COVID-19 & VACCINATION UPDATE

- The large majority of households in The Gambia are fully aware of the persistence of the virus and its dangerousness. More than eight out of 10 households are highly concerned about the virus and 79% are somewhat concerned. Less than 2% of households say they are not at all concerned by the virus and less than 5% doubt its dangerousness. Adherence to measures which limit the spread of the virus are reduced—while 93% of households reported continuing to wear a mask and 74% report washing their hands regularly, only 29% report avoiding crowds. Additionally, despite the high level of awareness of the virus among the population, the rate of awareness on the presence of variants (including the Delta variant) is lower (70%).

- Regarding vaccination, 10% of the eligible population (18 years and older) reported to have received a single dose of vaccine and only 5% received both doses. The bulk of the adult population (83%) remain unvaccinated. Vaccination rates are lower among the better-off households, in urban areas other than Banjul and Kanifing, and among the younger population. Despite the low vaccination rate, nearly two-thirds of households plan to be vaccinated. However, 22% are opposed to vaccination, and 10% are still hesitant. Among those who are reluctant to be vaccinated, although the reasons vary widely, lack of confidence in the COVID-19 vaccine is the main reason cited (33%).

- The results also show the strong influence of information related to COVID-19 on the population’s decision to be vaccinated. Although the majority of households (90%) get their information from the media (television, radio, newspapers), only 54% of households think that these media are reliable sources. Information from official government sources and health institutions is also trusted by only 21%. The limited confidence in the system for tracking adverse reactions or side effects to vaccinations also reflects the high level of distrust among the population. Only 9% have real confidence in the system and 30% have moderate confidence. Thus, 44% of households find it difficult to determine whether the COVID-19 vaccine-related information they receive is true, fake, or just rumors. In addition, 45% of households say that COVID-19 vaccine-related information affects their decision to take or not take the COVID-19 vaccine.

EMPLOYMENT

- Job losses (defined as individuals who were working before the beginning of the pandemic in March 2020, but subsequently stopped working), which increased to 21% in June 2021 (from 17% in December 2020) declined by more than 10 percentage points to 10% in August 2021.

- The significant decline in job losses is linked to the recovery of seasonal agricultural activity favoring the poorest and rural households who registered the largest decline in job loss. Between June and August 2021, job losses for the poorest and rural households declined from 32% to 8%; and from 26% to 8% respectively; while richer and urban households registered much smaller declines. The role of seasonality in labor market improvements is also evident in the reasons for job losses - the share of households who cited seasonality as a reason for job loss declined from 51% in June 2021 to 12% in August 2021, and the share of people working in the agricultural sector doubled during the same period from 23% in June 2021 to 47% in August 2021.

**Graph 1**: Individuals vaccination status as of August 2021 (%)

**Graph 2**: Confidence in the system for tracking adverse reactions or side effects to vaccinations in The Gambia (%)

**Graph 3**: People working before March 2020 but not working in June and August 2021 (%)

*Information about vaccination was asked about all eligible household members (18 years and over)
In almost all households (99%) with school-age children, all children (irrespective of gender) returned to school in the previous academic year. Of those who did not return, more than half planned to enroll as soon as possible. During previous school term, the protection of children from infection with the virus has been fairly well handled by households and school authorities. More than 89% of households report having provided children with protective masks for outdoor travel, and 57% report having advised children to maintain a physical distance as much as possible. However, 12% of households have not taken any measures to prevent their children from being infected. As for the schools, according to the households, they have concentrated their efforts in the implementation of hygiene measures, notably hand washing (82%), in the reduction of class sizes to reduce the risks of contamination (62%) and, to a lesser extent, in the implementation of awareness campaigns for the students on the increase of cases of COVID-19 infection (43%).

During the COVID-19 pandemic, more than eight out of ten households (84%) declare they have not received any assistance for children. Of the households who received some form of assistance, most of it came from family, relatives or friends. Only 56% and 3% of households respectively received financial and food assistance from non-governmental organizations or other institutions. The result is a rather mixed opinion among households about the gaps in the policy response to mitigate the negative impact of COVID-19 on children. Nearly half (47%) of households note, for example, in making up for loss contact hours in schools ensuring that children cover their syllabus. In addition, households cited low awareness about COVID-19 among children (44%), inadequate social assistance for children, financial support, food aid (40%), inadequate implementation of alternative learning methods (radio and/or TV classes) (33%), or inadequate provision of masks and sanitizers in schools (30%).

In the absence of support during the pandemic, the majority of households feel that, given the impact of the crisis on children, they would need the provision of masks and disinfectants (50%), financial assistance (47%), and educational support to make up for lost time in contact with children (45%).

### REMITTANCES AND SOCIAL ASSISTANCE

Since the beginning of the COVID-19 crisis in March 2020, nearly nine out of ten households say they are financially affected, of which 64% are very severely affected. Households belonging to the poorest 20% of the wealth distribution are even more affected, with up to 70% of them feeling very severely affected. The disparities are less pronounced across space.

In August 2021, over 60% of remittance receiving households reported a decline in remittances received during the pandemic. Between February and August 2021 the share of households who reported an improvement increased from 2.9% to 4.1%, and the share who reported a decline increased from 54.3% to 63.1%. While transfers through formal channels remain high- Western Union (47%), use of informal channels such as through friends and family increased by almost 15 percentage points.

Social assistance continues to be provided mainly by government and dominated by food distribution- with a slight increase in recipients of cash transfer in August compared to February 2021. About 67% of households received some type of assistance (financial, food, or other) in August. Social assistance is directed more towards the poorest and households in rural areas as indicated by a higher share of households receiving both food and cash transfers. 75% of recipients also consider food aid to be the most useful type of assistance.

### Social Assistance received by households in (%)

The bottom 20% or poorest households, and top 20% or richest households, are identified based on an asset index type of wealth distribution.

For further details, visit [https://www.gbddata.org](https://www.gbddata.org)

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Graph 4: Steps taken by Households during the previous term to protect children (%)

Graph 5: Steps taken by Schools during the previous term to protect students amid the recent spikes in COVID-19 cases (%)