease surveillance to a central government agency?

Yes = 1 , No = 0

Current Year Score: 0

There is insufficient evidence that The Gambia has a national mechanism for owners of livestock to conduct and report on disease surveillance to a central government agency. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, notes that the Ministry of Agriculture's Department of Livestock Services (DLS) has a generic passive disease surveillance system for livestock.[1] The JEE report says there is no legislation outlining diseases that are "compulsorily notifiable" suggesting that any reporting requirements are voluntary. Further, the JEE report says that incentives to report diseases "exist in legislation which are currently outdated and no longer routinely applied." Several news reports from May 2019 indicate that the DLS was involved in drafting new legislation that would address the control of animal disease. [2] There is no text of the draft Animal Health Bill 2019 available online, however, and the bill does not appear to have been signed into law as there is no record in the Food and Agriculture Organization of the United Nations database for legislation in Gambia. [3] Neither the DLS nor the Ministry of Agriculture share any information on how owners of livestock should report disease surveillance. [4]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[2] All Africa. 20 May 2019. "Gambia: Stakeholders Validate Two Bills On Animal Health". [<https://allafrica.com/stories/201905210246.html>]. Accessed 30 August 2020.

[3] Food and Agriculture Organization of the United Nations. "Gambia Country Profiles". [<http://www.fao.org/faolex/country-profiles/general-profile/en/?iso3=GMB>]. Accessed 30 August 2020.

[4] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August 2020.

1.2.2b

Is there legislation and/or regulations that safeguard the confidentiality of information generated through surveillance activities for animals (for owners)?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence of laws or guidelines that safeguard the confidentiality of information generated through surveillance activities for animals (or for owners). The voluntary animal disease surveillance system run by the Ministry of Agriculture's Department of Livestock Services (DLS) has no online presence, and the Joint External Evaluation report for The Gambia, published in September 2017, notes that Gambian laboratories lack an electronic management information system. [1,2] The Gambia has made generic commitments to supporting the privacy of medical data, and to data privacy in general; privacy is protected by the constitution. [3,4] However, it is unclear if and how these commitments extend to surveillance of animal health.

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[2] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August 2020.

[3] Government of The Gambia, Department of State for Communication, Information and Information Technology (DOSCIIT). 2008. "The Gambian ICT4D-2012 Plan". [<https://www.ellipsis.co.za/wp-content/uploads/2016/07/Gambia.pdf>]. Accessed 9 August 2020.

[4] Government of The Gambia. 1997. "Constitution of the Republic of the Gambia". [http://www.wipo.int/wipolex/en/text.jsp?file_id=221242]. Accessed 9 August 2020.

1.2.2c

Does the country conduct surveillance of zoonotic disease in wildlife (e.g., wild animals, insects, other disease vectors)?

Yes = 1 , No = 0

Current Year Score: 0

The Gambia does not conduct surveillance of zoonotic disease in wildlife. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, states that animal disease surveillance in The Gambia is limited to livestock. [1] However, the JEE also reports that there have been specific past instances of surveillance, such as a 2008 avian influenza monitoring collaboration between the Ministry of Health and Social Welfare and the Ministry of Environment, Climate Change, and Natural Resources' Department of Parks and Wildlife Management. [1] Additionally, surveillance of disease in wildlife is listed as a goal in the Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019. [2] Still, there is no mention of ongoing systematic surveillance on the relevant government websites, such as those of the Ministry of the Environment, Climate Change, and Natural Resources, the Ministry of Health and Social Welfare, and the Ministry of Agriculture. [3,4,5]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[2] Ministry of Health and Social Welfare. "Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019".

[<https://web.archive.org/web/20180713113603/http://www.moh.gov.gm:80/sites/default/files/HSEPRP%202017-2019.pdf>]. Accessed 9 August 2020.

[3] Ministry of Environment, Climate Change and Natural Resources website. [<http://meccnar.gm/>]. Accessed 9 August 2020.

[4] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[5] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August 2020.

1.2.3 International reporting of animal disease outbreaks

1.2.3a

Has the country submitted a report to OIE on the incidence of human cases of zoonotic disease for the last calendar year?

Yes = 1 , No = 0

Current Year Score: 0

2019

OIE WAHIS database

1.2.4 Animal health workforce

1.2.4a

Number of veterinarians per 100,000 people

Input number

Current Year Score: 1.11

2018

OIE WAHIS database

1.2.4b

Number of veterinary para-professionals per 100,000 people

Input number

Current Year Score: 12.18

2018

OIE WAHIS database

1.2.5 Private sector and zoonotic

1.2.5a

Does the national plan on zoonotic disease or other legislation, regulations, or plans include mechanisms for working with the private sector in controlling or responding to zoonoses?

Yes = 1 , No = 0

Current Year Score: 0

There is no publicly available evidence that The Gambia has a national law, plan, or equivalent strategy document, on zoonotic diseases in general. The websites of the Ministry of Agriculture and the Ministry of Health and Social Welfare make no mention of such a plan. [1,2] Further, no documentation exists on these websites for the National Ebola Virus Disease Preparedness and Response Plan (2014-2015), and an Integrated National Emergency Preparedness and Response Plan for Avian & Human Influenza (AHI) (2015-2019), making it unclear whether they involve any private sector collaboration. [1,2,3] The national laboratory system and the Directorate of Health Research (the public health research body) do not share relevant information via a public website. The Gambia's Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019 discusses animal health emergencies but not zoonoses specifically. The plan does not mention collaboration with private sector entities aside from the training of farmers in hygiene and the handling of livestock products. [4]

[1] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[2] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August 2020.

[3] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[4] Ministry of Health and Social Welfare. "Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019."

[<https://web.archive.org/web/20180713113603/http://www.moh.gov.gm:80/sites/default/files/HSEPRP%202017-2019.pdf>]. Accessed 9 August 2020.

1.3 BIOSECURITY

1.3.1 Whole-of- government biosecurity systems

1.3.1a

Does the country have in place a record, updated within the past five years, of the facilities in which especially dangerous pathogens and toxins are stored or processed, including details on inventories and inventory management systems of those facilities?

Yes = 1 , No = 0

Current Year Score: 0

There is not sufficient evidence of an up-to-date record of facilities in which especially dangerous pathogens and toxins are stored or processed. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, does not mention the existence of any such record. Further, the JEE report mentions that The Gambia does not have a list of dangerous pathogens or toxins for control, nor any system to secure or process such substances. [1] There is no mention of such a record by the Ministry of Health and Social Welfare. [2] The JEE report notes that the Medical Research Council (MRC) Unit in The Gambia, funded by the United Kingdom government, operates at a high level of compliance with international biosafety standards, but the website of the MRC does not contain a list of facilities to deal with dangerous substances, nor details of their inventories. [2,3] Neither the public defence agencies (through the Ministry of Interior), the national laboratory system, the Directorate of Health Research (the public health research body), the Ministry of Agriculture nor the Ministry of Higher Education, Research, Science, and Technology share relevant information via public websites. [2,4,5,6,7] Although The Gambia is a party to the Biological Weapons Convention, it has not submitted Confidence Building Measures since 2011. Access to the 2011 submitted report is restricted, and it is not publicly available. [8] The Gambia Health Services Assessment 2019 report notes that more than half of The Gambia's health facilities lack facilities and guidelines for safe final disposal or appropriate storage of infectious waste. [9] There is no relevant information documented in the Verification Research, Training and Information Centre (VERTIC) database. [10]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[2] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[3] Medical Research Council, The Gambia Unit. [<http://www.mrc.gm/>]. Accessed 9 August 2020.

[4] Ministry of the Interior. [<http://www.moi.gov.gm/>]. Accessed 9 August 2020.

[5] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August 2020.

[6] Gambia Armed Forces. [<http://gaf.gm/>]. Accessed 9 August 2020.

[7] Ministry of Higher Education, Research, Science and Technology. [<http://www.moherst.gov.gm/>]. Accessed 9 August 2020.

[8] United Nations. "Confidence Building Measures: Gambia". [<https://bwc-ecbm.unog.ch/state/gambia>]. Accessed 9 August 2020.

[9] Ministry of Health and Social Affairs. "The Gambia Health Services Assessment Report 2019". [http://www.moh.gov.gm/wp-content/uploads/2020/03/The-Gambia-Service-Delivery-Report_2019_Final-draft.pdf]. Accessed 9 August 2020.

[10] Verification Research, Training and Information Centre (VERTIC). "Gambia". [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/g/>]. Accessed 30 August 2020.

1.3.1b

Does the country have in place legislation and/or regulations related to biosecurity which address requirements such as physical containment, operation practices, failure reporting systems, and/or cybersecurity of facilities in which especially dangerous pathogens and toxins are stored or processed?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that The Gambia has in place legislation or regulations related to biosecurity which address requirements such as physical containment, operation practices, failure reporting systems or cybersecurity of facilities in which especially dangerous pathogens and toxins are stored or processed. The Joint External Evaluation report for The Gambia, published in September 2017, notes that The Gambia has no system to identify, secure, or process dangerous pathogens and toxins; nor does it have any related legislation or regulations. [1] Neither the public defence agencies (through the Ministry of Interior), the Ministry of Health and Social Welfare (or its national laboratory system), the Directorate of Health Research (the public health research body), nor the Ministry of Agriculture, share relevant information via public websites. [2,3,4,5] Although The Gambia is a party to the Biological Weapons Convention, it has not submitted Confidence Building Measures since 2011. Access to the 2011 submitted report is restricted, and it is not publicly available. [6] The Gambia Health Services Assessment 2019 report notes that more than half of The Gambia's health facilities lack facilities and guidelines for safe final disposal or appropriate storage of infectious waste. [7] There is no relevant information documented in the Verification Research, Training and Information Centre (VERTIC) database. [8]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[2] Ministry of the Interior. [<http://www.moi.gov.gm/>]. Accessed 6 August 2020.

[3] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[4] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August 2020.

[5] Gambia Armed Forces. [<http://gaf.gm/>]. Accessed 9 August 2020.

[6] United Nations. "Confidence Building Measures: Gambia". [<https://bwc-ecbm.unog.ch/state/gambia>]. Accessed 16 March 2019.

[7] Ministry of Health and Social Affairs. "The Gambia Health Services Assessment Report 2019".

[http://www.moh.gov.gm/wp-content/uploads/2020/03/The-Gambia-Service-Delivery-Report_2019_Final-draft.pdf]. Accessed 9 August 2020.

[8] Verification Research, Training and Information Centre (VERTIC). "Gambia".

[<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/g/>]. Accessed 30 August 2020.

1.3.1c

Is there an established agency (or agencies) responsible for the enforcement of biosecurity legislation and regulations?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that The Gambia has any established agency responsible for the enforcement of biosecurity legislation and regulations. Indeed, the Joint External Evaluation report for The Gambia, published in September 2017, notes that The Gambia has no system to identify, secure, or process dangerous pathogens and toxins; nor does it have any related legislation or regulations. [1] As such, there is also no agency responsible for the enforcement of biosecurity legislation or

regulations. Neither the public defence agencies (through the Ministry of Interior), the Ministry of Health and Social Welfare (or its national laboratory system), the Directorate of Health Research (the public health research body), nor the Ministry of Agriculture share relevant information via a public website. [2,3,4,5] Although The Gambia is a party to the Biological Weapons Convention, it has not submitted Confidence Building Measures since 2011. Access to the 2011 submitted report is restricted, and it is not publicly available. [6] There is no relevant information documented in the Verification Research, Training and Information Centre (VERTIC) database. [7]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[2] Ministry of the Interior. [<http://www.moi.gov.gm/>]. Accessed 9 August 2020.

[3] Gambia Armed Forces. [<http://gaf.gm/>]. Accessed 9 August 2020.

[4] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[5] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August 2020.

[6] United Nations. "Confidence Building Measures: Gambia". [<https://bwc-ecbm.unog.ch/state/gambia>]. Accessed 9 August 2020.

[7] Verification Research, Training and Information Centre (VERTIC). "Gambia".

[<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/g/>]. Accessed 30 August 2020.

1.3.1d

Is there public evidence that shows that the country has taken action to consolidate its inventories of especially dangerous pathogens and toxins into a minimum number of facilities?

Yes = 1 , No = 0

Current Year Score: 0

There is no public evidence that shows that the country has taken action to consolidate its inventories of especially dangerous pathogens and toxins into a minimum number of facilities. Indeed, the Joint External Evaluation (JEE) report for The Gambia, published in September 2017, notes that The Gambia has no system to identify, secure, or process dangerous pathogens and toxins. [1] There is no mention of facilities for the management of dangerous pathogens and toxins on the website of the Ministry of Health and Social Welfare. [2] The JEE report notes that the Gambian unit of the privately-owned Medical Research Council (MRC) operates at a high level of compliance with international biosafety standards, but the website of the MRC does not contain any information about specific actions taken to consolidate inventories of dangerous pathogens and toxins into a minimum number of facilities. [1,3] Neither the public defence agencies (through the Ministry of Interior), the Ministry of Health and Social Welfare's national laboratory system and its Directorate of Health Research (the public health research body), the Ministry of Agriculture, nor the Ministry of Higher Education, Research, Science, and Technology share relevant information via public websites. [2,4,5,6,7] Although The Gambia is a party to the Biological Weapons Convention, it has not submitted Confidence Building Measures since 2011. Access to the 2011 submitted report is restricted, and it is not publicly available. [8] There is no relevant information documented in the Verification Research, Training and Information Centre (VERTIC) database. [9]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[2] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 4 August 2020.

[3] Medical Research Council, The Gambia Unit. [<http://www.mrc.gm/>]. Accessed August 2020.

- [4] Ministry of the Interior. [<http://www.moi.gov.gm/>]. Accessed 6 August 2020.
- [5] Gambia Armed Forces. [<http://gaf.gm/>]. Accessed August 2020.
- [6] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed August 2020.
- [7] Ministry of Higher Education, Research, Science and Technology. [<http://www.moherst.gov.gm/>]. Accessed August 2020.
- [8] United Nations. "Confidence Building Measures: Gambia". [<https://bwc-ecbm.unog.ch/state/gambia>]. Accessed August 2020.
- [9] Verification Research, Training and Information Centre (VERTIC). "Gambia". [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/g/>]. Accessed 30 August 2020.

1.3.1e

Is there public evidence of in-country capacity to conduct Polymerase Chain Reaction (PCR)–based diagnostic testing for anthrax and/or Ebola, which would preclude culturing a live pathogen?

Yes = 1 , No = 0

Current Year Score: 0

There is no public evidence of in-country capacity to conduct Polymerase Chain Reaction (PCR)-based diagnostic testing for anthrax and/or Ebola. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, notes that The Gambia has a National Ebola Virus Disease Preparedness and Response Plan (2014-2015), and some of the details of this Ebola preparedness plan are discussed in the government’s Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019. [1,2] However, the Ebola preparedness plan is not available online, and the emergency preparedness plan has little information on testing. Ebola and anthrax are not mentioned on the websites of the Ministry of Agriculture, the Ministry of the Interior, or the Gambia Armed Forces. [3,4,5] Neither the public defence agencies (through the Ministry of Interior), the Ministry of Health and Social Welfare’s national laboratory system and its Directorate of Health Research (the public health research body), nor the Ministry of Agriculture share relevant information via public websites. [3,4,5,6] The Gambia Health Services Assessment Report 2019 indicates there is PCR testing available for HIV on-site at one health facility, but does not discuss PCR testing for Ebola or anthrax. [7]

[1] World Health Organisation (WHO). 24-29 September 2017. “Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia”. [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[2] Ministry of Health and Social Welfare. “Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019”. [<https://web.archive.org/web/20180713113603/http://www.moh.gov.gm:80/sites/default/files/HSEPRP%202017-2019.pdf>]. Accessed 9 August 2020.

[3] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August 2020.

[4] Ministry of the Interior. [<http://www.moi.gov.gm/>]. Accessed 9 August 2020.

[5] Gambia Armed Forces. [<http://gaf.gm/>]. Accessed 9 August 2020.

[6] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[7] Ministry of Health and Social Affairs. "The Gambia Health Services Assessment Report 2019". [http://www.moh.gov.gm/wp-content/uploads/2020/03/The-Gambia-Service-Delivery-Report_2019_Final-draft.pdf]. Accessed 9 August 2020.

1.3.2 Biosecurity training and practices

1.3.2a

Does the country require biosecurity training, using a standardized, required approach, such as through a common curriculum or a train-the-trainer program, for personnel working in facilities housing or working with especially dangerous pathogens, toxins, or biological materials with pandemic potential?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that The Gambia requires biosecurity training, using a standardized, required approach, such as through a common curriculum or a train-the-trainer program, for personnel working in facilities housing or working with especially dangerous pathogens, toxins, or biological materials with pandemic potential. Indeed, the Joint External Evaluation (JEE) report for The Gambia, published in September 2017, notes that The Gambia has no comprehensive training or curriculum for those who maintain or work with dangerous pathogens and toxins, nor does it provide any training needs assessments. Neither is there any sustained training in academic institutions. [1] Neither the public defence agencies (through the Ministry of Interior), the Ministry of Health and Social Welfare's national laboratory system and its Directorate of Health Research (the public health research body), the Ministry of Agriculture, nor the Ministry of Higher Education, Research, Science, and Technology, share relevant information via public websites. [2,3,4,5,6] Although The Gambia is a party to the Biological Weapons Convention, it has not submitted Confidence Building Measures since 2011. Access to the 2011 submitted report is restricted, and it is not publicly available. [7] There is no relevant information documented in the Verification Research, Training and Information Centre (VERTIC) database. [8]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[2] Ministry of the Interior. [<http://www.moi.gov.gm/>]. Accessed 9 August 2020.

[3] Gambia Armed Forces. [<http://gaf.gm/>]. Accessed 9 August 2020.

[4] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[5] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August 2020.

[6] Ministry of Higher Education, Research, Science and Technology. [<http://www.moherst.gov.gm/>]. Accessed 9 August 2020.

[7] United Nations. "Confidence Building Measures: Gambia". [<https://bwc-ecbm.unog.ch/state/gambia>]. Accessed 9 August 2020.

[8] Verification Research, Training and Information Centre (VERTIC). "Gambia".

[<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/g/>]. Accessed 30 August 2020.

1.3.3 Personnel vetting: regulating access to sensitive locations

1.3.3a

Do regulations or licensing conditions specify that security and other personnel with access to especially dangerous pathogens, toxins, or biological materials with pandemic potential are subject to the following checks: drug testing, background checks, and psychological or mental fitness checks?

Personnel are subject to all three of these checks = 3, Personnel are subject to two of these checks = 2, Personnel are subject to one of these checks = 1, Personnel are not subject to any of these checks = 0

Current Year Score: 0

There is no evidence that regulations or licensing conditions specify that security and other personnel with access to especially dangerous pathogens, toxins, or biological materials with pandemic potential are subject to drug testing, background checks, and psychological or mental fitness checks. Indeed, the Joint External Evaluation (JEE) report for The Gambia, published in September 2017, notes that The Gambia has no legislation or regulations on biosecurity. [1] Neither the Ministry of Health and Social Welfare, its national laboratory system and its Directorate of Health Research (the public health research body), the public defence agencies (through the Ministry of Interior), the Ministry of Agriculture, nor the Ministry of Higher Education, Research, Science, and Technology share relevant information via public websites. [2,3,4,5,6] Although The Gambia is a party to the Biological Weapons Convention, it has not submitted Confidence Building Measures since 2011. Access to the 2011 submitted report is restricted, and it is not publicly available. [7] There is no relevant information documented in the Verification Research, Training and Information Centre (VERTIC) database. [8]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[2] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[3] Ministry of the Interior. [<http://www.moi.gov.gm/>]. Accessed 9 August 2020.

[4] Gambia Armed Forces. [<http://gaf.gm/>]. Accessed 9 August 2020.

[5] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August 2020.

[6] Ministry of Higher Education, Research, Science and Technology. [<http://www.moherst.gov.gm/>]. Accessed 9 August 2020.

[7] United Nations. "Confidence Building Measures: Gambia". [<https://bwc-ecbm.unog.ch/state/gambia>]. Accessed 9 August 2020.

[8] Verification Research, Training and Information Centre (VERTIC). "Gambia".

[<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/g/>]. Accessed 30 August 2020.

1.3.4 Transportation security

1.3.4a

Does the country have publicly available information on national regulations on the safe and secure transport of infectious substances (specifically including Categories A and B)?

Yes = 1 , No = 0

Current Year Score: 0

There is no publicly available information on national regulations on the safe and secure transport of infectious substances (Categories A and B). The Gambia's Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019 states a goal of strengthening the transportation of samples, but does not go into any detail about existing regulations. [1] Similarly, The Gambia National Health Sector Strategic Plan (2014-2020) states a goal of strengthening the transport of samples, but does not go into any greater detail, and the 2015 National Health Care Waste Management Standard Operating Procedures do not distinguish between the transport of waste and infectious substances specifically. [2,3] Neither the Ministry of Transport, Works and Infrastructure, Ministry of Health and Social Welfare, its national laboratory system and its Directorate of Health Research (the public health research body), the public defence agencies (through the Ministry of Interior), the Ministry of Agriculture, nor the Ministry of Higher Education, Research, Science, and Technology share relevant information via public websites. [4,5,6,7,8,9] While the Joint External Evaluation report for The Gambia, published in

September 2017, states that standard operating procedures (SOPs) "for collection, packaging and transportation are available for diseases under surveillance", these SOPs are not shared via a public website, making it unclear whether they apply to Category A and B substances. [10] The recommendations of the World Health Organisation's Ebola virus preparedness strengthening team's 2014 country visit to The Gambia suggest a lack of guidelines on the transportation of infectious substances, but that at least some training of Ebola response teams had occurred for transporting Category A substances. [11]. Although The Gambia is a party to the Biological Weapons Convention, it has not submitted Confidence Building Measures since 2011. Access to the 2011 submitted report is restricted, and it is not publicly available. [12] There is no relevant information documented in the Verification Research, Training and Information Centre (VERTIC) database. [13]

[1] Ministry of Health and Social Welfare. "Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019." [http://www.moh.gov.gm/sites/default/files/HSEPRP%202017-2019.pdf]. Accessed 9 August 2020.

[2] Ministry of Health and Social Welfare. "The Gambia National Health Sector Strategic Plan (2014-2020)". [http://www.moh.gov.gm/sites/default/files/National%20Health%20Strategic%20Plan%202014-2020.pdf]. Accessed 9 August 2020.

[3] Ministry of Health and Social Welfare. 2015. "The National Health Care Waste Management Standard Operating Procedures". [http://documents1.worldbank.org/curated/en/764301468024555870/pdf/SR700SADROP15400Box385451B00PUBLIC0.pdf]. Accessed 9 August 2020.

[4] Ministry of Transport, Works and Infrastructure. [http://www.motwi.gov.gm/]. Accessed 9 August 2020.

[5] Ministry of Health and Social Welfare. [http://www.moh.gov.gm/]. Accessed 9 August 2020.

[6] Ministry of the Interior. [http://www.moi.gov.gm/]. Accessed 9 August 2020.

[7] Gambia Armed Forces. [http://gaf.gm/]. Accessed 9 August 2020.

[8] Ministry of Agriculture. [http://www.moa.gov.gm/]. Accessed 9 August 2020.

[9] Ministry of Higher Education, Research, Science and Technology. [http://www.moherst.gov.gm/]. Accessed 6 August 2020.

[10] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1]. Accessed 9 August 2020.

[11] World Health Organisation (WHO). 2014. "Ebola Virus Disease Preparedness Strengthening Team: Gambia Country Visit, 17-22 November 2014." [http://apps.who.int/iris/bitstream/handle/10665/145519/WHO_EVD_PCV_Gambia_14_eng.pdf?sequence=1]. Accessed 9 August 2020.

[12] United Nations. "Confidence Building Measures: Gambia". [https://bwc-ecbm.unog.ch/state/gambia]. Accessed 9 August 2020.

[13] Verification Research, Training and Information Centre (VERTIC). "Gambia". [https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/g/]. Accessed 30 August 2020.

1.3.5 Cross-border transfer and end-user screening

1.3.5a

Is there legislation and/or regulations in place to oversee the cross-border transfer and end-user screening of especially dangerous pathogens, toxins, and pathogens with pandemic potential?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence of a national legislation, regulation, or other guidance in place to oversee the cross-border transfer and end-user screening of especially dangerous pathogens, toxins and pathogens with pandemic potential. Neither the Ministry of Health and Social Welfare, the Ministry of Trade, Industry, Regional Integration and Employment, the Ministry of Agriculture, nor the Ministry of Higher Education, Research, Science, and Technology share relevant information via public websites. [1,2,3,4] The 2011 Gambia Trade Policy (which is the most recent available on the internet) is also silent on such regulations and guidance. [5] Although The Gambia is a party to the Biological Weapons Convention, it has not submitted Confidence Building Measures since 2011. Access to the 2011 submitted report is restricted, and it is not publicly available. [6] There is no relevant information documented in the Verification Research, Training and Information Centre (VERTIC) database. [7]

[1] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 4 August 2020.

[2] Ministry of Trade, Industry, Regional Integration and Employment. [<https://motie.gov.gm/>]. Accessed 9 August 2020.

[3] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 5 August 2020.

[4] Ministry of Higher Education, Research, Science and Technology. [<http://www.moherst.gov.gm/>]. Accessed 6 August 2020.

[5] Ministry of Trade, Regional Integration and Employment. 2011. "The Gambia Trade Policy." [<http://www.gambiatradinginfo.org/sites/default/files/The%20Gambia%20Trade%20Policy%202011.pdf>]. Accessed 9 August 2020.

[6] United Nations. "Confidence Building Measures: Gambia". [<https://bwc-ecbm.unog.ch/state/gambia>]. Accessed 9 August 2020.

[7] Verification Research, Training and Information Centre (VERTIC). "Gambia".

[<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/g/>]. Accessed 30 August 2020.

1.4 BIOSAFETY

1.4.1 Whole-of-government biosafety systems

1.4.1a

Does the country have in place national biosafety legislation and/or regulations?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence of national biosafety legislation and/or regulations in The Gambia. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, notes that The Gambia has no legislation or regulations on biosafety.

[1] Neither the Ministry of Health and Social Welfare, its national laboratory system and its Directorate of Health Research (the public health research body), the Ministry of Agriculture, nor the Ministry of Higher Education, Research, Science, and Technology share any relevant information via public websites. [2,3,4] A December 2017 report from the United States Department of Agriculture indicates that The Gambia has a draft biosafety law. [5] However, this draft law is not available online. Further, other studies and articles that mention biosafety and The Gambia seem generally to be concerned with the introduction and management of biotechnology in crops, such as genetically modified organisms (GMOs). For example, The Gambia has been participating in the United Nations Environment Programme and Global Environment Facility Biosafety Project, which is mainly concerned with the safety of GMOs in agriculture, and not with that of pathogens. [6,7] Although The Gambia is a party to the Biological Weapons Convention, it has not submitted Confidence Building Measures since 2011. Access to the 2011 submitted report is restricted, and it is not publicly available. [8] There is no relevant information

documented in the Verification Research, Training and Information Centre (VERTIC) database. [9]

- [1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.
- [2] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.
- [3] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August 2020.
- [4] Ministry of Higher Education, Research, Science and Technology. [<http://www.moherst.gov.gm/>]. Accessed 9 August 2020.
- [5] United States Department of Agriculture Foreign Agricultural Service. 21 December 2017. "2017 West Africa Biotechnology Report". [https://gain.fas.usda.gov/Recent%20GAIN%20Publications/Agricultural%20Biotechnology%20Annual_Dakar_Senegal_12-21-2017.pdf]. Accessed 9 August 2020.
- [6] Moola, Shenaz and Victor Munnik. 2007. "GMOs in Africa: Food and Agriculture: Status Report 2007". African Center for Biosafety. [https://www.biosafety-info.net/file_dir/2183848883a821e85e.pdf]. Accessed 9 August 2020.
- [7] United Nations Environment Programme. "UNEP-GEF Biosafety Projects". [https://unep.ch/biosafety/old_site/about.htm]. Accessed 9 August 2020.
- [8] United Nations. "Confidence Building Measures: Gambia". [<https://bwc-ecbm.unog.ch/state/gambia>]. 9 August 2020.
- [9] Verification Research, Training and Information Centre (VERTIC). "Gambia". [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/g/>]. Accessed 30 August 2020.

1.4.1b

Is there an established agency responsible for the enforcement of biosafety legislation and regulations?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence of an established agency responsible for the enforcement of biosafety legislation and regulations. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, does not specifically discuss whether such an agency exists, but notes that there are no elements in place for a comprehensive biosafety system, and that biosafety in The Gambia is generally underdeveloped. [1] Neither the Ministry of Health and Social Welfare, its national laboratory system and its Directorate of Health Research (the public health research body), the Ministry of Agriculture, nor the Ministry of Higher Education, Research, Science, and Technology share relevant information via public websites. [2,3,4] Although The Gambia is a party to the Biological Weapons Convention, it has not submitted Confidence Building Measures since 2011. Access to the 2011 submitted report is restricted, and it is not publicly available. [5] There is no relevant information documented in the Verification Research, Training and Information Centre (VERTIC) database. [6]

- [1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.
- [2] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.
- [3] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August 2020.
- [4] Ministry of Higher Education, Research, Science and Technology. [<http://www.moherst.gov.gm/>]. Accessed 9 August 2020.
- [5] United Nations. "Confidence Building Measures: Gambia". [<https://bwc-ecbm.unog.ch/state/gambia>]. Accessed 9 August 2020.

[6] Verification Research, Training and Information Centre (VERTIC). "Gambia".
[<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/g/>]. Accessed 30 August 2020.

1.4.2 Biosafety training and practices

1.4.2a

Does the country require biosafety training, using a standardized, required approach, such as through a common curriculum or a train-the-trainer program, for personnel working in facilities housing or working with especially dangerous pathogens, toxins, or biological materials with pandemic potential?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that The Gambia requires biosafety training, using a standardized, required approach, such as through a common curriculum or a train-the-trainer program, for personnel working in facilities housing or working with especially dangerous pathogens, toxins, or biological materials with pandemic potential. Indeed, the Joint External Evaluation (JEE) report for The Gambia, published in September 2017, notes that The Gambia has no comprehensive training or curriculum for biosafety, nor any training needs assessment. Neither is there any sustained training in academic institutions. [1] Neither the Ministry of Health and Social Welfare's national laboratory system and its Directorate of Health Research (the public health research body), the Ministry of Agriculture, nor the Ministry of Higher Education, Research, Science, and Technology share relevant information via public websites. [2,3,4] Similarly, there is no evidence from other external sources or studies that The Gambia requires biosafety training for such personnel. Although The Gambia is a party to the Biological Weapons Convention, it has not submitted Confidence Building Measures since 2011. Access to the 2011 submitted report is restricted, and it is not publicly available. [5] There is no relevant information documented in the Verification Research, Training and Information Centre (VERTIC) database. [6]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[2] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[3] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August 2020.

[4] Ministry of Higher Education, Research, Science and Technology. [<http://www.moherst.gov.gm/>]. Accessed 9 August 2020.

[5] United Nations. "Confidence Building Measures: Gambia". [<https://bwc-ecbm.unog.ch/state/gambia>]. Accessed 9 August 2020.

[6] Verification Research, Training and Information Centre (VERTIC). "Gambia".

[<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/g/>]. Accessed 30 August 2020.

1.5 DUAL-USE RESEARCH AND CULTURE OF RESPONSIBLE SCIENCE

1.5.1 Oversight of research with especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research

1.5.1a

Is there publicly available evidence that the country has conducted an assessment to determine whether ongoing research is occurring on especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research?

Yes = 1 , No = 0

Current Year Score: 0

There is no publicly available evidence that the country has conducted an assessment to determine whether ongoing research is occurring on especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research. Neither the Ministry of Health and Social Welfare, its national laboratory system and its Directorate of Health Research (the public health research body), the public defence agencies (through the Ministry of Interior), the Ministry of Agriculture, nor the Ministry of Higher Education, Research, Science, and Technology share relevant information via public websites. [1,2,3,4,5] Further, while the Joint External Evaluation (JEE) report for The Gambia, published in September 2017, does not discuss such research assessments per se, it notes that The Gambia lacks legislation or regulation related to laboratory premises, scientists, and technicians. [6] Although The Gambia is a party to the Biological Weapons Convention, it has not submitted Confidence Building Measures since 2011. Access to the 2011 submitted report is restricted, and it is not publicly available. [7] There is no relevant information documented in the Verification Research, Training and Information Centre (VERTIC) database. [8]

[1] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[2] Ministry of the Interior. [<http://www.moi.gov.gm/>]. Accessed 9 August 2020.

[3] Gambia Armed Forces. [<http://gaf.gm/>]. Accessed 9 August 2020.

[4] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August 2020.

[5] Ministry of Higher Education, Research, Science and Technology. [<http://www.moherst.gov.gm/>]. Accessed 9 August 2020.

[6] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[7] United Nations. "Confidence Building Measures: Gambia". [<https://bwc-ecbm.unog.ch/state/gambia>]. Accessed 9 August 2020.

[8] Verification Research, Training and Information Centre (VERTIC). "Gambia".

[<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/g/>]. Accessed 30 August 2020.

1.5.1b

Is there legislation and/or regulation requiring oversight of research with especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research?

Yes = 1 , No = 0

Current Year Score: 0

There is no publicly available evidence that the country has legislation and/or regulation requiring oversight of research with especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use researchs. Neither the Ministry of Health and Social Welfare, its national laboratory system and its Directorate of Health Research (the public health research body), the public defence agencies (through the Ministry of Interior), the Ministry of Agriculture, nor the Ministry of Higher Education, Research, Science, and Technology share relevant information via public websites. [1,2,3,4,5] Further, while the Joint External Evaluation (JEE) report for The Gambia, published in September 2017, does not discuss the existence of such a policy, it notes that, more generally, The Gambia lacks legislation or regulation related to laboratory premises, scientists, and technicians. It also notes that there is a lack of biological risk training to create a culture of dual use risk reduction. [6] Although The Gambia is a party to the Biological Weapons Convention, it has not submitted Confidence Building Measures since 2011. Access to the 2011 submitted report is restricted, and it is not publicly available. [7] There is no relevant information documented in the Verification Research, Training and Information Centre (VERTIC) database. [8]

[1] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[2] Ministry of the Interior. [<http://www.moi.gov.gm/>]. Accessed 9 August 2020.

[3] Gambia Armed Forces. [<http://gaf.gm/>]. Accessed 9 August 2020.

[4] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August 2020.

[5] Ministry of Higher Education, Research, Science and Technology. [<http://www.moherst.gov.gm/>]. Accessed 9 August 2020.

[6] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[7] United Nations. "Confidence Building Measures: Gambia". [<https://bwc-ecbm.unog.ch/state/gambia>]. Accessed 9 August 2020.

[8] Verification Research, Training and Information Centre (VERTIC). "Gambia".

[<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/g/>]. Accessed 30 August 2020.

1.5.1c

Is there an agency responsible for oversight of research with especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence of an agency in The Gambia responsible for oversight of research with especially dangerous pathogens, pathogens with pandemic potential, or other dual use research. Neither the Ministry of Health and Social Welfare, its national laboratory system and its Directorate of Health Research (the public health research body), the public defence agencies (through the Ministry of Interior), the Ministry of Agriculture, nor the Ministry of Higher Education, Research, Science, and Technology share relevant information via public websites. [1,2,3,4,5] Further, while the Joint External Evaluation (JEE) report for The Gambia, published in September 2017, does not discuss the existence of such an agency, it notes that, more generally, The Gambia lacks systematic oversight of laboratory premises, scientists, and technicians. It also notes that there is a lack of biological risk training to create a culture of dual use risk reduction. [6] Although The Gambia is a party to the Biological Weapons Convention, it has not submitted Confidence Building Measures since 2011. Access to the 2011 submitted report is restricted, and it is not publicly available. [7] There is no relevant information documented in the Verification Research, Training and Information Centre (VERTIC) database. [8]

- [1] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.
- [2] Ministry of the Interior. [<http://www.moi.gov.gm/>]. Accessed 9 August 2020.
- [3] Gambia Armed Forces. [<http://gaf.gm/>]. Accessed 9 August 2020.
- [4] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August 2020.
- [5] Ministry of Higher Education, Research, Science and Technology. [<http://www.moherst.gov.gm/>]. Accessed 9 August 2020.
- [6] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.
- [7] United Nations. "Confidence Building Measures: Gambia". [<https://bwc-ecbm.unog.ch/state/gambia>]. Accessed 9 August 2020.
- [8] Verification Research, Training and Information Centre (VERTIC). "Gambia". [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/g/>]. Accessed 30 August 2020.

1.5.2 Screening guidance for providers of genetic material

1.5.2a

Is there legislation and/or regulation requiring the screening of synthesized DNA (deoxyribonucleic acid) against lists of known pathogens and toxins before it is sold?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence of a national legislation, regulation, policy, or other guidance, requiring the screening of synthesised DNA before it is sold. Neither the Ministry of Health and Social Welfare, its national laboratory system and its Directorate of Health Research (the public health research body), the public defence agencies (through the Ministry of Interior), the Ministry of Agriculture, nor the Ministry of Higher Education, Research, Science, and Technology share relevant information via public websites. [1,2,3,4,5] Further, while the Joint External Evaluation (JEE) report for The Gambia, published in September 2017, does not discuss the existence of such legislation, it notes that, more generally, The Gambia lacks systematic oversight of laboratory premises, scientists, and technicians. [6] Although The Gambia is a party to the Biological Weapons Convention, it has not submitted Confidence Building Measures since 2011. Access to the 2011 submitted report is restricted, and it is not publicly available. [7] There is no relevant information documented in the Verification Research, Training and Information Centre (VERTIC) database. [8]

- [1] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.
- [2] Ministry of the Interior. [<http://www.moi.gov.gm/>]. Accessed 9 August 2020.
- [3] Gambia Armed Forces. [<http://gaf.gm/>]. Accessed 9 August 2020.
- [4] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August 2020.
- [5] Ministry of Higher Education, Research, Science and Technology. [<http://www.moherst.gov.gm/>]. Accessed 9 August 2020.
- [6] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.
- [7] United Nations. "Confidence Building Measures: Gambia". [<https://bwc-ecbm.unog.ch/state/gambia>]. Accessed 9 August 2020.
- [8] Verification Research, Training and Information Centre (VERTIC). "Gambia".

[<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/g/>]. Accessed 30 August 2020.

1.6 IMMUNIZATION

1.6.1 Vaccination rates

1.6.1a

Immunization rate (measles/MCV2)

Immunization rate (measles/MCV2), 95% or greater = 2, 80-94.9% = 1, Less than 80%, or no data = 0

Current Year Score: 0

2019

World Health Organization

1.6.1b

Are official foot-and-mouth disease (FMD) vaccination figures for livestock publicly available through the OIE database?

Yes = 1, No = 0

Current Year Score: 1

2020

OIE WAHIS database

Category 2: Early detection and reporting for epidemics of potential international concern

2.1 LABORATORY SYSTEMS STRENGTH AND QUALITY

2.1.1 Laboratory testing for detection of priority diseases

2.1.1a

Does the national laboratory system have the capacity to conduct diagnostic tests for at least 5 of the 10 WHO-defined core tests?

Evidence they can conduct 5 of the 10 core tests and these tests are named = 2, Evidence they can conduct 5 of the 10 core tests and the tests are not named = 1, No evidence they can conduct 5 of the 10 core tests = 0

Current Year Score: 0

There is not enough publicly available evidence to determine that the Gambian National Laboratory System has the capacity to conduct diagnostic tests for at least five of the 10 tests defined as core by the World Health Organisation (WHO). The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, notes that the National Public Health Laboratory System (NPHL) serves as the reference laboratory for Mycobacterium tuberculosis (TB), Plasmodium spp (malaria), HIV, Salmonella enteritidis serotype Typhi (typhoid), Rotavirus, and Shigella/Cholera. [1] Only the first four of these, however, are among the WHO-defined core tests, and there is no evidence that The Gambia has explicitly defined country-specific core tests. Further, the JEE gives The Gambia a score of 2 for laboratory testing for detection of priority diseases, indicating the country has the capacity to conduct only one to two core tests; the JEE lists HIV and TB as being the tests that Gambian laboratories are capable of. [1] This combination of evidence suggests that the NPHL may be able to test for plasmodium and typhus, since it is listed as a reference laboratory, but that they may not do so using rapid diagnostic testing for plasmodium spp nor bacterial culture for typhus. The WHO 2016 Annual Report for The Gambia (the most recent available) describes ongoing polio immunization efforts, including for surveillance. [2] However, the Ministry of Health and Social Welfare, NPHL, and its Directorate of Health Research (the public health research body) do not share additional information on these programs that would confirm the ability of the national laboratory system to conduct diagnostic tests for polio via public websites. [4]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[2] World Health Organisation (WHO) Gambia. 2016. "Annual Report 2016: Contributing to a Stronger Health System." [<https://www.afro.who.int/sites/default/files/2017-05/who-gambia-annual-report-2016.pdf>]. Accessed 9 August 2020.

[3] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

2.1.1b

Is there a national plan, strategy or similar document for conducting testing during a public health emergency, which includes considerations for testing for novel pathogens, scaling capacity, and defining goals for testing?

Yes, there is evidence of a plan, and it includes considerations for testing for novel pathogens, scaling capacity, and defining goals for testing = 2, Yes, there is evidence of a plan, but there is insufficient evidence that it includes considerations for testing for novel pathogens, scaling capacity, and defining goals for testing = 1, No evidence of a plan = 0

Current Year Score: 0

There is not sufficient evidence of a national plan, strategy or similar document regarding testing during a public health emergency in The Gambia which includes considerations for testing for novel pathogens, scaling capacity, and defining goals for testing. The Ministry of Health published The Gambia COVID-19 Plan on 11 June 2020. [1] The COVID-19 plan builds on lessons learnt from the National Ebola Virus Disease Plan 2015 and outlines a strategy for building testing capacity, but it is not clear how this plan would be applied to novel pathogens. The plan is, however, currently inaccessible (as on 25 June 2021). National Public Health Laboratories has a Facebook page that shares testing sites and provides a toll-free phone line to call for information on screening and testing, but does not appear to have published any plan covering testing for novel pathogens. [2] There is no evidence of a plan on the Ministry of Agriculture website. [3]

[1] Ministry of Health and Social Welfare, The Gambia. 11 June 2020. "The Gambia COVID-19 Plan". [<http://www.moh.gov.gm/wp-content/uploads/2020/07/The-Gambia-Revised-COVID-19-Plan-June-2020.pdf>] Accessed 15 March 2021.

[2] National Public Health Laboratories, Ministry of Health, The Gambia. "Facebook Group" [<https://www.facebook.com/pages/category/Government-Organization/National-Public-Health-Laboratories-MoH-The-Gambia-110229347399724/>] Accessed 15 August 2020.

[3] Ministry of Agriculture. "Website". [<http://www.moa.gov.gm/>] Accessed 15 March 2021.

2.1.2 Laboratory quality systems

2.1.2a

Is there a national laboratory that serves as a reference facility which is accredited (e.g., International Organization for Standardization [ISO] 15189:2003, U.S. Clinical Laboratory Improvement Amendments [CLIA])?

Yes = 1 , No = 0

Current Year Score: 0

There is inadequate evidence to confirm that The Gambia's National Public Health Laboratory (NPHL), the reference facility of the country, is accredited, or that other laboratories in the country are accredited. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, notes that there is a lack of national laboratories in the country that are accredited by the ISO. [1] Neither the Ministry of Health, its national laboratory system and its Directorate of Health Research (the public health research body), nor the Ministry of Agriculture provide information about laboratory accreditation via public websites. [2,3] The Gambian unit of the privately-run Medical Research Council does have ISO accreditation, but it is not the country's reference facility. [4]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[2] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[3] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August 2020.

[4] Medical Research Council, The Gambia Unit. 2015. "MRC Unit The Gambia Achieves ISO 15189 Accreditation." [<http://www.mrc.gm/mrc-unit-the-gambia-iso-accreditation/>]. Accessed 9 August 2020.

2.1.2b

Is there a national laboratory that serves as a reference facility which is subject to external quality assurance review?

Yes = 1 , No = 0

Current Year Score: 0

There is inadequate evidence to determine that the National Public Health Laboratory (NPHL), which serves as a reference facility, is subject to comprehensive external quality assurance (EQA) review. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, states the following: "There is no established total quality management system for the laboratories. There is no national External Quality Assurance (EQA) scheme, however, the Global Fund for AIDS, TB and Malaria supports external quality assurance (EQA) for HIV serology, TB, and malaria while the WHO supports EQA for rotavirus, measles, rubella, bacterial diagnosis, malaria, tuberculosis microscopy." [1] However, while it stands to reason that this EQA is applied to the NPHL for these pathogens—since the laboratory is the reference facility for TB, malaria, typhoid, and rotavirus, among others—this is not explicitly stated in the project documents of The Global Fund [2]. Neither the Ministry of Health and Social Welfare, its national laboratory system and its Directorate of Health Research (the public health research body), nor the Ministry of Agriculture provide relevant information via public websites. [3,4]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[2] The Global Fund. "Gambia". [<https://www.theglobalfund.org/en/portfolio/country/?k=6a035503-7fc3-41bf-85f8-757fcb9e2773&loc=GMB>]. Accessed 9 August 2020.

[3] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[4] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August 2020.

2.2 LABORATORY SUPPLY CHAINS

2.2.1 Specimen referral and transport system

2.2.1a

Is there a nationwide specimen transport system?

Yes = 1 , No = 0

Current Year Score: 0

There is insufficient evidence to show that The Gambia has a nationwide specimen transport system in place. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, notes that there "is a system in place to transport specific disease specimens (Rota, Measles, Rubella, Yellow Fever, Acute Flaccid Paralysis) to national or regional reference laboratories" from all Gambian districts for advanced diagnostics. However, the JEE report also states that the country lacks a standardized system for transporting specimens between facilities. [1] Additionally, the JEE scores Gambia as a 1 on the JEE for the D.1.2 indicator regarding "specimen referral and transport system," indicating that "no system is in place for transporting specimens from intermediate level/ districts to national laboratories, only ad hoc transporting." [1,2] Neither the Ministry of Health, its national laboratory system and its Directorate of Health Research (the public health research body), nor the Ministry of Agriculture provide information on these systems via public websites. [3,4]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[2] World Health Organisation (WHO). 2016. "Joint External Evaluation Tool". [https://apps.who.int/iris/bitstream/handle/10665/204368/9789241510172_eng.pdf?sequence=1]. Accessed 9 August 2020.

[3] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[4] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August 2020.

2.2.2 Laboratory cooperation and coordination

2.2.2a

Is there a plan in place to rapidly authorize or license laboratories to supplement the capacity of the national public health laboratory system to scale-up testing during an outbreak?

Yes = 2 , Yes, but there is evidence of gaps in implementation = 1 , No = 0

Current Year Score: 0

There is no evidence of a plan to rapidly authorize or license laboratories to supplement the capacity of the national public health laboratory system to scale-up testing during an outbreak. Neither the Ministry of Health, its national laboratory system and its Directorate of Health Research (the public health research body), nor the Ministry of Agriculture provide information on these systems via public websites. [1,2] The Medical Research Unit The Gambia at the London School of Hygiene and Tropical Medicine is the only testing center for COVID-19 in the country, according to the MRC Unit website. Testing appears to be limited and is not open to walk-in requests. Persons with suspected COVID-19 symptoms must first

contact the Ministry of Health on a national helpline and follow guidance [3]

[1] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[2] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August 2020.

[3] MRC Unit The Gambia at the London School of Hygiene and Tropical Medicine. "Coronavirus (COVID-19) Information." [<https://www.mrc.gm/coronavirus-covid-19-information/>] Accessed 30 August 2020.

2.3 REAL-TIME SURVEILLANCE AND REPORTING

2.3.1 Indicator and event-based surveillance and reporting systems

2.3.1a

Is there evidence that the country is conducting ongoing event-based surveillance and analysis for infectious disease?

Yes, there is evidence of ongoing event-based surveillance and evidence that the data is being analyzed on a daily basis = 2,
Yes, there is evidence of ongoing event-based surveillance, but no evidence that the data are being analyzed on a daily basis
= 1, No = 0

Current Year Score: 0

There is no publicly available evidence demonstrating that The Gambia is conducting ongoing event-based surveillance (EBS) and analysis for infectious disease. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, states that "ad hoc rumour monitoring is taking place but Event-based surveillance is not currently operational". [1] Neither the Ministry of Health and Social Welfare, its national laboratory system and its Directorate of Health Research (the public health research body), nor the Ministry of Agriculture provides relevant information via public websites. [2,3] The Gambia's Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019 does not contain any provisions for EBS. [4]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[2] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[3] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August 2020.

[4] Ministry of Health and Social Welfare. "Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019." [<http://www.moh.gov.gm/sites/default/files/HSEPRP%202017-2019.pdf>]. Accessed 9 August 2020.

2.3.1b

Is there publicly available evidence that the country reported a potential public health emergency of international concern (PHEIC) to the WHO within the last two years?

Yes = 1, No = 0

Current Year Score: 0

There is no publicly available evidence that The Gambia reported a potential public health emergency of international concern (PHEIC) to the World Health Organisation (WHO) within the last two years. In February 2018, a case of Rift Valley Fever contracted in The Gambia was reported by the WHO, but the organisation received notification of the illness from the Ministry of Health in Senegal, where the sole patient became ill. [1] The Gambian Ministry of Health and Social Welfare, in collaboration with the Department of Livestock Services of the Ministry of Agriculture, investigated a second case in The

Gambia; the date of that investigation and its outcome are not reported on a publicly available website. [1,2] Neither the Ministry of Health and Social Welfare, its national laboratory system and its Directorate of Health Research (the public health research body), nor the Ministry of Agriculture provide information relevant to disease reporting to the WHO via public websites. [3,4] The WHO Disease Outbreak News page does not report any potential PHEICs involving The Gambia in recent years, aside from the Rift Valley Fever case mentioned above. The Gambia does not appear to have reported a COVID-19 outbreak through the WHO Disease Outbreak mechanism. [5]

[1] World Health Organisation. 28 February 2018. "Rift Valley Fever: Gambia." [<http://www.who.int/csr/don/26-february-2018-rift-valley-fever-gambia/en/>]. Accessed 9 August 2020.

[2] World Health Organisation. "Gambia". [<http://www.who.int/countries/gmb/en/>]. Accessed 9 August 2020.

[3] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[4] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August 2020.

[5] World Health Organisation (WHO). "Emergencies Preparedness, Response: Gambia". [<https://www.who.int/csr/don/archive/country/gmb/en/>]. Accessed 9 August 2020.

2.3.2 Interoperable, interconnected, electronic real-time reporting systems

2.3.2a

Does the government operate an electronic reporting surveillance system at both the national and the sub-national level?

Yes = 1 , No = 0

Current Year Score: 1

The government of The Gambia operates a surveillance system that uses both electronic and paper-based reporting at both the national and sub-national levels. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, states that district surveillance officers channel data to a regional (meaning sub-national) health management office. That office enters the data into the electronic system using the District Health Information System (DHIS) 2 platform. This in turn helps generate weekly summary surveillance reports to the national surveillance officer, as well as a weekly epidemiological bulletin. [1] The Gambia National Health Sector Strategic Plan (2014-2020) confirms the existence of this system and describes some of its features. [2]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[2] Ministry of Health and Social Welfare. "The Gambia National Health Sector Strategic Plan (2014-2020)". [<http://www.moh.gov.gm/sites/default/files/National%20Health%20Strategic%20Plan%202014-2020.pdf>]. Accessed 9 August 2020.

2.3.2b

Does the electronic reporting surveillance system collect ongoing or real-time laboratory data?

Yes = 1 , No = 0

Current Year Score: 0

There is no public evidence that the District Health Information System (DHIS) 2 platform, which provides electronic and paper-based reporting at the national and sub-national level, collects real-time laboratory data. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, describes a process by which most data is manually entered and

released on a weekly basis. [1] The Gambia National Health Sector Strategic Plan (2014-2020), which describes some details of the DHIS2 platform, provides no information that would suggest it collects real-time laboratory data. [2]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[2] Ministry of Health and Social Welfare. "The Gambia National Health Sector Strategic Plan (2014-2020)". [<http://www.moh.gov.gm/sites/default/files/National%20Health%20Strategic%20Plan%202014-2020.pdf>]. Accessed 9 August 2020.

2.4 SURVEILLANCE DATA ACCESSIBILITY AND TRANSPARENCY

2.4.1 Coverage and use of electronic health records

2.4.1a

Are electronic health records commonly in use?

Electronic health records are commonly in use = 2, Electronic health records are not commonly in use, but there is evidence they are used = 1, No evidence electronic health records are in use = 0

Current Year Score: 0

There is no evidence that electronic health records (EHRs) are commonly in use in The Gambia. There is little public information about the use of EHRs in the country, as Gambian public hospitals have almost no internet presence, aside from a Facebook page, and neither the Ministry of Health and Social Welfare, its national laboratory system, nor its Directorate of Health Research (the public health research body) provide relevant information via public websites. [1] The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, mentions the use of some electronic record keeping on surveillance data, including through the use of the District Health Information System and some electronic reporting from regional facilities to the central level. However, the JEE does not discuss the collection of individual patients' data, nor does it quantify the extent of electronic record keeping. [2] There is no mention of the use of electronic patient health records in The Gambia National Health Sector Strategic Plan (2014-2020). [3] Some privately run facilities do use electronic record keeping. For example, The Gambia Unit of the Medical Research Council launched its electronic record-keeping system in March 2017. [4]

[1] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[2] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[3] Ministry of Health and Social Welfare. "The Gambia National Health Sector Strategic Plan (2014-2020)". [<http://www.moh.gov.gm/sites/default/files/National%20Health%20Strategic%20Plan%202014-2020.pdf>]. Accessed 9 August 2020.

[4] Medical Research Council, The Gambia Unit. 28 March 2017. "MRC Unit The Gambia launches Electronic Medical Records System (EMRS)". [<http://www.mrc.gm/mrc-unit-gambia-launches-electronic-medical-records-system-emrs/>]. Accessed 9 August 2020.

2.4.1b

Does the national public health system have access to electronic health records of individuals in their country?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the national public health system has access to electronic health records of individuals in their country. The Ministry of Health and Social Work runs a three-tier health system in the country, with village clinics in the first tier, larger health centres in the second tier, and general hospitals and a teaching hospital in the third tier. [1] There is no mention of the use of electronic patient health records in The Gambia National Health Sector Strategic Plan (2014-2020). [1] Neither the Ministry of Health and Social Welfare, its national laboratory system, nor its Directorate of Health Research (the public health research body) provide relevant information via public websites. [2] The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, mentions the use of some electronic record keeping on surveillance data, including through the use of the District Health Information System and some electronic reporting from regional facilities to the central level. However, the JEE does not discuss the collection of individual patients' data. [3]

[1] Ministry of Health and Social Welfare. "The Gambia National Health Sector Strategic Plan (2014-2020)". [<http://www.moh.gov.gm/sites/default/files/National%20Health%20Strategic%20Plan%202014-2020.pdf>]. Accessed 9 August 2020.

[2] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[3] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

2.4.1c

Are there data standards to ensure data is comparable (e.g., ISO standards)?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that individual electronic health records are commonly in use in The Gambia, let alone whether there are any data standards in place that would regulate them. There is no mention of the use of electronic patient health records in The Gambia National Health Sector Strategic Plan (2014-2020). [1] Neither the Ministry of Health and Social Welfare, its national laboratory system, nor its Directorate of Health Research (the public health research body) provide relevant information via public websites. [2] The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, mentions the use of some electronic record keeping on surveillance data, including through the use of the District Health Information System and some electronic reporting from regional facilities to the central level. However, the JEE does not discuss whether there are standards to ensure that this data is comparable or conforms to ISO standards. [3]

[1] Ministry of Health and Social Welfare. "The Gambia National Health Sector Strategic Plan (2014-2020)". [<http://www.moh.gov.gm/sites/default/files/National%20Health%20Strategic%20Plan%202014-2020.pdf>]. Accessed 9 August 2020.

[2] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[3] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

2.4.2 Data integration between human, animal, and environmental health sectors

2.4.2a

Is there evidence of established mechanisms at the relevant ministries responsible for animal, human, and wildlife surveillance to share data (e.g., through mosquito surveillance, brucellosis surveillance)?

Yes = 1, No = 0

Current Year Score: 0

There is no public evidence of established mechanisms at the relevant ministries responsible for animal, human and wildlife surveillance to share data. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, states that no linkage or exchange mechanism exists between human health and animal surveillance systems, nor between animal diagnostic laboratories and the public health laboratory system. [1] Neither the Ministry of Health and Social Welfare, its national laboratory system and its Directorate of Health Research (the public health research body), the Ministry of Agriculture, nor the Ministry of Environment, Climate Change and Natural Resources provide relevant information via public websites. [2,3,4]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[2] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[3] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August 2020.

[4] Ministry of Environment, Climate Change and Natural Resources. [www.moecww.gov.gm/]. Accessed 9 August 2020.

2.4.3 Transparency of surveillance data

2.4.3a

Does the country make de-identified health surveillance data on infectious diseases publicly available via reports (or other format) on government websites (such as the Ministry of Health, Ministry of Agriculture, or similar)?

Yes = 1, No = 0

Current Year Score: 0

There is evidence The Gambia makes de-identified health surveillance data on infectious diseases publicly available, but not on a regular basis outside of COVID-19 reporting. Gambia's District Health Information System (DHIS) 2 platform contributes to reports of de-identified health surveillance data on disease outbreaks that are shared publicly on the website of the Ministry of Health and Social Welfare (MOHSW). The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, states that these reports are made weekly. [1] However, reports posted on the MOHSW are not regularly updated. They are described as quarterly, but appear to be sporadic at best, and not easily searchable from within the website. [2] The only data on communicable diseases described in the 2016 document are aggregate national statistics from the first quarter of 2016 on malaria incidences and some non-epidemic childhood diseases. The rest of the report is dedicated to such topics access to health services, ante-natal health, and noncommunicable diseases. [3] The MOHSW has started to share daily reports on new COVID-19 cases with de-identified health surveillance data. [4]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[2] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[3] Ministry of Health and Social Welfare. 2016. "Health Management Information System Quarterly HIS Bulletin". [<http://www.moh.gov.gm/sites/default/files/HMIS%20Bulletin%20January-March%202016.pdf>]. Accessed 9 August 2020.

[4] Ministry of Health and Social Welfare. "COVID-19". [<http://www.moh.gov.gm/covid-19-report/>]. Accessed 30 August 2020.

2.4.3b

Does the country make de-identified COVID-19 surveillance data (including details such as daily case count, mortality rate, etc) available via daily reports (or other formats) on government websites (such as the Ministry of Health, or similar)?

Yes = 1 , No = 0

Current Year Score: 1

The Gambia makes de-identified COVID-19 surveillance data available daily on the Ministry of Health website. [1] Daily reports include new and cumulative confirmed cases, recoveries and deaths by region. [2]

[1] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>] Accessed 9 August 2020.

[2] Ministry of Health and Social Welfare. "COVID-19". [<http://www.moh.gov.gm/covid-19-report/>] Accessed 30 August 2020.

2.4.4 Ethical considerations during surveillance

2.4.4a

Is there legislation and/or regulations that safeguard the confidentiality of identifiable health information for individuals, such as that generated through health surveillance activities?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that The Gambia has laws, regulations, or guidelines that safeguard the confidentiality of identifiable health information for individuals, such as that generated through health surveillance activities. Although privacy is protected by the constitution and supported by the Information and Communications Act, 2009, there is no mention of protections applicable to personal health data [1] The Ministry of Health and Social Welfare does not mention any relevant information. [2] According to Data Guidance, in May 2019, the the Public Utilities Regulation Authority ('PURA') of Gambia issued a Draft Data Protection and Privacy Policy Strategy 2019 ('the Draft Policy Strategy') but is not recognised as a law at the moment. If enforced, the Draft Strategy Policy would protect "genetic data; personal data relating to offences, criminal proceedings and convictions, and related security measures; biometric data uniquely identifying a person; and information revealing racial or ethnic origin, political opinions, trade union membership, religious or other beliefs, health or sexual life". [3] In fact, despite being a signatory of the 2010 Economic Community of West African States ('ECOWAS') Supplementary Act A/SA.1/01/10 on Personal Data Protection within ECOWAS ('the ECOWAS Act'), there is no evidence that Gambia has rolled out any national policies or legislations to this effect. [3]

[1] Government of The Gambia. 2009. "Information and Communications Act, 2009".

[http://www.wipo.int/wipolex/en/text.jsp?file_id=238414]. Accessed 9 August 2020.

[2] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[3] One Trust Data Guidance. January 2021. "The Gambia - Data Protection Overview".

[<https://www.dataguidance.com/notes/gambia-data-protection-overview>] Accessed June 3, 2021.

2.4.4b

Is there legislation and/or regulations safeguarding the confidentiality of identifiable health information for individuals, such as that generated through health surveillance activities, include mention of protections from cyber attacks (e.g., ransomware)?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that The Gambia has laws, regulations, or guidelines that safeguard the confidentiality of identifiable health information for individuals, including protection from cyber attacks, the confidentiality of identifiable health information, or information generated through health surveillance activities. Although privacy is protected by the constitution and supported by the Information and Communications Act, 2009, there is no mention of protections applicable to personal health data [1] The Ministry of Health and Social Welfare does not mention any relevant information. [2] According to Data Guidance, in May 2019, the the Public Utilities Regulation Authority ('PURA') of Gambia issued a Draft Data Protection and Privacy Policy Strategy 2019 ('the Draft Policy Strategy') but is not recognised as a law at the moment. If enforced, the Draft Strategy Policy would protect "genetic data; personal data relating to offences, criminal proceedings and convictions, and related security measures; biometric data uniquely identifying a person; and information revealing racial or ethnic origin, political opinions, trade union membership, religious or other beliefs, health or sexual life" as well as follow its tenet of "Data security and security breach notification", which would establish appropriate security measures against risks such as accidental or unauthorised access to, destruction, loss, use, modification, or disclosure of personal data, including electronic records. [3] In fact, despite being a signatory of the 2010 Economic Community of West African States ('ECOWAS') Supplementary Act A/SA.1/01/10 on Personal Data Protection within ECOWAS ('the ECOWAS Act'), there is no evidence that Gambia has rolled out any national policies or legislations to this effect. [3]

[1] Government of The Gambia. 2009. "Information and Communications Act, 2009".

[http://www.wipo.int/wipolex/en/text.jsp?file_id=238414]. Accessed 9 August 2020.

[2] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[3] One Trust Data Guidance. January 2021. "The Gambia - Data Protection Overview".

[<https://www.dataguidance.com/notes/gambia-data-protection-overview>] Accessed June 3, 2021.

2.4.5 International data sharing

2.4.5a

Has the government made a commitment via public statements, legislation and/or a cooperative agreement to share surveillance data during a public health emergency with other countries in the region?

Yes, commitments have been made to share data for more than one disease, Yes, commitments have been made to share data only for one disease = 1, No = 0

Current Year Score: 0

There is insufficient evidence that the government of The Gambia has made a commitment to share surveillance data during a public health emergency with other countries in the region. Through its membership in the West African Health Organisation (WAHO), The Gambia will eventually be involved in the Regional Disease Surveillance Systems Enhancement Project in West Africa (REDISSE) for cooperation during epidemics and disease outbreaks. [1] REDISSE launched in 2016, and the first three countries to receive financing from the project were Guinea, Senegal, and Sierra Leone; The Gambia and other West African countries are slated for participation in later phases. [2,3] In any case, there is little evidence that The Gambia has yet made any kind of specific commitment to actively participate in this network, or others, with the sharing of surveillance data. Neither the Ministry of Health and Social Welfare, its national laboratory system, nor its Directorate of

Health Research (the public health research body) provide relevant information via public websites. [3]

[1] World Bank. "West Africa Regional Disease Surveillance Capacity Strengthening".

[<http://projects.worldbank.org/P125018/west-africa-disease-surveillance-response?lang=en>]. Accessed 9 August 2020.

[2] World Bank. 29 June 2016. "World Bank Contributes to Improved Disease Surveillance and Health Systems in West Africa Following Ebola Epidemic". [<http://www.worldbank.org/en/news/press-release/2016/06/29/world-bank-contributes-to-improved-disease-surveillance-and-health-systems-in-west-africa-following-ebola-epidemic>]. Accessed 9 August 2020.

[3] World Bank. 20 April 2016. "Project Information Document (PID) Appraisal Stage: Regional Disease Surveillance Systems Enhancement (REDISSE) (P154807)". [https://ewdata.rightsindevelopment.org/files/documents/07/WB-P154807_HexYeHb.pdf]. Accessed 9 August 2020.

[3] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

2.5 CASE-BASED INVESTIGATION

2.5.1 Case investigation and contact tracing

2.5.1a

Is there a national system in place to provide support at the sub-national level (e.g. training, metrics standardization and/or financial resources) to conduct contact tracing in the event of a public health emergency?

Yes, there is evidence that the national government supports sub-national systems to prepare for future public health emergencies = 2, Yes, there is evidence that the national government supports sub-national systems, but only in response to active public health emergencies = 1, No = 0

Current Year Score: 1

There is evidence of a national system in place to provide support at the sub-national level (e.g. training, metrics standardization and/or financial resources) to conduct contact tracing but only in the event of an active public health emergency.

There is evidence that the government will provide training of 50 border officers and 100 community-based nurses and public health officials. However, there are no details provided for the same. The Gambia COVID-19 Plan notes a lack of skills in COVID-19 prevention and management, especially at the community level. The plan sets a target of training 50 border officers and 100 community-based nurses and public health officials in COVID-19 prevention and contact tracing. The plan allocates a budget of \$8,765 (USD) to "train surveillance staff on contact tracing and follow-up." [1] The COVID-19 plan does not state whether these actions would be carried out in the event of a different health emergency. The COVID-19 plan is currently inaccessible (as on 30 April 2021). The Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019 mentions the need to "train surveillance staff on contact tracing and follow-up," but does not contain any more detail of a national system. [2] There is no other relevant information on the Ministry of Health website. [3]

[1] The Ministry of Health and Social Affairs. "The Gambia COVID-19 Plan." [<http://www.moh.gov.gm/wp-content/uploads/2020/07/The-Gambia-Revised-COVID-19-Plan-June-2020.pdf>] Accessed 16 March 2021.

[2] Ministry of Health and Social Welfare. "The Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019." [<http://extwprlegs1.fao.org/docs/pdf/gam184418.pdf>] Accessed 16 March 2021.

[3] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 16 March 2021.

2.5.1b

Does the country provide wraparound services to enable infected people and their contacts to self-isolate or quarantine as recommended, particularly economic support (paycheck, job security) and medical attention?

Yes, both economic support and medical attention are provided = 2, Yes, but only economic support or medical attention is provided = 1, No = 0

Current Year Score: 0

There is no evidence that The Gambia provides wraparound services to enable infected people and their contacts to self-isolate or quarantine as recommended, particularly economic support (paycheck, job security) and medical attention. There is no relevant information on the Ministry of Health website or the Medical Research Council (MRC) Unit, The Gambia website. [1,2] The Gambia COVID-19 Plan lays out a strategy for identifying and preparing isolation units or wards "where feasible for any suspected or probable cases." The plan does not outline any economic support for people who may be required to isolate, nor is it clear that the COVID-19 plan would be applied in the event of a different public health emergency. [3] The COVID-19 plan is currently inaccessible (as on 30 April 2021). The International Monetary Fund approved a \$47.1 million (USD) credit facility arrangement for The Gambia in March 2020 that is intended to strengthen the country's economy, but it does not appear this credit will extend to economic support for individuals impacted by COVID-19. [4]

[1] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>] Accessed 16 March 2021.

[2] MRC Unit, the Gambia. "COVID-19 Information." [<https://www.mrc.gm/coronavirus-covid-19-information/>] Accessed 16 March 2021.

[3] The Ministry of Health and Social Affairs. "The Gambia COVID-19 Plan". [<http://www.moh.gov.gm/wp-content/uploads/2020/07/The-Gambia-Revised-COVID-19-Plan-June-2020.pdf>] Accessed 16 March 2021.

[4] International Monetary Fund. "The Gambia: IMF Country Report No. 20/102".

[<https://www.imf.org/~media/Files/Publications/CR/2020/English/1GMBEA2020001.ashx>] Accessed 16 March 2021

2.5.1c

Does the country make de-identified data on contact tracing efforts for COVID-19 (including the percentage of new cases from identified contacts) available via daily reports (or other format) on government websites (such as the Ministry of Health, or similar)?

Yes = 1, No = 0

Current Year Score: 0

The Ministry of Health does make de-identified data on contact tracing efforts for COVID-19 available via reports, but there are occasional gaps in reporting where days were skipped or data from two days or more are pulled into one report. The percentage of new cases from identified cases is not clear. [1] As of August 14 2020, the Ministry of Health reported it had successfully traced 1,681 contacts of a target 1,731. [2] There is no other relevant information on the Ministry of Health website, or the MRC Unit, The Gambia website - a research lab that has collaborated with the Ministry of Health to conduct COVID-19 testing. [3,4]

[1] The Ministry of Health and Social Affairs. "COVID-19 ". [<http://www.moh.gov.gm/covid-19-report/>]. Accessed 14 August 2020.

[2] The Ministry of Health and Social Affairs. "COVID-19: Sitrep 14th August 2020". [http://www.moh.gov.gm/wp-content/uploads/2020/08/Gambia_The_COVID-19_Sitrep-14-August-2020.pdf]. Accessed 14 August 2020.

[3] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>] Accessed 15 September 2020.

[4] MRC Unit, The Gambia. "COVID-19 Information." [<https://www.mrc.gm/coronavirus-covid-19-information/>] Accessed 15

September 2020.

2.5.2 Point of entry management

2.5.2a

Is there a joint plan or cooperative agreement between the public health system and border control authorities to identify suspected and potential cases in international travelers and trace and quarantine their contacts in the event of a public health emergency?

Yes, plan(s)/agreement(s) are in place to prepare for future public health emergencies = 2, Yes, but plan(s)/agreement(s) are in place only in response to active public health emergencies = 1, No = 0

Current Year Score: 0

There is insufficient evidence of a joint plan or cooperative agreement between the public health system and border control authorities to identify suspected and potential cases in international travelers and trace and quarantine their contacts in the event of an active or future public health emergency. There is no evidence of an overarching plan on the Ministry of Health website and The Gambia's border control agency does not appear to have its own website. [1] There is a disease-specific plan for COVID-19 which highlights the need to establish cross border collaboration with neighboring country Senegal. The strategy outlined in the plan includes identifying rooms in border ports and health facilities where suspected or probable cases can be isolated. The plan also sets a target of training 50 border officers in COVID-19 prevention and contact tracing and monthly meetings for border officers on disease prevention and management.[2] The COVID-19 plan is currently inaccessible (as on 30 April 2021). The Health Sector Emergency Preparedness and Response Plan 2017-2019 is applicable to other diseases, however, it does not outline a plan or cooperative agreement between the public health system and border control authorities. [3]

[1] The Ministry of Health and Social Affairs. [<http://www.moh.gov.gm>] Accessed 16 March 2021.

[2] The Ministry of Health and Social Affairs. "The Gambia COVID-19 Plan". [<http://www.moh.gov.gm/wp-content/uploads/2020/07/The-Gambia-Revised-COVID-19-Plan-June-2020.pdf>] Accessed 16 March 2021.

[3] Ministry of Health and Social Welfare. 2017. "Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019". [<http://extwprlegs1.fao.org/docs/pdf/gam184418.pdf>]. Accessed 16 March 2021.

2.6 EPIDEMIOLOGY WORKFORCE

2.6.1 Applied epidemiology training program, such as the field epidemiology training program, for public health professionals and veterinarians (e.g., Field Epidemiology Training Program [FETP] and Field Epidemiology Training Program for Veterinarians [FETPV])

2.6.1a

Does the country meet one of the following criteria?

- Applied epidemiology training program (such as FETP) is available in country
- Resources are provided by the government to send citizens to another country to participate in applied epidemiology training programs (such as FETP)

Needs to meet at least one of the criteria to be scored a 1 on this measure. , Yes for both = 1 , Yes for one = 1 , No for both = 0

Current Year Score: 1

Applied epidemiology training programs are available in The Gambia. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, states that The Gambia began a basic Field Epidemiology Training Programme (FETP) in 2016. FETP-trained public and environmental health officers have been deployed to all 42 districts of the country. [1] The U.S. Centers for Disease Control and Prevention confirms the existence of the FETP, and describes some of its activities, which include the deployment of health officers to the districts. [2] There is insufficient evidence to say whether resources are provided by the government to send citizens to another country to participate in applied epidemiology training programs. There is no relevant information on the Ministry of Health website. [3] The Gambia is a member of African Field Epidemiology Network (AFENET), but The Gambia's country page is blank. [4]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 30 August 2020.

[2] André A. McKenzie, Augusto Lopez, Samantha Perkins, Stephanie Lambert, Lesley Chace, Nestor Noudeke, Aissatou Fall, and Biagio Pedalino. 2017. "Frontline Field Epidemiology Training Programs as a Strategy to Improve Disease Surveillance and Response." *Emerging Infectious Diseases* 23 (Suppl. 1): S166. [https://wwwnc.cdc.gov/eid/article/23/13/17-0803_article]. Accessed 30 August 2020.

[3] Ministry of Health and Social Work. [<http://www.moh.gov.gm/>] Accessed 15 September 2020.

[4] AFENET. "The Gambia." [<http://afenet.net/index.php/countries/gambia#background>] Accessed 15 September 2020.

2.6.1b

Are the available field epidemiology training programs explicitly inclusive of animal health professionals or is there a specific animal health field epidemiology training program offered (such as FETPV)?

Yes = 1 , No = 0

Current Year Score: 1

The Gambia's Field Epidemiology Training Program (FETP) has included the training of one veterinarian and three veterinary technicians, according to the Joint External Evaluation (JEE) report for The Gambia, published in September 2017. [1] However, while the FETP is inclusive of animal health professionals, the JEE states that its extension to veterinarians and veterinary technicians has so far been hampered by a lack of funds [1]. Neither the Ministry of Health and Social Welfare, its national laboratory system, nor its Directorate of Health Research (the public health research body) provide relevant information via public websites. [2]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[2] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

2.6.2 Epidemiology workforce capacity

2.6.2a

Is there public evidence that the country has at least 1 trained field epidemiologist per 200,000 people?

Yes = 1 , No = 0

Current Year Score: 1

2020

Completed JEE assessments; Economist Impact analyst qualitative assessment based on official national sources, which vary by country

Category 3: Rapid response to and mitigation of the spread of an epidemic

3.1 EMERGENCY PREPAREDNESS AND RESPONSE PLANNING

3.1.1 National public health emergency preparedness and response plan

3.1.1a

Does the country have an overarching national public health emergency response plan in place which addresses planning for multiple communicable diseases with epidemic or pandemic potential?

Evidence that there is a plan in place, and the plan is publicly available = 2, Evidence that the plan is in place, but the plan is not publicly available OR, Disease-specific plans are in place, but there is no evidence of an overarching plan = 1, No evidence that such a plan or plans are in place = 0

Current Year Score: 1

The Gambia has a national public health emergency preparedness plan, in the form of the Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019 (HSEPRP), but the plan is not publicly available. The HSEPRP is intended to be a comprehensive blueprint for the whole of government response to any health emergency. The plan was inspired in part by The Gambia's National Ebola Virus Disease Preparedness and Response Plan (2014-2015), or NEVDP. The HSEPRP mentions both Ebola and Avian and Human Influenza, but is not meant to be a disease-specific plan. Rather, it provides a framework for coordination across different ministries, departments, and various other entities that constitute the Gambian health sector, to respond to any health emergency. [1] Separately, according to the Joint External Evaluation (JEE) report for The Gambia, published in September 2017, The Gambia also has an Integrated National Emergency Preparedness and Response Plan for Avian & Human Influenza (AHI) (2015-2019). [2] However, neither the NEVDP nor the Avian and Human Influenza plan are available on the website of the Ministry of Health and Social Welfare or elsewhere on the internet. [3]

[1] World Health Organization. February 2016. "Gambia initiates an all hazard health sector preparedness and response plan." [<https://www.afro.who.int/news/gambia-initiates-all-hazard-health-sector-preparedness-and-response-plan>]. Accessed 9 August 2020.

[2] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017-61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[3] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

3.1.1b

If an overarching plan is in place, has it been updated in the last 3 years?

Yes = 1 , No /no plan in place= 0

Current Year Score: 0

There is insufficient public evidence that the Gambia's overarching national public health emergency response plan has been updated in the last 3 years. The Gambia's national public health emergency preparedness plan, the Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019 (HSEPRP), which includes specific (though limited) information on multiple communicable diseases with pandemic potential, is three years old; however the plan was launched in 2016 and implemented for the years between 2017 and 2019, and it is not known if it has been updated since then. The HSEPRP provides a framework for coordination across different ministries, departments, and various other entities that constitute the Gambian health sector, to respond to any health emergency, including Ebola and avian influenza. [1]

[1] World Health Organization. February 2016. "Gambia initiates an all hazard health sector preparedness and response plan." [<https://www.afro.who.int/news/gambia-initiates-all-hazard-health-sector-preparedness-and-response-plan>]. Accessed 9 August 2020.

3.1.1c

If an overarching plan is in place, does it include considerations for pediatric and/or other vulnerable populations?

Yes = 1 , No /no plan in place= 0

Current Year Score: 0

The Gambia's national public health emergency preparedness plan, the Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019 (HSEPRP), which includes specific (though limited) information on multiple communicable diseases with pandemic potential, does not include meaningful considerations for paediatric and other vulnerable populations. [1] The Joint External Evaluation (JEE) report for The Gambia, notes that the HSEPRP needs to be revised to include "radiological events, oil spills, chemical events, and other biohazards" in order to be a complete all-hazards plan. However, the JEE does not make recommendations about the inclusion of paediatric and vulnerable populations. [2]

[1] Ministry of Health and Social Welfare. "Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019." [<http://www.moh.gov.gm/sites/default/files/HSEPRP%202017-2019.pdf>]. Accessed 9 August 2020.

[2] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

3.1.1d

Does the country have a publicly available plan in place specifically for pandemic influenza preparedness that has been updated since 2009?

Yes = 1 , No = 0

Current Year Score: 0

2020

WHO Strategic Partnership for IHR and Health Security (SPH)

3.1.2 Private sector involvement in response planning

3.1.2a

Does the country have a specific mechanism(s) for engaging with the private sector to assist with outbreak emergency preparedness and response?

Yes = 1, No = 0

Current Year Score: 0

The Gambia's national public health emergency preparedness plan, the Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019, which includes specific (though limited) information on multiple communicable diseases with pandemic potential, does not include a specific mechanism for engaging with the private sector to assist with outbreak emergency preparedness and response. [1] The plan does state that, as a goal, collaboration should occur between the National Public Health Laboratory and private laboratories, but does not outline a mechanism for this to take place. [1] The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, does not make an evaluation of The Gambia's readiness to engage with the private sector specifically in response to an outbreak emergency, though in general it recommends better coordination with the private sector, both for laboratory work and risk communication. [2] There is no additional relevant information on the Ministry of Health and Social Welfare website. [3]

[1] Ministry of Health and Social Welfare. "Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019." [<http://www.moh.gov.gm/sites/default/files/HSEPRP%202017-2019.pdf>]. Accessed 9 August 2020.

[2] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[3] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

3.1.3 Non-pharmaceutical interventions planning

3.1.3a

Does the country have a policy, plan and/or guidelines in place to implement non-pharmaceutical interventions (NPIs) during an epidemic or pandemic?

Yes, a policy, plan and/or guidelines are in place for more than one disease= 2, Yes, but the policy, plan and/or guidelines exist only for one disease = 1, No = 0

Current Year Score: 0

There is insufficient evidence of a policy, plan and/or guidelines in place to implement non-pharmaceutical interventions (NPIs) during an epidemic or pandemic in the Gambia. There is a COVID-19 plan in The Gambia, however the Ministry of Health website does not provide any details on this plan. Therefore, it is unclear whether this plan contains any guidelines on NPIs. [1] The COVID-19 plan is currently inaccessible (as on 30 April 2021). The Health Sector Emergency Preparedness and Response Plan Related to All Hazards 2017-2019 (HSEPRP) talks about the need to provide adequate nutrition and promote good hygiene practices in the event of a health emergency, but the plan is not very detailed and does not outline when these non-pharmaceutical interventions should be taken. [2] The Ministry of Health and Social Welfare and the National Disaster Management Agency do not provide any additional relevant information on their websites.[3,4]

[1] The Ministry of Health and Social Affairs. "The Gambia COVID-19 Plan". [<http://www.moh.gov.gm/wp-content/uploads/2020/07/The-Gambia-Revised-COVID-19-Plan-June-2020.pdf>] Accessed 12 August 2020.

[2] Ministry of Health and Social Welfare. 2017. "Health Sector Emergency Preparedness and Response Plan Related to All

Hazards 2017-2019". [<http://extwprlegs1.fao.org/docs/pdf/gam184418.pdf>]. Accessed 18 March 2021.

[3] Ministry of Health and Social Welfare. "Website". [<http://www.moh.gov.gm/>]. Accessed 30 August 2020.

[4] The Republic of The Gambia National Disaster Management Agency. "Website". [<http://ndma.gm/>]. Accessed 18 March 2021..

3.2 EXERCISING RESPONSE PLANS

3.2.1 Activating response plans

3.2.1a

Does the country meet one of the following criteria?

- Is there evidence that the country has activated their national emergency response plan for an infectious disease outbreak in the past year?

- Is there evidence that the country has completed a national-level biological threat-focused exercise (either with WHO or separately) in the past year?

Needs to meet at least one of the criteria to be scored a 1 on this measure. , Yes for both = 1 , Yes for one = 1 , No for both = 0

Current Year Score: 1

There is evidence that The Gambia has activated their national emergency response plan for an infectious disease outbreak in the past year. The Gambia COVID-19 Plan builds on the lessons of the nation's 2015 National Ebola Virus Disease Plan and the Health Sector Emergency Preparedness and Response Plan Related to All Hazards published in 2017. [1] This 2017 All Hazards plan aimed to create a single comprehensive plan to effectively respond to emergencies and was used as a template for the COVID-19 Plan with significant overlap and shared objectives.[2] There is no evidence, however, that The Gambia has completed a national-level biological threat-focused exercise in the past year. The World Health Organization does not list any recent exercises, and there is no evidence of any exercises being completed on the Ministry of Health website. [3,4]

[1] The Ministry of Health and Social Affairs. "The Gambia COVID-19 Plan". [<http://www.moh.gov.gm/wp-content/uploads/2020/07/The-Gambia-Revised-COVID-19-Plan-June-2020.pdf>] Accessed 12 August 2020.

[2] Ministry of Health and Social Welfare. 2017. "Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019". [<http://extwprlegs1.fao.org/docs/pdf/gam184418.pdf>]. Accessed 30 August 2020.

[3] World Health Organization. "Simulation Exercise." [<https://extranet.who.int/sph/simulation-exercise>]. Accessed 12 August 2020.

[4] Ministry of Health and Social Affairs. [<http://www.moh.gov.gm/>]. Accessed 12 August 2020.

3.2.1b

Is there evidence that the country in the past year has identified a list of gaps and best practices in response (either through an infectious disease response or a biological-threat focused exercise) and developed a plan to improve response capabilities?

Yes, the country has developed and published a plan to improve response capacity = 2 , Yes, the country has developed a plan to improve response capacity, but has not published the plan = 1 , No = 0

Current Year Score: 0

There is not sufficient evidence that The Gambia has identified a list of gaps and best practices in response to an infectious disease or a biological threat. There is no record of a planned or conducted after-action review being conducted by The

Gambia on the World Health Organization (WHO) After Action Review page, the WHO country page, the Gambian Ministry of Health, or the National Disaster Management Agency website. [1,2,3,4] The Joint External Evaluation (JEE) report for The Gambia, published in September 2017 does not mention that any such exercise has taken place. [5]

[1] World Health Organization. "After Action Review". [<https://extranet.who.int/sph/after-action-review>]. Accessed 10 August 2020.

[2] World Health Organization. "Gambia". [<https://www.who.int/countries/gmb/en/>]. Accessed 10 August 2020.

[3] Ministry of Health and Social Affairs. [<http://www.moh.gov.gm/>] Accessed 10 August 2020.

[4] National Disaster Management Agency.

[http://www.ndma.gm/home/index.php?option=com_content&view=article&id=114:npm3&catid=1:latest-news]. Accessed

30 August 2020. [5] World Health Organization. &Irm;2017&Irm;. "Joint external evaluation of IHR core capacities of the Republic of the Gambia: mission report, September 24-29, 2017." [<https://apps.who.int/iris/handle/10665/259715>].

Accessed 30 August 2020.

3.2.2 Private sector engagement in exercises

3.2.2a

Is there evidence that the country in the past year has undergone a national-level biological threat-focused exercise that has included private sector representatives?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that The Gambia has undergone a national-level biological threat-focused exercise with private sector representatives in the past year. There is no record of a planned or conducted simulation exercise being conducted by The Gambia on the World Health Organization (WHO) Simulation Exercise page, the WHO country page, or the Gambian Ministry of Health website. [1,2,3]

[1] World Health Organization. "Simulation Exercise." [<https://extranet.who.int/sph/simulation-exercise>]. Accessed 12 August 2020

[2] World Health Organization. "Gambia". [<https://www.who.int/countries/gmb/en/>]. Accessed 10 August 2020.

[3] Ministry of Health and Social Affairs. [<http://www.moh.gov.gm/>] Accessed 10 August 2020.

3.3 EMERGENCY RESPONSE OPERATION

3.3.1 Emergency response operation

3.3.1a

Does the country have in place an Emergency Operations Center (EOC)?

Yes = 1 , No = 0

Current Year Score: 1

There is evidence that The Gambia has in place a Public Health Emergency Operation Centre (PHEOC). In an updated announcement, the World Health Organisation states that construction of the PHEOC was scheduled for completion in May 2016. [1] A May 2018 WHO article describes a joint health emergency operations exercise that involved the PHEOC of The Gambia, showing that the PHEOC is operational. [2] The 2016 WHO Annual Report for The Gambia also states that the PHEOC has been established. [3] The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, states that

a structure has been identified for the PHEOC and that it is currently under construction. Further, the JEE indicates that the PHEOC has at least some staff, though the report does not make it clear how close the PHEOC structure is to being fully operational. [4] The PHEOC does not appear to have any online presence.

[1] World Health Organisation (WHO) Gambia. “WHO Provides Technical Support for the Construction of Public Health Emergency Operations Centres in the Gambia.” [https://www.afro.who.int/news/who-provides-technical-support-construction-public-health-emergency-operations-centres-gambia]. Accessed 9 August 2020.

[2] World Health Organisation (WHO) Regional Office for Africa. 8 May 2018. “WHO Supports Six African Countries Conduct First Joint Health Emergency Operations Exercise”. [https://www.afro.who.int/news/who-supports-six-african-countries-conduct-first-joint-health-emergency-operations-exercise]. Accessed 9 August 2020.

[3] World Health Organisation Gambia. 2016. “Annual Report 2016: Contributing to a Stronger Health System”. [https://www.afro.who.int/sites/default/files/2017-05/who-gambia-annual-report-2016.pdf]. Accessed 9 August 2020.

[4] World Health Organisation (WHO). 24-29 September 2017. “Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia”. [http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1]. Accessed 9 August 2020.

3.3.1b

Is the Emergency Operations Center (EOC) required to conduct a drill for a public health emergency scenario at least once per year or is there evidence that they conduct a drill at least once per year?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that The Gambia’s Public Health Emergency Operation Centre (PHEOC) is required to conduct a drill at least once per year or that it conducts a drill at least once per year. Aside from the Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019, which mentions the establishment of the PHEOC as a goal [1], neither the Ministry of Health and Social Welfare nor National Disaster Management Agency share relevant information, including annual reports, via public websites. [2,3] None of the aforementioned sources provide any information about the drill requirements for the PHEOC, or any other operational details about the center. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, states that a structure has been identified for the PHEOC and that it is currently under construction, and that that the PHEOC has at least some staff. However, the JEE does not make it clear how close the PHEOC is to being fully operational, nor shed light on its plans, if any, to conduct drills. The JEE notes a general lack of training programme for PHEOC staff on emergency response operations. [4]

[1] Ministry of Health and Social Welfare. “Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019.” [http://www.moh.gov.gm/sites/default/files/HSEPRP%202017-2019.pdf]. Accessed 9 August 2020.

[2] Ministry of Health and Social Welfare. [http://www.moh.gov.gm/]. Accessed 9 August 2020.

[3] National Disaster Management Agency. [http://www.ndma.gm/home/index.php?option=com_content&view=article&id=114:npm3&catid=1:latest-news]. Accessed 9 August 2020.

[4] World Health Organisation (WHO). 24-29 September 2017. “Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia”. [http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1]. Accessed 9 August 2020.

3.3.1c

Is there public evidence to show that the Emergency Operations Center (EOC) has conducted within the last year a coordinated emergency response or emergency response exercise activated within 120 minutes of the identification of the public health emergency/scenario?

Yes = 1, No = 0

Current Year Score: 0

There is no public evidence to show that the Public Health Emergency Operation Centre (PHEOC) can conduct, or has conducted within the last year, a coordinated emergency response or emergency response exercise activated within 120 minutes of the identification of the public health emergency/scenario. Aside from the Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019, which mentions the establishment of the PHEOC as a goal, neither the Ministry of Health and Social Welfare nor National Disaster Management Agency, share relevant information via public websites about the PHEOC's operational requirements or capabilities. [1,2,3] Information from the World Health Organisation about a joint health emergency operations exercise in 2018 that involved the PHEOC of The Gambia and other West African countries does not contain details that could confirm the response time of the PHEOC. [4] The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, does not comment on the ability of the PHEOC to conduct an emergency response exercise activated within the given timeframe, but notes a general lack of a training programme for PHEOC staff on emergency response operations, and makes a recommendation for simulation exercises. [5]

[1] Ministry of Health and Social Welfare. "Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019." [http://www.moh.gov.gm/sites/default/files/HSEPRP%202017-2019.pdf]. Accessed 9 August 2020.

[2] Ministry of Health and Social Welfare. [http://www.moh.gov.gm/]. Accessed 9 August 2020.

[3] National Disaster Management Agency.

[http://www.ndma.gm/home/index.php?option=com_content&view=article&id=114:npm3&catid=1:latest-news]. Accessed 9 August 2020.

[4] World Health Organisation (WHO) Regional Office for Africa. 8 May 2018. "WHO Supports Six African Countries Conduct First Joint Health Emergency Operations Exercise". [https://www.afro.who.int/news/who-supports-six-african-countries-conduct-first-joint-health-emergency-operations-exercise]. Accessed 9 August 2020.

[5] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1]. Accessed 9 August 2020.

3.4 LINKING PUBLIC HEALTH AND SECURITY AUTHORITIES

3.4.1 Public health and security authorities are linked for rapid response during a biological event

3.4.1a

Does the country meet one of the following criteria?

- Is there public evidence that public health and national security authorities have carried out an exercise to respond to a potential deliberate biological event (i.e., bioterrorism attack)?
- Are there publicly available standard operating procedures, guidelines, memorandums of understanding (MOUs), or other agreements between the public health and security authorities to respond to a potential deliberate biological event (i.e., bioterrorism attack)?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0

Current Year Score: 0

There is no evidence that The Gambia’s public health and national security authorities have carried out an exercise to respond to a potential deliberate biological event, nor are there publicly available standard operating procedures, guidelines, or agreements between those entities regarding such events. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, notes that while public health officials, national security authorities, and the National Disaster Management Agency (NDMA) collaborate and cooperate over health emergencies, there are no memorandums of understanding, and joint exercises have never been carried out. [1] Neither the Ministry of Health and Social Welfare, the NDMA, nor the public defence agencies (through the Ministry of Interior) share relevant information via public websites. [2,3,4,5]

[1] World Health Organisation (WHO). 24-29 September 2017. “Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia”. [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[2] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[3] National Disaster Management Agency.

[http://www.ndma.gm/home/index.php?option=com_content&view=article&id=114:npm3&catid=1:latest-news]. Accessed 9 August 2020.

[4] Ministry of the Interior. [<http://www.moi.gov.gm/>]. Accessed 9 August 2020.

[5] Gambia Armed Forces. [<http://gaf.gm/>]. Accessed 9 August 2020.

3.5 RISK COMMUNICATIONS

3.5.1 Public communication

3.5.1b

Does the risk communication plan (or other legislation, regulation or strategy document used to guide national public health response) outline how messages will reach populations and sectors with different communications needs (eg different languages, location within the country, media reach)?

Yes = 1 , No = 0

Current Year Score: 0

There is no public evidence that The Gambia has in place a risk communication plan that is specifically intended for use during a public health emergency and which outlines how messages will reach populations and sectors with different communications needs. No publicly available evidence for such a plan exists in the National Public Health Emergency Response Plan or in other legislation, regulation or strategy documents. The Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019 does contain a section on risk communication. [1] However, the language on risk communication in the Plan is not detailed enough to constitute a plan, and makes no mention of groups and sectors with different communications needs. [1] Neither the Ministry of Health and Social Welfare and the National Disaster Management Agency (NDMA) provide relevant information via public websites. [2,3] Similarly, the Joint External Evaluation (JEE) report for The Gambia, published in September 2017, makes no mention of The Gambia planning specifically for various groups’ and sectors’ different communications needs. [4]

[1] Medical Research Council, The Gambia Unit. 28 March 2017. “MRC Unit The Gambia launches Electronic Medical Records System (EMRS)”. [<http://www.mrc.gm/mrc-unit-gambia-launches-electronic-medical-records-system-emrs/>]. Accessed 9 August 2020.

[2] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[3] National Disaster Management Agency.

[http://www.ndma.gm/home/index.php?option=com_content&view=article&id=114:npm3&catid=1:latest-news]. Accessed 9 August 2020.

[4] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

3.5.1 Risk communication planning

3.5.1a

Does the country have in place, either in the national public health emergency response plan or in other legislation, regulation, or strategy documents, a section detailing a risk communication plan that is specifically intended for use during a public health emergency?

Yes = 1 , No = 0

Current Year Score: 0

There is no public evidence that The Gambia has in place a section detailing a risk communication plan that is specifically intended for use during a public health emergency, either in the national public health emergency response plan or in other legislation, regulation or strategy documents. The Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019 (HSEPRP) states a goal of developing and implementing "a health emergency risk/outbreak communication strategic plan", indicating that such a plan does not yet exist. [1] The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, notes that The Gambia has a National Communication Taskforce, which coordinates risk communication. However, the JEE goes on to note the lack of a comprehensive risk communication policy and plan. [2] Neither the Ministry of Health and Social Welfare nor the National Disaster Management Agency share relevant information via public websites. [3,4]

[1] Ministry of Health and Social Welfare. "Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019." [<http://www.moh.gov.gm/sites/default/files/HSEPRP%202017-2019.pdf>]. Accessed 9 August 2020.

[2] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[3] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[4] National Disaster Management Agency.

[http://www.ndma.gm/home/index.php?option=com_content&view=article&id=114:npm3&catid=1:latest-news]. Accessed 9 August 2020.

3.5.1c

Does the risk communication plan (or other legislation, regulation or strategy document used to guide national public health response) designate a specific position within the government to serve as the primary spokesperson to the public during a public health emergency?

Yes = 1 , No = 0

Current Year Score: 0

There is no public evidence that The Gambia has designated a specific position within the government to serve as the primary spokesperson to the public during a public health emergency. The Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019 (HSEPRP) states a goal of developing and implementing "a health emergency risk/outbreak communication strategic plan", indicating that such a plan does not yet exist and there is therefore no designated spokesperson. [1] The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, notes that The Gambia has a National Communication Taskforce, which coordinates risk communication. However, the JEE goes on to note the lack of a comprehensive risk communication policy and plan. [2] Neither the Ministry of Health and Social Welfare nor the National Disaster Management Agency share relevant information via public websites. [3,4]

[1] Ministry of Health and Social Welfare. "Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019." [http://www.moh.gov.gm/sites/default/files/HSEPRP%202017-2019.pdf]. Accessed 9 August 2020.

[2] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1]. Accessed 9 August 2020.

[3] Ministry of Health and Social Welfare. [http://www.moh.gov.gm/]. Accessed 9 August 2020.

[4] National Disaster Management Agency.

[http://www.ndma.gm/home/index.php?option=com_content&view=article&id=114:npm3&catid=1:latest-news]. Accessed 9 August 2020.

3.5.2 Public communication

3.5.2a

In the past year, is there evidence that the public health system has actively shared messages via online media platforms (e.g. social media, website) to inform the public about ongoing public health concerns and/or dispel rumors, misinformation or disinformation?

Public health system regularly shares information on health concerns = 2, Public health system shares information only during active emergencies, but does not regularly utilize online media platforms = 1, Public health system does not regularly utilize online media platforms, either during emergencies or otherwise = 0

Current Year Score: 2

There is evidence The Gambia's public health system has informed the public about ongoing health concerns on social media. The Ministry of Health posts on Twitter at least one post per day with updates on COVID-19, reminding people to be alert and practice good hygiene as well as sharing infographics to illustrate facts such as "Coronavirus cannot be transmitted through mosquito bites." The Ministry of Health has also regularly tweeted about less pressing health concerns such as seasonal flu, Human Papillomavirus, and the importance of healthy diets and good hygiene. The Ministry of Health has also used social media to dispel misinformation about vaccines using the hashtag #VaccinesWork. [1,2]. The Ministry of Health and national laboratory are also active on Facebook. [3,4]

[1] Ministry of Health Gambia, Twitter. [https://twitter.com/mohgambia?lang=en]. Accessed 8 August 2020.

[2] Bindung Maternal and Child Health Hospital, Twitter.

"[https://twitter.com/BMCHH_Gambia/status/1290961293634043905]. Accessed 8 August 2020.

[3] Ministry of Health, The Gambia, Facebook. [https://www.facebook.com/Ministry-of-Health-The-Gambia-100866698020695/?__tn__=%2Cd%2CP-

R&eid=ARDAIkKEG9uUChoz9F78S_8xv750dU77oeBpIrv1uFsZTjKEUEUHbSJHDTgN9nmX2slkxYM94v8x7BE] Accessed 8 August 2020.

[4] National Public Health Laboratories, The Gambia, Facebook. [https://www.facebook.com/pages/category/Government-

Organization/National-Public-Health-Laboratories-MoH-The-Gambia-110229347399724/]. Accessed 8 August 2020.

3.5.2b

Is there evidence that senior leaders (president or ministers) have shared misinformation or disinformation on infectious diseases in the past two years?

No = 1, Yes = 0

Current Year Score: 1

There is not sufficient evidence that senior leaders in The Gambia have shared misinformation or disinformation on infectious diseases in the past two years. The Ministry of Health has been active in correcting misinformation spread on social media. [1] There is a history of false health information being spread by leaders in The Gambia. Former president Yahya Jammeh told AIDS patients that they could cure themselves with a body rub and a banana, according to The New York Times. Jammeh was in power for 22 years until he was voted out of power in 2016. [2] There do not appear to be any recent examples in international or national news outlets.

[1] Ministry of Health, The Gambia, Facebook.

[https://m.facebook.com/100866698020695/photos/a.138068120967219/192048398902524/?type=3&source=48&_ft_=qid.6843850191227438372%3A%3Amf_story_key.1562901520552389%3A%3Agroup_id.267133156795905%3A%3Aatop_level_post_id.1562901520552389%3A%3Aatl_objid.1562901520552389%3A%3Acontent_owner_id_new.100038225793638%3A%3Aoriginal_content_id.192048612235836%3A%3Aoriginal_content_owner_id.100866698020695%3A%3Apage_id.100866698020695%3A%3Asrc.22%3A%3Aphoto_id.192048398902524%3A%3Astory_location.6%3A%3Aattached_story_attachment_style.photo%3A%3Afilter.GroupStoriesByActivityEntQuery%3A%3Atds_flg.3%3A%3Apage_insights.%7B%22100866698020695%22%3A%7B%22page_id%22%3A100866698020695%2C%22page_id_type%22%3A%22page%22%2C%22actor_id%22%3A100038225793638%2C%22attached_story%22%3A%7B%22page_id%22%3A100866698020695%2C%22page_id_type%22%3A%22page%22%2C%22actor_id%22%3A100866698020695%2C%22dm%22%3A%7B%22isShare%22%3A0%2C%22originalPostOwnerId%22%3A0%7D%2C%22psn%22%3A%22EntStatusCreationStory%22%2C%22post_context%22%3A%7B%22object_fbtype%22%3A266%2C%22publish_time%22%3A1584445414%2C%22story_name%22%3A%22EntStatusCreationStory%22%2C%22story_fbid%22%3A5B192048612235836%5D%7D%2C%22role%22%3A1%2C%22sl%22%3A6%7D%2C%22dm%22%3A%7B%22isShare%22%3A0%2C%22originalPostOwnerId%22%3A0%7D%2C%22psn%22%3A%22EntGroupMallPostCreationStory%22%2C%22role%22%3A1%2C%22sl%22%3A6%2C%22targets%22%3A%5B%7B%22actor_id%22%3A100038225793638%2C%22page_id%22%3A100866698020695%2C%22post_id%22%3A192048612235836%2C%22role%22%3A1%2C%22share_id%22%3A0%7D%5D%7D%2C%22267133156795905%22%3A%7B%22page_id%22%3A267133156795905%2C%22page_id_type%22%3A%22group%22%2C%22actor_id%22%3A100038225793638%2C%22dm%22%3A%7B%22isShare%22%3A1%2C%22originalPostOwnerId%22%3A192048612235836%7D%2C%22psn%22%3A%22EntGroupMallPostCreationStory%22%2C%22post_context%22%3A%7B%22object_fbtype%22%3A657%2C%22publish_time%22%3A1584471158%2C%22story_name%22%3A%22EntGroupMallPostCreationStory%22%2C%22story_fbid%22%3A%5B1562901520552389%5D%7D%2C%22role%22%3A0%2C%22sl%22%3A6%7D%7D%2C%22__tn__=EHH-R]

[2] The New York Times. "Now Streaming on YouTube: Confessions From a Presidential Hit Squad in Gambia".

[<https://www.nytimes.com/2019/08/31/world/africa/gambia-truth-commission-yahya-jammeh.html>] Accessed 10 August 2020.

3.6 ACCESS TO COMMUNICATIONS INFRASTRUCTURE

3.6.1 Internet users

3.6.1a

Percentage of households with Internet

Input number

Current Year Score: 19.84

2019

International Telecommunication Union (ITU)

3.6.2 Mobile subscribers

3.6.2a

Mobile-cellular telephone subscriptions per 100 inhabitants

Input number

Current Year Score: 139.53

2019

International Telecommunication Union (ITU)

3.6.3 Female access to a mobile phone

3.6.3a

Percentage point gap between males and females whose home has access to a mobile phone

Input number

Current Year Score: 12

2019

Gallup; Economist Impact calculation

3.6.4 Female access to the Internet

3.6.4a

Percentage point gap between males and females whose home has access to the Internet

Input number

Current Year Score: 11.0

2019

Gallup; Economist Impact calculation

3.7 TRADE AND TRAVEL RESTRICTIONS

3.7.1 Trade restrictions

3.7.1a

In the past year, has the country issued a restriction, without international/bilateral support, on the export/import of medical goods (e.g. medicines, oxygen, medical supplies, PPE) due to an infectious disease outbreak?

Yes = 0, No = 1

Current Year Score: 1

There is no evidence The Gambia has restricted the import or export of medical goods in the past year due to an infectious disease outbreak on either the Ministry of Health or the Ministry of Agriculture website. [1,2] The Gambia received an assortment of medical supplies to limit the spread of COVID-19 from philanthropic groups in China in March 2020. [3] The Gambia has also purchased medical equipment such as ventilators and ambulances from Turkey and received donations of personal protective equipment from the West African Health Organization. [4] The Gambian Medicines Control Agency issued a Guideline for Importation of Medicines and Related Products into The Gambia in February 2018 which outlines which medicines can legally be imported into the country. [5]

[1] Ministry of Health and Social Affairs. [<http://www.moh.gov.gm/>] Accessed 9 August 2020.

[2] Ministry of Agriculture [<http://www.moa.gov.gm/>] Accessed 9 August 2020.

[3] World Health Organization. "Gambia Receives Support to Contain Spread of COVID-19". 29 March 2020.

[<https://www.afro.who.int/news/gambia-receives-support-contain-spread-covid-19>] Accessed 9 August 2020.

[4] Anadolu Agency. August 10, 2020. "Gambia's health system near collapse amid pandemic". Accessed 30 August 2020.

[5] Medicines Control Agency. "Guideline for Importation of Medicines and Related Products into The Gambia". 12 February 2018. [<http://www.mca.gm/wp-content/uploads/2018/02/GUIDELINE-FOR-IMPORTATION-OF-MEDICINES-AND-RELATED-PRODUCTS-INTO-THE-GAMBIA.pdf>] Accessed 9 August 2020.

3.7.1b

In the past year, has the country issued a restriction, without international/bilateral support, on the export/import of non-medical goods (e.g. food, textiles, etc) due to an infectious disease outbreak?

Yes = 0, No = 1

Current Year Score: 1

There is no evidence The Gambia has restricted the import or export of non- medical goods in the past year due to an infectious disease outbreak on either the Ministry of Health, the Ministry of Agriculture or the Ministry of Foreign Affairs website. [1,2, 3] Several countries with websites issuing travel advice, such as the United States of America and the United Kingdom state that Gambia's airspace closed as a result of the COVID-19 pandemic, but that medical cargo flights and essential supplies are exempted. [4]

[1] Ministry of Health and Social Affairs. [<http://www.moh.gov.gm/>] Accessed 9 August 2020.

[2] Ministry of Agriculture [<http://www.moa.gov.gm/>] Accessed 9 August 2020.

[3] Ministry of Foreign Affairs, International Cooperation and Gambians Abroad. [<http://www.mofa.gov.gm/>] Accessed 30 August 2020.

[4] Government of the United Kingdom. "Foreign Travel Advice: The Gambia". [<https://www.gov.uk/foreign-travel-advice/the-gambia/coronavirus#:~:text=Travel%20in%20The%20Gambia,the%20passage%20of%20essential%20supplies.>] Accessed 30 August 2020.

3.7.2 Travel restrictions

3.7.2a

In the past year, has the country implemented a ban, without international/bilateral support, on travelers arriving from a specific country or countries due to an infectious disease outbreak?

Yes = 0 , No = 1

Current Year Score: 0

There is evidence that the country has implemented a ban without bilateral support on travelers arriving from a specific country or countries due to an infectious disease outbreak. According to the U.S. Embassy in The Gambia's capital city Banjul, the country's airspace and land border were closed on March 23 2020 due to COVID-19 and remained closed as of August 15, meaning that passengers from any country cannot enter The Gambia. [1]

[1] [<https://gm.usembassy.gov/u-s-citizen-services/covid-19-information/>] Accessed 15 August 2020.

Category 4: Sufficient and robust health sector to treat the sick and protect health workers

4.1 HEALTH CAPACITY IN CLINICS, HOSPITALS, AND COMMUNITY CARE CENTERS

4.1.1 Available human resources for the broader healthcare system

4.1.1a

Doctors per 100,000 people

Input number

Current Year Score: 10.21

2015

WHO; national sources

4.1.1b

Nurses and midwives per 100,000 people

Input number

Current Year Score: 154.47

2015

WHO; national sources

4.1.1c

Does the country have a health workforce strategy in place (which has been updated in the past five years) to identify fields where there is an insufficient workforce and strategies to address these shortcomings?

Yes = 1 , No = 0

Current Year Score: 0

There is insufficient evidence that The Gambia has a public workforce strategy in place (which has been updated in the past five years) to identify fields where there is an insufficient workforce and strategies to address these shortcomings. Although the Joint External Evaluation (JEE) report for The Gambia, published in September 2017, states that The Gambia has a public workforce strategy in place, which addresses the staffing needs of the country and provides strategies to meet them, the date of publication of this strategy is unavailable, so it cannot be ascertained whether it was published within the last five years. [1] The Human Resources for Health Strategic Plan 2015-2019 serves as the country's public workforce strategy. [4] The Gambia's National Health Policy for 2012-2020 lists an objective of establishing "a vibrant and critical mass of human resources for health by 2020", and names several broadly stated policy goals for recruiting and developing human resources. [2] Neither the Ministry of Health and Social Welfare nor its Directorate of Human Resources for Health (which is responsible for the Strategic Plan) provide additional information via a public website. [3]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 17 March 2021.

[2] Ministry of Health and Social Welfare. "National Health Policy: 'Health Is Wealth' 2012-2020". [https://www.uhc2030.org/fileadmin/uploads/ihp/Documents/Country_Pages/Gambia/Gambia%20National%20Health%20Policy_2012-2020%20MoHSW%5B1%5D.pdf]. Accessed 17 March 2021.

[3] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 17 March 2021.

[4] Ministry of Health and Social Welfare "National Master Plan for Neglected Tropical Diseases" 2015-2020 [https://espen.afro.who.int/system/files/content/resources/GAMBIA_NTD_Master_Plan_2015_2020.pdf]. Accessed 17 March 2021.

4.1.2 Facilities capacity

4.1.2a

Hospital beds per 100,000 people

Input number

Current Year Score: 110.0

2011

WHO/World Bank; national sources

4.1.2b

Does the country have the capacity to isolate patients with highly communicable diseases in a biocontainment patient care unit and/or patient isolation room/unit located within the country?

Yes = 1, No = 0

Current Year Score: 0

There is insufficient public evidence to confirm that The Gambia has the capacity to isolate patients with highly communicable diseases in a biocontainment patient care unit and/or patient isolation facility located within the country. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, states that the country has two hospitals with patient isolation facilities; however, no details on the facilities are provided. [1] The Gambia's Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019 contains a section on strengthening the country's isolation capabilities, though here as well, there are no details on the existing facilities. [2] The Ministry of Health and Social Welfare does not provide additional information via a public website. [3] Neither the Edward Francis Small Teaching Hospital, the privately-operated Medical Resource Council—which are providers of some of the most advanced clinical services in The Gambia—nor other major Gambian hospitals share information on patient isolation via public websites. [4,5] The Gambia COVID-19 Plan outlines the need to establish "secure and safe isolation centers for care of patients" suggesting that there are not established isolation facilities.[6]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[2] Ministry of Health and Social Welfare. "Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019". [<http://www.moh.gov.gm/sites/default/files/HSEPRP%202017-2019.pdf>]. Accessed 9 August 2020.

[3] Ministry of Health and Social Welfare website. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[4] Edward Francis Small Teaching Hospital. [<http://www.efsth.gm/>]. Accessed 25 September 2018.

[5] Medical Research Council, The Gambia Unit. [<http://www.mrc.gm/>]. Accessed 9 August 2020.

[6] Ministry of Health and Social Welfare. "The Gambia COVID-19 Plan". [<http://www.moh.gov.gm/wp-content/uploads/2020/07/The-Gambia-Revised-COVID-19-Plan-June-2020.pdf>] Accessed 30 August 2020.

4.1.2c

Does the country meet one of the following criteria?

- Is there evidence that the country has demonstrated capacity to expand isolation capacity in response to an infectious disease outbreak in the past two years?

- Is there evidence that the country has developed, updated or tested a plan to expand isolation capacity in response to an infectious disease outbreak in the past two years?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that The Gambia has demonstrated capacity to expand isolation or that it has developed, updated or tested a plan to increase isolation capacity in response to an infectious disease in the past two years. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, states that there are two hospitals with isolation facilities and designated IPC focal persons [1]. It does not shed light on capacity expansion. There is no relevant information on the Ministry of Health website [2].

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 15 March 2021.

[2] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 17 March 2021.

4.2 SUPPLY CHAIN FOR HEALTH SYSTEM AND HEALTHCARE WORKERS

4.2.1 Routine health care and laboratory system supply

4.2.1a

Is there a national procurement protocol in place which can be utilized by the Ministries of Health and Agriculture for the acquisition of laboratory supplies (e.g. equipment, reagents and media) and medical supplies (e.g. equipment, PPE) for routine needs?

Yes for both laboratory and medical supply needs = 2, Yes, but only for one = 1, No = 0

Current Year Score: 0

There is no evidence of a national procurement protocol in place which can be utilized by the Ministry of Health and Social Welfare (MOHSW) and the Ministry of Agriculture for the acquisition of laboratory needs (such as equipment, reagents and media) and medical supplies. The Gambia National Health Sector Strategic Plan (2014-2020) reports that the MOHSW has no procurement unit, which makes management of procurement according to Public Procurement Regulations difficult. The Strategic Plan also notes that, between the MOHSW and its non-governmental partners there are "numerous and parallel systems of...procurement". [1] Further, the Gambia Public Procurement Authority issues regulations on procurement in the country. Various forms are downloadable on its website, but few policy documents, and none that establishes a clear guideline or protocol for procurement. [2] The Gambia Public Procurement Authority Act, 2014 (which is also downloadable on the website of the Gambia Public Procurement Authority), establishes standards and regulations for procurement, but does not appear to function as a protocol. [2,3] Neither the MOHSW, its national laboratory system and its Directorate of Health Research (the public health research body), the Ministry of Agriculture, nor the Gambia Public Procurement Authority share additional relevant information via public websites. [2,4,5] The Joint External Evaluation report for The Gambia, published in September 2017, states that "all media and reagents for performance of core laboratory tests are procured externally; the country is heavily dependent on donor funding to procure laboratory equipment, reagents and consumables". The JEE mentions that The Gambia succeeds in certain types of medical procurement through partnership with and funding from external partners, but does not say anything about whether a protocol for procurement exists or not. [6]

[1] Ministry of Health and Social Welfare. "The Gambia National Health Sector Strategic Plan (2014-2020)".

[<http://www.moh.gov.gm/sites/default/files/National%20Health%20Strategic%20Plan%202014-2020.pdf>]. Accessed 9 August 2020.

[2] Gambia Public Procurement Authority. [<https://www.gppa.gm/>]. Accessed 9 August 2020.

[3] Government of The Gambia. 2014. "The Gambia Public Procurement Authority Act, 2014." [<https://www.gppa.gm/assets/Uploads/GPPA-BILL-2014-.pdf>]. Accessed 7 August 2020.

[4] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 8 August 2020.

[5] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 8 August 2020.

[6] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

4.2.2 Stockpiling for emergencies

4.2.2a

Does the country have a stockpile of medical supplies (e.g. MCMs, medicines, vaccines, medical equipment, PPE) for national use during a public health emergency?

Yes = 2, Yes, but there is limited evidence about what the stockpile contains = 1, No = 0

Current Year Score: 0

There is no evidence The Gambia has a stockpile of medical supplies (e.g. MCMs, medicines, vaccines, medical equipment, PPE) for national use during a public health emergency. The Gambia received an assortment of medical supplies to limit the spread of COVID-19 from philanthropic groups in China in March 2020. [1] The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, is silent on the matter of stockpiling. However, it notes that "there are no agreements in place with manufacturers or distributors to procure MCMs during a public health emergency". [2] Neither the public defence agencies (through the Ministry of Interior), the Ministry of Health and Social Welfare (or its national laboratory system), the National Disaster Management Agency, nor the Medicines Control Agency share additional relevant information via public websites. [3,4,5,6,7] The Gambia's Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019 states as a goal to "provide an appropriate stockpile of emergency medicines, vaccines, and non-medical supplies", but does not indicate whether this has actually occurred. [8]

[1] World Health Organization. "Gambia Receives Support to Contain Spread of COVID-19". 29 March 2020.

[<https://www.afro.who.int/news/gambia-receives-support-contain-spread-covid-19>] Accessed 18 March 2021.

[2] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 18 March 2021.

[3] Ministry of the Interior. [<http://www.moi.gov.gm/>]. Accessed 18 March 2021.

[4] Gambia Armed Forces. [<http://gaf.gm/>]. Accessed 18 March 2021.

[5] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 18 March 2021.

[6] National Disaster Management Agency.

[http://www.ndma.gm/home/index.php?option=com_content&view=article&id=114:npm3&catid=1:latest-news]. Accessed 18 March 2021.

[7] Medicines Control Agency. [<http://www.mca.gm/>]. Accessed 18 March 2021.

[8] Ministry of Health and Social Welfare. "Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019." [<http://www.moh.gov.gm/sites/default/files/HSEPRP%202017-2019.pdf>]. Accessed 18 March 2021.

4.2.2b

Does the country have a stockpile of laboratory supplies (e.g. reagents, media) for national use during a public health emergency?

Yes = 2, Yes, but there is limited evidence about what the stockpile contains = 1, No = 0

Current Year Score: 0

There is no evidence The Gambia has a stockpile of laboratory supplies for national use during a public health emergency. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, is silent on the matter of stockpiling. [1] Neither the public defence agencies (through the Ministry of Interior), the Ministry of Health and Social Welfare (or its national laboratory system), the National Disaster Management Agency, nor the Medicines Control Agency share additional relevant information via public websites. [2,3,4,5,6] The Gambia's Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019 states as a goal to "provide an appropriate stockpile of emergency medicines, vaccines, and

non-medical supplies", but does not indicate whether this has actually occurred. [7]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[2] Ministry of the Interior. [<http://www.moi.gov.gm/>]. Accessed 9 August 2020.

[3] Gambia Armed Forces. [<http://gaf.gm/>]. Accessed 9 August 2020.

[4] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[5] National Disaster Management Agency.

[http://www.ndma.gm/home/index.php?option=com_content&view=article&id=114:npm3&catid=1:latest-news]. Accessed 8 August 2020.

[6] Medicines Control Agency. [<http://www.mca.gm/>]. Accessed 9 August 2020.

[7] Ministry of Health and Social Welfare. "Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019." [<http://www.moh.gov.gm/sites/default/files/HSEPRP%202017-2019.pdf>]. Accessed 9 August 2020.

4.2.2c

Is there evidence that the country conducts or requires an annual review of the national stockpile to ensure the supply is sufficient for a public health emergency?

Yes = 1, No = 0

Current Year Score: 0

There is insufficient evidence that The Gambia conducts or requires an annual review of the national stockpile to ensure the supply is sufficient for a public health emergency. The Public Health Emergencies Centre Operational Plan (PHECOP) for The Gambia does mention stockpiling PPE kits for a national emergency, however, the plan provides no specific details for the same [1]. PHECOP does not state whether annual stock piling audits or reviews are mandated. There is no information on the Ministry of Health website regarding stockpiling [2]. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, mentions the need to have stockpiles in order to prepare for public emergencies, but does not provide any specific details or outlines [3].

[1] World Health Organisation (WHO). "Emergencies Preparedness, Response: Gambia".

[<https://www.who.int/csr/don/archive/country/gmb/en/>]. 16 August 2021.

[2] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 17 March 2021.

[3] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 15 March 2021

4.2.3 Manufacturing and procurement for emergencies

4.2.3a

Does the country meet one of the following criteria?

- Is there evidence of a plan/agreement to leverage domestic manufacturing capacity to produce medical supplies (e.g. MCMs, medicines, vaccines, equipment, PPE) for national use during a public health emergency?

- Is there evidence of a plan/mechanism to procure medical supplies (e.g. MCMs, medicines, vaccines, equipment, PPE) for national use during a public health emergency?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0

Current Year Score: 0

There is no evidence that the Gambia has a plan or agreement to leverage domestic manufacturing capacity to produce medical supplies (e.g. MCMs, medicines, vaccines, equipment, PPE) for national use during a public health emergency, and no evidence of a procurement plan or mechanism. The Gambia COVID-19 Plan sets a budget for the procurement of lab equipment and personal protective equipment (PPE) but does not include any detail on where these supplies will be sourced. [1] During COVID-19, The Gambia has purchased second-hand equipment such as ventilators and ambulances from Turkey. The Gambia has also received large PPE donations from Turkey, China and the West African Health Organization, but media reports suggest there is still a shortage of protective gear for health workers. [2] The Gambia's Health Sector Emergency Preparedness and Response Plan for All Hazards 2017-2019 does not share any detail on domestic manufacturing capacity or details of a procurement mechanism. [3] There is no additional relevant information on the Ministry of Health, the National Disaster Management Agency or The Gambia Armed Forces website. [4,5,6]

[1] Ministry of Health and Social Welfare. "The Gambia COVID-19 Plan". [<http://www.moh.gov.gm/wp-content/uploads/2020/07/The-Gambia-Revised-COVID-19-Plan-June-2020.pdf>]. Accessed 18 March 2021.

[2] Anadolu Agency. 10 August, 2020. "Gambia's Health System Near Collapse Amid Pandemic". [<https://www.aa.com.tr/en/africa/gambia-s-health-system-near-collapse-amid-pandemic/1937191>] Accessed 18 March 2021.

[3] Ministry of Health and Social Welfare. "Health Sector Emergency Preparedness and Response Plan for All Hazards 2017-2019". [<http://extwprlegs1.fao.org/docs/pdf/gam184418.pdf>] Accessed 18 March 2021.

[4] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>] Accessed 18 March 2021.

[5] National Disaster Management Agency. [<http://ndma.gm/>]. Accessed 30 August 2020.

[6] Gambia Armed Forces (GAF). [<https://gaf.gm/index.php/author/gafeditor/>]. Accessed 18 March 2021.

4.2.3b

Does the country meet one of the following criteria?

- Is there evidence of a plan/agreement to leverage domestic manufacturing capacity to produce laboratory supplies (e.g. reagents, media) for national use during a public health emergency?

- Is there evidence of a plan/mechanism to procure laboratory supplies (e.g. reagents, media) for national use during a public health emergency?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0

Current Year Score: 0

There is no evidence that the Gambia has a plan or agreement to leverage domestic manufacturing capacity to produce laboratory supplies for national use during a public health emergency, and no evidence of an effective procurement plan. The Gambia COVID-19 Plan sets a budget to "maintain minimum laboratory consumables, reagents and equipment stock levels in all designated medical and veterinary laboratories for emergencies" but does not include any detail on where these supplies will be sourced. [1] The Gambia's Health Sector Emergency Preparedness and Response Plan for All Hazards 2017-2019 similarly does not share any detail on domestic manufacturing capacity or details of a procurement mechanism. [2] There is no additional relevant information on the Ministry of Health, the National Disaster Management Agency or the The Gambia Armed Forces website. [3,4,5]

[1] Ministry of Health and Social Welfare. "The Gambia COVID-19 Plan". [<http://www.moh.gov.gm/wp-content/uploads/2020/07/The-Gambia-Revised-COVID-19-Plan-June-2020.pdf>]. Accessed 30 August 2020.

[2] Ministry of Health and Social Welfare. "Health Sector Emergency Preparedness and Response Plan for All Hazards 2017-2019". [<http://extwprlegs1.fao.org/docs/pdf/gam184418.pdf>] Accessed 30 August 2020.

[3] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>] Accessed 30 August 2020.

[4] National Disaster Management Agency. [<http://ndma.gm/>]. Accessed 30 August 2020.

[5] Gambia Armed Forces (GAF). [<https://gaf.gm/index.php/author/gafeditor/>] Accessed 30 August 2020.

4.3 MEDICAL COUNTERMEASURES AND PERSONNEL DEPLOYMENT

4.3.1 System for dispensing medical countermeasures (MCM) during a public health emergency

4.3.1a

Does the country have a plan, program, or guidelines in place for dispensing medical countermeasures (MCM) for national use during a public health emergency (i.e., antibiotics, vaccines, therapeutics and diagnostics)?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that a plan, program, or guidelines are in place for dispensing medical countermeasures (MCMs) for national use during a public health emergency. Indeed, the Joint External Evaluation (JEE) report for The Gambia, published in September 2017, asserts that there are no established procedures related to sending and receiving MCMs; it adds that existing plans and policies require review to ensure that they adequately address the issue of MCMs. [1] The Gambia's Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019 mentions the need to stockpile certain MCMs, including vaccines, but does not confirm whether this has happened, or detail how they would be distributed regionally and dispensed to individuals in an emergency. [2] Neither the public defence agencies (through the Ministry of Interior), the Ministry of Health and Social Welfare (or its national laboratory system), the National Disaster Management Agency, nor the Medicines Control Agency share additional relevant information via public websites. [3,4,5,6,7] The Gambia COVID-19 Plan, published in March 2020 by the Ministry of Health and Social Welfare, does not outline any guidelines for dispensing MCMs and sets developing a distribution plan as a goal. [8]

[1] World Bank. 20 April 2016. "Project Information Document (PID) Appraisal Stage: Regional Disease Surveillance Systems Enhancement (REDISSE) (P154807)". [https://ewdata.rightsindevelopment.org/files/documents/07/WB-P154807_HexYeHb.pdf]. Accessed 8 August 2020.

[2] Ministry of Health and Social Welfare. "Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019".

[3] Ministry of the Interior website. [<http://www.moi.gov.gm/>]. Accessed 8 August 2020.

[4] Gambia Armed Forces. [<http://gaf.gm/>]. Accessed 8 August 2020.

[5] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 8 August 2020.

[6] National Disaster Management Agency.

[http://www.ndma.gm/home/index.php?option=com_content&view=article&id=114:npm3&catid=1:latest-news]. Accessed 8 August 2020.

[7] Medicines Control Agency. [<http://www.mca.gm/>]. Accessed 8 August 2020.

[<http://www.moh.gov.gm/sites/default/files/HSEPRP%202017-2019.pdf>]. Accessed 8 August 2020.

[8] Ministry of Health and Social Welfare. "The Gambia COVID-19 Plan". [<http://www.moh.gov.gm/wp-content/uploads/2020/03/FINAL-SIGNED-COPY-NCOVID-19-2020-Ver-01-09Mar-2020.pdf>]. Accessed 30 August 2020.

4.3.2 System for receiving foreign health personnel during a public health emergency

4.3.2a

Is there a public plan in place to receive health personnel from other countries to respond to a public health emergency?

Yes = 1, No = 0

Current Year Score: 0

There is no public plan in place to receive health personnel from other countries to respond to a public health emergency. Indeed, the Joint External Evaluation (JEE) report for The Gambia, published in September 2017, asserts that there are no defined standards or established mechanisms, plans, frameworks, standard operating procedures, nor licensing procedures for receiving public health personnel from other countries, or deploying them. [1] Neither the public defence agencies (through the Ministry of Interior), the Ministry of Health and Social Welfare (or its national laboratory system), nor the National Disaster Management Agency share additional relevant information via public websites. [2,3,4,5]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 8 August 2020.

[2] Ministry of the Interior. [<http://www.moi.gov.gm/>]. Accessed 8 August 2020.

[3] Gambia Armed Forces. [<http://gaf.gm/>]. Accessed 6 September 2018.

[4] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 8 August 2020.

[5] National Disaster Management Agency.

[http://www.ndma.gm/home/index.php?option=com_content&view=article&id=114:npm3&catid=1:latest-news]. Accessed 8 August 2020.

4.4 HEALTHCARE ACCESS

4.4.1 Access to healthcare

4.4.1a

Does the constitution explicitly guarantee citizens' right to medical care?

Guaranteed free = 4, Guaranteed right = 3, Aspirational or subject to progressive realization = 2, Guaranteed for some groups, not universally = 1, No specific provision = 0

Current Year Score: 2

2020

World Policy Analysis Center

4.4.1b

Access to skilled birth attendants (% of population)

Input number

Current Year Score: 57.2

2013

WHO/World Bank/United Nations Children's Fund (UNICEF)

4.4.1c

Out-of-pocket health expenditures per capita, purchasing power parity (PPP; current international \$)

Input number

Current Year Score: 12.29

2017

WHO Global Health Expenditure database

4.4.2 Paid medical leave

4.4.2a

Are workers guaranteed paid sick leave?

Paid sick leave = 2, Unpaid sick leave = 1, No sick leave = 0

Current Year Score: 2

2020

World Policy Analysis Center

4.4.3 Healthcare worker access to healthcare

4.4.3a

Has the government issued legislation, a policy, or a public statement committing to provide prioritized healthcare services to healthcare workers who become sick as a result of responding to a public health emergency?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence of The Gambia having carried out legislation, policies, or public statements regarding prioritized health care services to healthcare workers, let alone those who become sick as a result of responding to a public health emergency. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, contains no mention of such a policy. [1] The Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019 mentions the need to better incentivize healthcare workers, for example through provision of insurance, but does not mention the prioritization of care. [2] The Gambia National Health Sector Strategic Plan (2014-2020) does not discuss the issue. [3] The Ministry of Health and Social Welfare does not provide relevant information via a public website. [4] The Gambia COVID-19 Plan, published by the Ministry of Health in March 2020, discussed providing additional training and personal protective equipment to healthcare workers, but does not outline a policy to prioritize healthcare services to healthcare workers who may get sick. [5]

- [1] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 8 August 2020.
- [2] Ministry of Health and Social Welfare. "Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019". [<http://www.moh.gov.gm/sites/default/files/HSEPRP%202017-2019.pdf>]. Accessed 8 August 2020.
- [3] Ministry of Health and Social Welfare. "The Gambia National Health Sector Strategic Plan (2014-2020)". [<http://www.moh.gov.gm/sites/default/files/National%20Health%20Strategic%20Plan%202014-2020.pdf>]. Accessed 8 August 2020.
- [4] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 8 August 2020.
- [5] Ministry of Health and Social Welfare. March 2020. "The Gambia COVID-19 Plan". [<http://www.moh.gov.gm/wp-content/uploads/2020/03/FINAL-SIGNED-COPY-NCOVID-19-2020-Ver-01-09Mar-2020.pdf>]. Accessed 30 August 2020.

4.5 COMMUNICATIONS WITH HEALTHCARE WORKERS DURING A PUBLIC HEALTH EMERGENCY

4.5.1 Communication with healthcare workers

4.5.1a

Is there a system in place for public health officials and healthcare workers to communicate during a public health emergency?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that there is a system in place for public health officials and healthcare workers to communicate during a public health emergency in The Gambia. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, indicates that, while communication between different levels of public health authorities and workers is part of the Public Health Emergency Operations Centre plan, communication lines are not yet fully functional. [1] The Gambia's Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019 contains a section on building the capacities for communications during disasters, but is not specific and does not indicate which if any measures have been implemented. [2] Neither the Ministry of Health and Social Welfare nor National Disaster Management Agency share additional relevant information via public websites. [3,4]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 8 August 2020..

[2] Ministry of Health and Social Welfare. "Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019". [<http://www.moh.gov.gm/sites/default/files/HSEPRP%202017-2019.pdf>]. Accessed 8 August 2020..

[3] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 8 August 2020.

[4] National Disaster Management Agency.

[http://www.ndma.gm/home/index.php?option=com_content&view=article&id=114:npm3&catid=1:latest-news]. Accessed 8 August 2020..

4.5.1b

Does the system for public health officials and healthcare workers to communicate during an emergency encompass healthcare workers in both the public and private sector?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that there is a system in place for public health officials and healthcare workers to communicate during a public health emergency in The Gambia. Thus, there is also no evidence of such a plan that involves both the public and the private sector. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, indicates that, while communication between different levels of public health authorities and workers is part of the Public Health Emergency Operations Centre plan, communication lines are not yet fully functional. Further, the JEE states in its section on "internal partner communication and coordination" that there is an "absence of guidelines and protocols for partner engagements". [1] The Gambia's Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019 contains a section on building the capacities for communications during disasters, but is not specific and does not indicate which if any measures have been implemented. [2] Neither the Ministry of Health and Social Welfare nor National Disaster Management Agency share additional relevant information via public websites. [3,4]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 8 August 2020..

[2] Ministry of Health and Social Welfare. "Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019". [<http://www.moh.gov.gm/sites/default/files/HSEPRP%202017-2019.pdf>]. Accessed 8 August 2020.

[3] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 8 August 2020.

[4] National Disaster Management Agency.

[http://www.ndma.gm/home/index.php?option=com_content&view=article&id=114:npm3&catid=1:latest-news]. Accessed 8 August 2020..

4.6 INFECTION CONTROL PRACTICES AND AVAILABILITY OF EQUIPMENT

4.6.1 Healthcare associated infection (HCAI) prevention and control programs

4.6.1a

Is there evidence that the national public health system is monitoring for and tracking the number of healthcare associated infections (HCAI) that take place in healthcare facilities?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the national public health system monitors for and tracks the number of health care associated infections (HCAIs) that take place in healthcare facilities. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, indicates that The Gambia has draft national guidelines on infection prevention and control (IPC), and facility-level standard operating procedures. However, it does not conduct surveillance of at-risk groups for HCAIs at hospitals, and there is poor awareness in the Gambian health system of the effects of HCAIs. Neither is there research on the impacts of HCAIs in the health system [1]. Neither the Ministry of Health and Social Welfare (or its national laboratory system) nor the Directorate of Health Research (the public health research body) provide relevant information via public available websites [2]. The World Health Organisation does not list a national action plan for antimicrobial resistance for The Gambia; such action plans sometimes provide relevant information [3].

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61->

eng.pdf?sequence=1]. Accessed 8 August 2020.

[2] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 8 August 2020.

[3] World Health Organisation (WHO). "Drug Resistance Library of National Action Plans". [<http://www.who.int/drugresistance/action-plans/library/en/>]. Accessed 8 August 2020.

4.7 CAPACITY TO TEST AND APPROVE NEW MEDICAL COUNTERMEASURES

4.7.1 Regulatory process for conducting clinical trials of unregistered interventions

4.7.1a

Is there a national requirement for ethical review (e.g., from an ethics committee or via Institutional Review Board approval) before beginning a clinical trial?

Yes = 1, No = 0

Current Year Score: 1

There is a national requirement for ethical review before beginning a clinical trial in The Gambia. The Medicines and Related Products Act, 2014, states that, before a clinical trial begins, the person or entity who conducts it must submit to the Medicines Control Agency "an ethical clearance certificate issued for medical research by an approved institution". [1] Neither the Act nor the website of the Medicines Control Agency provide any more details on this process. [1,2] However, documents from the Medical Research Council (MRC) a UK-based nongovernmental organisation, state that the MRC and the government of The Gambia have jointly operated an Ethics Committee since 1980. These descriptions indicate that this Ethics Committee is responsible for reviewing research proposals in the country, although these sources do not mention the Gambian law under which they operate. [3,4] The Ministry of Higher Education, Research, Science and Technology's Draft National Science, Technology and Innovation Policy (2015-2024) declares as policy that "government will ensure that researchers and participants in a clinical trial are ethically protected". [5] Neither the Ministry of Health and Social Welfare nor the Ministry of Higher Education, Research, Science and Technology shares additional relevant information via public website. [6,7]

[1] Government of The Gambia. 2014. "Medicines and Related Products Act, 2014".

[<http://bch.cbd.int/database/attachment/?id=18368>]. Accessed 8 August 2020.

[2] Medicines Control Agency. "Functions". [<http://www.mca.gm/functions/>]. Accessed 8 August 2020.

[3] Medical Research Council. "Gambia Government and MRC Promote Safe, Relevant Research".

[<http://www.mrc.gm/gambia-government-and-mrc-promote-safe-relevant-research/>]. Accessed 9 August 2020.

[4] Medical Research Council. "Ethics Committee: The Gambia Experience". [http://ec.europa.eu/research/science-society/document_library/pdf_06/corrah-bs2_en.pdf]. Accessed 8 August 2020.

[5] Ministry of Higher Education, Research, Science and Technology. October 2014. "Draft National Science, Technology and Innovation Policy (2015-2024)". [https://moherst.gov.gm/sites/default/files/NSTIP_081014.pdf]. Accessed 8 August 2020.

[6] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 4 August 2020.

[7] Ministry of Higher Education, Research, Science and Technology. [<http://www.moherst.gov.gm/>]. Accessed 6 August 2020.

4.7.1b

Is there an expedited process for approving clinical trials for unregistered medical countermeasures (MCM) to treat ongoing epidemics?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence of an expedited process for approving clinical trials for unregistered medical countermeasures to treat ongoing pandemics. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, makes no mention of such a process. [1] Similarly, the Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019 does not discuss clinical trials or any expedited approval procedures. [2] Neither the Ministry of Health and Social Welfare, the Ministry of Higher Education, Research, Science and Technology, the National Disaster Management Agency, nor the Medicines Control Agency share additional relevant information via public websites. [3,4,5,6]

[1] World Health Organisation (WHO). “Drug Resistance Library of National Action Plans”.

[<http://www.who.int/drugresistance/action-plans/library/en/>]. Accessed 8 August 2020.

[2] Ministry of Health and Social Welfare. “Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019”. [<http://www.moh.gov.gm/sites/default/files/HSEPRP%202017-2019.pdf>]. Accessed 9 August 2020.

[3] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[4] Ministry of Higher Education, Research, Science and Technology. [<http://www.moherst.gov.gm/>]. Accessed 6 August 2020.

[5] National Disaster Management Agency.

[http://www.ndma.gm/home/index.php?option=com_content&view=article&id=114:npm3&catid=1:latest-news]. Accessed 9 August 2020.

[6] Medicines Control Agency. [<http://www.mca.gm/>]. Accessed 8 August 2020.

4.7.2 Regulatory process for approving medical countermeasures

4.7.2a

Is there a government agency responsible for approving new medical countermeasures (MCM) for humans?

Yes = 1 , No = 0

Current Year Score: 1

The Gambia’s Medicines Control Agency is responsible for approving new medical countermeasures for humans in the country. [1] However, the Agency does not provide, via a public website, information on what this entails. The Medicines and Related Products Act, 2014, which established the Agency, simply asserts its role as the approver of medicines and related products, but does not provide greater detail on what that involves. [2] Neither the Ministry of Health and Social Welfare nor the Ministry of Higher Education, Research, Science and Technology share additional relevant information via public website. [3,4]

[1] Medicines Control Agency. “Functions”. [<http://www.mca.gm/functions/>]. Accessed 9 August 2020.

[2] Government of Gambia. 2014. “Medicines and Related Products Act, 2014”.

[<http://bch.cbd.int/database/attachment/?id=18368>]. Accessed 8 August 2020.

[3] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[4] Ministry of Higher Education, Research, Science and Technology. [<http://www.moherst.gov.gm/>]. Accessed 6 August 2020.

4.7.2b

Is there an expedited process for approving medical countermeasures (MCM) for human use during public health emergencies?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence of an expedited process for approving medical countermeasures for human use during public health emergencies. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, makes no mention of such a process. [1] Similarly, the Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019 does not discuss clinical trials or any expedited approval procedures. [2] Neither the Ministry of Health and Social Welfare, the Ministry of Higher Education, Research, Science and Technology, the National Disaster Management Agency, nor the Medicines Control Agency share additional relevant information via public websites. [3,4,5,6]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[2] Ministry of Health and Social Welfare. "Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019". [<http://www.moh.gov.gm/sites/default/files/HSEPRP%202017-2019.pdf>]. Accessed 9 August 2020.

[3] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 4 August 2020.

[4] Ministry of Higher Education, Research, Science and Technology. [<http://www.moherst.gov.gm/>]. Accessed 6 August 2020.

[5] National Disaster Management Agency.

[http://www.ndma.gm/home/index.php?option=com_content&view=article&id=114:npm3&catid=1:latest-news]. Accessed 8 August 2020.

[6] Medicines Control Agency. [<http://www.mca.gm/>]. Accessed 8 August 2020.

Category 5: Commitments to improving national capacity, financing plans to address gaps, and adhering to global norms

5.1 INTERNATIONAL HEALTH REGULATIONS (IHR) REPORTING COMPLIANCE AND DISASTER RISK REDUCTION

5.1.1 Official IHR reporting

5.1.1a

Has the country submitted IHR reports to the WHO for the previous calendar year?

Yes = 1, No = 0

Current Year Score: 1

2020

World Health Organization

5.1.2 Integration of health into disaster risk reduction

5.1.2a

Are epidemics and pandemics integrated into the national risk reduction strategy or is there a standalone national disaster risk reduction strategy for epidemics and pandemics?

Yes = 1 , No = 0

Current Year Score: 0

There is no public evidence that The Gambia has a national risk reduction strategy in place, let alone one that mentions pandemics. Similarly, it does not have a standalone national disaster risk reduction strategy for pandemics. The National Disaster Management Programme: Strategic Action Plan (2008-2011) is the most recent publicly available plan detailing Gambia's approach to risk reduction. [1] However, it does not make mention of pandemics (or disease). The UN International Strategy for Disaster Reduction's assessment for The Gambia indicates that the country may have more extensive disaster risk reduction plans than what has been made available on public websites, but makes no mention of pandemics. [2] The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, states that The Gambia has a multi-sectoral National Platform for Disaster Risk Reduction. [3] But more information about this platform is not available on a public website, beyond brief mention by the National Disaster Management Agency (NDMA) of the need to "revive" the platform. [4] The NDMA's 2012 Disaster Risk Reduction Capacity Assessment Report lacks sufficient information about pandemic risk reduction to document the existence of a strategy. [5] Neither the Ministry of Health and Social Welfare nor the NDMA provide additional relevant information via public websites. [6,7]

[1] Government of The Gambia. April 2008. "National Disaster Management Programme: Strategic Action Plan (2008-2011)". [https://www.preventionweb.net/files/10880_GambiadisasterManagementProgramme200.pdf]. Accessed 9 August 2020.

[2] International Strategy for Disaster Reduction. 23 April 2015. "Gambia: National Progress Report on the Implementation of the Hyogo Framework for Action (2013-2015)".

[https://www.preventionweb.net/files/42626_GMB_NationalHFAprogress_2013-15.pdf]. Accessed 9 August 2020.

[3] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[4] National Disaster Management Agency. 4 April 2017. "National Platform Meeting".

[http://www.ndma.gm/home/index.php?option=com_content&view=article&id=110%3Anational-platform-meeting&catid=1%3Alatest-news&Itemid=53]. Accessed 9 August 2020.

[5] National Disaster Management Agency. February 2012. "Disaster Risk Reduction Capacity Assessment Report".

[<https://www.cadri.net/sites/default/files/GAMBIA-Capacity-Assessment-Report-for-DRR.pdf>]. Accessed 9 August 2020.

[6] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 4 August 2020.

[7] National Disaster Management Agency.

[http://www.ndma.gm/home/index.php?option=com_content&view=article&id=114:npm3&catid=1:latest-news]. Accessed 8 August 2020.

5.2 CROSS-BORDER AGREEMENTS ON PUBLIC HEALTH AND ANIMAL HEALTH EMERGENCY RESPONSE

5.2.1 Cross-border agreements

5.2.1a

Does the country have cross-border agreements, protocols, or MOUs with neighboring countries, or as part of a regional group, with regards to public health emergencies?

Yes = 2, Yes, but there is evidence of gaps in implementation = 1, No = 0

Current Year Score: 2

The Gambia has cross-border agreements and affiliations with neighboring countries for public health emergencies. The government of The Gambia is involved, albeit indirectly, through its membership in the World Bank-funded West African Health Organisation (WAHO), in the Regional Disease Surveillance Systems Enhancement Project in West Africa (REDISSE) for cooperation during epidemics and disease outbreaks. [1] REDISSE focuses on strengthening surveillance and cross-border information sharing across West Africa and aims to provide "immediate and effective response" to public health crises or emergencies. The Gambia is also affiliated with the African Vaccine Regulatory Forum and the African Field Epidemiology Network, which have both coordinated regional responses to public health emergencies such as COVID-19 and Ebola. [2,3] The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, states that The Gambia has some level of informal arrangement with Senegal for cross-border exchanges of health information with border officials. However, no further details on this are available via a public website. [4] Further, The Gambia's Health Sector Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019 states a goal of signing a memorandum of understanding (MOU) with Senegal on public health emergency surveillance collaboration, though there is no evidence that such an MOU has yet been signed. [5] Media reports suggest that The Gambia and Senegal have cooperated to respond to the COVID-19 pandemic. Gambia sealed its Senegal border on March 23, 2020. [6] There is no evidence of gaps in implementation.

[1] World Bank. "West Africa Regional Disease Surveillance Capacity Strengthening".

[<http://projects.worldbank.org/P125018/west-africa-disease-surveillance-response?lang=en>]. Accessed 7 August 2020.

[2] World Health Organisation (WHO). "African Vaccine Regulatory Forum".

[http://www.who.int/immunization_standards/vaccine_regulation/africa_network/en/]. Accessed 9 August 2020.

[3] African Field Epidemiology Network. "West Africa". [<http://www.afenet.net/index.php/countries/west-africa>]. Accessed 9 August 2020.

[4] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[5] Ministry of Health and Social Welfare. "Emergency Preparedness and Response Plan Related to All-Hazards 2017-2019". [<http://extwprlegs1.fao.org/docs/pdf/gam184418.pdf>] Accessed 20 August 2020.

[6] Panapress. 23 August 2020. "Coronavirus: Gambia, Senegal health ministers strengthen fight against COVID-19".

[https://www.panapress.com/Coronavirus-Gambia-Senegal-health-a_630656975-lang2-free_news.html]. Accessed 25 August 2020.

5.2.1b

Does the country have cross-border agreements, protocols, or MOUs with neighboring countries, or as part of a regional group, with regards to animal health emergencies?

Yes = 2, Yes, but there is evidence of gaps in implementation = 1, No = 0

Current Year Score: 0

There is no public evidence that The Gambia has cross-border agreements, protocols or MOUs with neighbouring countries, or as part of a regional group, with regards to animal health emergencies. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, states that The Gambia has both a National Ebola Virus Disease Preparedness and Response Plan (2014-2015), and an Integrated National Emergency Preparedness and Response Plan for Avian & Human Influenza (AHI) (2015-2019). [1] Both might conceivably have an international element, but the plans are not available on a public website. The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, states that the "national veterinary laboratory has a collaborating centre in Senegal (L'NERV)". [2] However, neither the Ministry of Health and Social Welfare, the NDMA, nor the Ministry of Agriculture provide additional relevant information via public websites. [3,4,5]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[2] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[3] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 4 September 2018.

[4] National Disaster Management Agency.

[http://www.ndma.gm/home/index.php?option=com_content&view=article&id=114:npm3&catid=1:latest-news]. Accessed 8 August 2020.

[5] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August 2020.

5.3 INTERNATIONAL COMMITMENTS

5.3.1 Participation in international agreements

5.3.1a

Does the county have signatory and ratification (or same legal effect) status to the Biological Weapons Convention?

Signed and ratified (or action having the same legal effect) = 2, Signed = 1, Non-compliant or not a member = 0

Current Year Score: 2

2021

Biological Weapons Convention

5.3.1b

Has the country submitted confidence building measures for the Biological Weapons Convention in the past three years?

Yes = 1, No = 0

Current Year Score: 0

2021

Biological Weapons Convention

5.3.1c

Has the state provided the required United Nations Security Council Resolution (UNSCR) 1540 report to the Security Council Committee established pursuant to resolution 1540 (1540 Committee)?

Yes = 1 , No = 0

Current Year Score: 0

2021

Biological Weapons Convention

5.3.1d

Extent of United Nations Security Council Resolution (UNSCR) 1540 implementation related to legal frameworks and enforcement for countering biological weapons:

Very good (60+ points) = 4, Good (45–59 points) = 3, Moderate (30–44 points) = 2, Weak (15–29 points) = 1, Very weak (0–14 points) or no matrix exists/country is not party to the BWC = 0

Current Year Score: 2

2021

Biological Weapons Convention

5.3.2 Voluntary memberships

5.3.2a

Does the country meet at least 2 of the following criteria?

- Membership in Global Health Security Agenda (GHSA)
- Membership in the Alliance for Country Assessments for Global Health Security and IHR Implementation (JEE Alliance)
- Membership in the Global Partnership Against the Spread of Weapons and Materials of Mass Destruction (GP)
- Membership in the Australia Group (AG)
- Membership in the Proliferation Security Initiative (PSI)

Needs to meet at least two of the criteria to be scored a 1 on this measure. , Yes for five = 1 , Yes for four = 1 , Yes for three = 1 , Yes for two = 1 , Yes for one = 0 , No for all = 0

Current Year Score: 0

2021

Global Health Security Agenda; JE Alliance; Global Partnership; Australia Group; PSI

5.4 JOINT EXTERNAL EVALUATION (JEE) AND PERFORMANCE OF VETERINARY SERVICES PATHWAY (PVS)

5.4.1 Completion and publication of a Joint External Evaluation (JEE) assessment and gap analysis

5.4.1a

Has the country completed a Joint External Evaluation (JEE) or precursor external evaluation (e.g., GHSA pilot external assessment) and published a full public report in the last five years?

Yes = 1, No = 0

Current Year Score: 1

2021

WHO Strategic Partnership for IHR and Health Security (SPH); Global Health Security Agenda

5.4.1b

Has the country completed and published, within the last five years, either a National Action Plan for Health Security (NAPHS) to address gaps identified through the Joint External Evaluation (JEE) assessment or a national GHSA roadmap that sets milestones for achieving each of the GHSA targets?

Yes = 1, No = 0

Current Year Score: 0

2021

WHO Strategic Partnership for IHR and Health Security (SPH); Global Health Security Agenda

5.4.2 Completion and publication of a Performance of Veterinary Services (PVS) assessment and gap analysis

5.4.2a

Has the country completed and published a Performance of Veterinary Services (PVS) assessment in the last five years?

Yes = 1, No = 0

Current Year Score: 0

2021

OIE PVS assessments

5.4.2b

Has the country completed and published a Performance of Veterinary Services (PVS) gap analysis in the last five years?

Yes = 1, No = 0

Current Year Score: 0

2021

OIE PVS assessments

5.5 FINANCING

5.5.1 National financing for epidemic preparedness

5.5.1a

Is there evidence that the country has allocated national funds to improve capacity to address epidemic threats within the past three years?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence The Gambia has committed funding from the national budget to improve capacity for future epidemic threats. The Ministry of Finance and Economic Affairs' (MoFEA) National Development Plan 2018-2021 lays out improvement plans for primary healthcare resources in The Gambia but does not discuss building capacity to address future epidemic threats. [1] The 2020 national budget for The Gambia likewise does not address epidemic threats. [2] The Ministry of Health and Social Welfare's "Health is Wealth" National Health Policy 2012-2020 says that to "maintain a ready state of preparedness and a swift response to diseases with epidemic potential, the Government of The Gambia will strengthen the epidemiological surveillance system so that there is effective detection, investigation, and management of any suspected and confirmed cases of priority" but there are no funding commitments in this document. [3] There is no evidence of funding being allocated to address epidemic threats on either the Ministry of Health and Social Welfare or the Ministry of Agriculture website. [4,5]

[1] Ministry of Finance and Economic Affairs, Republic of The Gambia. "National Development Plan 2018-2021" [<https://mofea.gm/ndp>] Accessed 9 August 2020.

[2] Ministry of Finance and Economic Affairs, Republic of The Gambia. 6 December 2019. "Budget Speech 2020". [<https://www.mofea.gm/downloads-file/budget-speech-2020>] Accessed 9 August 2020.

[3] Ministry of Health and Social Welfare, Republic of The Gambia. "Health is Wealth 2012-2020, National Health Policy". [https://www.uhc2030.org/fileadmin/uploads/ihp/Documents/Country_Pages/Gambia/Gambia%20National%20Health%20Policy_2012-2020%20MoHSW%5B1%5D.pdf] Accessed 9 August 2020.

[4] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>] Accessed 9 August, 2020.

[5] Ministry of Agriculture. [<http://www.moa.gov.gm/>] Accessed 9 August 2020.

5.5.2 Financing under Joint External Evaluation (JEE) and Performance of Veterinary Services (PVS) reports and gap analyses

5.5.2a

Does the Joint External Evaluation (JEE) report, National Action Plan for Health Security (NAPHS), and/or national GHSA roadmap allocate or describe specific funding from the national budget (covering a time-period either in the future or within the past five years) to address the identified gaps?

Yes = 1 , No/country has not conducted a JEE = 0

Current Year Score: 0

2021

WHO Strategic Partnership for IHR and Health Security (SPH); Global Health Security Agenda

5.5.2b

Does the Performance of Veterinary Services (PVS) gap analysis and/or PVS assessment allocate or describe specific funding from the national budget (covering a time-period either in the future or within the past five years) to address the identified gaps?

Yes = 1 , No/country has not conducted a PVS = 0

Current Year Score: 0

2021

OIE PVS assessments

5.5.3 Financing for emergency response

5.5.3a

Is there a publicly identified special emergency public financing mechanism and funds which the country can access in the face of a public health emergency (such as through a dedicated national reserve fund, an established agreement with the World Bank pandemic financing facility/other multilateral emergency funding mechanism, or other pathway identified through a public health or state of emergency act)?

Yes = 1 , No = 0

Current Year Score: 1

There are publicly identified special emergency public financing mechanism and funds which The Gambia can access in the face of a public health emergency. These include the World Bank's International Development Association (IDA), from which The Gambia is eligible to borrow. [1] As a qualified borrower from the IDA, The Gambia is also eligible to access funds from the World Bank's Pandemic Emergency Financing Facility (PEF). [2] There is no other publicly available evidence that The Gambia has a dedicated national reserve fund. The Ministry of Health and Social Welfare does not share relevant information via a public website. [3]

[1] International Development Association (IDA). "Borrowing Countries". [<http://ida.worldbank.org/about/borrowing-countries>]. Accessed 9 August 2020.

[2] Pandemic Emergency Financing Facility. December 2017. "Operational Brief for Eligible Countries". [<http://pubdocs.worldbank.org/en/119961516647620597/PEF-Operational-Brief-Dec-2017.pdf>]. Accessed 9 August 2020.

[3] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 4 August 2020.

5.5.4 Accountability for commitments made at the international stage for addressing epidemic threats

5.5.4a

Is there evidence that senior leaders (president or ministers), in the past three years, have made a public commitment either to:

- Support other countries to improve capacity to address epidemic threats by providing financing or support?
- Improve the country's domestic capacity to address epidemic threats by expanding financing or requesting support to improve capacity?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0

Current Year Score: 0

There is no evidence that senior Gambian leaders, have, in the last three years, made a public commitment either to improve The Gambia's own domestic capacity to address epidemic threats by expanding financing or requesting support to improve capacity; or to support other countries to improve capacity to address epidemic threats by providing financing or support. The Joint External Evaluation (JEE) assessment for The Gambia, published in September 2017, as well as The Gambia National Health Sector Strategic Plan (2014-2020) repeatedly note the need for funding to achieve health sector objectives. [1,2] There is no evidence in international media outlets that The Gambia or its leaders have made a request for such funding, to address epidemic threats or otherwise, in the last three years. Neither the Ministry of Health; the Ministry of Foreign Affairs, International Cooperation and Gambians Abroad; nor the Office of the President shares additional relevant information via public websites. [3,4,5] The Global Health Security Tracking Dashboard does not report any financing geared toward improving The Gambia's capacity to address epidemic threats in the past three years. [6]

[1] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

[2] Ministry of Health and Social Welfare. "The Gambia National Health Sector Strategic Plan (2014-2020)". [<http://www.moh.gov.gm/sites/default/files/National%20Health%20Strategic%20Plan%202014-2020.pdf>]. Accessed 9 August 2020.

[3] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 4 August 2020.

[4] Ministry of Foreign Affairs, International Cooperation and Gambians Abroad. [<http://www.mofa.gov.gm/>]. Accessed 8 August 2020.

[4] International Monetary Fund (IMF). 4 March 2015. "The Gambia: Request for Disbursement Under the Rapid Credit Facility, Cancellation of the Extended Credit Facility Arrangement, and Proposal for a Staff-Monitored Program". [<http://www.imf.org/external/pubs/ft/scr/2015/cr15104.pdf>]. Accessed 9 August 2020.

[5] Office of the President. [<http://statehouse.gov.gm/>]. Accessed 9 August 2020.

[6] Global Health Security Tracking Dashboard. "Gambia". [<https://tracking.ghscosting.org/#analysis/GM/r>]. Accessed 9 August 2020.

5.5.4b

Is there evidence that the country has, in the past three years, either:

- Provided other countries with financing or technical support to improve capacity to address epidemic threats?
- Requested financing or technical support from donors to improve the country's domestic capacity to address epidemic threats?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0

Current Year Score: 1

There is evidence that The Gambia has, in the past three years, requested donor finances to improve domestic capacity to address epidemic threats. The Global Health Security Funding Tracker notes that Gambia has received funding from multiple donors to enhance its capacity on global security preparedness, including just over US\$23,000 from the World Health Organisation to establish processes for long-term poliovirus risk management, including containment of all residual polioviruses, and the certification of polio eradication globally. [1] However, the Gambia National Health Sector Strategic Plan (2014-2020) repeatedly mentions the need to plan funding to meet its objectives. [2] There is no evidence found in international news media that The Gambia has made relevant investments or provided technical support to other countries in the last three years. Neither the Ministry of Health nor the Ministry of Foreign Affairs, International Cooperation and Gambians Abroad shares additional relevant information via public websites. [3,4] No additional information on investments and technical support to combat epidemic disease is mentioned on the various websites of the World Health Organisation or the United Nations.

[1] Global Health Security Funding Tracker. [<https://tracking.ghscosting.org/#/data>]. Accessed August 8 2020.

[2] Ministry of Health and Social Welfare. "The Gambia National Health Sector Strategic Plan (2014-2020)". [<http://www.moh.gov.gm/sites/default/files/National%20Health%20Strategic%20Plan%202014-2020.pdf>]. Accessed 4 August 2020.

[3] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[4] Ministry of Foreign Affairs, International Cooperation and Gambians Abroad. [<http://www.mofa.gov.gm/>]. Accessed 8 August 2020.

5.5.4c

Is there evidence that the country has fulfilled its full contribution to the WHO within the past two years?

Yes = 1 , No = 0

Current Year Score: 0

2021

Economist Impact analyst qualitative assessment based on official national sources, which vary by country

5.6 COMMITMENT TO SHARING OF GENETIC AND BIOLOGICAL DATA AND SPECIMENS

5.6.1 Commitment to sharing genetic data, clinical specimens, and/or isolated specimens (biological materials) in both emergency and non-emergency research

5.6.1a

Is there a publicly available plan or policy for sharing genetic data, clinical specimens, and/or isolated specimens (biological materials) along with the associated epidemiological data with international organizations and/or other countries that goes beyond influenza?

Yes = 1 , No = 0

Current Year Score: 0

There is no publicly available plan or policy for sharing genetic data, epidemiological data, clinical specimens, or isolated specimens (biological materials) with international organisations and/or other countries that goes beyond influenza. The Gambia National Health Sector Strategic Plan (2014-2020) mentions the data sharing capabilities of the country's Health Management Information System (HMIS), but does not go into detail nor mention pathogens with pandemic potential. [1] Neither the Ministry of Health and Social Welfare, the Ministry of Higher Education, Research, Science and Technology, nor the Ministry of Agriculture share relevant information via public websites. [2,3,4] The Joint External Evaluation (JEE) report for The Gambia, published in September 2017, does not provide information on the existence of relevant policies.[5]

[1] Ministry of Health and Social Welfare. "The Gambia National Health Sector Strategic Plan (2014-2020)". [<http://www.moh.gov.gm/sites/default/files/National%20Health%20Strategic%20Plan%202014-2020.pdf>]. Accessed 9 August 2020.

[2] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 9 August 2020.

[3] Ministry of Higher Education, Research, Science and Technology. [<http://www.moherst.gov.gm/>]. Accessed 9 August 2020.

[4] Ministry of Agriculture. [<http://www.moa.gov.gm/>]. Accessed 9 August.

[5] World Health Organisation (WHO). 24-29 September 2017. "Joint External Evaluation of IHR Core Capacities of the Republic of The Gambia". [<http://apps.who.int/iris/bitstream/handle/10665/259715/WHO-WHE-CPI-REP-2017.61-eng.pdf?sequence=1>]. Accessed 9 August 2020.

5.6.1b

Is there public evidence that the country has not shared samples in accordance with the Pandemic Influenza Preparedness (PIP) framework in the past two years?

Yes = 0 , No = 1

Current Year Score: 1

There is no public evidence that The Gambia has not shared samples in accordance with the Pandemic Influenza Preparedness (PIP) framework in the past year. There is no reference to sharing influenza data on the Ministry of Health and Social Welfare website and there have not been any reports of The Gambia not sharing samples in either national or international media. [1] The latest External Evaluation of the Pandemic Influenza Preparedness Partnership Contribution, published in 2016, does not refer to The Gambia not sharing samples, nor does it list The Gambia as a priority country for improving the "national ability to detect, monitor and share novel influenza viruses". [2]

[1] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 4 August 2020.

[2] World Health Organisation (WHO). 2016. "External Evaluation of the Pandemic Influenza Preparedness Partnership Contribution—High-Level Implementation Plan 2013-2016". [http://www.who.int/about/evaluation/pip_evaluation_report.pdf]. Accessed 9 August 2020.

5.6.1c

Is there public evidence that the country has not shared pandemic pathogen samples during an outbreak in the past two years?

Yes = 0 , No = 1

Current Year Score: 1

There is no public evidence that The Gambia has not shared pandemic pathogen samples during an outbreak in the past two years. There is no reference to not sharing pandemic pathogen data on the Ministry of Social Health and Welfare website and

there have not been any reports of The Gambia not sharing samples in either national and international media. [1] The Ministry of Health and Social Welfare shares daily updates on the status of the COVID-19 pandemic in The Gambia, but these do not indicate if samples are not being shared. [2] There is no record of The Gambia participating in the World Health Organization's Global Influenza Surveillance and Response System (GISRS). [3]

[1] Ministry of Health and Social Welfare. [<http://www.moh.gov.gm/>]. Accessed 4 August 2020.

[2] Ministry of Health and Social Welfare. "COVID-19." [<http://www.moh.gov.gm/covid-19-report/>] Accessed 30 August 2020.

[3] World Health Organization. "Influenza Virus Traceability Mechanism - IVTM 2.0" [<https://extranet.who.int/ivtm2/>] Accessed 30 August 2020.

Category 6: Overall risk environment and vulnerability to biological threats

6.1 POLITICAL AND SECURITY RISK

6.1.1 Government effectiveness

6.1.1a

Policy formation (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 2

2020

Economist Intelligence

6.1.1b

Quality of bureaucracy (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 0

2020

Economist Intelligence

6.1.1c

Excessive bureaucracy/red tape (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 0

2020

Economist Intelligence

6.1.1d

Vested interests/cronyism (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 1

2020

Economist Intelligence

6.1.1e

Country score on Corruption Perception Index (0-100, where 100=best)

Input number

Current Year Score: 37

2020

Transparency International

6.1.1f

Accountability of public officials (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 1

2020

Economist Intelligence

6.1.1g

Human rights risk (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 3

2020

Economist Intelligence

6.1.2 Orderly transfers of power

6.1.2a

How clear, established, and accepted are constitutional mechanisms for the orderly transfer of power from one government to another?

Very clear, established and accepted = 4, Clear, established and accepted = 3, One of the three criteria (clear, established, accepted) is missing = 2, Two of the three criteria (clear, established, accepted) are missing = 1, Not clear, not established, not accepted = 0

Current Year Score: 2

2021

Economist Intelligence

6.1.3 Risk of social unrest

6.1.3a

What is the risk of disruptive social unrest?

Very low: Social unrest is very unlikely = 4, Low: There is some prospect of social unrest, but disruption would be very limited = 3, Moderate: There is a considerable chance of social unrest, but disruption would be limited = 2, High: Major social unrest is likely, and would cause considerable disruption = 1, Very high: Large-scale social unrest on such a level as to seriously challenge government control of the country is very likely = 0

Current Year Score: 2

2021

Economist Intelligence

6.1.4 Illicit activities by non-state actors

6.1.4a

How likely is it that domestic or foreign terrorists will attack with a frequency or severity that causes substantial disruption?

No threat = 4, Low threat = 3, Moderate threat = 2, High threat = 1, Very high threat = 0

Current Year Score: 2

2021

Economist Intelligence

6.1.4b

What is the level of illicit arms flows within the country?

4 = Very high, 3 = High, 2 = Moderate, 1 = Low, 0 = Very low

Current Year Score: 3

2020

UN Office of Drugs and Crime (UNODC)

6.1.4c

How high is the risk of organized criminal activity to the government or businesses in the country?

Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0

Current Year Score: 2

2021

Economist Intelligence

6.1.5 Armed conflict

6.1.5a

Is this country presently subject to an armed conflict, or is there at least a moderate risk of such conflict in the future?

No armed conflict exists = 4, Yes; sporadic conflict = 3, Yes; incursional conflict = 2, Yes, low-level insurgency = 1, Yes; territorial conflict = 0

Current Year Score: 3

2021

Economist Intelligence

6.1.6 Government territorial control

6.1.6a

Does the government's authority extend over the full territory of the country?

Yes = 1, No = 0

Current Year Score: 1

2021

Economist Intelligence

6.1.7 International tensions

6.1.7a

Is there a threat that international disputes/tensions could have a negative effect?

No threat = 4, Low threat = 3, Moderate threat = 2, High threat = 1, Very high threat = 0

Current Year Score: 3

2021

Economist Intelligence

6.2 SOCIO-ECONOMIC RESILIENCE

6.2.1 Literacy

6.2.1a

Adult literacy rate, population 15+ years, both sexes (%)

Input number

Current Year Score: 50.78

2015

United Nations Development Programme (UNDP); United Nations Educational, Scientific and Cultural Organization (UNESCO);
The Economist Intelligence Unit

6.2.2 Gender equality

6.2.2a

United Nations Development Programme (UNDP) Gender Inequality Index score

Input number

Current Year Score: 0.38

2018

United Nations Development Programme (UNDP); The Economist Intelligence Unit

6.2.3 Social inclusion

6.2.3a

Poverty headcount ratio at \$1.90 a day (2011 PPP) (% of population)

Input number

Current Year Score: 2.3

2015

World Bank; Economist Impact

6.2.3b

Share of employment in the informal sector

Greater than 50% = 2, Between 25-50% = 1, Less than 25% = 0

Current Year Score: 2

The level of employment in the informal sector in The Gambia is 75.89 percent according to the 2018 Gambia Labour Force Survey (GLFS) which is the most recent survey data available. The 2018 survey was implemented by the Gambia Bureau of Statistics from November 2017 to July 2018. Funding for the survey was provided by the United Nations Development Programme (UNDP) and Ministry of Trade, Industry, Regional Integration and Employment. The survey followed International Labour Organization (ILO) guidelines. [1] The most recent survey prior to 2018 was in 2012. The 2012 GLFS survey showed the level of employment in the informal sector in The Gambia was 68.2 percent. [2] The 2018 survey was more comprehensive than the 2012 survey, according to information provided by the World Bank. [3]

[1] World Bank. "Gambia Labour Force Survey 2018". [<https://microdata.worldbank.org/index.php/catalog/3584/related-materials>]. Accessed 10 August 2020.

[2] World Bank. "World Development Indicators – The Gambia"

[<https://databank.worldbank.org/reports.aspx?source=2&series=SL.ISV.IFRM.ZS&country=GMB>]. Accessed 10 August 2020.

[3] World Bank. "Data Catalog". [<https://datacatalog.worldbank.org/dataset/gambia-labour-force-survey-2018>]. Accessed 10 August 2020.

6.2.3c

Coverage of social insurance programs (% of population)

Scored in quartiles (0-3, where 3=best)

Current Year Score: 0

2016, or latest available

World Bank; Economist Impact calculations

6.2.4 Public confidence in government

6.2.4a

Level of confidence in public institutions

Input number

Current Year Score: 1

2021

Economist Intelligence Democracy Index

6.2.5 Local media and reporting

6.2.5a

Is media coverage robust? Is there open and free discussion of public issues, with a reasonable diversity of opinions?

Input number

Current Year Score: 1

2021

Economist Intelligence Democracy Index

6.2.6 Inequality

6.2.6a

Gini coefficient

Scored 0-1, where 0=best

Current Year Score: 0.36

Latest available.

World Bank; Economist Impact calculations

6.3 INFRASTRUCTURE ADEQUACY

6.3.1 Adequacy of road network

6.3.1a

What is the risk that the road network will prove inadequate to meet needs?

Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0

Current Year Score: 1

2021

Economist Intelligence

6.3.2 Adequacy of airports

6.3.2a

What is the risk that air transport will prove inadequate to meet needs?

Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0

Current Year Score: 2

2021

Economist Intelligence

6.3.3 Adequacy of power network

6.3.3a

What is the risk that power shortages could be disruptive?

Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0

Current Year Score: 1

2021

Economist Intelligence

6.4 ENVIRONMENTAL RISKS

6.4.1 Urbanization

6.4.1a

Urban population (% of total population)

Input number

Current Year Score: 61.93

2019

World Bank

6.4.2 Land use

6.4.2a

Percentage point change in forest area between 2006–2016

Input number

Current Year Score: -5.66

2008-2018

World Bank; Economist Impact

6.4.3 Natural disaster risk

6.4.3a

What is the risk that the economy will suffer a major disruption owing to a natural disaster?

Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0

Current Year Score: 4

2021

Economist Intelligence

6.5 PUBLIC HEALTH VULNERABILITIES

6.5.1 Access to quality healthcare

6.5.1a

Total life expectancy (years)

Input number

Current Year Score: 61.73

2018

United Nations; World Bank, UNICEF; Institute for Health Metrics and Evaluation (IHME); Central Intelligence Agency (CIA)
World Factbook

6.5.1b

Age-standardized NCD mortality rate (per 100 000 population)

Input number

Current Year Score: 595.5

2019

WHO

6.5.1c

Population ages 65 and above (% of total population)

Input number

Current Year Score: 2.56

2019

World Bank

6.5.1d

Prevalence of current tobacco use (% of adults)

Input number

Current Year Score: 14.4

2018

World Bank

6.5.1e

Prevalence of obesity among adults

Input number

Current Year Score: 10.3

2016

WHO

6.5.2 Access to potable water and sanitation

6.5.2a

Percentage of homes with access to at least basic water infrastructure

Input number

Current Year Score: 77.99

2017

UNICEF; Economist Impact

6.5.2b

Percentage of homes with access to at least basic sanitation facilities

Input number

Current Year Score: 39.23

2017

UNICEF; Economist Impact

6.5.3 Public healthcare spending levels per capita

6.5.3a

Domestic general government health expenditure per capita, PPP (current international \$)

Input number

Current Year Score: 24.72

2018

WHO Global Health Expenditure database

6.5.4 Trust in medical and health advice

6.5.4a

Trust medical and health advice from the government

Share of population that trust medical and health advice from the government , More than 80% = 2, Between 60-80%, or no data available = 1, Less than 60% = 0

Current Year Score: 2

2018

Wellcome Trust Global Monitor 2018

6.5.4b

Trust medical and health advice from medical workers

Share of population that trust medical and health advice from health professionals , More than 80% = 2, Between 60-80%, or no data available = 1, Less than 60% = 0

Current Year Score: 2

2018

Wellcome Trust Global Monitor 2018