



# Socioeconomic Impact of **COVID-19** in The Gambia

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## A rapid assessment

July 2020





## A Report on the Socioeconomic Effects of COVID-19 in The Gambia

July 2020



*Photo Credit: UNDP: Training on COVID-19 prevention measures, public order management and human rights obligations for the Gambia Armed Forces together with Ministry of Health, WHO and National Human Rights Commission.*



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## List of Acronyms

ANC	Antenatal Care
ART	Antiretroviral Therapy
CBG	Central Bank of The Gambia
COVID-19	Coronavirus Disease 2019
CRR	Central River Region
CRRN	Central River Region North
CRRS	Central River Region South
CRVS	Civil Registration and Vital Statistics
DSPD	Department of Strategy and Policy Delivery
ECD	Early Childhood Development
EU	European Union
FAO	Food and Agricultural Organization
GBoS	The Gambian Bureau of Statistics
GBV	Gender Based Violence
GCCI	Gambia Chamber of Commerce and Industry
GDP	Gross Domestic Product
GRA	The Gambia Revenue Authority
GTTI	The Gambia Technical Training Institute
IHS	Integrated Household Survey
ICT	Information Communication Technology
IMF	International Monetary Fund
ISP	Internet Service Providers
KMC	Kanifing Municipal Council
LEG	Local Education Group
LGA	Local Government Area
LRR	Lower River Region
MICS	Multiple Indicator Cluster Survey
MoBSE	Ministry of Basic and Secondary Education
MoFEA	Ministry of Finance and Economic Affairs
MoHERST	Ministry of Higher Education, Research, Science and Technology
MoHSW	Ministry of Health and Social Welfare
MoICI	Ministry of Information Communication and Infrastructure
MoJ	Ministry of Justice
MoWCSW	Ministry of Women, Children and Social Welfare
MRCG	Medical Research Council Unit The Gambia
MSME	Micro Small and Medium Enterprises
NaNA	National Nutrition Agency
NBR	North Bank Region
NDMA	National Disaster Management Agency
NDP	National Development Plan
NGOs	Non-Governmental Organizations



NPLs	Non-Performing Loans
NSDS	National Strategy for the Development of Statistics
NSS	National Statistical System
OMVG	The Gambia River Based Development Organization
OVP	Office of the Vice President
PHC	Primary Health Care
POE	Points of Entry
PURA	Public Utilities Regulatory Authority
SDG	Sustainable Development Goals
SitRep	Situation Reports
SME	Small and Medium Enterprises
SoPE	State of Public Emergency
SOPs	Standard Operating Procedures
SPS	Social Protection Secretariat
SR	Social Registry
SSHFC	Social Security and Housing Finance Corporation
SSR	Security Sector Reforms
TRRC	Truth Reconciliation and Repatriation Commission
TVET	Technical and Vocational Education and Training
UHC	Universal Health Care
UN	United Nations
UNDP	United Nations Development Programme
UNFPA	United Nation's Population Fund
UNICEF	United Nations Children's Fund
URR	Upper River Region
UTG	University of The Gambia
VDC	Village Development Committee
VISACAs	Village Savings and Credit Associations
VPN	Virtual Private Network
WCR	West Coast Region
WFP	World Food Program
WHO	World Health Organization



# Chapter 1: Short Term Effects

## Introduction

The Novel Coronavirus Disease which was given the name Coronavirus Disease 2019 (COVID-19) by the World Health Organization (WHO) on 11<sup>th</sup> February 2020 was first discovered in Wuhan, China and reported to the WHO on 31<sup>st</sup> December 2019. Since its discovery, it was first declared a Public Health Emergency of International concern on 30<sup>th</sup> January 2020 before being finally declared a Global Pandemic on March 11<sup>th</sup>, 2020 by the WHO. According to the 148<sup>th</sup> WHO Situation Report on COVID-19, COVID-19 has globally registered a total of 7,941,791 confirmed cases and 434,796 deaths. The report highlights that Americas have the highest number of confirmed cases (3,841,609), followed by Europe (2,434,184) with Africa having the least number of cases (181,903). USA (2,079,592) and Brazil (867,624) recorded the highest confirmed cases respectively, and the USA has so far registered the highest number of deaths standing at 115,484.

Despite the increasing level of preparedness and high level of preventive measures to avoid the spread of the virus within African countries, the vulnerable continent has as at 16<sup>th</sup> June 2020 confirmed 181,903 and 4,235 deaths of COVID-19<sup>1</sup>. About 40 percent of these confirmed cases were registered in South Africa as well as the highest number of deaths (1,568 cases) which constitutes about 37 percent of total deaths on the continent. It must be noted that although, the first registered cases for all affected African countries were imported cases, local transmissions are on the rise. The alarm has been sounded for more robust containment measures as recommended by the WHO to be in place to avoid a rapid spread.

As a result of the rapid increase in the number of confirmed cases, Senegal, The Gambia's nearest neighbor had declared a State of Emergency on Monday, 23<sup>rd</sup> March 2020 to curtail the spread. Senegal registered her first confirmed case which was imported from the United Kingdom on March 2<sup>nd</sup> and its first death was registered on March 31<sup>st</sup>, 2020. Senegal reports a total of 5,173 confirmed cases of which 3,424 fully recovered, 64 deaths and 1,685 under treatment (78<sup>th</sup> Sitrep, 15<sup>th</sup> June 2020)

The Gambia confirmed her first COVID-19 case on 17<sup>th</sup> March, 2020, the case was reported on the 16<sup>th</sup> March by a 28-year female who travelled back from the United Kingdom (UK). Two days after the confirmation of the first case (19<sup>th</sup> March, 2020), the first case of death from a 71-year Bangladeshi man was registered after a posthumous diagnosis. The 78<sup>th</sup> Situational Report on COVID-19 (15<sup>th</sup> June, 2020) reports a total of 34 confirmed cases with 24 recoveries, 1 death and 9 currently hospitalized active cases.

The Situational Report (15<sup>th</sup> June 2020) also highlights that with the exception of North Bank East and Lower River, all of the other five health regions in the country had at least a confirmed case (26 confirmed cases in Western One). There are 2,095 cumulative negative tests<sup>2</sup> and 10 newly quarantined bringing up a total of 203 persons under quarantine.

In the government's efforts to curb the spread of the virus, the president on 17<sup>th</sup> March, 2020 placed a suspension on all public gatherings with an immediate closure of all schools and other tertiary institutions and madrassas. This was followed by a declaration of a State of Public Emergency (SoPE) on March 27<sup>th</sup>, 2020. The government also tabled for the extension of the bill for a 90 day period on 2<sup>nd</sup> April, 2020 but it was ap-

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<sup>1</sup> 148<sup>th</sup> Situation Report on COVID-19, WHO

<sup>2</sup> Including Repeated Tests





proved by the National Assembly for a period of 45 days effective April 3<sup>rd</sup>, 2020. The Emergency Powers regulation was amended on 16<sup>th</sup> April, 2020 allowing markets to operate 12 hours daily (6AM – 6PM), the first 6-hours for food vendors and the other half for non-food vendors. On 19<sup>th</sup> May 2020, the government of The Gambia granted an additional 21 days extension of the National State of Emergency with lesser restrictions taking effect from 10<sup>th</sup> June 2020.

## Effects on Economic Sectors and Groups

The current COVID-19 situation is fluid and filled with uncertainty. The aim of this study therefore is to provide policymakers and stakeholders a concise analysis of what is expected to happen in the short and medium term as well as provide recommendations to mitigate the adverse effects of the pandemic. For this reason, availability of data is key to the success of this study.

Given the abruptness of this crisis, the whole country was caught unaware. The high degree of uncertainty has also made decision-making difficult for all those involved in the process. Ideally in a study of this magnitude, data from different government agencies and partners would be used. Due to the difficulty in obtaining the relevant data coupled with the disparate way data is kept across different institutions, the Integrated Household Survey (IHS), 2015/16 and other data sources are used for analysis.

Although the IHS data is from 4 years ago, it is believed that the general pattern and figures would not significantly differ from the actual once adjustments are made for population increases. Another reason for using the IHS 2015/16 in this study is that the analysis from the above institutions would mainly focus on macro-economic indicators and not household surveys. Finally, the IHS 2015/16 is the most comprehensive survey available to date that is capable of answering questions covering a broad range of topics. In some sections, the Multiple Indicator

Cluster Survey (MICS) 2018 is used to answer questions not covered in the IHS

### ***The Economy and Government finances***

A straightforward effect of COVID-19 on the country is its impact on economic growth. The halt in tourism and the reduction in economic activity resulting from the nationwide and regional State of Public Emergency (SoPE) will adversely affect GDP (Gross Domestic Product) growth. The International Monetary Fund (IMF) has revised the 2020 growth projections from 6.3 percent to 2.5 percent assuming recovery in Q-3 2020. This growth projection is subject to significant downside risks owing to the high level of uncertainty compounded with continued spread of the virus particularly in Africa and the economic consequence of the pandemic on the world economy.

Related to a slower economic growth is a fall in revenue for the government. The Minister of Finance and Economic Affairs (MoFEA) in his address to parliament indicated that the expected COVID-19 revenue shortfall for the year is about GMD1 billion (approximately USD20 million). This estimate was made at a time when not much was known about the impact of the pandemic, GDP growth and the declaration of the state of emergency. Thus, the fall in government revenue is expected to be significantly higher than GMD1 billion, especially with The Gambia Revenue Authority's (GRA) decision to allow businesses a two-month extension for filing 2019 tax returns and for paying 2020 Q-1 income taxes. The Minister of Finance and Economic Affairs further stated that the economic impact of the COVID-19 outbreak would be a loss of GMD2.5 billion and that the economy would shrink to by 3 percentage points to 3.3 percent from a projected growth rate of 6.3 percent in 2020. This will also have implications on the budget and net domestic borrowing negatively impacting the concessionary fiscal stance the Government had been undertaking in recent years.

In late March it was expected that there would be a drastic drop in remittances (international transfer) driven by an inability of senders abroad to leave their homes to make transfers. Unrecorded remittances facilitated by air travel between the



sender's country and The Gambia is also expected to be adversely affected with the cancellation of all commercial flights to The Gambia. What has been seen from official figures for March and April is an increase in official transfers (USD 31 million and USD 44 million respectively), a marked increase from the previous months, and the same time last year. It is believed that this sharp increase in official transfers is due to a lack of options for those who regularly use the unofficial channels, now forced to use the official channels. If this is the case, then the original assumption of a fall in remittances could still hold, even though with an increase in official transfers.

Figure 1: Time Series of Remittances, Millions USD and Polynomial Trend Line

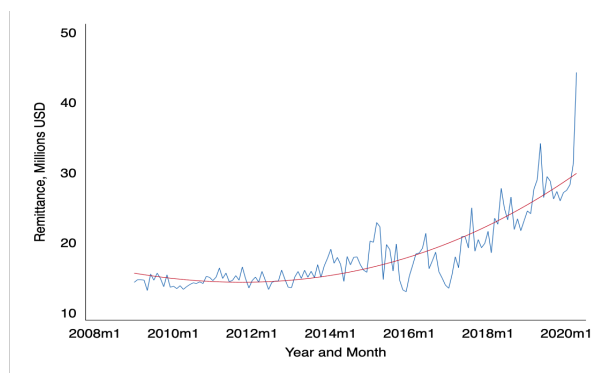


Table 1: Proportion of Households Receiving Remittances by LGA

LGA	Received Transfer (Percent)	Amount (GMD)
Banjul	30	12,681.95
Kanifing	35	17,959.97
Brikama	29	13,416.76
Mansakonko	45	8,333.79
Kerewan	37	7,454.67
Kuntaur	28	4,547.06
Janjangbureh	33	5,290.75
Basse	54	16,180.82

Note: IHS 2015/16 used to estimate figures. Sample weight (*hhweight*) at EA level used.

Table 1 above shows the proportion of households, by Local Government Area (LGA), that received a transfer (either from abroad or another region in the country) and the average amount received. The table provides an idea of the expected effects due to a fall in remittances. Although Kerewan, Mansakonko and Basse LGAs have a higher proportion of households that receive remittances, Basse, Kanifing and Brikama receive the highest amounts on average.

With lockdown measures taking place in the main host countries for Gambian migrants, many have lost jobs or simply do not have the regular access they did to send money back home to The Gambia. The US, UK, Italy, Spain, Sweden and Germany are all affected by the crisis at the same time and this is detrimental for the dependent households here in The Gambia. The decline in remittances by even 20 percent as is being projected globally would bring down remittance inflows from US\$318.5 million to US\$254.8 million which is a significant loss of about 4 percent of GDP for a small economy like The Gambia.

Data from the Central Bank of The Gambia (CBG) shows that the total stock of debt as of end of March 2020 is just over GMD7 billion. With unemployment sure to rise given the disruption of the tourism and hospitality industry amongst others, Non-Performing Loans (NPLs) are also sure to rise, an unwanted effect for the banking industry, NPLs have already crept up to 4.8 percent in March, compared to the same time last year (3 percent increase). Two sectors that are expected to be severely affected are the tourism and construction (and real estate) sectors, which account for 5 percent and 25 percent of the current stock of debt respectively. Although the exposure of banks to the tourism sector is relatively insignificant, there is a possibility of banks being adversely affected the longer this crisis continues. There are signs that distributive trade, which makes up 24 percent of the outstanding loans



also makes up 27 percent of the NPLs for March 2020.

### **Tourism**

The first sector to get hit during the pandemic was the tourism sector. Hotels and Lodges, Restaurants & Bars and the informal sector linked with this sector were immediately hit once the virus spread to Europe. After the country's first case on the 17<sup>th</sup> March, 2020 and the subsequent closure of the country's airspace, the tourist season was declared all but over. Tourist arrivals have already declined by 53.7 percent between February 2020 and March 2020<sup>3</sup>. Hotels and other establishments in the sector with debts look to be the most vulnerable businesses. Workers, both formal and informal, are adversely affected. Additional effects can be seen through reduced or almost no visits by tourists leading to reduced incomes for local enterprises located in Protected Areas and reduction in incomes for households involved in agroforestry businesses such as honey production and handcrafting. Closure of border with Casamance has led to an increase in adverse effects on the environment such as forest degradation (increased burning of charcoal) to earn a livelihood. Furthermore, the lockdown and movement restrictions provide cover for illegal activities such as deforestation, wildlife poaching and illegal, unreported and unregulated fishing activities especially in transfrontier/cross border PAs with shared resources. As a result of the unprecedented use of disposable face masks and other medical waste, a significant amount of masks/waste could be discarded in the natural environment, polluting our waterways, farmlands etc. with profound implications for human health and the environment.

UNDP's (United Nations Development Programme) Brief on the effects of COVID-19 on the Tourism sector estimates that the sector employs 42,000 people directly and another 40,000 indirectly. By generating USD85 million in foreign exchange for the country last year and a projected

USD108.5 million this year, COVID-19's effect on the economy is expected to be significant both in terms of foreign exchange earnings and employment.

It is unclear at this point how long it will take for the COVID-19 spread to be contained, however stakeholders in the tourism industry from previous experience estimate the impact to last for at least 8 months (March-October 2020). By such assumption, the industry stands to lose about 101,930 air arrivals taking cue from the projected arrivals in 2020 (March-October). This heavy impact will have serious negative effects on all tourism stakeholders and of course negative social impacts as well that will culminate as a result of employees losing their jobs especially those that work in tourism establishments.

It is estimated that The Gambian economy would lose an estimated USD108.5<sup>4</sup> million in income. This is income that should have accrued to either government agencies, private establishments and small businesses attached to the sector, but excluding VAT and fuel costs. This amount represents close to 7 percent of GDP.

The impact of COVID-19 has forced the tourism establishments to make counter-reactions in order to sustain themselves and their operations. This has led establishments to adopt measures such as reduction of staff, reduction of pay, disposal of stock etc. According to the Gambia Bureau of Statistics' (GBoS) Rapid Assessment of the Impact of COVID-19 on Tourism and Related Sectors, out of the 266 formal tourism establishments, 167 had to reduce the working staff as a measure to mitigate the impact of COVID-19 while 65 have reduced the payment of their retained staffs. Thirty out of the thirty-two hotels visited reduced their working staff with three of them reducing staff payment

As part of the GBOS rapid assessment, individual tourism entrepreneurs were covered including Tourist Taxi Drivers, Airport Porters, Fruit Sellers/

<sup>3</sup> CBG Datawarehouse ([gambia.datawarehousepro.com](http://gambia.datawarehousepro.com))

<sup>4</sup> Total value reported in the UNDP Policy Brief #2, 3<sup>rd</sup> April, 2020.



Juice Pressers, Bird Watchers, Tourist Guides, Hairdressers and Craft Market Vendors. About 69 percent of the respondents reported that it is as a result of the COVID-19 pandemic their businesses have closed. The proportion was higher than the national average for all businesses except for tourist taxi drivers which was 50.0 percent. This is followed by total loss of earnings with about 21 percent. The proportion ranges from 14.5 per cent for craft market vendors to 27.5 per cent for tourist taxi drivers. Loss of employment as a result of COVID-19 was reported only by tourist taxi drivers and craft market vendors. Reduced earnings as a result of COVID-19 were reported by all the respondents except for fruit sellers/juice pressers, bird watchers and airport porters.<sup>5</sup>

### ***Environment***

The environment cuts across many important sectors of national development such as health and tourism among many others. Consequently, the impact of COVID 19 outbreak on sensitive sectors like tourism and health to name just a few could have some direct and indirect implications for the environment sector and dependent communities. However, the direct impact of COVID 19 on the environment so far has been positive on a global scale. Firstly, the worldwide disruption caused by the pandemic and the resultant lockdown and movement restrictions have led to a drop in:- air pollution, GHG emissions (decarbonized sustainable economy that many have been advocating for decades), marine pollution and an increase in species richness/ e.g. fish biomass due to decreased fishing activities. Despite the benefits, The Gambia will also face challenges related to deforestation, wildlife poaching, illegal, unreported and unregulated (IUU) fishing activities and loss of revenue from protected areas as a result of the negative impacts of COVID-19.

### ***Trade***

The closure of the border with Senegal could prove to have a bigger effect on trade than the importation of goods from other countries

abroad. The Gambia's access to the Atlantic Ocean and the relative ease of clearing cargo means the country is still used as a port for our neighbors in the sub region; Mali, South Senegal (Casamance), Guinea Bissau and Guinea. Re-export trade makes up more than half of imports and serves as a source of revenue for the country. Border closure has created an expectation on a significant drop in revenue from re-export trade. Closure of borders also has an effect on trade with Senegal and regional integration especially affecting the movement of goods and people. Livelihoods in communities close to the borders are particularly affected for example, agroforestry businesses have been affected by a lack of tourist visits and closure of lumos; making communities vulnerable. A study by the Directorate of Strategic Policy and Delivery at the Office of The President in May estimates the 5 of the 8 Councils located in NBR, LRR, CRR and URR have lost D584,000 within an 8-week period due to closure of lumos and other social distancing measures put in place by the government. Although the illegal smuggling of goods is not expected to make up for the lost revenue, incomes generated from such activities should show up as expenditure in other sectors of the economy - most likely real estate (why?). The lack of income and increase in smuggling can push communities within the borders to engage in the smuggling of people across the border, further exacerbating the transmission of COVID-19 and increasing the community's chances of getting infected.

Gambia's main imports come from Asia and South America. With the virus seemingly under control in Asia, it is likely that imports will return close to pre-pandemic levels for commodities brought from Asia. The trend of supply chains moving away from China to other lower cost countries such as Vietnam, Indonesia and Cambodia should not have a major effect on the country's ability to get its demand met. The bigger challenges are availability of foreign exchange in the country and the ability for importers to travel to move goods from the exporting country to The Gambia.

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<sup>5</sup> Rapid Assessment of the Impact of COVID-19 on Tourism and Related Sectors

A slowdown in economic activity, a desire by the Central bank to control inflation and political pressure to provide foreign exchange to importers could lead to a reduction of foreign currency. Although, with the disbursement of foreign aid including the USD21.3 million under the IMF's Rapid Credit Facility and USD6.7 million of the USD47 million under the 39 months Extended Credit Facility arrangements, the pressure on the CBG foreign exchange reserves could be attenuated.

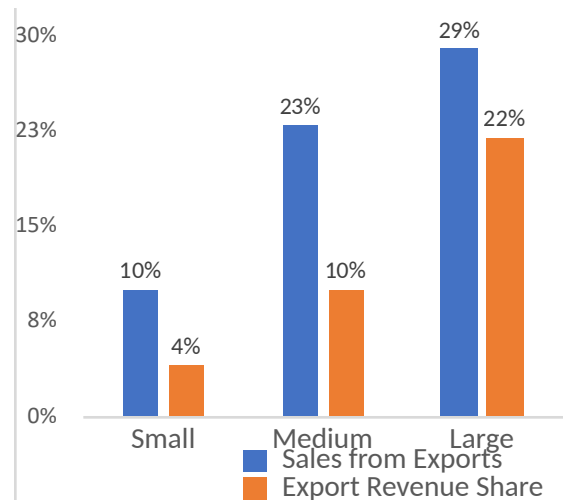
Lost in the talk about trade effects is its effects on non-agricultural exports, particularly for micro, medium and small enterprises. There is a dearth of data at individual firm level, making it difficult to estimate a true effect. Using the World Bank's 2018 Establishment Survey (BES 2018) of firms in the country, an estimate on the proportion of firms in the country that will be affected was made. Figure 2 shows the percentage of firms which make at least some percent of their revenue from exports, either directly or indirectly and the average share of export revenue as a percentage of total revenue. This is broken down by size of firm. The effect of COVID-19 on revenue shares rises with the size of firms, hitting large firms the most (22 percent of revenues affected on average). Large firms are also more likely to have exports as a part of their revenue.

It is important to note that all firms in the survey were registered. Although results from the School of Business and Public Administration's MSME (Micro Small and Medium Enterprises) mapping study of 2018 differ. Using the dataset, almost 8 percent of MSMEs stated they exported their products. This is lower than the average for registered firms (16 percent overall). As a result, this creates an expectation to see a more negative impact of COVID-19 on export revenues for medium and large registered firms in the country.

Another cause of concern with regards to international trade is the current shortage of cargo vessels to transport goods and fuel. There is already a shortage of tankers available to transport oil, driven primarily by the exceedingly low price of oil in the market. If this shortage extends to vessels carrying containers, in this case driven by

a limited supply of vessels, then the country could face serious challenges if the current situation persists.

*Figure 2: Proportion of Firms with Exports Forming a Part of Sales Revenue (Directly or Indirectly)*



Source: World Bank Business Enterprise Survey 2018 used.  
Note: Survey sample weights used (median weights) to estimate values above.

### **Transport**

The transport sector can be divided into two, the transport of people and the transport of goods. The transport sector was the second part of the economy to be adversely affected. At the moment, the national state of emergency has affected drivers engaged in the transportation of people. Although fuel prices have dropped by about GMD12 over the past months, it is difficult to quantify whether the reduction in fuel price makes up for the halving of the maximum number of passengers that can now board a commercial vehicle. Besides the limiting of passenger numbers, the prevention measures have also reduced the number of people using transport as many are staying/working at home. Strikes by drivers operating at the Brikama car park and those plying the Westfield-Brikama highway is a sign that the drop in fuel prices might not be sufficient to make up for the loss in number passengers per trip.



The transport of goods will also be affected; cross border transport of goods, driven by re-export trade, should fall with border closures. There is anecdotal evidence that transportation of goods within the country has also fallen as a result of the SoPE. Provisional 1<sup>st</sup> quarter trade data already shows a decline of 60 percent year-on-year in exports.

### **Micro Small and Medium Enterprises (MSMEs)**

The effect of COVID-19 on MSMEs is expected to be the same as all other sectors, a reduction in activity and loss of earnings. However, with little to no resources set aside to serve as bridge financing in difficult times, the effect on small businesses could actually be more pronounced than the effect on sectors/businesses that have the capacity to withstand economic stalemate for a longer period. A related impact from the closure of borders is the loss of income by informal cross-border traders around the major crossing points in Amdalai, Farafenni and Giboro. Although an assessment is yet to be conducted, anecdotal evidence suggests a steep decline in revenue and partial loss of livelihoods for informal cross border traders, particularly affecting female traders who may not be able to explore alternatives.

Due to the low amount of data on the informal sector, it is difficult to estimate how many and to what degree they will be impacted. The IHS 2015/16 is used to estimate, the number of MSMEs set up by households (disclosed to the interviewers), how much they earn and what percentage of them are registered to pay income tax. These results are presented in Table 2 below. As would be expected, Banjul, Kanifing and Brikama have the household enterprises with the highest monthly revenue. Because monthly incomes are self-reported numbers and not verified, it is recommended that the pattern of the numbers be the focus rather than actual revenue. The pattern is in line with expectations.

Table 2: MSMEs Information by LGA

LGA	No. of Enterprise (Est.)	Average Monthly Revenue (GMD)	Registered for Income Tax (Percent)
Banjul	382	35,525.06	4
Kanifing	4,399	61,561.97	4
Brikama	10,401	20,689.29	4
Mansakonko	4,468	21,706.72	15
Kerewan	11,955	8,759.51	14
Kuntaur	1,460	7,781.67	5
Jangbureh	1,061	6,870.85	4
Basse	7,218	11,607.78	14

Note 1: Estimate of average monthly revenue removes to top 2 percent of revenue earners (outliers).

Note 2: These figures are for 2016. No adjustments were made for the duration due to lack of adequate information to scale to 2020.

### **Education**

The first steps taken by the government of The Gambia after the first case in country were the banning of public gatherings and the closure of all schools including universities by declaring a State of Public Emergency (SoPE) and schools and tertiary institutions have remained closed since then. During this period, private schools and government institutions have been attempting to find a solution to this challenge; how to teach students who are not allowed to go to the school. Whilst private schools took the path of online classes, public schools through the Ministry of Basic and Secondary Education (MoBSE) have



started classes, on television and radio for certain subjects at most levels. The results for this have been mixed, with people, particularly in rural areas complaining about their lack of access to a television to follow these classes. There is anecdotal evidence that those with a radio have difficulty understanding what is being taught because they cannot see what the teacher is writing on the board. Also, students in the commercial field have raised concerns highlighting that they are left out because their core subjects are not featured<sup>6</sup>. There are also the concerns for students in non-formal education such as those in madrasas, that also augment the risks and burden of children not going to school.

Although commendable, MoBSE's approach risks further exacerbating inequalities that exist in the education sector. Students from wealthier (more advantaged) backgrounds are more likely to complete school and perform better in exams. Students from the rural areas and public schools are more likely to have these deficiencies. These inequalities may further be entrenched if the current situation persists and those disadvantaged are not able to get the same access to the content provided by MoBSE on the television and radio.

The Ministry of Higher Education, Research, Science and Technology (MoHERST) in collaboration with GSM operators and the University of The Gambia worked closely together to make available, in April, real time online classes for students to continue their learning. This approach allows students to connect to Google Classroom and Google Meet for free. The content (recorded classes and lecture materials) is made available for all students at a near zero cost. This allows those without time, or the means to access online classes in real time to access the content later on.

Despite MoHERST's effort, some tertiary institutions could still not host online classes, this has resulted in the significant loss of credit hours. A

segment that has remained more difficult to deal with is The Gambia Technical Training Institute (GTTI) and other Technical and Vocational Education and Training (TVET) institutions. Due to the nature of some of their programs, hands on programs, it would be more challenging to solve the problem. However, this provides the opportunity for the increased use of technology in the education sector and to take advantage by doing things differently in the sector.

### **Health Care**

The arrival of the COVID-19 to the country's shores has exposed the shortcomings in the nation's healthcare system. The Gambia, as in most underdeveloped countries, has a low ratio of health professionals per 1000 people (1.1 per 1000 people<sup>7</sup>), limited expertise and a shortage of basic equipment for conducting basic tests and treatment. Over the past twenty years, The Gambia's Primary Health Care (PHC) system has been challenged, with 16 nurses and mid-wives per 10000 people, 11 hospitable beds per 10,000 people and health expenditure remaining low at 4.4 percent of GDP compared to countries with very high human development where the averages are 81 nurses and mid-wives per 10,000 people, 55 hospital beds per 10,000 people and health expenditure of 12 percent of GDP. It may be that the added burden of dealing with the COVID-19 has put further strain on the healthcare system, both for its workers and current (and potential) patients. A breakdown in the PHC would affect women, children under 5 and older persons the most, those most likely to be in need of healthcare.

The current singular focus on containing and eradicating COVID-19 has led to a situation where, "nothing else matters". This singular focus has led to resources, both labor and capital, being diverted to one cause; ending the pandemic. This poses problems for non-COVID-19 patients especially those with chronic illnesses. Patients

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<sup>6</sup> Economics, Financial Accounting, Cost Accounting, etc.

<sup>7</sup> COVID-19 and Human Development. UNDP (2020)

particularly the elderly who have weak immune systems and suffering from chronic illnesses such as diabetes, high blood pressure and asthma are particularly at risk right now, with resources and attention diverted away from them. It should be expected that this would be a common occurrence in such a crisis, with limited human capital and resources.

further extended for another 21 days), an increase in stress and the incidence of mental health disorders is anticipated. There is evidence in other countries that SoPEs have led to an increase in domestic violence and other forms of abuse. In The Gambia, the added stress, particularly for men who have lost their means of earning an income, and yet are expected to continue



*Photo Credit: ITC/YEP – 6000 face masks handed to University of The Gambia students through partnership with UNDP, YEP and Mbolo Association.*

Related to the above group are those living with HIV/AIDS (PLHIV). Antiretroviral therapy (ART) programs for this group could be hampered as well. It is imperative that programs for those living with HIV/AIDS and other illnesses such as Tuberculosis, Diabetes are given the treatment they need. If attention is diverted away, it is possible that deaths could increase in these disease groups, possibly surpassing COVID-19 deaths.

Mental health has begun to be taken seriously in the country, even though the necessary expertise and enabling environment are not yet in place. With a healthcare system whose focus is diverted, and a national SoPE expected to last for 73 days (Initial 7 days plus additional 45 days and

taking on their responsibilities, the added stress can manifest in increased spousal (and child) abuse and more severely affect mental health as a result of isolation. These negative effects also greatly impact older persons who are at high risk from COVID-19 and the social distancing and semi-lockdown conditions can negatively impact their mental health and wellbeing.

In the case of women, the cumulative effects of lack of basic healthcare (especially at PHC level), and inability to earn income through petty trading and the increased childcare demands due to school closures, can have serious psychological effects on them. It is therefore necessary that psychosocial support be provided for households that are at most risk. Households that were





termed as vulnerable, prior to the crises, and those made newly vulnerable should be targeted for psychosocial support.

### **Research**

Academic research still plays a minor role in The Gambian economy, with only a few institutions consistently engaged in it (Medical Research Council Unit The Gambia (MRCG at LSHTM) and University of The Gambia to name two). The minor role played is mostly due to a lack of funding particularly at the University level. With COVID-19, it is expected that there will be a drastic drop in research for most areas, with the exception of COVID-19 related researches. This is expected to occur in the short-term, but as the crisis abates, growth in other areas, driven by an influx of funding to better understand the pandemic's effect on society, and seeking ways to better deal with a future pandemic if it does occur is expected to be seen.

### **Vulnerable groups**

As time has passed, a better understanding of the effects of COVID-19 on the population, and those vulnerable groups<sup>8</sup> have been gained. Grouping those vulnerable into the newly vulnerable and those vulnerable before the pandemic. Those made vulnerable due to the pandemic, can be further broken down into those made vulnerable due to the pandemic itself, and those made vulnerable due to the response by government to tackle this pandemic. People affected can fall into more than one of these groups (Pre COVID-19 or not, and government response effect or not). Knowing which of these a vulnerable group falls into would help in determining the way to address the problem.

The most obvious groups affected include daily income earners and workers in the tourism sector. Petty traders (mostly women), day laborers (mostly men) and commercial drivers are some of the more prominent people who fall into this category. Contractual workers whose contracts are

expected to expire during this pandemic also face job security issues given that their contracts are likely not to be renewed. Their vulnerability is related to a lack of income brought about by the SoPE and resulting slowdown in economic activity. This current situation would drive households headed by those in this group below the poverty line. In addition to lower/no income is an increase in stress brought about by uncertainty. For heads of households in this group, the stress of continued expectations of providing for the family in this current climate can potentially lead to stress expressed in other negative behaviors. Migrant and mobile populations are more vulnerable to infection, as well as broader social and economic impacts due to several factors and barriers including lack of or inadequate access to proper information on prevention, limitations in accessing basic healthcare, diagnostic and treatment services, cramped and crowded living and working conditions, etc.

People with chronic non-communicable diseases and PLHIV are especially at risk and efforts to minimize their exposure have become paramount. Related to this group are the elderly and persons with disabilities. These two groups were considered vulnerable pre-COVID-19, needing regular healthcare services. They have been found to be particularly susceptible to the illness. It has been observed that that hospitals are trying to decongest by giving longer appointments to patients, prescribing drugs lasting for 2-3 months and rotating of their health professionals during working hours in order to comply with social distancing measures. This can be viewed as a reduction in supply of labor, coupled with an increase in demand. With attention diverted to tackling COVID-19, these three vulnerable groups (people with pre-existing health conditions, the elderly and persons with disabilities) are particularly at risk. In The Gambia, these impacts can be seen in border communities (with mobile populations moving fluidly across borders) and communities with high numbers of returned migrants aiming to restart their lives. Once borders reopen, the capacity of The Gambia to maintain proper procedures for screening and detection of

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<sup>8</sup> Those with Chronic illnesses, the elderly, persons with disabilities, women and children, migrants and returnees



ill passengers at points of entry (POE) will be stretched, which could lead to a significant risk of infection for managing entries and returns to the country. Strengthening the core capacities for public health measures at points of entry will help mitigate the risk of infection.

Women are especially at risk due to a convergence of a number of stressors; reduced income (if a petty trader), increased burden of childcare (due to school closings) and increased burden of caring for sick household members especially those with chronic non-communicable diseases may increase the burden in the health systems, thus resulting to a reduction in the quality of healthcare. Care must be taken to understand the dynamics in such households where both spouses are experiencing elevated stress levels. The Gambia has also witnessed an increase in gender-based violence (GBV) during the pandemic<sup>9</sup>. From March to date, 72 cases have been registered through the 'One stop Centres' coordinated by the Network Against Gender Based Violence. 56 of these cases are sexual violence while the remaining 16 are cases of wife battering. Of these 16 cases of domestic violence, 15 were perpetrated against women. The consequences of such violence may lead to or exacerbate pre-existing anxiety and depression among women. With this pandemic, it may be more difficult for domestic violence survivors to seek and receive help, owing to curbs on movement, limited availability of services, or limited knowledge of services. For survivors who have lost their jobs or have no income, leaving an abusive partner will become even more difficult during the COVID-19 pandemic owing to financial dependence.

### ***Agriculture and Food Security***

According to the IHS 2015/16, Agriculture employs nearly 46 percent of the labour force and is the major source of livelihood for 80 percent of the rural population. Agriculture contributes 25 percent of GDP and 30 – 40 percent of all foreign exchange earnings from exports, though share of services in GDP is increasing. Agriculture and related industries contribute to economic growth,

employment, poverty reduction, food security, and nutrition. The Gambia relies on rain-fed Agriculture and the 2019 rainy season was poor due to late and erratic rains which drastically impacted 2019/20 Agricultural season, with an estimated decline of 11 percent and 46 percent in cereal production compared to last year and the 5-year average, respectively. The reported disturbance of the agricultural food system caused by the SoPE, business closure, and restriction of movement will not only continue to affect the overall food supply chain if the crisis persists, but will translate into more serious consequences as the timing of the COVID-19 in The Gambia has coincided with the preparation of the main agriculture season. Therefore, further consequences are expected on the local food production as the capacities of vulnerable producers to engage in production will be affected.

The agrifood system is one of the largest economic sectors in The Gambia, spanning production, industry and services. It is also one of the leading job producers. Employers and employees alike depend on a functioning food system for their livelihoods, from agrifood companies to the informal street vendor. Given the structure and informality of agrifood systems in The Gambia, government will have to cater to the formal marketing channels and also find measures to make informal markets work consistently with virus containment.

Fortunately, the timing of COVID-19 has given Government a chance to increase its focus on Agriculture. The current crisis has the possibility to reduce the stock of basic food commodities, reduce food security and increase malnutrition. Unlike other effects already observed, the effect of COVID-19 on agriculture, food security and nutrition will depend on the response of government in scaling up its activities in agriculture (described in the next section). There is time for government and other implementing partners such as Food and Agricultural Organization (FAO) to provide inputs, technology and more aggressive extension services to farmers while World Food Program (WFP) could provide food as-

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<sup>9</sup> Network Against Gender Based Violence one stop centre data (2020).



sistance and nutrition package to save lives. The aim must be to protect household food security and increase the yield of food crops.

The depth of the challenge facing the country with regards to food security will depend on the ability of the country to import the basic food commodities and the ability to meet a shortfall with domestic production if bottlenecks in the importation of these products is experienced.

The March 2020 Cadre Harmonize (CH) concluded that 81,976 persons were in crisis (phase 3-4), with approximately 401,967 people identified as experiencing food and nutrition stress before the pandemic. The projected situation is that 136,586 people will be into crisis around June to August. With the negative impact of the pandemic across various sectors, jobs and livelihood losses in the urban areas are estimated to affect about 40,000 people as a result of the COVID-19 situation, thus increasing the pockets of urban vulnerability and the CH crisis (severely food insecure) estimates by an additional 40,000, bringing the total number of people requiring urgent assistance to 176,586 people with an additional 555,988 people under pressure in need of resilience building.

Thus, based on CH projections and further analysis on urban vulnerability a total of 732,574 are vulnerable to food security, of which 36 percent are in West Coast Region (WCR), 17 percent in North Bank Region (NBR) and Kanifing Municipality Council (KMC) each, 10 percent in Upper River Region (URR), 14 percent in CRR (9 percent in CRRN and 5 percent in CRRS) and 5 percent in Lower River Region (LRR). This translates to approximately 91,572 food insecure households' country wide.

As mentioned in the Trade subsection, it is not yet fully understood what the supply chain will look like in the next 6 months or whether countries will limit exports of the products consumed in The Gambia. As a result, studies such as the Ministry of Agriculture's pre-harvest study would give us an idea of the country's food security sit-

uation, but these figures would be underestimated given the drastic change in situation.

### ***Tradition in Society (Arts, Culture and Religion)***

It would be difficult to quantify the effects the National Emergency Act and the resulting prohibitions put in place in terms of social gatherings, religious congregation and strict rules on size of traditional ceremonies (marriages, funerals and naming ceremonies). The full effects on Gambian society and culture moving forward will take time to see. What have been observed in the past month is a significant reduction in these activities particularly congregational prayers at mosques and churches.

Praying as a congregation forges links and bonds within the community, which in turn increases social cohesion and reduces the likelihood of ethnic tensions. During stakeholder consultations, it is also observed that people are still carrying on their daily lives as before, with the difference being people are more observant of personal distancing and having their hands clean at all times. Although not ideal, this is expected to have a positive effect in combating the stress brought about by COVID-19.

The time restrictions put on business operating hours coupled with restrictions of gathering sizes have had an adverse effect on MSMEs as mentioned above, and traditional artists (griots) who make a living from traditional ceremonies. The effect on this group is similar to petty traders; reduced income and increased likelihood of falling below the poverty line. If the situation persists, there is a possibility that Gambian society's views on this group will change, leading to a dying out of this profession.<sup>10</sup>

### ***Nutrition***

The COVID-19, has increased pressures on several pre-existing conditions with acutely malnourished children being nine times more likely to die and experiencing pulmonary complications. More-

<sup>10</sup> The Government of The Gambia has eased the restriction on the number of people that can congregate in one location from 10 to 100. This change was made in early June.



over, disruptions to already inequitable health and nutrition services further disadvantage the most vulnerable. Food insecurity at the household level is one of the three main underlying causes of malnutrition<sup>11</sup>. Food security and Nutrition are inextricably linked, particularly in places where food supplies are insecure and dwindling or there are restrictions in movement and increase market prices. When food becomes scarce, hygiene, safety and nutrition are often ignored as people shift to less nutritious diets and consume more unsafe foods. This will increase the vulnerability to stunting, overweight/obesity and associated noncommunicable diseases that will also increase the severity of COVID 19 symptoms<sup>12</sup>

Food security analysis estimates about 177,000 severely food insecure individuals and 556,000 moderately food insecure individuals (about 92,000 households) in need of immediate food assistance (In-kind or cash) and resilience building. COVID-19 will increase the burden of acute malnutrition by 36 percent from 42 percent, from 676 children to 58,177 with a quarterly increment of between 2.7 to 5.6 percent. This increment in malnutrition is directly proportionate to the socio-economic development and effect on the country's GDP.

The Gambia Cost of Hunger in Africa Report revealed that positioning nutrition interventions as a top priority for human capital development has a lasting effect on the socio-economic development of a country, which needs more attention in the current pandemic. In pre COVID-19 scenario, the report estimates an equivalent of about GMD 3.956 billion (USD 83.4 million - which represented 5.1 percent of the GDP in 2018) is lost annually - Stunting related productivity losses contributes the largest costs at 4.7 percent of GDP followed by Health and Education at 0.4 percent and 0.002 percent respectively<sup>13</sup>.

<sup>11</sup> UNICEF, *Conceptual Framework on nutrition*

<sup>12</sup> *GNR 2020*

<sup>13</sup> Cost of Hunger in Africa Gambia report, 2020 - GoTG, WFP

<sup>14</sup> MICS 2018

The IHS 2015/16 estimates that about 55.1 percent of the population cannot meet the daily required minimum calorie intake of 2400 per day per person. Malnutrition, both undernutrition and micronutrient deficiencies are high among women of reproductive age 15-49 years and children under five years of age and therefore is a public health challenge in The Gambia. Despite recent gains, the MICS 2018 showed that malnutrition rates continue to be high in The Gambia with stunting at 19 percent, wasting at 6.2 percent and underweight at 13.9 percent. Rural regions are still above the national average; CRR 50.9 percent (CRRN 26.6 percent, CRRS 24.3 percent), NBR 20.8 percent and URR 19.5 percent. COVID-19 is expected to dent the significant gains in the fight against malnutrition<sup>14</sup>.

### ***Effects on the Progress towards the National Development Plan (NDP) and Sustainable Development Goals (SDGs)***

The Annual Progress Report (2018) of the NDP reported strong progress registered by major strategic priorities with Tourism registering a 100 percent on track record as at 2018. Whilst Human Capital was just 45 percent on track, agriculture and youth empowerment were constrained by 67 percent and 75 percent respectively. The Gambia SDGs Status Report (2019) highlighted sectors such as research, innovation and creative sector, education and youths as well as human capital as sectors that require major improvement for sustainable development. Despite the sluggish progress in these sectors, they are as well the first to be affected with the COVID-19 pandemic. Thus, the pandemic will further strangle development in these sectors and tourism is likely to fall off its track. Given that most resources will be diverted to fighting the pandemic, this means that proper implementation of the NDP in its last 2 years will be a challenge which will eventually



result to the fall in some of the achievements registered thus far on the SDGs.

### ***Effects on Social Cohesion***

According to the West Africa Network for Peacebuilding's position paper on "the impact of COVID-19 on human security and social cohesion in the country", published in June 2020, the "pandemic is placing strains on human security, state-public trust and the democratization process of the country". The socio-economic impacts on various sectors articulated above, and the unprecedented policy and emergency measures being taken in response, will likely have lasting impact on the quality of relationships within and between families, communities and groups. For example, increased sexual and gender-based violence has been reported. Frustrations from emergency regulations, loss of jobs and livelihoods among others, are taking a toll on social cohesion. Against the background of Gambia's fragile democratic transition, the impact of the pandemic could exacerbate existing fault lines and socio-political stresses.

## **Recommendations for the Short-Term**

This section focuses on discussion on the steps that need to be taken within the next 6 months to limit the spread of COVID-19 and ensure that the economy is in good footing once the current crisis has passed. Undertaking these steps in as inclusive and participatory manner as possible will maximize impact and reduce unintended negative impacts, especially on social cohesion. In the short term, the steps to be taken can be lumped into 3 main categories; Containment and Prevention measures, Social Protection and Continuity of Government and the Economy.

### ***Containment & Prevention measures***

A large proportion of the activities to be implemented in this category will be done by government, with support provided by local and in-

ternational partners. As discussed in the previous section, Government has taken steps to contain and prevent the spread of the virus by setting up quarantine centers, border patrol/surveillance to prevent or lower the illegal entries and exists, testing suspected cases, communicating to the public about the dangers of COVID-19 and passing a bill in parliament for a State of Public Emergency (SoPE). All the above are needed in this fight. Government's focus now in this area is to scale up its activities across the country and have consistency in its activities.

Information gathered from the Daily Situation Reports (SitRep) have shown that as of 15<sup>th</sup> June, 2020 a total of 2,239 tests were conducted<sup>15</sup>. From a population of over 2 million, this is a small number. In the same report, completed follow-ups (prior to the first case on 17<sup>th</sup> March) were 310. There are also 619 people who have completed their quarantine. From the number of tests conducted, one can be certain that most of these people quarantined were not tested after the completion of their 14-day quarantine. There is evidence from Mali that people can complete their quarantine period, be asymptomatic yet test positive for the virus. As a result, more vigorous testing must be done. With the medical test kits donated by the Jack Ma foundation, it should be possible to conduct tests now given the low number. However, this does not rule out the concern on possible shortage in test kits if the number of cases peaks.

Consistency in activities also needs to take place. There is anecdotal evidence that call operators at 1025 are not taking every call seriously. There is an anecdotal evidence where a person reported all the signs of COVID-19 to the operator. The person was told there was a team from Brikama going back to town that would pick them up. An hour later the person called 1025 to enquire about the status of the pickup team only to be told the team had forgotten and was now in Kotu. The caller was told to wait home until the next day. Although these incidents may be rare, they could have serious ramifications. The work done by the 1025 hotline is vital to control the spread

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<sup>15</sup> Including Repeated Tests



of the virus through rapid identification, isolation and treatment. Thus, effective monitoring of the hotline by the MoH is recommended.

The COVID-19 response plan put together by MoH shows that the necessary plans have been made to ensure that this virus will be beaten. Given the limited resources of government, both capital and human, support from local and international partners will be needed, particularly in coordination and also giving government information on best practice in tackling this virus within the sub region.

With the uncertainty faced at the moment, it is not known whether the resources pledged to government will be enough to beat the virus. What one can be certain of is that with proper coordination of government and its partners, the limited resources available can go a long way towards containing the spread this virus.

Given the interval between confirmation of official cases of COVID-19 in the country coupled with the extension of the SoPE, people are starting to get restless. If the current trend in official case confirmation continues, it is believed that the population may resume their normal activities again. The toll, in terms of income and psychological stress, is reaching a point where the risk/reward dynamic will force people to come out in direct violation of the SoPE's regulations. To counter this before it becomes a problem, there is a need for vigorous testing. The focus should be in the rural areas and border towns. A news story on *Foroyaa* (a daily local newspaper) about Gambians arrested in Senegal due to crossing the border provides some evidence that people from both countries are crossing the border<sup>16</sup>.

A report by the Department of Strategy and Policy Delivery (DSPD) came out on the week of April 9<sup>th</sup>, 2020. Using the dynamic model from Imperial College of London, the report estimated likely infection rates, critical cases and deaths for the country. In all scenarios, the critical cases that will

result in hospitalization was around 0.2 percent of those infected; which translates to around 29,000 people.

From a population of 2 million, this seems small, but two points need to be noted. First, the country has about 3,000 beds in all health facilities combined. If the total number of beds offered by The Gambia Hotel Association is included, then the country will have a total of 8,000 beds available to it; far short of the 29,000. Second, the model calculates the critical cases and deaths directly due to COVID-19. The increase in hospitalization and death due to other illnesses such as HIV/AIDS, hypertension, diabetes and tuberculosis are not estimated. These would put further strain on the health system.

This report agrees with the (DSPD) report that the current State of Public Emergency (SoPE) could likely cause more harm than the problem being tackled. Unfortunately, given the weaknesses in the country's health system identified by the WHO report, it is believed that easing SoPE should be looked into, but only if the following issues are resolved:

1. Testing at the population level is increased both per day and across all regions. The 100,000 test kits provided from The Jack Ma Foundation and the MRCG at LSHTM lab are not enough to cover the entire population within a short period of time. More kits need to be made available and training done for health workers to administer these tests to the population.
2. Border posts, both formal and informal, should be upgraded with the necessary facilities to be able to test and track all those passing through<sup>17</sup>.
3. Quarantine sites should observe the standard operating procedures (SOPs) for a quarantine. As observed by the WHO team, quarantine sites are lacking in certain equipment and staff are not fully complying with quarantine SOPs; increas-

<sup>16</sup> This story appeared on the *Foroyaa* newspaper dated 3<sup>rd</sup> April 2020.

<sup>17</sup> See WHO Rapid Assessment Report for more details on what is needed.



*Photo credit: UNFPA (dignity kits presented to women /girls to meet their hygiene needs amidst COVID-19)*



ing the risk of local transmission of the illness.

### **Social Protection Measures**

COVID-19 has led to a slowdown in the economy, an increase in vulnerable households due to reduced incomes, an increase in stress and an increase in food insecurity. In addition to the steps taken by government and its partners to contain the spread of the virus, ensuring that society still functions is also necessary. To ensure this is the case, a number of steps need to be taken. Unlike containing and eradicating COVID-19, these activities are at a wider scale and could potentially cost more.

### **Food Relief**

Food assistance to vulnerable households across the country is the first step in protecting households from the economic effects of the pandemic. Right now, there is no doubt about an increase in vulnerable households brought about by the State of Public Emergency (SoPE). The challenge is identifying who the most vulnerable are and reaching them with the necessary support. On April 26<sup>th</sup>, 2020 the government launched a food relief initiative targeting 84 percent of the population. The package comes in the form of providing assistance of 50kgs rice, 50kgs sugar 10 litres of oil.

Table 7 in Annex 1 shows the proportion and number of households that are food poor, per LGA. The figures are arrived at using the IHS estimates for food poor households and scaling this to match the 2020 population estimates. In total, there is an estimate that there are about 141,000 households in the country that are food poor, with Brikama and Kanifing having the highest number of households and Janjangbureh having the highest proportion. Using the National Nutrition Agency's (NaNA) recommendation of a bag of rice (GMD1,400), a 20-liter bottle of oil (GMD600) and GMD1,000 in cash to purchase other items, to ensure a diverse /balanced diet for the household, this would cost GMD3,000 per household. It is estimated that providing the above to these households would cost GMD423 million per month to the government. For a cash

transfer or food assistance of 6 months, this would cost GMD2.5 billion; 2.6 percent of GDP and 10 percent of government's budget.

For identification, a mix of quantitative analysis (using existing survey data sources) to identify the most vulnerable communities, and then using a Community Based Targeting method to identify the most vulnerable people within the community is recommended. It should be noted that local structures such as the Village Development Committee (VDC) and Areas Councils must be used in the process of identification of vulnerable households in areas where distribution is not universal. Using extension workers already living in the communities for distribution would also be helpful.

Cash payments to households to purchase the items needed is recommended. This is a more cost-effective method than government purchasing rice and oil and transporting to the beneficiary households. The logistics costs alone are daunting for a government experiencing difficulties supplying fuel for the COVID-19 response. In addition, it would increase the possibility of individuals diverting the food items to non-vulnerable households. Disbursement of the cash should be done through the financial system; banks, micro-finance institutions and VISACAs. This has two advantages, first it spreads the task across entities that are already experienced in the disbursement and accounting of cash payments. Second, it forces the unbanked into the system.

Along with food assistance should have been a strong messaging campaign to educate the population on the purpose of food relief and its one-off provision and the process of selection households because there will be those that disagree with the process. Therefore, with a well-crafted message, the population should have been in a better position to understand the need for selecting a subset of the population for the relief.

The need for a messaging campaign to educate people about the temporary nature of the assistance is for people to understand that the resources needed are extremely high, particularly for an underdeveloped country such as The





Gambia. Spending close to 10 percent<sup>18</sup> of a government's budget on food transfers means a number of other services must be sacrificed.

Local government Authorities (Councils) should be a part of the implementation of social protection activities taking place. Given that Village Development Committees and Ward Development Committees are under the area councils, it is only natural that area councils are a part of the implementation.

### **Grants and Loans to MSMEs**

The food transfers are meant to solve challenges at the household level. For private MSMEs, a mix of grants and loans is recommended. Grants should target small and medium businesses particular those in the informal sector. The loan scheme should offer low interest with payments starting in 12 months and for a duration of 3 years.

In both cases businesses in the tourism, transport, entertainment and trade (particularly retail traders) should be prioritized. Enterprises which are currently unable to make revenue, or in the case of petty traders, unable to open due to the SoPE should be placed in the grants pool.

Firms in the formal sector which have experienced a fall in revenue and are likely to see growth after the crisis should be put in the loans pool. Firms in sectors that are likely to see a significant shift in how the business will operate, and thus will need to change their business model will also qualify for a loan. Those firms selected for a loan cannot layoff their staff for at least for 12 months. The loan amount given out to each Small and Medium Enterprises (SME) will be proportional to the size of the firm; either in turnover or staff size as of 1<sup>st</sup> March 2020.

A new source of funding is recommended for these activities. The IFC's offer to provide funding for financial institutions in developing countries is one place Government can start. The same insti-

tution also is offering to fund businesses in sectors that have been adversely affected by COVID-19. It is recommended that if funds are available to offer grants and loans to Gambian businesses, the distribution of these grants should be through the financial system; banks and micro-finance institutions. This has the effect of spreading the work across a larger number of parties, thus speeding up the process whilst ensuring disbursements are accounted for. The second is to force enterprises operating in the informal sector to be backed, either with a bank or a micro-finance institution.

### **Psychosocial Support**

A mix of reduced incomes, limited movement due to the SoPE and uncertainty about the duration of this crisis will cause a significant increase in stress for a large proportion of the population. This will lead to an expression of this stress in socially unacceptable ways; such as GBV and increased antisocial behaviors. This is an area that UN agencies with a focus on these issues and the Ministry of Women, Children and Social Welfare (MoWCSW) can provide the much-needed support to vulnerable households and women. It will be necessary to identify these households through community-based targeting. This method would be much faster, be compliant with social distancing requirements and more likely to be accurate than other methods employed in the current context.

With social distancing being implemented and time constrained, it is necessary to identify characteristics that are correlated with the likelihood that GBV would occur in a given household. Table 7 (in the Annex) serves as a starting point, allowing institutions such as UNFPA (United Nation's Population Fund) and MoWCSW to narrow down their search to households that have a high likelihood of experiencing GBV. Table 5A in the annex uses a variable from the MICS 2018 as a proxy for GBV. Women in the MICS were asked whether it was justified for their husband to beat them under certain circumstances. If a woman said yes to

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<sup>18</sup> As of 22<sup>nd</sup> June 2020, approximately D800M has been earmarked for distribution on rice, sugar and oil to households, much less than estimated in this study.



*Photo Credit: IOM (returnees have come together to manufacture soap for their communities)*

any one of the 5 scenarios, then the variable “GBV belief” was marked as a one and zero otherwise. Other variables that will be easy to get from The Gambian Bureau of Statistic (GBoS) listing and survey data are included in the regression; woman’s education level, head of household’s education level, whether household is in an urban area or not and the wealth score of the household. It is important to note that correlations are estimated and not causation. From the results, all 4 variables have a strong correlation to the GBV proxy. Households where the head has low education, lives in the rural areas, is poor or close to poor and the woman also has a low education level are households that should be targeted first<sup>19</sup>.

### **Ensuring Continuity of Government Service and the Economy**

During an emergency, especially that of a pandemic such as the COVID-19, governments are expected to continue the operations of essential services with minimal disruptions.

The unique nature of the COVID-19 is forcing almost all governments to an SoPE, having most of their workforce working remotely or in some countries such as The Gambia to stay home with no means of working. Social distancing thus far is the most effective way to preventing the spread.

For The Gambia government to ensure that its essential services are continued without disruptions and also enforcing social distancing, basic IT infrastructure and support services must be in place. A video conferencing application such as

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<sup>19</sup> In the regression, sample weights (*wmweight*) were used.



Zoom must be utilized to allow government staff to conduct meetings remotely without having them in one place exposing themselves to the virus. For the staff working remotely, there should be systems that will give these staff a secure access to the government systems through a Virtual Private Network (VPN). This will ensure that the essential services are operational whilst the majority of the workforce are working remotely. Government's websites must be constantly updated as this is one of the best ways for government to communicate with its citizens. This will also ensure that the people will stay home and get information from the websites without the need to visit the government departments. A stable, affordable and fast internet connectivity is a prerequisite for the above emergency solution to be effective. COVID-19 has presented the opportunity for Government to change the way it works, effectively using ICT and emerging technologies to reduce government expenditure.

## Re-opening the Economy

With the State of Public Emergency (SoPE) going on for over two months and the official number of cases at 34, it is not too early to draw up plans for how a reopening of the economy will be done, and what the criteria for reopening would be. Recommendation for reopening the economy should depend on two main factors; the ability to do mass testing and the number of new cases.

### ***Mass Testing***

Countries around the world are struggling to get enough test kits to conduct tests on the population. This has been the main reason for countries advocating for social distancing to curb the spread of the virus. The Gambia's situation is more challenging than that of more advanced countries. Currently, the country has 20,000 test kits donated by the Jack Ma foundation and laboratory facilities at the Medical Research Council of The Gambia (MRCG) at LSHTM as the total sum of available tests that can be conducted.

Assuming MRCG at LSHTM can conduct 5,000 tests, and the possibility of repeated tests, more than 25,000 people cannot be tested; less than 2 percent of the population. Without the ability to do mass testing, social distancing which is however a challenge to maintain in The Gambia would be the best way to control transmission of the virus.

Fortunately, Mologic, a UK based firm, has received funding to produce rapid test kits at a cost of USD1 per kit. The test kits are expected to provide results within 10 mins. Production is expected to start in June in their Dakar facility. This would prove to be a godsend, allowing the country to reduce restrictions on activities slowly whilst vigorously testing the population for the virus.

### **Number of new cases**

The number of new cases has been relatively low, given the projections made by WHO and Imperial College. It could be argued that official cases are low due to limited testing being done by the government. Although testing so far has been very limited, 2,239 tests (including repeat test) was performed over an 87-day period (as of 15<sup>th</sup> June 2020) since investigation started, it makes sense to be selective in conducting tests given the severely limited test kits available to the government right now.

If the number of new cases remains relatively low in the near-term, and the test kits produced by Mologic are available in the market, the government should then look into slowly reopening the economy. A slow phased in approach to reopening is recommended, slowly allowing activities that can take place with social distancing taking place first, then finally with social gatherings and congregations in the tail end. Government will have to sit down with the private sector and other stakeholders to plan out the steps for reopening and the conditions that need to be met before moving from one stage to the next.



## Chapter 2: Medium Term Effects

### Introduction

The novelty of the effects currently experienced around the globe makes predicting the effects of the pandemic very challenging. Nonetheless, a couple of assumptions are made to have an approximation of what the medium and long-term effects would be. These assumptions would be country specific. This chapter gives a description of the most likely outcome for sectors and groups within the economy. In addition, recommendations are provided on what government and development partners should focus on in the medium-term.

It is important to state that with the scale of COVID-19 cases and the unfortunate number of deaths resulting from the virus, the world will not be the same again. Policymakers must have this in mind when planning for the future. The Gambia will now have to increase its efforts to play catchup, or risk being left further behind by the world.

In determining what the medium-term effects of COVID-19 will be on The Gambia, it is believed that two factors will be the most important determinants of which course the country will take:

1. The length of time it will take until a vaccine is found, within this year or beyond 2020.
2. The total number of official deaths from COVID-19 in the country.

The length of time to get a vaccine is a proxy for the effect of the pandemic on the global economy, which has a significant effect on the country's growth prospects. The total number of official deaths from COVID-19 serves as a proxy by capturing the extent of the damage caused by COVID-19 to The Gambia and also serving as a form of measuring possible attitude change once this crisis is over.

The longer it takes for a vaccine to be found, the greater the damage to the world economy, supply chains and the budgets of donor agencies.

These three have a significant effect on the country's main foreign exchange earners; tourism, re-exports and government budget supports respectively. The longer this goes on, the deeper the effect of the pandemic on the economy.

Official deaths are identified as an important determinant of what is likely to happen domestically given what had been observed over the past months. Social distancing rules and the SoPE does not seem to have changed attitudes of people in cases where government has not enforced (through arrests and prosecution) the new rules. The current number of cases as at 15<sup>th</sup> June, 2020 seems to have had little effect on people's state of mind or fears regarding the virus. In addition to current attitudes, it is expected that the country's growth trajectory after this crisis will to a large extent depend on the willingness of government (and the people) to change their behaviors.

With these 2 factors considered, and each having two possibilities - vaccine found (within 2020 or beyond 2020) and official death toll (low or high) - there are four possible outcomes moving forward. Figure 3 shows these four possible outcomes for the medium-term, labeled A to D.



In scenario A, a vaccine is found within this year and the official death toll is very low (less than 100 deaths attributed to COVID-19). This scenario is the best-case scenario of the four, with the economy experiencing negative growth for the first 3 quarters of the year followed by growth picking up in the 4<sup>th</sup> quarter. This scenario is very similar to IMF's prospects for the country, which expects growth to be negative in the first half of

the year then picks up in the 3<sup>rd</sup> quarter. Growth will be negative in 2020 but return to normal in 2021.

The negative effects of COVID on the country will be minimal as tourism, agriculture, remittances and donor funding all pick up in 2021 in addition to increased spending due to the 2021 elections.

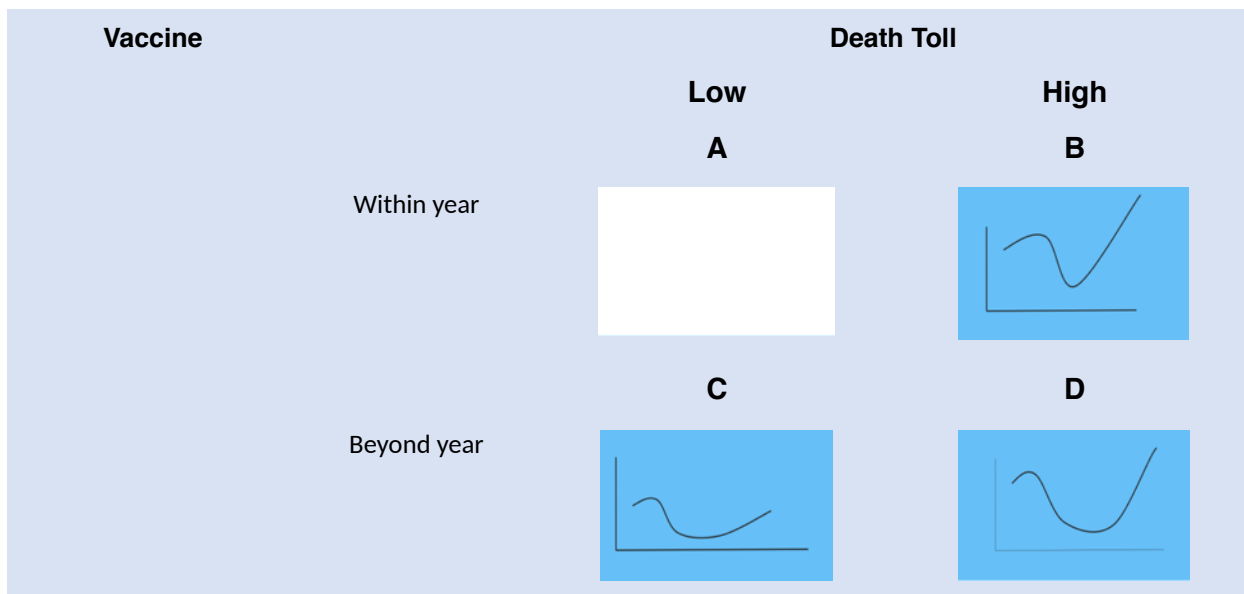


Figure 3: Possible Outcomes for the Economy in the Medium-Term

Scenario B, a vaccine is found within the year, but the number of death cases from the virus are high, reaching the worst-case scenario of WHO projections. Although the effect on GDP would be negative until quarter 3, then growth starting in the fourth, the number of deaths would greatly expose the shortcomings of the country's health system and government's tight fiscal space. This coupled with the negative effects brought about by an ever-tighter state of public emergency during the 3<sup>rd</sup> quarter would lead to an increase in the poor population and increased social tension.

Scenario C is similar to A, but with the country experiencing negative growth for a longer period than in scenario A. Growth is expected to be slow for all of 2020 and the first half of 2021. The societal effects will be less severe than in scenario B.

In scenario D, the worst possible case, a sharp decline in growth in 2020, negative growth in 2021 and the growth returning in 2022 is expected. It is likely that GDP, poverty and health indicators will not return to pre-crisis levels for a few years after that. Growth is expected to be faster than during the pre-crisis once this period is over.

An end to the pandemic would provide both relief and a sense of duty to fix the country's problems which have been exposed by COVID-19.



## **Medium-Term Socioeconomic Effects**

Based on observations in The Gambia since the first registered case and news from the biomedical industry, scenarios A and C are believed to be the most likely scenarios to occur. This section will focus on the medium-term effects of COVID-19 on the country, focusing on different sectors and groups within the country, assuming that scenario A plays out. In the medium-term, the Government will re-prioritize the National Development Plan in light of the COVID-19 pandemic which will also inform the next long-term vision for the country.

### **Government Revenue and Macroeconomy**

Government revenue is expected to fall in 2020, as projected by the IMF, but to rebound in 2021. Slower growth in tourism will be made up with increases in remittances, investments (in the ICT sector) and a rebound in trade (especially re-export trade). Budget support from the IMF and World Bank and the country's recent debt relief by the IMF should help the government to reduce its deficit whilst also allocating more spending to education, health and social protection. The 2021 elections should lead to an increase in spending, leading to an increase in inflation in 2021 (and a larger depreciation in the Dalasi than in the recent past). Trade balance is expected to close this year, but return to its pre-crisis trend, but slower. Remittances are expected to be much lower in 2020 but expected to bounce back with the economy in 2021. Also, remittances are expected to fuel investments in the real estate sector as has been the trend.

### **Trade**

In line with IMF's projections for 2020 and 2021, it is also expected that with the trade deficit closing for this year, then expanding in 2021 and beyond. Slower growth in the tourism industry will have significant effects on the economy and dalasi. A pickup in remittances is ex

pected and increased investments in other sectors to make up for the loss in output in the tourism sector. In this scenario (scenario A) minimal effects on the supply chain and The Gambia's trading partners (both imports and exports) in the short to medium-term is expected.

With trade picking up again and borders reopened, the medium and larger firms should see an increase in revenue as more demand picks up. The limited exposure of MSMEs in the export market means the effects of COVID-19 and the resulting growth effects are muted for these enterprises.

### **Education**

If a vaccine for COVID-19 is found within the next 6 months, the effects on education will not be as severe in the medium-term. Steps currently being taken by both education ministries to resolve the challenge of school closures, coupled with schools reopening before end of year would mean the time lost would not be so great. Students currently in the final year of their cycles would be most adversely affected, mostly those in grades 9 and 12.

The time lost due to COVID-19 could be regained with extra sessions added in the next academic calendar for all levels. An increase in dropouts should be expected especially within the groups of girls and persons with disabilities. At the tertiary level, the most likely to be affected are those in the vocational and technical fields, but similar to the basic and secondary cycle, the time lost will not be too great. MoBSE, MoHERST, and other stakeholders should look into ways to mitigate this with support of Local Education Group (LEG) chaired by UNICEF (United Nations Children's Fund).

### **Healthcare System**

COVID-19 will put strain on the health system, further showing the frailties of the healthcare system. With the entire health sector and government focused on containing and preventing the disease, other vulnerable groups such as the elderly and persons with chronic illnesses, PLHIV



and tuberculosis are expected to have less attention and time devoted to them. Currently Antenatal Care (ANC) services offered by public health facilities have been reduced.

In addition to the above, the public's faith in the healthcare system will also erode in the medium term. As a result, government will need to be aggressive in this area in order to regain the public's trust. It is expected that health indicators will deteriorate over the next 6 to 9 months, then begin to pick up next year. Spurred by increased investment in health by the government and the private sector, there is an expectation to see increased quality and greater focus to tackle the country's health system's challenges.

### ***Tourism***

In this scenario, global travel is expected to open up again slowly. The tourist season in The Gambia starts in November and ends in April. This means that by the time the season is in full swing, travel restrictions would have been lifted for a couple of months. The industry should not expect to hit pre-crisis levels or growth in the 2020/21 tourist season. In addition, with COVID-19 hitting the elderly more, the industry's most common and loyal customers, it will take a while before this age group will be ready to travel abroad. The industry should be ready for lower revenues in the next season across the board. As tour operators are likely to slash prices to entice more travelers, hotels and other formal businesses within the sector will experience a squeeze in margins. This will trickle down to MSMEs in the tourism related sector, who are expected to bear the brunt of this in the form of lower tourist expenditures.

### ***MSMEs***

The effect of COVID-19 on MSMEs will be largely driven by the economy's prospects. As mentioned above, in the more likely scenario A, return to growth in the final quarter of this year will be seen, but with the tourism sector still struggling. MSMEs in the tourism and entertainment industry will have difficulties even after the crisis passes. MSMEs in other sectors should see a return to normalcy. Those involved in real estate, retail

trade, communications and transport are expected to see a bigger jump in growth compared to other sectors.

At the moment it will be difficult to determine the medium-term effects of employment, particularly for the self-employed. A return to growth should see an increase in business activity, coupled with increased donor funding and an increase in spending due to the presidential elections, unemployment should fall. Alternatively, unemployment remains stubbornly high (close to crisis levels) because of a significant change in demand for sectors is experienced. For example, a significant growth in services is anticipated, especially in Information Communication Technology (ICT), Data Management Services and Logistics. All three sectors require specialized skills learnt at the tertiary level. A shortage of workers in these three sectors might be experienced (leading to an increase in wages in these three sectors) whilst other sectors experience a supply glut. In such a case, unemployment could remain relatively high.

### ***Agriculture and Food Security***

Agriculture in The Gambia is still dependent on rainfall and government supply of inputs. In the medium-term, government's support in this sector is not expected to increase in 2020 and 2021, driven first by the crisis and later by the upcoming elections. Rainfall is particularly hard to predict, given that its effectiveness on output depends not only on timing but also the right amount. The Department of Water Resources has not projected a drought for this year. Assuming no drought takes place next year, agricultural output is expected to increase compared to 2020, driven mainly by increased investment in the sector and a growing world economy.

In this scenario, supply chains are expected to remain stable and trade levels to pick up in 2021. Given that a large portion of the country's food is imported, access to markets is a major determinant of food security. A growing economy in 2021, increased remittances and investments will finance the resulting trade deficit. Vulnerable households in pre-crisis and those made vulnera-



ble during the crisis should see an improvement in their situation. The latter group is expected to recover more quickly, with little change (in composition and income) in the former group.

### **Rule of Law**

Resource allocation for Gambian prisons have been significantly low in the past years. This has led to the state of depilated structures, inadequate access to proper sanitary facilities and worst of all feeding prisoners with food that lack the relevant nutritious balance. These conditions amongst others have been vastly deliberated on during the TRRC proceedings. As at March of this year, the state of the prison can be termed as congested. There are 629<sup>20</sup> detainees (301 remanded) with 859 personnel in Mile 2, Jeshwang and Janjanbureh prisons. The conditions in these prisons and the existing health conditions of inmates have raised fear amongst inmates regarding the spread of COVID-19. To this effect, the Rule of Law Project in partnership with government through GCCI has purchased a 30-passenger seat mini-bus to facilitate the transportation personnel with the prisons as a way to curtailing the spread of COVID-19 whilst trying to address prisoners' concerns. However, it must be highlighted that prisoners are still at risk given that some of these personnel live in the prisons with their families whose movements are not restricted.

Similar to the health workers are the police personnel<sup>21</sup> who have been given the responsibility of maintaining internal security, law and order. During this State of Public Emergency (SoPE), they are a key player in enforcing government's SoPE restrictions especially those relating to the ban of all public gatherings. This involves coming directly in contact with the communities even more, thus increasing their risk. The ban on public gathering has also led to the temporary stop of the TRRC which resumed proceedings mid-June after almost a three months break. It has also led to the suspension of court proceedings. This has

increased the advocate for digitalization to enable the usage of zoom to conduct virtual courts. This is expected to decongest the prisons in compliance with health advice.

## **Recommendations for the Medium-Term**

### **Social Protection**

Still trying to understand the full effects of COVID-19 on the country, its effects on the country in the medium term is more so a challenge. One thing to be fairly confident about is that economic indicators will be worse in 2020 whilst some growth can be expected in 2021. IMF's projections show a likelihood to return to pre-crisis levels sometime in late 2021 in the optimistic scenario. As a result, social protection measures implemented now are likely to be needed into the medium term, although not at the same levels as now.

The lack of a quick response with regards to social protection can be mainly attributed to two things, first, a lack of information of those most vulnerable and second, the lack of proper coordination between the central authority (NDMA) and other stakeholders to effectively coordinate social protection measures prior to the crisis. Both of these problems are in the works to be solved. The Government of The Gambia has established a Social Protection Secretariat (SPS) under the Office of the Vice President (OVP). The SPS will be responsible for coordinating and monitoring all social protection programs in the country once established. In addition to monitoring social protection programs, the SPS will also be responsible for the Social Registry. The registry will house information on a large segment of the population initially, with the aim of getting all households in the country on it. This list will be used by government, international organizations and Non-Governmental Organizations (NGOs) to

<sup>20</sup> Request for Country Allocation of UNDP COVID-19 Rapid Response Facility Resources for L3 COVID-19 Crisis, March 2020.

<sup>21</sup> 6000 personnel (Request for Country Allocation of UNDP COVID-19 Rapid Response Facility Resources for L3 COVID-19 Crisis, March 2020)





get a list of the most vulnerable households/groups that qualify for their social programme.

The Social Registry (SR) is thus critical to the country's aim to tackle poverty. It is recommended that UN agencies in country work to support the realization of the Social Registry in the following ways:

1. Provide technical expertise to the government in the building and maintaining of the SR and linking to the Civil Registration and Vital Statistics (CRVS) System. The planning stage for the SR project, funded by the World Bank, is in its final stages, but implementation has just begun. There is a role for the UN system and other international organizations to provide support for the Registry and the Secretariat. At the moment, the Secretariat has 2 staff (with a total of 9 to be hired). For a project this vital to the nation's plans to eradicate poverty and protect vulnerable groups (those with Chronic illnesses, the elderly, persons with disabilities, women and children, migrants and returnees) in society, more resources (human and capital) is needed.
2. Development partners can help in maintaining the Registry's significance by taking part in its updating over its lifetime. This can take the form of ensuring any survey funded by a development partner collects information that is in the Registry and in addition once the survey has been completed, the information must be added to the Registry to update its information. Doing so would ensure the Registry's relevance to both governments, its users and the population at large.

## **Education**

The COVID-19 pandemic has further exacerbated inequalities that exist and thus increasing the educational outcomes gap between those more advantaged and those less so. This can be seen at all levels, particularly at the basic and secondary

cycle levels with private schools having easier access to online content whilst students in government schools struggle with getting access to classes on the radio and television. Students with access to online classes have the advantage of not only getting to join a class online and study at their own pace, but also consume the educational content as many times as they want. This is an option not available to students in government schools.

To prevent the further widening of this gap, steps need to be taken to make educational content (local content especially) available online for students at all levels. To make this a reality, government and its development partners will need to first do a study to determine the needs of sectors at all levels, from Early Childhood Development (ECD) to Tertiary. Second there needs to be both education ministries (MoBSE & MOHERST) and their partners to support educational institutions to create their own content. Recent advances in technology have made it possible for both formal programs as well as vocational and technical to be taught online. Support for educational institutions to make their face-to-face classes and learning materials available online would increase the quality of learning whilst pushing the country's education system in the direction education will be taking moving forward.

Making face-to-face classes available online and also generating new content is one part of the solution. Storing content and making it easily accessible to students is another challenge. There are a number of possible solutions that can be implemented. One such is that adopted by the MoHERST. The Ministry convince mobile operators to allow students of the University of The Gambia to access Google Classroom and Google Meet for free, whilst also selling data bundles to University of The Gambia (UTG) students at half price to facilitate online research<sup>22</sup>. A second approach is to use the Ministry of Information Communication and Infrastructure's (MoICI) bandwidth in conjunction with the exchange at Serrekunda to host all educational content and provide free internet access to anyone accessing

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<sup>22</sup> The University of The Gambia has covered the costs of the units, 1.5GB, for its students, making it free for students.

this content within the country. Operators (GSM and ISPs) can route all traffic to educational content to MoCI at no cost.

Finally, there will have to be policies and rules put in place with regards to content ownership, user rights and resale rights. Guiding the establishment of the plan above would require expertise which the government might not have inhouse. Development partners can step in here to provide guidance and expertise when needed to facilitate the move of educational content and classes on-line.

### ***Health System Upgrading***

pre-crisis levels for a number of health indicators.

The Universal Health Care (UHC) bill recently passed is one way to regain trust. UHC has not been implemented yet, giving government and its partners an opportunity to increase its coverage across the population and providing processes that are aged-friendly. Universal access to health care is something people can stand behind and would be desperately in need of once this pandemic is defeated. For UHC's scale to be increased, there will have to be further studies on its feasibility and the resource envelope needed to make it work.



*Photo Credit: UNICEF (significance of getting children immunized during COVID-19)*

The effects of COVID-19 on the healthcare system will lead to a reversal of gains made in a number of health indicators such as maternal mortality, infant mortality and child anthropometry measures. The public's trust in the healthcare system would be seriously dented. There is an expectation that it would take a few years to return to

The method of financing UHC within The Gambia's health sector is a discussion that needs to be had. Whether UHC beneficiaries will only be able to attend public health facilities or can also go to private health facilities should be addressed. If private health facilities are part of the system, who shoulders the burden of the added costs?



These are questions that will have to be answered once the crisis passes. After the crisis, with the public health sector overstrained, private health facilities will become vital in ensuring people get access to quality healthcare.

The private healthcare market is characterized by a lack of scale, with each private health facility basically a clinic. Private health facilities rarely have more than one full-time doctor available, relying on public doctors to moonlight at private facilities to offer their expertise in an area not covered by the resident doctor. If The Gambia's health sector is to play an important role, there is a need to increase scale of health facilities; this can be done in two ways. First, to promote investment in the health sector by local Gambians. There are signs that this has been taking place in the laboratory diagnostics with a number of Gambian owned labs opening in last few years. Promotion of investment should be focused on the opening of larger health facilities with more resident doctors stationed full-time at these facilities.

A second option (though not mutually exclusive to the first) is to go the route of Senegal; allowing public doctors to start their own clinics whilst working in the public health facilities. Doctors see patients at public facilities during the first half of the day, and then see patients at their own private clinic during the second half of the day. Further study needs to be done for this option given that there is opportunity for doctors to exploit such a system. It is worth noting that Senegal does have a better health care system than The Gambia. Whether this is due to the incentive structures in place needs to be looked at further.

In addition to the strain on the healthcare system, other frailties have also been exposed by the crisis; chief among these is the lack of a robust logistics system. Logistics goes beyond vehicles and fuel. There is an urgent need to have a real-time system that allows the Ministry of Health and Social Welfare (MoH) to know where demand of and supply for resources are within the system, have the ability to transport resources to the points of need as and when needed. They should be able to track all this in real-

time and be able to forecast, thus anticipating their needs. This can also be extended to provide a databank for individuals and their medical history, this database should be disintegrated especially into aged groups, medical conditions etc. and periodical analysis and report publications made available. This will immensely assist government and other stakeholders in identifying the high-risk individuals especially the elderly in times like this pandemic. The Planning & IT Unit of the Ministry of Health (MoH) will need capacity support once this crisis is over. Additionally, health screenings in border crossings (or Points of Entries) is very essential moving forward. There was already a gap in this type of capacity before COVID-19 and it will be extremely important to address this gap in line with immigration and border management guidelines and procedures.

### ***Communications Infrastructure***

COVID-19 has exposed the country's weak communications infrastructure. The poor quality of the network, the lack of full coverage across the country and the high prices have all contributed to low adoption of internet usage and stifled progress. This needs to be addressed as soon as possible. Upgrading the country's IT infrastructure is vital, particularly the GSM operators. As of June 2020, only two out of the four operators have 3G across the board. Two of the carriers are either still at 2G only or mostly 2G with 3G in a few parts of the country. The cost of data bundles is too high, although there is competition in both the GSM and Internet Service Providers (ISPs) markets.

Public Utilities Regulatory Authority (PURA) needs to step in to:

1. Pushing all GSM operators to move to 4G or else leave the market to provide space for a new entrant.
2. Require all GSM operators increase their coverage across the entire country.
3. Introduce collocating of antennae on the same tower by different operators to make recommendation 2 above easier to achieve.



4. Conduct regular test of service quality and fine operators that do not meet standards.

The world is moving to 5G, there is no excuse for GSM operators still offering 3G with data charges that are amongst the highest in the sub-region. PURA needs to step in to force operators to move up to 4G for now, with plans to move 5G within a reasonable timeframe. Moving up to 4G would greatly increase the speed available to users and enhance user experience. This must be done whilst ensuring that prices are either stable or fall. Data bundle prices in Senegal for 4G are as low as a third of prices in The Gambia.

Communications companies (GSM and ISP in particular) need to be available all over the country. The quality of service must also be consistent across the country. One way of making this easier is to allow collocating within the same tower. This means that on the same tower, Africell, QCell, Gamcel and Comium equipments can all be found, with none interfering with the other. To make this a reality, PURA will have to come up with new rules (suggested above). An increase in coverage, move to 4G and maintaining price is likely to lead to operators to lower quality. Hence the need for regular test of network quality, coupled with fines for operators that are below the threshold set by PURA. For the steps above to be taken, PURA will need to be empowered. Capacity building of staff will also have to take place. Strengthening the use and infrastructure of traditional communication channels such as television and radio will also be important for the country.

### ***Mobile Money (Increased Financial Inclusion)***

In addition to lack of data on vulnerable people, the second obstacle to rapid deployment of social protection measures is a lack of a mechanism to disburse cash payments to households that all households had access to. Mobile money would be the ideal way of doing this, but unfortunately, the mobile money market is underdeveloped, with only two operators (Afrimoney & Qmoney),

both charging high fees and not interoperable. This situation needs to be resolved if the SR Project is to be a success.

Mobile money operators are under the supervision of the Central Bank of The Gambia (CBG). CBG views mobile money operators as depository institutions just like banks or microfinance institutions, but without the ability to grant loans. This has stifled the growth of the market. CBG should change the definition of mobile money operators to become non-depository institutions facilitating the transfer of funds but not holding deposits. Along with the change in definition is the lowering of requirements to start a mobile money firm. Currently the initial deposit is GMD10 million (USD200,000) plus an additional GMD5 million (USD100,000) to hold as reserve. The current cost of opening is steep, even without considering other setup costs as staff, premises, and technology costs associated with setting up a mobile money firm.

By removing the deposit holding part of mobile money, all mobile money operators would have to partner with a bank(s) to hold their deposits. In this scenario, mobile money operators act as a cross between a local money transfer institution and technology firm. To complete the rule change, CBG must force all mobile money operators to ensure their service is interoperable with other mobile money operators and Gamswitch. One of the biggest hold backs to mobile money adoption is the lack of interoperability between Afrimoney and Qmoney. Users of one service cannot transfer to those in another service. The CBG should endeavor to end this as soon as possible. Doing so would increase the adoption of mobile money.

With the above rule changes, bringing in the unbanked would become easier. At the moment, microfinance institutions, foreign exchange bureaus and mobile operators would incur a lower cost to bring in an unbanked person into the banking sector. With mobile money operators being freed from behaving like depository institutions and also being interoperable, any new mobile money user without a bank account is a new

unbanked person entering the system; a more cost-effective way of ensuring financial inclusion.

If mobile money is nurtured, it would facilitate social protection measures in the form of cash transfers, an activity that is likely to grow significantly moving forward. Cash transfers with mobile money are more efficient, cost effective and easier to account for. Mobile money can also be used as a proxy to measure the activities of the informal sector.

The lack of standard facilities, reliable electricity, water, internet and infrastructure are holding back the sector, preventing it from moving to the higher end of the market. In addition to these, it is expected that the quality of the health sector would be equally important to tourists moving forward. The pandemic has led to a greater awareness of the importance of the health sector to not only the country's residents but also tourists.



*Photo Credit: UNDP/OHCHR/WHO COVID training for the police.*

### **Tourism**

The tourism sector was the first to be hit during this pandemic. The sheer speed and breadth of the pandemic's effect on the sector has shown the sector's importance to the country, not only directly but also indirectly. Data collected by the Gambia Bureau of Statistics (GBoS) in its Rapid Assessment Study of the Tourism and Related Sectors has shown how skewed revenue is for the sector towards hotels, with 94 percent of reported incomes lost due to the pandemic being attributed to hotels. This shows a further need to diversify the current product of package tours, further including MSMEs and the informal sector into the tourism sector to play a bigger part.

### **Data**

During consultative meetings and discussions with stakeholders, what stood out was the consistent apparent lack of data. What initially seemed like a lack of data, was later learnt to actually be a case where data was fragmented across different institutions. There was no centralized system where administrative data and survey data could be accessed. As a result, decisions that could be done in a day had to be held up for a few days until the agency responsible could get or give authority to share the data.

Given the vital role the Gambia Bureau of Statistics (GBoS) plays in collecting, storing and disseminating data, it is vital that GBoS is able to do all three of its roles effectively. GBoS is well



known for its expertise in conducting surveys, but another vital role played by GBoS is its collection and collating of macroeconomic and administrative data. Administrative data from MDAs such as the Ministry of Justice (data on registered businesses), Social Security and Housing Finance Corporation (SSHFC) are necessary for GBoS to play its role in providing government with the data needed during the planning stage or when a crisis such as COVID-19 takes place. Strengthening the national data architecture and implementing the National Strategy for the Development of Statistics (NSDS) II will enhance the 11 Ministries, Departments and Agencies of the National Statistical System (NSS) to provide more timely, reliable data especially at the administrative level.

Observations have been made on how important it is to have a robust social protection system in place. GBoS has been engaged to collect data for the SR, covering all households initially in 30 districts including 20 of the poorest districts in the country based on the 2015/16 IHS. With the availability of funds, the entire country will be covered. This information will be fed into the SR as a starting point. Registries should be viewed as living things and as such must constantly be updated to be useful. One way to ensure the continual updating of the Registry is to make sure that large surveys done by GBoS always collect basic information (Household roster, contact details of household head, asset ownership, etc.) needed by the Registry and linking to CRVS. This information, once cleaned, should be added to the registry. This will ensure that the Registry is always updated, providing the most up to date information on households for stakeholders.

Collecting more data; survey and administrative, is the first part. Making this data accessible to government and other stakeholders in real-time is another matter. GBoS needs to work on a portal to give government institutions access to the data they hold directly, instead of the laborious process of requesting for the data and waiting for it to be shared. During a crisis, this does not cut it. It is now the convention that statistical agencies make their data available to the public via a portal. This access is within bounds depending on the variables of interest. By providing access to

their data, stakeholders would be aware of what data is available, without the need to request data in order to find out whether GBoS has it.

Highlighted in the VNR Report, 2020 is for the need for methodologies that support data disaggregation especially for categories such as older persons, persons with disabilities, and other vulnerable groups which will greatly support SDG reporting and implementation of the 2030 Agenda. Although there might be a possibility of the data being in existence somewhere of the lack or inadequate periodical update of websites and proper disaggregation makes access to these kinds of data a huge challenge. Also highlighted was a challenge in terms of computation of indicators from already existing data. Thus, the adoption of the SDG meta data for proper national indicator definitions and computation mechanisms is essential.

In order for GBoS to be able to adequately perform their new roles, staff need to have their capacity built, especially to increase the stock of demographers within the institution as currently, there is no demographer in the Bureau. The lack of an English-speaking statistical training institution within the subregion has been a challenge for the Bureau. To save on cost, a statistical training institution can be built. GBoS can take advantage of UTG's experience in curriculum development to programs tailored to the Bureau's needs.

### ***Rule of Law***

As highlighted above, the security sector prisons especially have been and is still facing challenges to properly implement and carry out their responsibilities. This first calls for the revisiting of institutional responsibilities to eliminate any overlaps in the different arms. Sensitization of the security forces on the Security Sector Reforms (SSR) is of relevance due to their involvement in the implementation of laws and maintaining order in the country. Additionally, capacity building is of relevance given the delicate nature of the sector. Downsizing of the security force is also an avenue that the government needs to refocus on, this is expected to eliminate any surprises that

may arise as a result of the implementation of the SSR. To carry out this operation, it is recommended that an independent professional firm be hired to avoid any bias.

### **Agri-food System**

Regular, consistent and concise communication with clear messages on the food situation is critical to reduce panic, maintain confidence in the agriculture and food sector and feel secure about the availability of and access to food. People in rural and urban areas need information on market operations and good health practices when working and shopping. Joint statement could be issued by the Ministry of Agriculture, commerce and the private sector on the current levels and functioning of the national food supply system

Ministries must ensure that agrifood goods, services and workers are identified as essential and qualify for exemption. They can work with transport, security and health officials to develop appropriate identification measures (e-passes, stickers) and agree to agrifood system exemptions to certain movement measures (e.g. priority lanes, driving at night, access to retail markets and normally restricted residential areas for direct sales, indications of persons allowed on food trucks, free movement of transport workers).

Government will need to cater to traditional and modern marketing channels but also find measures to keep informal markets open and COVID-19 compliant. Although social protection measures will address the vulnerabilities of many low-income consumers, rapid emergency investments to keep domestic markets functioning can actually pay off, as they reduce the burden on social protection budgets.

Ministries and local governments could work with producers and food businesses to find solutions to agricultural marketing bottlenecks, matching supply and demand and facilitating enhanced collaboration between producer organizations and diverse buyers.



*Photo Credit: WHO – Support to the COVID-19 Response*

Although private sector and producer organizations are also innovating (e.g. use of apps to link food SMEs to producers), market actors may require support to aggregate agricultural production and connect buyers to sellers. Joint government-private sector-producer organization committees can help facilitate this process, considering measures to use electronic payments. These measures can help reduce post-harvest loss and waste in all supply chain functions. COVID-19 agrifood response committees can also help to identify actions to alleviate operational and liquidity constraints for agrifood businesses, traders and producer organizations, including tax relief or other financial support to ensure continuity in their operations.



## Chapter 3: The Long-Term (Preparing for the Next Pandemic)

### Recommendations for Dealing with the Next Pandemic

What does The Gambia need in order to be prepared to deal with another pandemic should one occur in the future? To answer this question, assumptions need to be made regarding how the pandemic would disrupt the economy and what needs to be still be operational. This section identifies the key infrastructure that needs to be in place to allow the country to operate as close to normal as possible. The steps that need to be taken in order to get the desired point will also be discussed. It is important to note that the recommendations put forward in this section cover the big picture, the foundation that everything else will be built on. For example, although irrigation will be vital in increasing agricultural efficiency, well-functioning utilities (water and electricity) that are affordable, reliable and available all over the country is a prerequisite.

To come up with recommendations, it is assumed that any pandemic that would occur would have similar effects and requirements to the current COVID-19 outbreak;

1. It would take at least 6 months for a therapeutic to be obtained and a year for a vaccine to be developed.
2. Mortality rates will be relatively low, yet the possibility of contagion fairly high.

As a result, a pandemic with the above attributes would require social distancing methods to be in place. An aggressive drive to implement both pharmaceutical and non-pharmaceutical methods to tackle the pandemic until a vaccine has been found. As the world is beginning to learn about the impact of such methods on the economy of countries and the toll these measures (particularly non-pharmaceutical measures) have on the population, the need to have infrastructure in place that would allow people to

live their lives as close to normal as possible and transactions to still take place between parties is now being appreciated.

It is recommended that moving forward, the country; government, the private sector, UN Agencies and other NGOs work towards helping The Gambia achieve improvements in the following:

1. Utilities
2. Bringing Everyone into the Formal Sector
3. Strengthening Social Protection
4. Increased Food and nutrition and Health-care Security

#### **Utilities**

Utilities which typically means electricity and water (but in this Report internet and mobile money are also included) have become a key component for sustainable development. These are critical needs that serve as essential foundations necessary to anchor other development projects. The Gambia has since in the 1970s suffered electricity and water problems. Despite some achievements; from a national access level to electricity of 59 percent in 2017 as opposed 60.3 percent in 2018 (VNR Report, 2020), the inadequate supply and access to water and electricity has become part of our daily living conditions

#### **Electricity**

Similarly, electricity is a hurdle in both rural and most parts of the urban area. Whilst it is relatively more accessible in the urban areas (76.4%<sup>23</sup>) as compared to rural areas (26.8%), there are locations with a less stable supply than others. Some urban areas still go for 2-3 days without electricity. In addition to the instability is also the high cost of installing and paying for electricity. In working to establish universal access to electrici-

<sup>23</sup> VNR Report, 2020





ty, renewables should be considered as part of the mix of sources of energy to be used.

### **Water**

Whilst water is accessible in most areas, the quality of water remains poor even in some part of the urban center. Reliable supply has become a major problem with some areas going for almost a whole day with just an hour to two of running water.

Since the declaration of the OMVG Hydroelectric project in 2016, not much has been significantly registered. A universal access to water and electricity coupled with consistent quality of service and affordable prices are essential. Water and electricity in particular are the foundations upon which the remaining recommendations are built. Without these, the full potentials of the rest of this section will not be realized.

### **Internet**

Internet in The Gambia is accessed from the Internet Service Providers (ISP), GSM Operators or other technology companies that provide city Wifi-services. The pandemic has extensively demonstrated the need for a stable and affordable internet service due to its use as a way of promoting social distancing whilst keeping up with work. However, this is stressful given the unstable and expensive internet coverage in The Gambia relative to other countries in the sub-region. Internally, the quality of internet coverage receive is not uniform, urban centers are more likely to have faster and more stable internet connection that peri-urban or rural areas.

Africell, which has the least data cost relative to other GSM providers, charges GMD259 for 1GB of data, whilst Orange Senegal charges approximately GMD211 for 2.5GB of data. This cost of data in The Gambia is more than 150 percent higher than in Senegal. Similarly, Gamtel provides the cheapest bandwidth for fiber internet with 10Mbps at GMD2500 (for home connection) whilst in Senegal, Orange offers 15Mbps for approximately GMD2,105. Both packages are offered with a 4G internet service.

Therefore, as recommended in the medium-term report, PURA being the utility regulatory body needs to come up with policies to ensure that all GSM providers operate at;

1. a minimum of 4G internet service
2. national coverage with a reliable network quality
3. affordable data costs

### **Expanding the payments Infrastructure**

The need for a vibrant ecosystem that promotes the use of mobile money in The Gambia arose as a concern during COVID-19 pandemic. As highlighted in chapter two, in The Gambia, mobile money operators are supervised by the Central Bank, with getting a license involving an initial deposit of GMD10 million approximately USD200,000 and an additional reserve of GMD5 million (USD100,000). Mobile money providers are also considered as depository institution like other microfinance institutions by the CBG. The high startup cost makes it difficult to small and medium sized startups to enter the market and provide much needed disruption.

Beyond mobile money, the Government, through the Central bank of The Gambia, should look at expanding the payments infrastructure beyond cash and mobile money. Debit cards and banking apps all innovative payment solutions that have not gained traction with the population. There is a need to promote these options particularly with the banked population and MSMEs. Doing to would ease transactions, whilst also bringing in more businesses into the formal sector.

### ***Bringing people into the system***

The COVID-19 pandemic has to a large extent demonstrated the lack of a comprehensive database for individuals and businesses. This means that a centralized system where data such as business name, sectors in which they belong, household name and members, household location, is missing for a large section of the population. In the event this data is available, it is scattered across different institutions.



For the informal sector, it has also been observed that data on informal service providers, as well as the kind of service they provide, and the location is extremely limited. Other administrative data were also found to be scattered in the different collecting institutions. This makes data access tedious and time consuming because it has to follow protocols; which has led to the delays in decision making.

It is recommended that the government of The Gambia works towards building a database of both people and businesses that is comprehensive. A good starting point will be to use existing data from all MDAs including Gambia Revenue Authority (GRA), Social Security and Housing Finance Corporation (SSHFC), Gambia Bureau of Statistics (GBoS), Ministry of Justice (MoJ) and the Social Protection Secretariat's Social Registry among others. These MDAs have data on the different sectors they relate to at individual, business and public services available. A few things should be noted during the process of building the central database. First, security of the data must be ensured in order to avoid infringing upon the rights of people. Second, bringing together all these data sources must be done in stages. The process of building the central database must be viewed as a continuous process, requiring continued updating of the data for it to remain relevant. The process of building such a system will be complex and the rules governing it must be in place to avoid its abuse.

### ***Strengthen Social Protection (SP)***

Over the past 5 years, there have been a plethora of social protection activities by different organizations. A few of the most well-known are the World Food Programs' Home-grown School Feeding, the World Bank's recently concluded Maternal and Child Nutrition Health Results Project & the upcoming Nafa Project, the European Union (EU) Social Protection Cash transfers implemented by NGOs in LRR, CRR and URR and UNICEF's BReST project. Each of these is a separate social protection program, mainly cash transfer, aimed at different segments of the population. Although covering a significant segment of the

population, COVID-19 has exposed the weaknesses inherent in the lack of coordination and the need to scale up interventions nationally.

It is our recommendation that social protection programs need a central authority that would facilitate coordination. Second, these activities should be scaled up and offer complementary initiatives to develop resilience and sustainability. The first has already begun with the establishment of the SP) under OVP. The establishment of the SPS is vital in ensuring that there is coordination in social protection, duplication of effort is eliminated and deserving households receive the support they need.

The establishment of SPS will facilitate the scaling up of social protection programs, allowing for organizations to join their efforts to reach a larger scale. This will facilitate the effective coordination of Social protection measures to take into account households residing in the designated protected areas (such as Kiang West National Park, Jokadu National Park and Tanbi Wetland Reserve) across the country. It will further complement government's efforts in Addressing climate change in partnership with relevant authorities as climate change is vital for the country's ecosystem and livelihoods of households in protected areas. Thus, the building of the SR under the SPS is a major reason for its importance and its ability to aid in the scaling up of social protection nationally.

SP will have to form an integral part government's strategy to alleviate poverty, using it as a mechanism to help households in need, through unconditional cash transfers and free public services and conditional cash transfers and benefits. The former to help households that are disadvantaged and the latter to influence positive behaviors. It should be pointed out that although SP will be vital, its success will depend on the foundation it sits upon; Bringing people into the system and having a robust system to aggregating administrative and survey data.

### ***Increase food and healthcare security timetable***

The current pandemic has made it clear that the country's dependency on importation of food and medical supplies is a major Achilles heel during a pandemic. If a country cannot secure its staple food or have access to medical supplies, then its chances of getting through a pandemic are very slim.

With the current uncertainties surrounding the duration of the pandemic, it is important for The Gambia to ensure its food security and the ability to combat the disease pharmaceutically. The government should promote local food production capacity, for domestic supply of food and as an employment generator. Thus, working towards creating stocks (build reserve warehouses) of the most essential food and medical supplies needed by the country.

Reserve warehouses should be in multiple locations distributed across the country. In addition, an efficient logistics system needs to be put in place for the management and easy distribution of the items in reserve should the need arises. Currently there is a pharmaceutical warehouse in Kotu (Central Medical Stores) which serves as the central warehouse for the country's medicines before onward distribution to the health regions. The reserve warehouse will be a separate entity, its purpose being to store critical food and medical supplies, with the purpose of being used in the event of a disaster, either regional or national.

These reserves should also be accompanied by a policy document clearly stipulating the methods of access and distribution and the conditions under which the reserves should be accessed. Most importantly, the document should clearly outline the government institutions will have the authority to either request or approve access to the Reserves. In addition to the reserves, systems need to be in place to account for the available stock at any point in time. The system should also be able to trace all request and approvals made to the respective individuals. This will facilitate account-

ability and transparency whilst making audit of the reserves more straightforward.



*Photo Credit: Provision of locally made PPE and fumigation materials by UNDP and the National Environmental Agency to prevent the spread of COVID-19 in KMC.*



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## Bibliography

- Finance & Economic Affairs, M. o. (2019). *The 2018 Annual Progress Report (APR) of The Gambia National Development Plan (2018-2021)*. Banjul: Ministry of Finance and Economic Affairs (MoFEA).
- Africa, U. N. (2020). *Economic impact of the COVID-19 in Africa*. Addis Ababa: IdeastoAction.
- Africa, U. N. (2020). *Potential Socio-Economic Impact Of Coronavirus In West Africa: Impediments to harnessing demographic dividend*. Addis Ababa.
- Briefing, R. B. (2020). *Understanding and Tackling the Socio Economic Dimensions of COVID 19 in Africa*. Regional Bureau for Africa Briefing .
- COVID-19, S.-e. I. (2020). *Socio-economic Impact of the COVID-19 on Zimbabwe A Preliminary Assessment by the UN TPA/IMF/WB*. Zimbabwe.
- Ethiopia, U. N. (2018). *Socio-Economic Impact Of COVID-19 In Ethiopia*. United Nations Ethiopia.
- Fund, I. M. (2020). *Regional economic outlook. Sub-Saharan Africa : COVID-19 : an unprecedented threat to development*. International Monetary Fund.
- Fund, I. M. (2020). *Request For Disbursement Under The Rapid Credit Facility And Modification Of Performance Criteria Under The Extended Credit Facility Arrangement*. International Monetary Fund.
- Kartik, A. A. (2020). *Tackling COVID-19 in Africa: An unfolding health and economic crisis that demands bold action*. McKinsey & Company.
- Kumba, M. M. (2020). *Focus On COVID-19 Responses*. Banjul.
- Management, D. o. (2020). *2019 Public Dept Bulletin*. Directorate of loans and dept management.
- Nations, U. (2020). *Policy Belief: The Impact of COVID-19 on children*. United Nations.
- Programme, U. N. (2020). *The Economic Impact Of COVID-19 And Gender Inequality*. UNDP.
- Statistics, T. G. (2020). *COVID-19 in The Gambia: A Rapid Assessment of the impact of COVID-19 on Tourism and Related Sectors*. Banjul: The Gambia Bureau of Statistics (GBoS).
- Sterner, A. (2020). *UNDP COVID-19 Response: UNDP's Gender offer for gender-equitable response and recovery* . UNDP.
- UNDP. (2015). *The Gambia Common Country Assessment September, 2015*. UNDP.
- UNDP. (2020). *COVID-19 Socioeconomic Impacts and Recovery Efforts in The Gambia*. UNDP.
- UNDP. (2020). *COVID-19 UNDP's Integrated Response*. UNDP.
- UNDP. (2020). *The Tourism Sector In The Context Of COVID-19 Outbreak In The Gambia*. Banjul: UNDP.
- UNDP. (2020). *UNDP COVID-19 Response*. UNDP.
- WHO, U. T. (2020). *The Gambia COVID-19 Rapid Assessment Report*. World Health Organization and United Nations The Gambia.



## ANNEX 1

Table 3: Proportion of households receiving Remittances by LGA

LGA	Received Transfer (Percent)	Amount GMD	HHH Female, (Percent)	HHH Female Transfer, (Percent)
Banjul	30	12,681.95	22	12
Kanifing	35	17,959.97	22	14
Brikama	29	13,416.76	17	8
Mansakonko	45	8,333.79	24	16
Kerewan	37	7,454.67	16	10
Kuntaur	28	4,547.06	7	4
Janjangbureh	33	5,290.75	9	5
Basse	54	16,180.82	9	6



Table 4: The Gambia: Balance of Payments, 2018-22 (Millions of U.S. dollars)

	2018	2019	2020		2021		2022
	Act.	Prel.	EBS/20/13	Proj.	EBS/20/13	Proj.	Proj.
<b>1. Current account</b>							
<b>A. Goods and services</b>	-307.2	-335.3	-399.4	-384.4	-426	-409.5	-425.8
<b>Goods (net)</b>	-405	-451.8	-524.4	-467.2	-568.8	-552.1	-586.3
<b>Exports, f.o.b</b>	115	143.3	152.6	127.1	164.7	164	177.5
<b>Imports, f.o.b</b>	-520	-595.1	-677	-594.2	-733.5	-716	-763.7
<b>Services (net)</b>	97.8	116.4	125	82.8	142.8	142.5	160.5
<b>Services exports</b>	198.6	226.7	251.6	193.3	271.8	270.3	293.2
<b>of which: Travel Income</b>	153.8	181.3	203.4	146.8	219.6	219.7	238.5
<b>Services imports</b>	-100.8	-110.2	-126.5	-110.6	-129	-127.8	-132.8
<b>B. Income(net)</b>	-29.1	-30	-31	-30.7	-32	-31.7	-31.9
<b>Income credits</b>	2.3	2.3	2.4	2.4	2.5	2.5	2.5
<b>Income debits</b>	-31.4	-32.4	-33.4	-33.1	-34.5	-34.1	-34.4
<b>C. Current transfers</b>	178.1	270.8	262.5	234.1	251.7	236.6	247.8
<b>Official transfers</b>	15	55.8	62.1	72	52.4	52.3	49.6
<b>Of which: Covid-19 assistance</b>				10			
<b>Remittances</b>	150.8	202.7	188.1	149.8	186.7	171.8	185.3
<b>Other transfers</b>	12.3	12.3	12.3	12.3	12.6	12.6	12.9
<b>Current account (excl. official transfer)</b>	-173.3	-150.4	-230.1	-253.1	-258.7	-256.8	-259.5
<b>Current account (incl. official transfer)</b>	-158.3	-94.6	-167.9	-181.1	-206.3	-204.6	-209.9

Source: IMF, The Gambia Staff Report RCF and QPC Modification Under the ECF Arrangement, April 2020



Table 5: Gambia's top 5 Trading Partners by Imports 2015 - 2019 (CIF Value GMD '000)

PARTNER	2015	2016	2017	2018	2019
<b>Cote d'Ivoire</b>	2,968,776	2,732,396	7,264,989	13,435,666	10,547,725
<b>Brazil</b>	1,583,353	1,873,892	1,604,168	2,444,937	2,703,962
<b>Senegal</b>	2,550,061	540,693	4,680,643	774,044	670,789
<b>China</b>	1,149,531	1,148,083	2,135,948	2,013,703	2,758,805
<b>India</b>	484,558	561,820	808,567	1,482,674	3,091,931

Source: Gambia Bureau of Statistics

Table 6: Gambia's top 5 Trading Partners by Export 2015 - 2019 (CIF Value GMD '000)

PARTNER	2015	2016	2017	2018	2019
<b>Viet Nam</b>	150,156	472,097	391,234	26,412	67,809
<b>China</b>	99,556	78,351	52,516	0	183,339
<b>India</b>	103,017	94,913	52,419	33,080	92,028
<b>United Kingdom</b>	136,312	3,954	3,611	7,096	6,595
<b>France</b>	162,921	1,185	1,647	1,540	3,423

Source: Gambia Bureau of Statistics





Table 7: Proportion and number of Households Food Poor and Proportion of Household Expenditure used on Food per capita

LGA	Households Food Poor (Percent)	No. Food Poor Households (Percent)	Spent on Food per Capita (Percent)
Banjul	15	1,429	52
Kanifing	27	23,294	49
Brikama	50	60,047	62
Mansakonko	49	8,116	67
Kerewan	46	15,259	68
Kuntaur	49	6,443	77
Janjangbureh	51	8,775	72
Basse	44	17,641	71



Table 8: OLS Results: Factors Correlated to Woman Believing husband justified in GBV

VARIABLES	GBV Belief
Education Level of household head	-0.023** (0.011)
Education Level of Woman	-0.076*** (0.009)
Rural	0.259*** (0.053)
Wealth Score (natural log)	-0.040* (0.020)
Constant	0.468*** (0.023)
Observations	5,945
R-squared	0.070
<b>Robust standard errors in parentheses</b> *** p<0.01, ** p<0.05, * p<0.1	

Note: IHS 2015/16 used to estimate the correlation between GBV and woman's characteristics.



## ANNEX 2

### Measures to Combat COVID-19

#### **Government of The Gambia**

Since the first confirmed case of COVID-19, the government of The Gambia has made a series of declarations which are all geared towards combating the rapid spread of the virus. These proclamations range from those encouraging social distancing to controlling the price of essential food items to avoid commodity hoarding.

- The Government of The Gambia through the Ministry of Health and the National Health Emergency Committee (NHEC) has developed *The Gambia COVID-19 Plan* which outlines the preparedness and the effective response plan aligned to national disaster plans.
- The first declaration was proclaimed on March 17<sup>th</sup>, 2020 in relation to the closure of all schools and universities including madrassas, this also includes all non-formal education for 21 days. In view of this, the Ministry of Basic and Secondary Education (MoBSE) has provided alternative learning opportunities using TV and Radio platforms. The University of The Gambia through its line Ministry (MoHERST) have also collaborated with GSM operators to promote e-learning platforms that promotes a vibrant learning environment given its complicated nature.
- An immediate decision in the 4<sup>th</sup> Cabinet Sitting (19<sup>th</sup> March, 2020) following recommendation of the NHEC studying COVID-19, the President suspends flights from thirteen countries and a mandatory 14-day quarantine for all individuals travelling from 47 countries in Asia, Europe and France. The President further approved a sum of GMD500 million to the Emergency Fund Response to COVID-19 of the Health Ministry.
- In its effort to avoid price increment for major essential commodities such as rice, oil, onions etc., the public was informed through a joint press release by the Trade and Justice ministries (23<sup>rd</sup> March, 2020) of the President's declaration to maintain prices at open market as at 18<sup>th</sup> March 2020. The statement went further to prohibit hoarding of these commodities and exportation of these commodities and petroleum related products.
- The President declared a SoPE on March 27<sup>th</sup>, 2020. The government also tabled for the extension of the bill for 90 days on 2<sup>nd</sup> April, 2020 it was approved by the national assembly for a period of 45 days effective April 3<sup>rd</sup>, 2020. During this period, overseas travels are suspended for all Ministries Departments and Agencies (MDAs), all public gatherings are suspended, The Gambia-Senegal border would remain closed, vehicle owners (both private and commercial) are expected to carry half of the capacity lawfully allowed, non-essential workers are urged to work from home etc. The Emergency Power regulation was also amended on 16<sup>th</sup> April, 2020 allowing markets to operate 12 hours daily (6AM – 6PM), the first 6-hours for food vendors and the other half for non-food vendors. The SoPE is further extended for 21 days with lesser restrictions such as the reopening of places of worship on 10<sup>th</sup> June, 2020.
- The Government launched a Food Relief Package on 26<sup>th</sup> April, 2020 to assist 84 percent of households in The Gambia. The package comes in the form of 50kg of rice, 50kg sugar and 20-litres of oil.
- The Government of The Gambia through a press release 30<sup>th</sup> April, 2020 announced its biggest ever reduction in retail fuel prices. In the same release, in collaboration from MoFEA and MoHERST on a GMD29.1 million student relief package for both government and non-government funded students abroad.



### ***Activities by the Private Sector***

The Gambia Chamber of Commerce and Industry (GCCCI) has setup a live telethon *Businesses Against COVID-19* subsequently extended to *GCCCI COVID-19 Fundraiser* as a platform where businesses, philanthropists and individuals both home and in the diaspora can donate and make pledges and join the fight against COVID-19. All funds gathered will be used to help government of The Gambia.

At community levels, individuals are setting up fundraisers to help provide basic food item to the less privilege and highly vulnerable families in their communities and beyond. Most prominent of these is *The Gambia National Fundraiser*. It must be pointed that this act is common in the urban areas, however, the most vulnerable communities are found in the rural areas where the poverty level and dependency ratio is higher.

The current restrictions have affected the Supply Chain system for the import of Specialized Nutritious Foods used in the food supplementation program. However, WFP supported local production of fortified blended cereals may provide a local solution.

### ***International Organizations***

- The IMF on April 15<sup>th</sup>, 2020 approved the disbursement of USD21.3 million as COVID-19 emergency support under the Rapid Credit Facility. On April 13<sup>th</sup>, 2020 the IMF also approved the cancellation of the six-month, starting April 14<sup>th</sup>, 2020, debt service due the IMF for about USD2.9 million. This support come few weeks after the approval by the IMF Executive Board a program supported by the Extended Credit Facility in the amount of USD47.1 million (56.3 percent of Gambia's quota) of which USD6.7M has been disbursed.
- The World Bank (WB) on 2<sup>nd</sup> April approved a USD10 million grant from the International Development Association for the emergency COVID-19 response of The Gambia. The funds are geared towards case detection, tracing and reporting as well as provision of diagnostic capacity equipment to fight the pandemic.
- The first brief on the socioeconomic situation of COVID-19 by UNDP (27<sup>th</sup> March 2020) highlights the support provided by the UN system in major response areas especially in coordination, case management, logistics and safety, epidemiological and laboratory surveillance, risk communication and social mobilization and psychosocial care and support. It went on further to emphasize the continued collaboration of the UN with the government in their efforts to safeguard livelihoods and progressive sustainable development.
- UNDP in collaboration with the Government of The Gambia signed a partnership on 8<sup>th</sup> March 2020 to close the inequality gap in rural communities. Both parties signed the implementation of the Program for Accelerated Community Development (PACD). The Government with its partners initially contributed USD5 million which the PACD will use to provide needs such as water, electricity, boost food security etc. in five of the seven regions (Banjul and Kanifing excluded).
- WFP with the MoH and NaNA continues to provide therapeutic supplementary feeding to Moderately malnourished children 6-59 months and Pregnant and Lactating Women (PLWs) in LRR, NBR, CRR and URR. About 1,550 children and 1907 women are currently benefiting from these programs monthly.
- 312 schools with 150,742 pupils will receive take home family rations in the WFP supported school feeding program.
- GT Board with funding from UNDP of USD70 to informal workers in the tourism and related sectors registered with GT Board



## ANNEX 3

### UN Framework for the immediate socio-economic response to COVID-19

The emergence of COVID-19 has led to questions about whether the role of the UN and its Agencies should change in the light of the challenges faced by countries. COVID-19 has made the UN system more vital than ever before, to serve as the institution that brings its members together, guiding the discussion on topics as diverse as human rights, financial inclusion & women's rights and leading the fight to protect the rights of the most vulnerable in society.

The overall role of the UN System in The Gambia is not expected to be change drastically, but there is a need to increase focus in some areas. The April 2020 Report by the UN (A Framework for the Immediate Socio-economic Response to COVID-19) should be a guiding principle for the UN agencies in the country, helping The Gambia to “build back better”. The new focus on the UN system in The Gambia can be grouped into 4 pillars.

#### ***Pillar 1: Protecting Health Service and Systems During the Crises***

The health sector is an essential intervention area whose activities need to be properly coordinated to enhance sustainable recovery and preparedness of future pandemics. It has been observed that there is a high priority and a shift of funds towards COVID-19 at the expense of other illness. This has posed a threat of a high spread and resulting deaths from these illness as compared to COVID-19. Implying that there is an anticipated increase in the demand for health services once the economy starts to reopen and in the aftermath of the COVID-19. This is an early warning signal to empower and strength the fragile health system to avoid a system collapse.

Therefore, it is recommended that UN agencies assist government in maintaining health service providers to perform life-saving services especially to those with chronic illness. UN agencies such as UNAIDS targeting those with HIV and others that target a particular group of individuals with illness or other health related issues should come together to offer their advice to government in making sure that their aim of mitigating the risk of other illness and the health in general on effective operational procedures once the economy starts to reopen is not defeated. In the process of supporting and maintaining major health service, UN agencies, given their experience in other countries should also advocate for the installation of systems that provide health data and other essential data such as medication and supplies to enhance the quality of health service delivery.

To foster preparedness for sustained recovery and for future pandemics, the UN and its agencies should also consider expanding their strategies to incorporate operational technical advice to government. Thus, it is important that UN deepens its collaboration with the government to engage in joint programming which places capacity building at the center of the implementation process. These programs have to start with outlining effective and efficient procedures for procurement, decentralized storage facilities, management and distribution of core health supplies; both curative and preventive. Distribution should be followed by systems used to track that the vulnerable population; children, pregnant women, youths, persons with chronic illnesses and disabilities, migrants and returnees are not left behind.

The UN using their expertise and lessons learnt in countries who have implemented UHC should empower the government in the implementation of UHC and proper service delivery of primary health care



needs given their importance in maintaining and easing access to health care services at proximate locations whilst strengthening the health system for recovery.

It is also suggested that the UN expands its outreach programs especially those pertaining to inclusive health response for those marginalized and vulnerable groups especially persons with disabilities. During these activities, stakeholders such as humanitarian groups like red cross should be a key participant in promoting these activities. This should be accompanied by training of community members on first aid services and other primary health care services.

### ***Pillar 2: Protecting People: Social Protection and Basic Services***

The need to scale up social protection packages has stood out during this pandemic. The UN system in The Gambia, as one of the largest actors on social protection services is a key player in this expansion process. UN agencies are well known for their expertise in conducting large scale transfers (the BRST (UNICEF) and the Home-grown School Feeding Program (WFP) stand out as examples). This expertise should be used to also support government to build and maintain centralized systems for social support as well as local economy (HGSF). Expertise can also be used to provide further support and capacity building in developing national budgets that are driven by pro-poor social protection programs.

Education is an essential part of social protection packages, the UN agencies given their broad expertise in education should extend a hand to offer their support to promote digital learning. Potential training support should also be offered to teachers on how to effectively host online classes with less supervision. This will make it easier to adapt to digital learning in any future pandemic.

In Chapter 1 it is noted that there could be an increase in violence (particularly GBV). The inadequate supply of social workers and community shelters has made it rather difficult to access frontline response and counselling for vulnerable individuals. The UN, through its agencies such as UNFPA, has to increase the focus of their programs geared towards the support and preventing of violence against women and their reproductive health and rights to continuously provide support to these individuals and break the chains to end GBV. The UN with stakeholders such as government, traditional leaders and youth group e.g. Think Young Women (TYW) and national authorities need to work together through community outreach campaigns to provide essential services for these groups. The extension of the Joint UN Package on Essential Service to end GBV will be a driving force to meet the demands at community levels. It is also recommended for the UN to provide support to construct community shelters and contribute towards the investment of improved systems to report cases in a timely fashion.

COVID 19 can further increase food insecurity in the country, as stricter measures implemented across the world to curtail the spread of the virus globally are having noticeable impact in the food supply chain. Adding to the already reported declining yield trends of cereal crop yields over the past 10 years, especially rice, the staple food of Gambian population. National food requirement estimates for 2020 (398,364 Mt rice and 128,362 Mt coarse grains) shows a deficit of about 375,658 Mt and 65,129 Mt for rice and of coarse grains respectively. Therefore, March 2020 Carde Harmonize (CH) analysis, before the COVID-19 outbreak in the country, number of people in crisis or worse (IPC/Phase 3 and above) was estimated at 81 976 persons and 401 967 were classified in stressed (IPC/Phase 2) conditions, at risk of slipping into crisis or worse, if confronted with additional shocks or stressors, like COVID-19. It further estimated that 136 586 people will face food and nutrition crisis or worse, and 555 988 will be in stress if nothing is done by June and August 2020. Therefore FAO humanitarian support with provision of agriculture inputs to support most vulnerable families affected by poor farming season will be key to contribute reduce food insecurity.



Ensure continuity and quality of water and sanitation (WASH) is critical element of basic services. Inter-Ministerial coordination mechanism for WASH was established in The Gambia, and UN agencies should continue to support it and accelerate joint efforts for quality improved WASH services for the population, especially the most vulnerable at schools, health facilities, and communities in coupled with behavior change communication by mainstreaming gender-sensitive WASH needs.

***Pillar 3: Economic Response and Recovery: Protecting Jobs, MSMEs and Vulnerable Workers/ Pillar 4: Macroeconomic Response & Multilateral Collaboration***

COVID-19 has caused havoc across the country, putting the jobs of large swaths of the population at risk, especially those in the informal sector. Fortunately, the severity of the pandemic has not reached the levels forecasted by the WHO. Unfortunately, the steps taken to halt the spread of the disease has had an effect on the economy. Government and its partners should prepare a comprehensive stimulus package to tackle the threat of job loss and prepare the economy for recovery. For an essential recovery to take place, it is important to create productive jobs during the recovery.

In the medium to long term (after this crisis has ended), UN Agencies can work towards partnering with government to create policies aim towards increased job protection. This can take the form of providing the groundwork that promotes teleworking and policies that guide both businesses and individuals to minimize layoffs. Whilst households can be protected through the social protection, scaling up in the employment Intensive Investment Response and gender stimulus packages are also strategies that the UN can consider expanding to promote better work programs and inclusive growth policies.

Agriculture being one of the major contributing to GDP in the Gambia should continue to be given special focus to increase food availability, access, utilization and stability of food production over time. As such the continue role of FAO in supporting Government address the key global food challenges facing the world including Gambia : 1. Widespread malnutrition in the form of hunger, obesity and micronutrient deficiency, 2. Growing Food demand due to population growth and shifting diets, 3. Unwanted environmental impact of agriculture production and 4. Important food loss and food waste along the value chain. But also FAO's role in supporting he Gambia Government vision moving towards a modernized and market oriented agriculture sector is critical.

The UN using its international linkages should coordinate with local and international partners including government, youth and women organizations to provide platforms where youth, women and the civil society organizations are given a chance to sit on decision making tables. These strategies will promote youth and women employment and provide market linkages for private businesses. The strategies can be strategized to include gender responsive aid programs especially those focused in the agriculture, tourism and related sectors which are mostly vulnerable. In terms of skills, there is already a felt disconnect between skills training institutions provide and skills required in the labor market. Thus, long term plans to address socio-economic development will need to address this gap and ensure the workforce is ready for the disruption that is certain to come.

***Pillar 5: Social Cohesion and Community Resilience***

Sustainable recovery policies cannot be properly implemented when communities are left out. To flatten the curve and ensure long-term recovery, promotion of social dialogue and political engagement grounded on fundamental human rights such as the right to associate, freedom of speech and press, gender equality and women inclusion, marginalization of migrants and returnees who are often the sub-



ject of stigma and discrimination amongst others must be placed in the fore front. The UN through its agencies acting on their development agenda should provide support to government in developing policies that are in accordance with the rule of law.

These laws should prioritize peaceful political transition especially for countries like The Gambia which are faced with weak health and security systems because of the inadequate supply of capacity in community led solutions. Thus, the UN has to work with government to strengthen institutional capacity to implement and foster an inclusive social cohesion led by community resilience in a just and peaceful society to meet the SDGs.

In achieving the above, the UN agencies have to deploy their team of experts to the different stakeholders and governments authorities to actively participate in the development of community led systems that encourage mutual intergenerational support especially for women who bear the burden at household levels. The UN should also support equitable service delivery by providing experts in community development including geospatial data collection to reflect the risk at communities. Technical advice on human right systems through offering expert advice and support to the judiciary and security services and equitable access to government finance and risk reduction is key to achieving a community led solutions.





## ANNEX 4

### Methodology of the Study

The Study on the Socioeconomic Effects of COVID-19 on The Gambia: Short, Medium and Long-Term, began on 1<sup>st</sup> April 2020. The aim of the study was to focus on the wider socioeconomic impact of COVID-19 on the country, looking at a number broad range of sectors and groups, particularly vulnerable groups pre COVID-19. Due to the rapidly changing environment and evolving response by government and development partners, it was decided that the Report would come out in phases, with each chapter coming out every other week. This method, it was agreed would provide stakeholders with up to date information as the situation was evolving.

With the study covering a broad range of sectors and groups, discussions with stakeholders across government, public enterprises, UN Agencies, private sector and non-governmental organizations were conducted over a 2-month period (See Table 9). Institutions across the spectrum of stakeholders were contacted, with those responding being interviewed and data and reports collected from stakeholders when available. The first draft of the short-term effects (what is now chapter 1) came out 10<sup>th</sup> April. The second draft of the short-term effects which incorporated the comments from stakeholders came out 23<sup>rd</sup> April 2020. The first draft of the medium-term effects (what is now the second chapter) came out 23<sup>rd</sup> April as well. Over the next 4 weeks, the first two chapters were widely disseminated, and comments received and incorporated into later drafts. The long terms effects came out during the last week of May, compiling the short and medium-term effects (the latest version at that time) as well. This version shared during the last week of May was termed the pre-validation version and shared with stakeholders prior to Validation. The current version of this study is the post validation version, taking in comments from the validation and meetings with stakeholders after the validation.

The aim of this study has been to be to consult with as wide a group of stakeholders and experts as possible, given the widespread impact of COVID-19 on the country. The novelty of the diseases has made it difficult to predict what the effects would be in the medium to long-term. As a result, we have attempted to reach as many experts (in their particular area) as possible to arrive at a “consensus from experts”. We wish to thank all those who took part in the study. Their contributions have immensely affected the quality of the work done.

*Table 9: List of Institutions contact, met and those received comments from during the Study Period*

#	Institution	Con- tacted by Con- sul- tant	Met	Date Met	How	Com- ment on Drafts Sent
1	International Monetary Fund	Yes	Yes	3-Apr	Zoom Meeting	Yes
2	National Nutrition Agency	Yes	Yes	6-Apr	Zoom Meeting	No



3	UNFPA	Yes	Yes	8-Apr	Zoom Meeting	No
4	UNICEF	Yes	Yes	9-Apr	Zoom Meeting	Yes
5	OHCHR	Yes	Yes	10-Apr	Zoom Meeting	No
6	Gambia Women's Chamber of Commerce	Yes	Yes	17-Apr	Zoom Meeting	No
7	Ministry of Trade, Industry, Regional Integration and Employment	Yes	Yes	20-Apr	Zoom Meeting	No
8	Ministry of Women, children and Social Welfare	Yes	Yes	20-Apr	Zoom Meeting	No
9	Ministry of basic and Secondary Education	Yes	Yes	20-Apr	Zoom Meeting	No
10	Central Bank of The Gambia	Yes	Yes	Multiple discussions and data shared	Face-to-face	No
11	Ministry of Finance and Economic Affairs	Yes	Yes	7-May	Zoom Meeting	Yes
12	Internal Trade Commission	Yes	Yes	Multiple discussions and data shared	Zoom Meeting	Yes
13	UNCDF	Yes	Yes	14-May	Zoom Meeting	No
14	Social Development Fund	Yes	Yes	15-May	Face-to-face	No
15	REBABAN: Driss Bensouda	Yes	Yes	15-May	Face-to-face	No
16	Gambia Chamber of Commerce and Industry	Yes	Yes	18-May	Zoom Meeting	No
17	National Association of Cooperative Credit Unions of The Gambia	Yes	Yes	20-May	Face-to-face	No
18	UNDP	Yes	Yes	Multiple discussions and data shared	Zoom and Email	Yes



1 9	UNOPS	Yes	Yes	8-Apr	Zoom Meeting	No
2 0	Gambia Bureau of Statistics	Yes	Yes	Multiple discussions and data shared	Email	Yes
2 1	WFP	Yes	No	N/A	N/A	Yes
2 2	Gambia Tourism Board	Yes	No	N/A	N/A	No
2 3	Gambia Revenue Authority	Yes	No	N/A	N/A	No
2 4	World Bank	Yes	No	N/A	N/A	Yes
2 5	FAO	Yes	No	N/A	N/A	Yes
2 6	Ministry of Interior	No	No	N/A	N/A	Yes
2 7	Ministry of Transport, Works and Infrastructure	No	No	N/A	N/A	Yes
2 8	IOM	Yes	No	N/A	N/A	No
2 9	UNAIDS	Yes	No	N/A	N/A	No
3 0	Office of the President: DPSD	Yes	No	N/A	N/A	Yes
3 1	Ministry of Health	Yes	No	N/A	N/A	No
3 2	Ministry of Agriculture	Yes	No	N/A	N/A	No
3 3	National Disaster Management Agency	Yes	No	N/A	N/A	No
3 4	Resident Coordinator Office	Yes	Yes	9-Jun	Face-to-face	Yes
3 5	ACDHRS/helpage (Sola Mahoney)	Yes	Yes	17-Jun	Zoom Meeting	Yes
3 6	Environment Group**	Yes	Yes	18-Jun	Face-to-face	Yes



37	Gambia Association of Local Government Authorities ***	Yes	Yes	16-Jun	Zoom Meeting	Yes
38	Accelerator Lab (UNDP)	Yes	Yes	17-Jun	Zoom Meeting	No
39	West African Network for Peacebuilding	Yes	Yes	19-Jun	Zoom Meeting	No

\* Met the person as an individual and not a representative of the institution

\*\* Composed of the Ministry of Environment, Climate Change, Natural Resources and Department of Parks and Wildlife, Department of Forestry and National Environment Agency

\*\*\* Met with Chairman of GALGA and Director Local Governance & Decentralization