

Maternal and  
Newborn Health  
Disparities

# The Gambia



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# Maternal and Newborn Health Disparities in The Gambia

## Key Facts

### The Gambia reference table

Demographic indicators	Year	Value
Total population (thousands) <sup>1</sup>	2017	2,101
Total live births (thousands) <sup>1</sup>	2017	82
Total Fertility Rate (number of children per woman) <sup>1</sup>	2017	5
Adolescent birth rate (per 1,000 women 15-19) <sup>10</sup>	2011	88
Impact indicators		
Maternal mortality ratio (per 100,000 live births) <sup>4</sup>	2015	706
Average annual rate of MMR reduction between 2000 and 2015 (%) <sup>5,a</sup>	2015	2
Lifetime risk of maternal death: 1 in x <sup>4,b</sup>	2015	24
Stillbirth rate (per 1,000 total births) <sup>6</sup>	2015	24
Preterm birth rate (per 100 live births) <sup>7</sup>	2015	14
Under-five mortality rate (per 1,000 live births) <sup>3</sup>	2016	65
Under-five deaths that are newborn (%) <sup>3</sup>	2016	43
Neonatal mortality rate (per 1,000 live births) <sup>3</sup>	2016	28
Neonatal deaths (thousands) <sup>3</sup>	2016	2
Service Delivery		
Availability of EmONC Services (% of minimum acceptable level) <sup>8</sup>	2012	50
Skilled health professional density (per 10 000 population) <sup>9</sup>	2008	10
Physician density (per 1,000 population) <sup>9</sup>	2008	0.1
Nurse and midwife density (per 1,000 population) <sup>9</sup>	2008	0.9

# Maternal and Newborn Health Disparities in The Gambia

In 2017, approximately 82,000 babies were born in The Gambia, or around 200 every day.<sup>1</sup>

Among young women (aged 20-24), 19 percent gave birth by age 18.<sup>2</sup>

Approximately 6 babies will die each day before reaching their first month<sup>3</sup>; 6 stillbirths occur every day.<sup>6</sup>

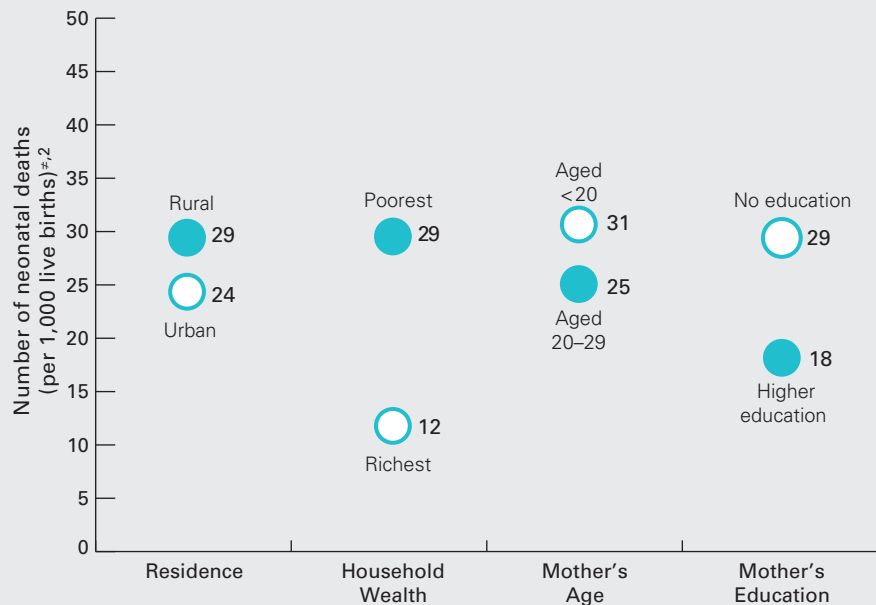
## Neonatal mortality rate:

The Gambia's neonatal mortality rate (NMR)<sup>4</sup> is 28 deaths per 1,000 live births.<sup>3</sup>

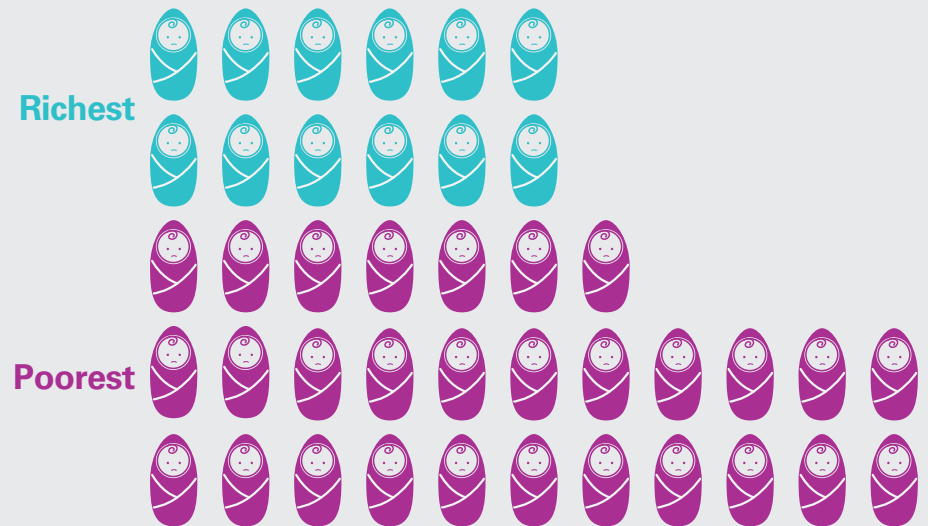
NMR<sup>5</sup> in rural areas is 29 deaths per 1,000 live births and 24 deaths per 1,000 live births in urban areas for an urban-to-rural ratio of 0.8.<sup>2</sup>

NMR<sup>5</sup> among the poorest households is 29 neonatal deaths per 1,000 live births, compared to 12 deaths per 1,000 live births among the richest households.<sup>2</sup>

## Neonatal mortality rates, by background characteristics, 2013



## Neonatal mortality rate by wealth quintiles



The NMR for those in the **poorest quintile** (29 per 1,000 live births) is 2.4 times higher than for the **richest quintile** (12 per 1,000 live births).<sup>2</sup>

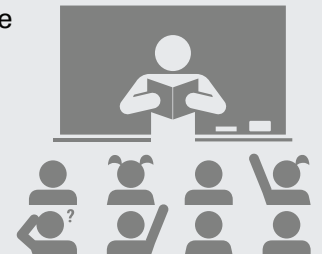
**1 in 5**  
young women  
(aged 20-24) have  
given birth by age 18.<sup>2</sup>



Newborns with less educated mothers are

**1.6x**

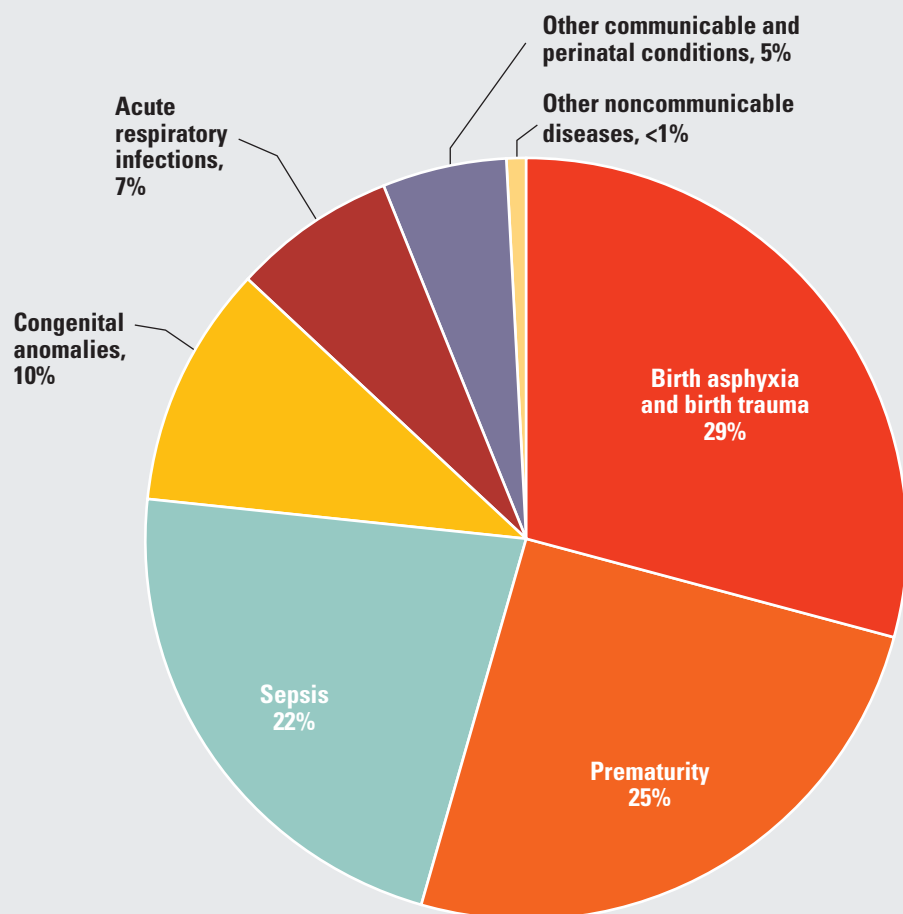
more likely to die during the first month  
compared to those born to mothers  
with higher education.<sup>2</sup>



# Maternal and Newborn Health Disparities in The Gambia

## The Gambia – Causes of Neonatal Mortality, 2016

In The Gambia, the main causes of neonatal deaths in 2016 were prematurity (25 per cent), birth asphyxia and birth trauma (29 per cent) and sepsis (22 per cent).<sup>11</sup>



Source: WHO-MCEE, 2017

## Maternal and newborn health coverage indicators

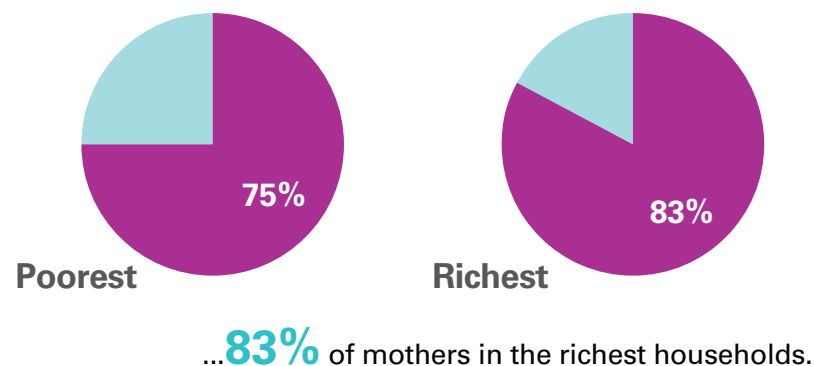
### By residence:<sup>2</sup>

- In rural areas, 78 per cent of women made at least 4 antenatal care visits, compared to 77 per cent in urban areas.
- Coverage of skilled attendance at birth is 75 per cent in rural areas, compared to 41 per cent in urban areas.
- 13 per cent of newborns in rural areas receive postnatal care (PNC) within 2 days of birth, compared to 22 per cent in urban areas.

### By household wealth:<sup>2</sup>

- Most mothers among richest households (83 per cent) made at least 4 antenatal care visits, compared to 75 per cent of mothers from the poorest households.
- Only 46 per cent of mothers in the poorest households had a skilled attendant at birth, compared to 82 per cent of mothers in the richest households.
- 33 per cent of newborns in the richest households receive PNC within 2 days of birth, compared to 16 per cent among the poorest households.

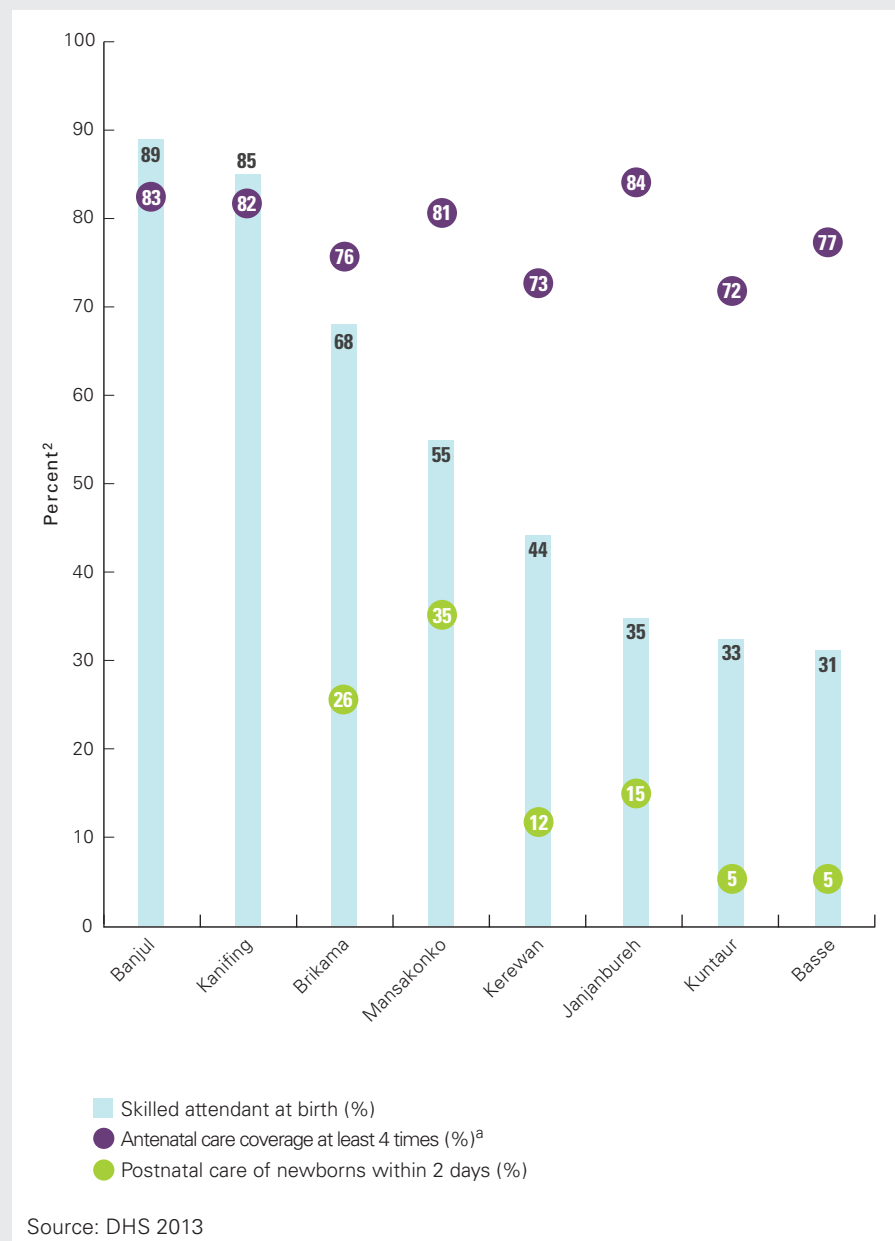
Only **75%** of mothers in the poorest households have **4 antenatal care visits** compared to...



Source: DHS 2013

# Maternal and Newborn Health Disparities in The Gambia

## Selected maternal and newborn health indicators, by region, 2013



## Maternal and newborn health coverage indicators

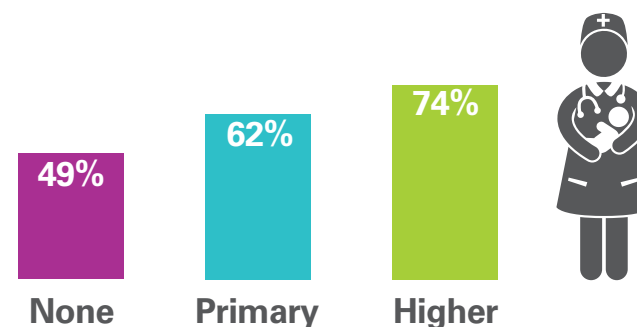
### By mother's age:<sup>2</sup>

- 77 per cent of mothers aged 20-34 made at least four ANC visits, compared to 74 per cent among younger mothers (aged less than 20).
- Mothers aged 20-34 and younger mothers have similar levels of skilled attendance at birth (56 per cent and 62 per cent, respectively).
- Their newborns receive low levels of postnatal care: 16 per cent and 14 per cent, respectively.

### By mother's education:<sup>2</sup>

- 82 per cent of mothers with higher education made at least four ANC visits, compared to 76 per cent of mothers with no education.
- 49 per cent of mothers with no education had a skilled attendant at birth, compared to 62 per cent with primary education and 74 per cent for mothers with higher education.
- 12 per cent of newborns are checked within 2 days of birth if their mothers have no education, compare to 20 per cent of mothers with a primary education and 26 per cent of mothers who received higher education.

The better educated the mother is, the more likely she will receive critical **maternal health services**



Percentage of women having a skilled birth attendant relative to their education level

# Maternal and Newborn Health Disparities in The Gambia

## Disparities in key maternal and newborn health interventions

	Coverage – care for mothers						Coverage – care for newborns							Other	
	Demand for family planning satisfied by modern methods (%)	Antenatal care coverage at least 4 times (%)*	Skilled attendant at birth (%)	Institutional delivery (%)	Delivered by caesarean section (%)	Postnatal care of mothers within 2 days (%)	Postnatal care of newborns within 2 days (%)	Newborn weighed at birth (%)	Early initiation of breast-feeding (%)	Exclusive breast-feeding (<6 months) (%)	BCG vaccine for newborn (%)	DPT 1 vaccination received (%)**	Tetanus protection for newborns (%)	Birth registration (%)	Births by age 18 (%)*,a
<b>National estimate</b>	24	78	57	63	2	76	15	59	52	47	99	98	71	72	18
Banjul	44	83	89	93	11	84		86	41	46	94	93	66	71	8
Kanifing	33	82	85	88	4	83		83	46	41	95	95	68	64	8
Brikama	28	76	68	75	2	83	26	71	45	46	100	99	70	77	12
Mansakonko	25	81	55	54	2	76	35	60	57	60	99	98	87	62	14
Kerewan	19	73	44	53	1	61	12	41	51	43	99	99	72	75	14
Kuntaur	15	72	33	38	1	61	5	31	51	38	99	99	68	73	22
Janjanbureh	13	84	35	50	1	76	15	58	60	49	100	98	69	66	22
Basse	5	77	31	31	1	70	5	30	67	56	100	100	74	73	26

Key for tables:

0-24%

25-49%

50-74%

75-100%

Data not available

Source: DHS 2013

# Maternal and Newborn Health Disparities in The Gambia

## Disparities in key maternal and newborn health interventions

		Coverage – care for mothers					Coverage – care for newborns									Other
		Demand for family planning satisfied by modern methods (%)	Antenatal care coverage at least 4 times (%) <sup>a</sup>	Skilled attendant at birth (%)	Institutional delivery (%)	Delivered by caesarean section (%)	Postnatal care of mothers within 2 days (%)	Postnatal care of newborns within 2 days (%)	Newborn weighed at birth (%)	Early initiation of breast-feeding (%)	Exclusive breastfeeding (<6 months) (%)	BCG vaccine for newborn (%)	DPT1 vaccination received (%) <sup>**</sup>	Tetanus protection for newborns (%)	Birth registration (%)	Births by age 18 (%) <sup>a,a</sup>
<b>National estimate</b>		24	78	57	63	2	76	15	59	52	47	99	98	71	72	18
<b>Residence</b>	Urban	32	77	75	83	3	85	22	76	47	41	98	98	67	72	10
	Rural	15	78	41	44	1	68	13	44	55	52	100	99	74	72	19
Residence ratio (urban to rural)		2.2	1.0	1.9	1.9	2.6	1.2	1.7	1.7	0.9	0.8	1.0	1.0	0.9	1.0	0.5
<b>Household Wealth</b>	Richest	38	83	82	90	5	89		85	43	44	98	98	66	75	5
	Poorest	15	75	46	49	1	71	16	47	55	54	99	98	71	69	20
Household wealth ratio (richest to poorest)		2.6	1.1	1.8	1.8	4.3	1.2	2.1	1.8	0.8	0.8	1.0	1.0	0.9	1.1	0.2
<b>Mother's age</b>	Less than 20	11	74	62	68	2	78	14	57					65		14
	20-34		77	56	62	2	75	16	59					73		
	35-49		30	58	62	3	75	10	61					68		
<b>Mother's education</b>	No education	18	76	49	54	2	71	12	50	55	45	99	99	72		29
	Primary	18	78	62	63	1	76	20	60	47	49	99	96	75		16
	Secondary or Higher	37	82	74	82	3	86	26	80	47	48	98	98	67		7
Mother's education ratio (highest to lowest)		2.1	1.1	1.5	1.5	1.8	1.2	2.3	1.6	0.8	1.1	1.0	1.0	0.9		0.2

Key for tables:  0-24%  25-49%  50-74%  75-100%  Data not available

Source: DHS 2013

## Sources:

- 1 United Nations, Department of Economic and Social Affairs, Population Division (2017). World Population Prospects: The 2017 Revision.
- 2 The Gambia Demographic and Health Survey 2013.
- 3 United Nations Inter-agency Group for Child Mortality Estimation (UNICEF, WHO, United Nations Population Division and the World Bank).
- 4 United Nations Maternal Mortality Estimation Inter-agency Group (WHO, UNICEF, UNFPA, United Nations Population Division and the World Bank).
- 5 Trends in maternal mortality: 1990 to 2015: estimates by WHO, UNICEF, UNFPA, World Bank Group and the United Nations Population Division.
- 6 Trends in maternal mortality: 1990 to 2015: estimates by WHO, UNICEF, UNFPA, World Bank Group and the United Nations Population Division. Lawn JE, Blencowe H, Waiswa P, et al, for The Lancet Ending Preventable Stillbirths Series study group with The Lancet Stillbirth Epidemiology investigator group. Stillbirths: rates, risk factors, and acceleration towards 2030. Lancet 2016; published online Jan 18. [http://dx.doi.org/10.1016/S0140-6736\(15\)00837-5](http://dx.doi.org/10.1016/S0140-6736(15)00837-5).
- 7 Blencowe H, Cousens S, Oestergaard M, Chou D, Moller AB, Narwal R, Adler A, Garcia CV, Rohde S, Say L, Lawn JE. National, regional and worldwide estimates of preterm birth rates in the year 2015 with time trends since 1990 for selected countries: a systematic analysis and implications.
- 8 Averting Maternal Death and Disability, United Nations Children's Fund, and United Nations Population Fund special data compilation, 2015.
- 9 Global Health Workforce Statistics database, World Health Organization, Geneva. (<http://www.who.int/hrh/statistics/hwfstats/>).
- 10 United Nations, Department of Economic and Social Affairs, Population Division (2015). 2015 Update for the MDG Database.
- 11 WHO-MCEE estimates for child causes of death, 2000-2016.

## Notes:

- a MMR estimates have been rounded according to the following scheme: < 100 rounded to nearest 1; 100–999 rounded to nearest 10; and ≥ 1000 rounded to nearest 10.
  - b Life time risk has been rounded according to the following scheme: < 100 rounded to nearest 1; 100–999 rounded to nearest 10; and ≥ 1000 rounded to nearest 100.
- ^ Reference period: five years preceding the survey.  
≠ Reference period: ten years preceding the survey.  
# Births by age 18 among 20-24 year olds.
- ( ) Based on small denominators (typically 25-49 unweighted cases). No data based on fewer than 25 unweighted cases are displayed.

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