 

 **MAPPING OF ACTORS AND SERVICES**

Study «Profile of Migrant Children and Youth (CYM) and mapping of child protection actors and services in Côte d'Ivoire, Guinea, Gambia and Senegal»

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List of Acronyms

|  |  |
| --- | --- |
| **ACRWC** | African Charter on the Rights and Welfare of the Child |
| **ADRS** | Alternative Dispute Resolution Secretariat |
| **ANWG** | Adolescence Neighbourhood Watch Group |
| **AVRR** | Assisted Voluntary Return and Reintegration  |
| **BSED** | Basic and Secondary Education Directorate |
| **CCPC** | Community Child Protection Committee |
| **CEO** | Chief Executive Officer |
| **CEDAG** | Child Environmental Development Association Gambia |
| **CYM** | Children and Young Migrants |
| **CPA** | Child Protection Alliance |
| **CPS** | Child Protection System |
| **CRR** | Central River Region  |
| **CRU** | Child Rights Unit |
| **CSO** | Civil society organization  |
| **DHS** | Directorate of Health Service |
| **DSW** | Department of Social Welfare |
| **ECOWAS** | Economic Community of West African States  |
| **EUTF** | European Union Trust Fund  |
| **FGM/C** | Female Genital Mutilation/Cutting  |
| **ICWU** | Immigration Child Welfare Unit |
| **IMU** | Irregular Migration Unit  |
| **LGA** | Local Government Area |
| **MoHSW** | Ministry of Health and Social Welfare |
| **MoWC&SW** | Ministry of Women, Children and Social Welfare |
| **NAATIP** | National Agency Against Trafficking in Persons |
| **NALA** | National Agency for Legal Aid |
| **NCPSC** | National Child Protection Steering Committee |
| **NDB** | Net Domestic Borrowing |
| **NGOs** | Non-Government Organisations |
| **NYC** | National Youth Council |
| **NB** | North Bank |
| **PCWO** | Police Child Welfare Officer  |
| **PCWU** | Police Child Welfare Unit |
| **RVA** | Risk and Vulnerability Assessment |
| **UN CRC** | United Nations Convention on the Rights of the Child |
| **UNDP** | United Nations Development Programme |
| **UNICEF** | United Nations Children’s Fund  |
| **URR** | Upper River Region  |
| **VDCs** | Village Development Committees |
| **WAN** | West African Network |
| **WCD** | West Coast Division  |
| **WDCs** | Ward Development Committees |

# INTRODUCTION

**General introduction of The Gambia**

**Brief historic:**

The Gambia gained its independence from the UK in 1965. Geographically surrounded by Senegal, it formed a **short-lived Confederation of Senegambia** between 1982 and 1989. In 1991, the two nations signed a friendship and cooperation treaty, although tensions flared up intermittently during the regime of Yahya JAMMEH. JAMMEH led a **military coup in 1994** that overthrew the president and banned political activity. A new constitution and **presidential election in 1996**, followed by parliamentary balloting in 1997, completed a nominal return to civilian rule. JAMMEH was elected president in all subsequent elections including most recently in late 2011. After 22 years of increasingly authoritarian rule, President JAMMEH was defeated in **free and fair elections in December 2016**. Due to The Gambia’s poor human rights record under JAMMEH, international development partners had distanced themselves, and substantially reduced aid to the country. These channels have now reopened under the administration of President Adama BARROW, who took office in January 2017.

**Administrative organisation:**

The Gambia is divided into **two municipalities headed by a Mayor and five administrative regions headed by governors**. The two municipalities are Banjul, and Kanifing. The regions are: Central River, Lower River, North Bank, Upper River and Western. Additionally, the Gambia is divided into **eight local government areas** (LGA): Banjul, Basse, Brikama, Janjanbureh, Kanifing, Kerewan, Kuntaur and Mansakonko. The current study mainly took place in the towns of Soma and Farafeni, respectively belonging to Kerewan LGA (North Bank Region) and Mansakonko LGA (Lower River Region). Institutional interviews also took place in the Capital City,Banjul.

**Sociodemographic data:**

The Gambia is one of the smallest countries in West Africa, with a total population of 2,173,999 (july 2020). Population settlements are found scattered along the Gambia River; the largest communities, including the capital of Banjul, and the country's largest city, Serekunda, are found at the mouth of the Gambia River along the Atlantic coast

The Gambia has a youthful age structure with almost 60% of the population who is under the age of 25. This is likely to persist because the country’s total fertility rate remains strong at nearly 4 children per woman. The overall literacy rate is around 55%, and is significantly lower for women than for men. At least 70% of the population are farmers who are reliant on rain-fed. Crop failures caused by droughts between 2011 and 2013 have increased poverty, food shortages, and malnutrition.

The Gambia’s population is composed of several ethnicities: Mandinka/Jahanka 34%, Fulani/Tukulur/Lorobo 22.4%, Wolof 12.6%, Jola/Karoninka 10.7%, Serahuleh 6.6%, Serer 3.2%, Manjago 2.1%, Bambara 1%, Creole/Aku Marabout 0.7%, other 0.9%, non-Gambian 5.2%, no answer 0.6% (2013 est.). The official language is English, and the other spoken languages are Mandinka, Wolof and Fula. Most of the population is Muslim (4% are Christians).

**Migration issue summary in The Gambia**

The Gambia is a **source, transit and destination for migrants.** Since the 1980s, economic deterioration, drought, and high unemployment, especially among youths, have driven both **domestic migration** (largely to the urban area) and **migration abroad** (legal and illegal). The top receiving countries for Gambian emigrants are Spain, the US, Nigeria, Senegal, Italy and the UK. According to the migration profile report for Gambia[[1]](#footnote-1), in 2017, over 35,000 Gambians arrived in Europe by irregular means between 2014 and 2018, with many others in Africa along the Central Mediterranean Route opting for voluntary return. Among those irregular migrants who take the “backway[[2]](#footnote-2)”, unaccompanied children from The Gambia represent a large part. In October 2017, 2,420 unaccompanied migrant children from Gambia benefited from the child protection system in Italy. They were representing 13% of the total of unaccompanied children (The most represented nationality). In addition, 186 Gambian children were reported as missing / runaways from centres in Italy during the same month[[3]](#footnote-3).

The Gambia is a host country for around 120,000 migrants, according to the 2003 Population and Housing Census. At the time, the main countries of origin of migrants were Senegal (50%), Guinea (20%), Guinea-Bissau (8%), Mali, Cameroon, Mauritania, and Nigeria. More specifically, Gambia’s role as a host country to refugees is a result of wars in several of its neighbouring West African countries. Since 2006, refugees from the Casamance conflict in Senegal, have replaced their pattern of flight and return with permanent settlement in The Gambia, often moving in with relatives along the Senegal-Gambia border. About 7,400 Casamance refugees are registered in The Gambia. According to the Irregular Migration Unit (Ministry of Interior), there is an increasing number of female migrants in the Gambia.

**National legal and institutional framework for Child Protection and Migration in The Gambia:**

The Gambia’s legal system incorporates common law, customary law and Sharia law.

The Gambian government has signed, ratified, and/agreed to the main international conventions on the rights of the child such as the UN Convention on the Rights of the Child, ratified in 1990, and the African Charter on the Rights and Welfare of the Child, ratified on the 14th December 2000. Those international instruments have been translated into national legislations such as the Children’s Act 2005 and the women’s Act 2010.

**Below, the main ratified conventions by The Gambia are listed:**

|  |  |
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| UN Convention on the Rights of the Child (CRC, 1989) | 8-Aug-1990 |
| Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW, 1979) | 16-Apr-1993 |
| Optional CRC Protocol on Sale of Children, Child Prostitution and Child Pornography | 8-Apr-2010 |
| Worst Forms of Child Labour Convention (ILO #182, 1999) | 3-Jul-2002 |
| Convention Against Transnational Organized Crime (2000) | 5-May-2003 |
| (Palermo) Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children (2000) | 5-May-2003 |
| International Covenant on Civil and Political Rights (1966) | 22-Mar-1979 |
| International Covenant on Economic, Social and Cultural Rights (1966) | 29-Dec-1978 |
| Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (1984) | 28-Sep-2018 |
| Convention Relating to the Status of Refugees (1951) | 7-Sep-1966 |
| Protocol to the Convention Relating to the Status of Refugees (1967) | 29-Sep-1967 |
| African Charter on Human and People's Rights (1981) | 8-Jun-1983 |
| African Charter on the Rights and Welfare of the Child (1990) | **14-Dec-2000** |
| African Youth Charter (2006) | 30-Apr-2009 |
| International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families | **28-Sep-2018** |
| Optional Protocol to the Convention on the Rights of the Child on the involvement of children in armed conflict | 27-Sep-2019 |

The Gambia is a Member State of the Economic Community of West African States (ECOWAS) and contributed towards the regional Plan of Action against trafficking for West Africa. ECOWAS requires that all member states adopt a National Plan of Action (NPA) against Human Trafficking. Therefore, The Gambia created and adopted a NPA for 2012-2016, and additionally, signed Multilateral Cooperation Agreements in relation to human trafficking[[4]](#footnote-4):

* Cooperation Agreement with Central African countries on the issue of human trafficking;
* Bilateral agreement with Senegal.
* Bilateral agreement with Ghana in relation to human trafficking.
* Multilateral agreement to combat child trafficking in West Africa signed by The Gambia, Benin, Ivory Coast, Ghana, Guinea, Mali, Niger and Togo.
* Bilateral agreements with Taiwan on “Cooperation on Immigration Affairs and Human”.

The domestic child protection legal framework consists of several Acts, among which the **Children’s Act 2005** is the main one. It enshrines welfare principles and issues, the core rights and responsibilities, defines protection and care necessary for the child and obligations from duty bearers especially the State and parents. The Children’s Act also defines the juvenile justice administration, setting the legal age for criminal responsibility at 12 years and establishing the Children’s Court.

**Below, are presented the main domestic law relating to child protection and migration:**

* Births and Deaths Registration Act, 1990
* Constitution of the Gambia, 1997 (Core rights of the Gambian citizen)
* Children's Act, 2005
* Labour Act, 2007 (Employment age: 16)
* Tourism Offences Act, 2003
* Trafficking in Persons Act, 2007
* Women’s Act, 2010

Child protection is also addressed in several national policies such as the **Health Strategy 2010-2014**, **Social Welfare Policy 2003-2013** and the **Education Policy 2016-2030**, as a cross cutting issue.

Below, **national strategies addressing Child Protection, and to a lesser extent, migration,** are presented:

* Strategy of the Ministry of Health and Social Welfare for 2010 – 2014
* Social Welfare Policy 2003-2013
* Education Policy 2004-2015
* National Gender Policy 2010-2020
* National Youth Policy 2009-2018
* Integrated National Disability Policy 2009-2018
* **National Social Protection Policy** (2015-2025), along with a National Social Protection Implementation Plan (2015-2020). Its long-term vision is “to establish, by 2035, an inclusive, integrated and comprehensive social protection system that will effectively provide protective, preventative, promotive and transformative measures to safeguard the lives of all poor and vulnerable groups in the Gambia. It is worth noting that refugees and migrants are mentioned by the policy as among the priority target groups. The Policy is considered a commendable document by the DSW, but the challenge lies in its implementation.
* **Child Protection Strategy** 2016-2020: and its plan of action (2016-2018): A positive aspect of the plan of action is that it engages a vast array of actors (governmental stakeholders at the national and local level, NGOs). However, it is worth noting that none of the planned activities is dedicated to children on the move (although they could fall under the vulnerable children or children at risk categories mentioned in Strategic Objective 5 of the plan of action).
* **National Migration Policy** was launched by the honourable Minister of Interior in December 2020

The child protection legal and policy framework encounters a range of weaknesses. First and foremost, **available legislation and policies are not well implemented and enforced**. The Children's Act mixes elements of principles of law with the enforcement of rules and regulations, making subsequent legal reforms more difficult and cumbersome. Moreover, government actors, especially at the local level, and communities are not aware about Children’s Act. Further, there is a **conflict between the Children’s Act and other pieces of legislation such as the Sharia and Customary Law**. It is also relevant to highlight that Health policy lacks provisions for dealing with child protection issues requiring medical interventions. In this specific case, the legal framework does not allow care givers to act towards the best interest of the child. For instance, a police report is required for treatment of cases like rape and physical injuries before any medical attention. Dispersion of child protection across policies requires strong coordination and cooperation among Ministries, Departments, and Agencies (MDAs) involved in child protection. However, inter-sectorial coordination and cooperation is currently weak and needs to be reinforced.

The Child Protection Strategy, along with its Plan of Action, adopted since 2016 are meant to address these weaknesses. This strategy is built upon six strategic axes which are: i) the promotion of the rights of the child, ii) the legal framework strengthening, iii) the collaboration and coordination, iv) developing capacities and ensuring resources, v) expansion of preventive and protective services, vi) knowledge and information. A review of the strategy is needed since it ended in 2020.

**The services for child protection are fragmented between different institutions dealing with different issues and tasks**.

Specifically, about **children and young’s migration legal framework**, in 2019, The Gambia Government, with the support of IOM and through the Department of Social Welfare (DSW), developed a **Standard Operating Procedure for the protection of young migrants**, especially children. The government, also with the support of IOM, has adopted **the national migration policy** that has highlighted key points regarding the migration dynamics in The Gambia. A national **Referral Mechanism** **for sustainable reintegration of returnees** has also been developed to enhance the case management process of people in migration difficulties, most especially children and young migrants.

This IOM initiative is complementary with the Child Protection System reinforcement activities supported by the Department of Social Welfare and UNICEF Gambia: in the frame of the ECOWAS **strategic framework for strengthening child protection systems,** the partners are working on **case management forms** that will help build a child protection data base system.

Both initiatives will better guarantee the continuum of car for children and young migrants in The Gambia.

Moreover, even if The Gambia has one of the best decentralization plan on paper, when it comes to practice, it is very weak. Indeed, much of the services are centred in the Greater Banjul area. Even though government offices have branches across the country, most of the decisions, in the area of child protection, are done in Capital City. The fact that the services are not well decentralized, puts communities located far from Banjul, in a challenging situation to access basic services.

**Level of integration of ECOWAS procedures in the country**

In ECOWAS countries, there is no central public body mandated to coordinate migration and child protection issues. As a matter of fact, the legal arrangements for dealing with migration issues vary from one country to another. In The Gambia, the existing services do not treat the migratory phenomenon primarily, but only as an ancillary action. However the Child Environment and Development Association The Gambia (CEDAG), as the West African Network (WAN) focal point in the country, plays a pivotal role facilitating the reintegration of children on the move within the ECOWAS sub-region.

Although IOM plays a crucial role in taking the lead when it comes to migration, the government is not doing enough to mainstream issues of migrations in its development policies.

Regarding Child Protection area, even if the department of social welfare is working on the implementation of the ECOWAS strategic framework for strengthening Child Protection Systems, the lack of means for case management is still an issue: the police, for instance, lack the much-needed infrastructure to be able to manage and record cases as expected and institutions also lack the required financial and human capital to be able to intervene effectively when the need arises.

The work of building a protective environment for children and young migrants is far from being materialized in a specific support, both structural and programmatic.

# GENERAL INTRODUCTION TO THE INSTITUTIONNAL STAKEHOLDERS INTERVENING IN CHILD AND YOUNG MIGRANTS PROTECTION

## SYNTHETIC REVIEW OF MINISTERIAL SERVICES AND ACTORS

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| **PRESENTATION DES SERVICES CENTRAUX MINISTERIELS ET LEURS PROGRAMMES D’ACTION[[5]](#footnote-5)** |
| **Name of Ministry** | **Composition / Organization** | **Mandate** | **Comments** |
| **Ministry of Women, Children and Social Welfare (MoWC&SW)[[6]](#footnote-6)** | **Department of social Welfare (DSW)*** **Child protection units**
* National Child Protection Steering Committee (NCPSC)
* National Child Protection Platform
* Regional Child Protection Committees
* Community Child Protection Committees (CCPC)
* Adolescence Neighbourhood Watch Groups

**the National Women’s Bureau*** the National Women’s Council.
 | The Ministry consists of four directorates and 18 programme units. The key two agencies of the MoWC&SW in charge of child protection are the DSW and the Directorate of Children Affairs. At the regional level, there are regional social welfare offices and team. There are village Development Committees at the village level.According to the Children’s Act 2005, **the DSW** is the key government institution responsible for the welfare of children in The Gambia.The DSW runs a child helpline (199) housed at the shelter for Children in Bakoteh The National Women’s Bureau is a policy implementing agency. This is the supervisory body oh the National Women’s Council. The National Women’s Council is a policy body aimed at voicing the needs of women. The involvement of the National Women’s Bureau within the Ministry of Women’s Affairs in child protection is framed by its goals to eliminate discrimination against women, including girl children, and address the issues of harmful traditions, domestic, and sexual abuse. | Social assistance in the Gambia falls under the authority of the MoWC&SW and liesin the hands of the DSW, whose role is to protect vulnerable groups. It isorganized into three departments: i) **childcare** (including for children on the move); ii) **adults** **and the** **elderly**; and iii) **people with disabilities**. The directorate is represented countrywide by regional offices. At both national and regional level,there are 30 trained professional social workers working for the DSW. In addition, 600 persons are working with the DSW as members of the community child protection committees (they are involved in advocacy, sensitization, family tracing, follow-up on reintegration). |
| **Ministry of Health**  | **Directorate of Health Services** | They play a vital role in the area of child health and through their regional health directorate birth registrations is also provided for by this directorate. They also do immunization services to children  | Health care delivery services, birth registrations and immunisation all lies under the purview of the ministry of health through its line directorates  |
| **Ministry of Justice**  | Child Rights Unit (CRU)National Agency Against Trafficking in Persons (NAATIP). National Agency for Legal Aid (NALA)At the judiciary level: **Children Court** | The **CRU** of the Ministry is responsible for prosecuting serious child offence cases**NAATIP**’s mission is to prevent, respond to, and prosecute cases of trafficking in persons including child trafficking. Its preventive activities include sensitising communities in local languages about trafficking in persons, especially child trafficking, through meetings at the grassroots level and border posts, and partnerships with other relevant institutions. The response activities of NAATIP imply intercepting victims and suspects, questioning them, and investigating cases. **NALA**’s role in relation to child protection is to provide legal representation and legal advice to children in conflict with law and child victims, deal with all the child abuse cases in the court, and sensitise general public about its mandate with regard to child protection.Special judicial structure for ensuring justice for children. According to the Children’s Act 2005, the key function of the **Children Court** includes hearing and determining criminal charges against a child, all civil matters regarding a child including adoption, and any other cases concerning child care and protection.[[7]](#footnote-7) The Children’s Court can also exercise any other jurisdiction conferred on it by the Children’s Act or any other written law. | At the regional level, the Ministry of Justice has an office in Basse, URR. The CRU and NAATIP are based only in Banjul. In the meantime, NALA has offices in Farafenni, North Bank (NB) and Basse, URR.Children’s Courts are available only in three locations covering three regions: Kanifing municipality (GBA), Brikama (WCD), and Basse (URR). The latter two were established in 2011. Following the Children’s Act 2005, each of the Children’s Courts has a chairperson, who is a magistrate, and a panel of three people respected in the community, at least one of whom is a woman. |
| **Ministry of Interior** | Gambian Police ForceGambian Immigration Department* **Irregular Immigration Unit**
* The Police Force and Immigration Force have a **Child Welfare Unit** (CWU):
	+ Immigration Child Welfare Unit
	+ Police Child Welfare Unit

Prison (children wing) | The 1965 Immigration Act provides a legal framework and includes provisions about visas and residence permits, but it does not address the question of irregular migrationThe Gambian Police Force was established in 1995 and has 16 staff members in its Headquarters in Banjul and every police station throughout the country is supposed to have a PCWO. | Since the transatlantic route through the coastal city of **Tanji** is not used anymore by migrants, as it was between 2005 and 2008, the **IMU** finds it more difficult to undertake concrete actions to monitor and counter irregular flows. The **IMU** **can only intercept unaccompanied minors at official exit points**, or people who are obviously about to migrate irregularly (carrying few belongings, moving in groups often comprising a large number of young people). **Outside of official exit points, the****unit can, in principle, intercept anyone** but it lacks the means to do so. |
| **Ministry of Youth & sports** | National Youth Council | Is responsible for meeting policy issues as well as co-operating with donor agencies for the youth development programs.The council is responsible for coordinating the different projects operated by various youth organisations as well as playing an active role in their promotion around the country. | Youth Empowerment project National Youth Services Schemes provide skills training to more than 200 young people a year. |
| **the Ministry of Tourism and Culture** | The **Gambian Tourism Board** is of relevance to child protection.  | Collaborates with civil society actors such as Child Protection Alliance (CPA) to sensitise communities on sexual abuse of children in the tourist areas. |  |
| **Ministry of local government and lands** | **Local Governments*** Village Development Committees (VDC)
* Ward Development Committees (WDC)
 | VDCs and WDCs act as a local entry point for development assistance to villages and wards. It is, therefore, the duty of WDCs and VDCs to: identify local development needs; prioritise them; develop, implement and manage appropriate plans; raise, coordinate and manage financial resources; mobilise community participation in development activities, and support and strengthen all development oriented groups within the community |  |

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| **INTERMINISTERIAL STRUCTURES** |
| **Name of structure** | **Composition** | **Mandate** |
| **National Child Protection Steering Committee** | Comprises all the stakeholders in the area of child protection in The Gambia.  | The same committee is replicated in all the regions across the country and is chaired by the Governor. |
| **Inter-Ministerial Migration Committee** | gathering government authorities and CSOs concerned with Migration Management, whose focal point is the Deputy Permanent Secretary of the Ministry of Interior.  | The Committee in collaboration with IOM is in the process of developing a national migration policy which should augment the existing policy framework for migration management and address issues related to irregular migration. |
| **National Women Council** | Brings together women leaders from the 53 districts, as well as Ministries and CSOs, meets quarterly. It produces recommendations which are then implemented by the Bureau of Women Affairs |  |
| **Technical Working Group was put in place for the EUTF** | It is chaired by the Ministry of Interior, and gathers the Ministries of Health and Social Welfare, Trade, Foreign Affairs, Land and Regional Government, the Immigration Department, the Department of Social Welfare, the National Youth Council, local authorities as well as civil society organizations.  | Although it is not its core mission, this Working Group is being mobilized to find ad hoc solutions and better coordinate interventions regarding voluntary humanitarian returns from Libya. |
| **National steering committee of the WAN** | It gathers the Police, the Immigration, the Social Welfare, NAATIP, CEDAG and the CPA to review cases and the way they were handled. | Meets quarterly.CEDAG is leading trainings dedicated to the personnel of CPUs about ECOWAS standards. |

## SYNTHETIC REVIEW OF NON-GOVERNMENTAL ACTORS’ ACTION

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| **NON GOUVERNEMENTAL ACTORS : DESCRIPTION OF STRUCTURES’ ACTIONS** |
| **TANGO**, which is a large network of Gambian NGOs, | The Association of Non-Governmental Organizations in the Gambia (TANGO), founded in 1983, is the umbrella organization for NGOs operating in The Gambia. The Association was founded by a group of NGOs out of the concern to avoid duplication of NGO efforts, and to minimize conflict and competition between NGOs. It is composed of 4 thematic groups: i) Gender & Poverty, ii) Education & Life Skills, iii) **Youth, Child, Health & Population**, iv) Human Rights & Governance. |
| **Child Protection Alliance****(CPA)** | The CPA organizes meetings gathering child protection organizations to share information about CSOs’ interventions, avoid overlaps, and ensure that CSOs’ interventions are in line with the Child Protection Strategy. |
| **IOM** | Having established an operational presence in 2001, IOM The Gambia officially became a country office in July 2017 and implements an extensive range of programs in Migrant Protection and Assistance (MPA), Assisted Voluntary Return and Reintegration (AVRR), Labour Mobility and Human Development (LHD), Immigration and Border Management (IBM), Migration Health and Communication for Development (C4D). It works closely with the Government of The Gambia to strengthen migration governance through national coordination frameworks and evidence-based policy design, particularly through research and collection and analysis of data to inform policymaking. IOM has also provided technical assistance to the Government in developing its first national migration policy. Operationally, IOM facilitates the sustainable reintegration of returning migrants, placing a particular emphasis on the protection of vulnerable migrants. Between January 2017 and October 2019, over 4,800 Gambian returnees were assisted. IOM also works with local partners to raise awareness among potential migrants about risks of and alternatives to irregular migration and promotes diaspora engagement to contribute to economic development through knowledge and skills transfer. As a whole, IOM supports the Government of The Gambia and national and local partners to build their capacities to protect migrants, promote their rights and better manage migration. |
| **UNICEF** | Unicef Gambia runs a “children on the move” programme which supports local and community systems to ensure the provision of adequate services to **children on the move**, and that families, communities and community leaders are well informed of the risks of **unsafe migration of children**. The programme also provides **temporary shelter** for unaccompanied and separated children, and psycho-social support, as well as family and school reintegration for returnee children. The program is known with as “Nsa Keno” meaning “ we can do it” in local language. |
| **Child Fund** | Child Fund supported the DSW in the creation of the National Child Protection Committee and its regional and local declinations (Regional Child Protection Committees, Community Child Protection Committees). The National Child Protection System relies on these entities. |
| **COOPI** | Since December 2018, COOPI has intervened in Gambia to assist returning migrants and in particular to take charge of the mental health and psycho-social well-being (training, child friendly space in Farafenni) of those who have suffered violence along the Mediterranean route.  |
| **CEDAG** | CEDAG is the WAN Focal Point in The Gambia. As such, it works closely with the DSW dealing with CYM Case Management. |
| **ENABEL** | The programme *Make it in the Gambia*, implemented in part by GIZ in partnership with the **National Accreditation and Quality Assurance Authority (NAQAA)** have validated eight enriched skills training curricula in May 2019 at Khamsys in Bijilo. The curricula were developed by a team of 17 TVET and industry experts under the EU funded Make it in the Gambia - Tekki Fii project. 1200 youths across three regions are expected to benefit from this Project during three years. |

# SIMPLIFIED MAPPING OF ACTORS AND SERVICES

The following table describes actors and structures delivering services to CYM identified in Soma and Farafenni. As we will analyse below, many of those services are only available at a national level, mainly in the Banjul area, or at the regional level in the Local Government Areas (LGA) which are Kerewan, for Farafenni and Mansakonko, for Soma. For that reason, the table below, not only maps the actors and services that exist in the two targeted towns by the research, but widen its scope to every services to which CYM can be referred to at regional and national levels.

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| **National structures (involved in Case Management in Soma and Farafeni)** |
| **Service Name** | **Benefits** | **Status** | **Capabilities/ Limitations**  | **Level of coordination** | **Comments** |
| **Department of Social Welfare (Headquarter in Bakoteh, Banjul area)** | **Emergency Support:** In this category the department office provides accommodation services to children who are abandoned or lack parental care requiring emergency support   |  Ministerial Department.  | There is only one shelter run and managed by government in Bakoteh (Banjul area). If a child in Farafeni or Soma needs emergency care and support, he will have to be transported to Bakoteh. Mobility is also not available at the regional level as all the vehicles are at the central level. | Works with the police, The Gambia Immigration, Community Child Protection Committee and other organisations like CEDAG. | Logistic support in terms of response to the needs of children is a challenge and there are also knowledge gaps in this domain, most especially in the psychosocial interventions.  |
| **Individual assessment:** Conduct home visits and compile reports  | Inadequate number of social workers and inadequate mobility  | Lead player in the area of child protection and service delivery  | They need to employ more social workers to offer better services to the people   |
| **Family Research:** Take the lead in mediations on issues of family dispute and also provide assistance in form family strengthening programs   | Inadequate human resources and infrastructure  | Lead the child protection systems  | Key player in the child protection  |
| **Individual assessment:** Responsible for the assessment of children who are in need of special care and placement as the government entity responsible for coordinating the serivces  | Have capacity gaps in terms of professionals and human resource availability in the regions  |  |   |
| **M&E:** As the government main primary protection service delivery, they monitor the situation of children in the country  | Limited number of social workers in regional offices  | Lead the implementation of the child protection strategy plan  | They are the entry point to understanding the child protection system in the Gambia   |
| **Immigration Child Welfare Unit** (Gambia Immigration Department)   | **Identification:** As frontline workers in the border entry points, immigration department is vital in the identification of children and young people in migration and thus serve as a referral point for many of them.The Immigration Child Welfare Unit is responsible for cases that involve children.These offices deploy officers at border points in Soma and Farrafeni | This is a government security department responsible for both internal and external migration.   | In terms of personnel they have many officers across regions.They have knowledge gaps in the area of children case management and, to some extent, in the referral mechanism.Mobility is a key constraint to most of them to do more patrols and transport children who need to be shelthered in Bakoteh. | They work closely with the **Department of Social Welfare** that houses the shelter (Bakoteh) for children and with **The Gambia police force**. The department is also a member of **The Gambia Child Protection Sub Committee.** |  They need more training in terms of children and young migrants case management and, equally, be supported to be better equipped to respond when the need arises: needs for private rooms for interviews, child friendly spaces meant for a conductive environment for children. |
| **SOS Children village Bakoteh, Farafeni and Basse**   | **Emergency Support:** They operate children villages in two places bakoteh and Basse. Children in need of accommodation are often sheltered for permanent purposes. They also do community base support to vulnerable families in terms of building their capacities. | NGO  | Often involve a long process before a child is sheltered. Also they only do permanent placement and not on a temporal basis. | They work closely with the department of social welfare as the oversight body responsible for the supervisions of all care services, including residential care organisations in The Gambia. | They are very good at partnering with other services when it comes to the delivery of programs.  |
| **Individual assessment:** Conduct family base home visit   |  NGO  | Inadequate Number of Offices and personnel in other regions | Work with Social Department and Community Actors. |  They have good working knowledge on study of children and family situation.  |
| **Alternative placement:** Children who are in need of alternative placement benefit from this service. they can come from different parts of the country. |  NGO  | Not many shelters are available in the country only in **Basse** and **Bakoteh**.  | This service area is coordinating with the government department responsible for the protection of children.  |  Only place children on permanent basis.  |
| **IOM** | **Family Research:** Support family reintegration of young migrants through family tracing.   |  UN | Have a good number of professional staff both local and international  | Lead in the migration activities but jointly work with government agencies and departments | Have supported government in terms of developing migration policies   |
| **Social and professional integration:** Support the reintegration of returning migrants and support them with reintegration packages   | UN  | They have a good number of staff and projects that run across the country.  | They work closely with the department of social welfare and support the development of the first standard operating procedure for the support of children migrants  | Very effective in times of response and coordination   |
| **M&E:** Track the progress of their intervention in projects sites   |  UN | Very good capacity and have a lot of resources and expertise  | Jointly work with partners like the department of social welfare, ministry of youth and sports and the ministry of interior  | They support partner organisations with capacity building   |
| **ChildFund The Gambia** (Headquarter in Kanifing but operates with affiliated federations mainly in the west coast region) | **Family and community Support:** They are a child-centred organisation that also supports youth groups in life skills.  | NGO   | They have a good knowledge of working for the interest of children and young people.  | Work jointly with government partners but also link with childlike minded organisations across the country  | A very solid organisation that operated structurally in wet coast regions but extend in terms of services to other organisations  |
| **Children Court** (Brikama, Kanifing and Basse) | **Individual assessment:** This is the court responsible for adoption and fostering orders in the Gambia. They sit over cases of custody dispute too and juvenile cases   |  Judiciary  | Limited number of courts  | Work with social welfare and the police  | They are responsible for deciding on cases of adoption and foster placement in coordination with social welfare  |
| **Community Actors (Both in Farafenni and Soma)** |
| **Service Name** | **Benefits** | **Profiles** | **Capabilities**  | **Level of coordination** | **Comments** |
| **Community Actors** | **Identification:** They help in identifying children in vulnerable situations   | CYW,religious leaders, host families, community leaders.district chiefs (seyfo)  | Inadequate knowledge in understanding the issues of children and their rights  | Work closely with the police, social welfare, immigrations and other stakeholders. | The services within this category is done on a voluntary basis.   |
| **Individual assessment:** They offer temporal shelters to children who are homeless and refer them to the appropriate authorities for actions   | Knowledge gaps in the area of child protection and migration  | Work with all the stakeholders on issues of children and young people  |   |
| **Emergency Support**: They are within the community and serve as watch dogs to help in referral of cases in terms of emergency   | Inadequate knowledge on issues of children and young migrants  | Work with government institutions and NGOs as well as community base organisations. | Need capacity building in areas of advocacy and child protection issues   |
| **Social and professional integration:** Help in local reintegration of children at the community level   | Inadequate Knowledge on the laws available for the protection of children  | Work with Department of Social Welfare, | Need capacity building on issues of children and young migrants to mainstream child protection in its community. |
| **FARAFENNI (NORTH BANK REGION)** |
| **Service Name** | **Benefits** | **Status** | **Capabilities** | **Level of coordination** | **Comments** |
| **Department of Social Welfare** (Kerewan Office) |  **Cross-cutting action:** There are various services available here:* Case management,
* Mediation services in dispute relating the children,
* Provision of shelter to children (Bakoteh)
* Family tracing and re-integration of children
 | Public Institution   | There are social workers in Banjul (headquarters). At the regional level there are, on average, 2 social workers in a region  | The Department is currently the lead player in the area of child protection and coordinates the **Child Protection Sub Committee** which comprises all the stakeholders in the area of child protection in The Gambia. The same committee is replicated in all the regions across the country and is chaired by the Governor. | Capacity in terms of specialization is a challenge. For example, there is no trained child psychologist at the department level |
| **Farafenni Hospital** | **Emergency Support*** Victims of rapes’ case management,
* Birth registrations
* Reproductive and child health services,
* Immunization campaigns

  | institution | They have a good number of facilities across the country but limited knowledge on children issues especially on case management of gender base violence. The human resources are available but not enough regarding the ratio of doctors per population. | They work closely with the police and other organisations like **IOM** and the department of social welfare. They sit in the **Child Protection Subcommittee**. | Required a more detailed training in the area of migration and children on the move in terms of case management and referral systems in the child protection system. |
| **COOPI** | **Emergency Support:** Offer emergency placement (child friendly spaces) before the child is moved from Farafenni to the Shelter in Bakoteh and psychosocial support. Coopi also provides emergency kits. | NEW NGO   | Limited number of personnel as they are a new organisation that is operating mainly in Farafeni only for now  | Coordinate jointly with CEDAG and other stakeholders at the community mainly the Farafenni Community Child Protection Committee and the Youth Centre  | A key partner that can be of help in implementing future programs most especially on migrants and children on the move projects   |
| **Family Research:** Support young migrants with cash for work project and temporally provides accommodation for them   |  Ngo  | A new office they didn’t have a good number of staff and operate around Farafeni for now  | Work with an implementing partner: **CEDAG**  | They are a potential partner in the area of children on the move and young migrants  |
| **CEDAG** | **Individual assessment:** Supports children on the move in terms of logistical support   | NGO (WAN focal point in The Gambia) | They have less than 10 staff both at the headquarter and in Farafenni. Most often, they work closely with the department of social welfare. | Work with social welfare, Gambia Immigration Department, CWU and The Gambia police force. They also colaborate with **COOPI** in Farafeni  | They are the focal  NGO for the west african protection of children on the move in The Gambia. |
| **Family Research:** Support children on the move at family level   | Ngo  | Limited number of staff  | Work with social welfare and other partners  | Have a good understanding of issues around children on the move   |
| **Social and professional integration**: Support children on proper reintegration most especially children on the move. They also support training of community actors in children on the move project and are responsible for the implementation of the west African standard   |  NGO  | They have a capacity gap in the area of human resources  | They work in coordination with the department of social welfare are responsible for linking with other organisations for reintegration in the west African region  | Need more personnel to be able to respond better   |
| **M&E:** They also monitor all the children they reintegrate across the country   | NGO   | Limited number of staff  | Closely work with the police, social welfare department, Gambia immigration department and the community child protection committee | They have a good understanding of the ECOWAS or WAN standards when it comes to children on the move as they are the focal point NGO for the WAN project in the Gambia   |
| **Community Child Protection Committees (CCPC)** | **Family and Community support:** They serve as an entry in communities when it comes to issues of child protections and gender-based violence.  | Community Base organisation   | Limited knowledge on child protection issues  | Work under the purview of the department of social welfare. They also work closely with NGOs and the police.  | They are very active in identifying children in need of help at the community level and also help in referrals of those case   |
| **The Local Government Council (Kerewan)** | **Family and Community support:** They are responsible for implementing the decentralized structures in the Gambia and do have a budget allocation for children issues   | Local Government Area   | Have few professionals in child protection if any  | Work with the **governor’s office** and other partners  | They have a working knowledge with communities   |
| **SOMA (LOWER RIVER)** |
| **Service Name** | **Benefits** | **Status** | **Capabilities** | **Level of coordination** | **Comments** |
| **Department of Social Welfare** (Mansakonko Office)  |  **Cross-cutting:** There are various services available here:* case management,
* mediation services in dispute relating the children,
* provision of shelter to children

family tracing and re-integration of children  | Public Institution   | There are social workers in Banjul (headquarters). At the regional level there are, on average, 2 social workers in a region  | The Department is currently the lead player in the area of child protection and coordinates the **Child Protection Sub Committee** which comprises of all the stakeholders in the area of child protection in The Gambia. The same committee is replicated in all the regions across the country and is chaired by the Governor. | Capacity in terms of specialization is a challenge. For example, there is no trained child psychologist at the department level |
| **Soma Health Center** | **Emergency Support*** Victims of rapes’ case management,
* Birth registrations
* Reproductive and child health services,
* Immunization campaigns
 | institution | The human resources are available but not enough regarding the ratio of doctors per population. | They work closely with the police and other organisations like **IOM** and the department of social welfare. They sit in the **Child Protection Subcommittee**. | Required a more detailed training in the area of migration and children on the move in terms of case management and referral systems in the child protection system. |
| **Community Child Protection Commitees** | **Family and Community support:** They serve as an entry point in communities when it comes to issues of child protections and gender-based violence.  | Community Base organisation   | Limited knowledge on child protection issues  | Work under the purview of the department of social welfare. They also work closely with NGOs and the police.  | Voluntary organisations They are very active in identifying children in need of help at the community level and also help in referrals of those cases   |
| **The Local Government Council (Mansakonko Area) for Soma.** | **Family and Community support:** They are responsible for implementing the decentralized structures in the Gambia and do have a budget allocation for children issues   | Local Government Area   | Have few professionals in child protection if any  | Work with the **governor’s office** and other partners  | They have a working knowledge with communities   |
|  |  |  |  |  |  |

# DESCRIPTION OF SERVICES

## Representation of services on migration routes

|  |  |  |
| --- | --- | --- |
| **Sites** | **Services** | **Institutions** |
| **FARAFENNI** | **Identification** | Community Actors |
| **Emergency Support** | Farafenni HospitalCOOPICommunity Actors |
| **individual assessment** | CEDAGCommunity ActorsDSW (Kerewan) |
| **Family Research** | COOPICEDAGDSW (Kerewan) |
| **Alternative Placement** | *Gap of service provision > Bakoteh Center (Banjul)**COOPI (Child friendly space)* |
| **Social and professional reintegration** | CEDAG |
| **Follow up** | CEDAG |
| **Family and Community Support** | SOS Children VillageCCPCThe local government council (Kerewan) |
| **Sites** | **Services** | **Institutions** |
| **SOMA** | **Identification** | Community actors |
| **Emergency Support** | Soma Health CenterCommunity Actors |
| **Individual assessment** | Community ActorsDSW (Mansakonko) |
| **Family Research** | *Gap of service provision*DSW (Mansakonko) |
| **Alternative Placement** | *Gap of service provision > Bakoteh Center (Banjul)* |
| **Social and professional reintegration** | *Gap of service provision* |
| **Follow up** | *Gap of service provision* |
| **Family and Community Support** | CCPCThe local Government council (Mansakonko)Community Actors |

## Gap Analysis

First, in the frame of the study, we have noticed **a knowledge gap about the existing services** amongst the CYM. according to the individual surveys, the majority of the CYM met are not aware of the services available in their locality that they can tap for their own benefit.

Moreover, although there are protocols, the effective implementation of those protocols remains a challenge. Therefore, children and young migrants are still moving in a risky situation within The Gambia territory and the ECOWAS member states, with limited care services.

Several gaps are highlighted in care provision:

1. **Follow up** is not enough with regards to the situation of young migrants and children: The main reason is that many of the offices are not well equipped with mobility engines to help them reach out to project intervention sites for monitoring purposes.
2. **Inadequate human resources** have hindered the effective adherence of these protocols in the subregions. There is a knowledge gap in relation with existing protocols due to various factors: i) Civil servants’ mobility between services and ii) lack of training. Indeed, in some instances, staff are moved from one unit to another and replaced by new ones who, often don’t have the required training to work in that area, especially in the immigration and police child welfare unit.
3. **Professional reintegration of young migrants is not effective** due to various reasons: i) It happens that the young migrants misused the Support which is often in Kind. ii) Also, young migrants don’t follow the prescribed designed program of reintegration or family interference. This service is provided by IOM and CEDAG, jointly with the Department of Social Welfare. There is a crucial lack of monitoring for those activities as there are instances when returnee migrants deviate from their professional or vocational trainings.
4. **Some CYM need economic support** (this is actually the main need expressed by them) but only few organisations are responding or providing services in that area.

1. **Family reintegration**: there is little support on the side of the organisations supporting young migrants as compared to their needs. Although IOM is intervening in supporting migrants, mainly those who are stranded on the Backway (way to Europe) and have to come back (return migrants) through IOM facilitated movement. Currently, UNICEF Gambia is supporting the DSW and CEDAG in the re-integration of children on the move to their respective families, although **this need has not been expressed** during the interviews with children.
2. **Gender sensitive services:** The research has proven that, when it comes to service delivery, there is no gender discrimination. Beneficiaries, especially migrants, are treated equally. Nevertheless, among the stakeholders met, we have not come across an organisation that confirms having services for people who are into commercial sex work. Therefore, service delivery for those especially vulnerable young women, is a challenge. At least 2 sex workers interviewed in the frame of this survey mentioned that they benefited from condom supplies and blood test from the public hospital of Farafenni in the context of Covid19 pandemic. In general, sex workers have testified that they are not supported and don’t know where to report abuses.
3. **Recreational needs** have been specially mentioned by young children. There is no evidence that recreational services are delivered although COOPI has established a Child Friendly Space in Farafeni (CFS). The CFS provides recreational activities to children on the move and, by extension, the community. Some education programs such as debate, quiz, and other games, are provided by the CFS. This is part of a broader project “*investing in the future*” which runs up to September 2021. The implemented activities within the CFS could respond to the demand from migrant children.
4. From a **geographical point of view, there is a huge gap in terms of services**. Indeed, most institutional services available for CYM identified in Farafenni and Soma are located in the Banjul area. Even in their respective LGA (Kerewan and Mansakonko) services are very limited. Community actors, even if officially recognized, can hardly fill in the gaps.

## Analysis of available services

* **Services and institutional actors**
	+ **Department of social Welfare**:

The department is the main child protection service provider in The Gambia. It has regional officers across the country who are responsible for coordinating child protection services. As such, they serve as referral points for cases involving children.

The office in Kerewan, which serves the entire region of North Bank, is the one covering Farafeni. Its geographical coverage is wide with inadequate human resource: thus, the office is not being able to cover other parts of the region on a timely manner. The office in Mansakonko serves the entire Lower River Region of which Soma is covered. All those offices work closely with the **police child welfare units** and **immigration child welfare units** to refer cases to the **Bakoteh Shelter** which is the only available shelter for children in need of protection.

The Bakoteh shelther has five social workers, including the shelter manager. It includes a clinic that offers medical services to children temporally placed there and to those within the community. Food is provided at the cost of government and clothing is supported by **CEDAG**. There is no education facility at the shelter, but all the children placed there are attending school: they are transported to and from their schools on a daily basis. Children who need permanent placement are taken either to **SOS** **children village** or **Sinchu Orphanage[[8]](#footnote-8)** for permanent placement. Counselling, psychosocial support and recreational services are offered by the social workers to all children under the care at the shelter. Under the Children’s Act 2005 **the police can also refer children directly to the shelter** for placement as well as the community child protection committees.

* + **Immigration child welfare unit (ICWU)**:

The Immigration Child Welfare Unit was established in 2011. The Unit headquarter is based in Banjul. There are officers’ stations across the country with background in the area of child protection. The establishment of the ICWU is a positive development in the child protection system since it is already actively engaged in work. The **Child Welfare Officers** need training on child protection and migration. The Unit does not have separate vehicles meant for patrol but rely on the station vehicles belonging to all the units at the Immigration. As a result, simple activities such as transportation of children to the shelter become a difficulty. It also lacks child-friendly premises for interviewing children. At the moment, the lack of a separate space for interviewing children in both Farafenni and Soma is a challenge in the Immigration Department makes the issue of privacy and confidentiality mostly not feasible.

* + **Police Gender and Child Welfare Unit (PGCWU)**:

In terms of premises, only one office is allocated in the Police Headquarter to 16 staff members. Meanwhile, PCWOs at the regional and district levels do not have a separate office. Consequently, there is not a safe and calm environment in the police stations to interview children. This has detrimental effects on privacy and confidentiality of cases relating to children. PGCW Officers have to interview children with other people present in the room or outside of the building. Moreover, police stations have cells only for adults, some of which are just one large room.

**Both Soma and Farafenni’s police stations** have police gender and child welfare officers among their staff. However, they often find it challenging to keep children, even missing children, in safe environments as there are no shelters in those settlements. The children’s Act 2005 provides that children who are in conflict with the law should not be kept in the same cells with adults. This is always a challenge to comply with this legal standard as there are not child friendly police station. Further, there is only one vehicle in each police station for dealing with all cases. Thus, the vehicle is overloaded with the activities where child-related cases get deprioritised. Some PGCWOs complained that, in urgent cases such as rapes, they have to walk a long distance at night to deal with the case since neither police vehicle nor transport funding are available. In rape cases, it is also a challenge for PGCWOs to transport and accompany the victim to Banjul. Indeed, local healthcare facilities cannot examine the victims neither in Soma nor in Farafenni. Police stations, in both towns, don’t have either a separate and functional information technology materials for proper recording of cases involving children. They also have some knowledge gaps most especially in the area of psychosocial support and counselling.

* + **Health facilities**

The **Farafenni General Hospital** is the main referral hospital for the whole region of North Bank. They also take referral cases from Soma and other health facilities within the area. They offer all services related to medical attention and reproductive and child health services. There is also a Regional Health Directorate responsible for the implementation of the programs of the ministry of health at the regional level. Services like birth registrations and immunization are also delivered there.

**Soma** has a health centre that offers services ranging from maternal and child health areas as well as birth registrations services. It is difficult to ascertain whether they follow the ECOWAS protocol for children on the move, but one thing that is certain, is that they take cases irrespective of where the patients come from. There are domestic rules that guide the operations of all the facilities across the country.

* + **Area Councils** (Kerewan and Mansakonko)

Kerewan and Mansakonko **area councils** are the local administrative authorities for both Farafenni and Soma. Each area council covers the entire region endorsing the responsibility of the development of their communities and structures like the **village development committees**. Their services include, but not limited to, providing water and sanitation, electricity, recreational parks, construction of markets and car parks. They also offer **sponsorship to needy and vulnerable children** within their area of jurisdiction. They are members to regional child protection sub-committees.

There are a good number of professionals both at the level of the police, Immigration Department, social workers and lawyers who are available to intervene in the area of child protection. The challenge is that, when it comes to specialisation, like psychologists for instance, there is a crucial gap.

Services and actors composing the Child protection system, may not be discriminating to migrants but, due to the constraints in terms of resources, facilities and services are not migrant friendly.

The above response mechanisms are completed by NGOs and IOM, through punctual programs

* + Programs depending on donors’ funding:

**IOM:** They provide re-integration services to children and young migrants who have returned from migrations. This program is offered at the national level to migrants across the country who were facilitated to return back home from the “back-way”. They conduct family tracing to stranded migrants and offer placement as well. Currently they support the shelter for children with food and non-food items as well as capacity building on psychosocial support. Since 2019, IOM is also facilitating technical support to the government (the DSW) in developing the **Standard Operating Procedure (SOPs) for young migrants in The Gambia**. IOM also conducts capacity building activities for government agencies on migration issues and response. The main gap is that IOM only supports migrants whose returns have been facilitated: Therefore, any other migrant who is not captured in their data base is not supported.

**3. SOS Children village:** their offer shelter to children who are in need of family-based care, family strengthening programs, social work training, school, nursery and skills training, and health support to mothers with cancer. The beneficiaries of the permanent placement are mainly children who lack the family support mechanisms and need residential care. They are sensitive to the child right approach but **do not include specific services to children migrants**. The NGO is also implementing a **women empowerment project** in the frame of which they are currently supporting two hundred women and children with incomes generating activities and skills trainings. They target households headed by women and offer training in the areas of violence against women and children. They are also supporting structures called *family welfare committees* in Farafenni. In Soma they have a **youth empowerment project** which is a four-year project that supports youth and children on psychosocial support, skills training and entrepreneurship. They also work with schools on outreach activities with returning migrant.

**4. Child Fund The Gambia**: they are working with three **community federations in the west Coast Region**, where they intervene mainly in Child protection issues, early childhood care and development, children social and financial education scheme in schools. They also create employment opportunities for youth and children who have dropped out from school, through skills trainings. Their geographical area of intervention is the West Coast Region and their programs are youth and children focuses, **without any specific component for migrants**.

**5. CEDAG:** The program intervention area for this organisation at the national level is summarized in the following domains: Supporting and promoting all activities on children’s welfare, Early childhood development , Re-integration of trafficked children to their families and communities within the “Children on the Move project” of the West African Network collaboration with DSW on provision of services especially clothing, food and medical services to children on the move sheltered at Bakoteh. The beneficiaries of the services are mainly children on the move, including those who are victims of traffic.

* **Community practices**

The **awareness of communities on child rights and protection issues**, and their willingness and commitment to take individual and collective action when the rights of a child are violated, is an important aspect of a strengthened child protection mechanism or system. Furthermore, a protective environment for children can only be created when negative attitudes, values and beliefs, regarding child protection, are challenged and changed.

During the research, we met numerous actors at the community level. Among them, are the community child protection committees, religious leaders, youth clubs etc... Despite the fact that some of them know that it is a collective responsibility for one to act, when it comes to issues of child protection, many of them lack the knowledge about the referral mechanisms and the laws available. As we will see below, they don’t play the role of foster parents. Indeed, fostering in The Gambia, as provided for in the Children’s Act 2005 is to be determined by the Children Court and the DSW. Although the communities can also locally foster children, that is not legally recognized. The usual practice is that, if a child is found in a risky situation, the matter is often referred to the relevant authorities like the police and the department of social welfare to take care of the child. People, at the community level, often shy away with sheltering children for fear of reprisal, should something happen to the child during the custody. Foster and other placements are formalities that have to go to the children’s Court for redress and often involve children who are abandoned by their families.

The community actors are key in any intervention despite the constraints they face in terms of resources and facilities. The usual practice is that when they have cases, they refer them to the appropriate authorities for intervention and service delivery. There is also community support like psychological first aid that is often provided.

**Religious leaders** serve as parents to the children under their custody during the period of their quranic memorisation. Numerous children are taken to marabouts that they haven’t met in their life and at a very tender age. Then, they hardly receive visitation from their immediate family members. Some of them run away from the daras due to the hardship they go through and, as such, they are exposing them to more dangers like physical abuse, exploitation and trafficking. Those who chose to remain are often send to the streets, mainly the markets and car parks, to beg for the marabout or the religious leader. There is not much of family contact between the children and their respective family. In most cases, medical papers, like clinic cards are not available when the children got sick. Accommodation is not conducive in some daras and children will have to manage under difficult circumstances.

**Community leaders**: these are people who are within the community (e.g the Alkalolu who are the heads of the community and also the chiefs who are heads a districts). They have some judicial powers in terms of applying the customary law and they are key in decision making processes. They lead community mobilisation efforts and organise their communities for communal activities. Within the community they serve as the entry point for development.

In the absence of child protection services at the community level, alkalolu, seyfo, and Village Development Committees fill in the gap. However, they experience an array of weaknesses: Alkalolu and VDCs are not aware of child protection legislation. Seyfo, even if they are aware of the legislation, lack a full understanding of it. Most of these local authority actors do not know about the existence of child protection services and only a few seyfo have referred cases to them. All of these actors need information on how to deal with cases involving children and teenagers. Indeed, their focus on the tradition impedes the child-related cases from being solved in the best interest of the child. Furthermore, the community actors are keen in seeking information and training on listening and determining child maintenance, support, and custody cases. Indeed, the interviews with district chiefs revealed that they do not apply the same rules for dealing with these cases.

* **Level of coordination of actors and services:**
	+ **National coordination**

The coordination on service delivery, in the area of child protection, exists through the **National Child Protection Steering Committee (NCPSC)** and also the **Regional Child Protection Steering Committee**. This coordination mechanism brings together key State actors and NGOs as well as the UN systems, to sit in one platform and discuss matters related to children. The **Department of Social Welfare**, under the Ministry of Women Children and Social Welfare, is the primary body that coordinates the affairs of the committee. There is also a **National Migration Committee** that brings partners from government and the UN system to sit together and decide matters relating to migration. At the regional level there exist the **technical advisory committee** that is chaired by the regional governor and decides on programs related to the region. All actors and institutions operating in a particular region are members of the technical body.

In the course of the research, it appeared to be evident that stakeholders have a common voice that needs to be enhanced so that coordination and cooperation on programme and case management between child protection actors would be more effective. Inter-agency child protection collaboration and coordination on the programme level emerged with the establishment of the NCPSC, in 2011. The key aim of the steering committee is to coordinate child protection activities of various ministries and agencies and share information among them. The committee meets on a quarterly basis and also, when emergencies come their way. Department of Social Welfare has developed an **interagency child protection guidance** where responsibilities of each institution are spelled out. The list of institutions include the DSW, Police, the Director of Public Prosecutions, the Children’s Court, the Directorate of Health Services, and the Ministry of Basic and Secondary Education, the Juvenile Wing of the Prison Services, UNICEF, IOM, Civil Society Organisations, Day Care Centres, Pre-School Services, and the wider community. It is evident that the guidance mainly focuses on child abuse, while other child protection issues and prevention activities and, consequently, relevant actors are omitted.

* + **Coordination between Community and institutional actors**

The **Community Child Protection Committees (CCPC)** are better placed, by virtue of its proximity to the community and knowledge and understanding of community practices, to advocate for the eradication of certain child protection issues and harmful traditional practices such as Female Genital Mutilation/Cutting (FGM/C), early marriage, corporal punishment and the abuse and exploitation of children.

The **Child Protection Alliance**, **ChildFund** and the **Department of Social Welfare**, in collaboration with and support from **UNICEF**, are setting up Community Child Protection Committees which bring together representatives of Government Departments, Non-Governmental Organisations, community members and leaders, and professionals responsible for helping to protect children from abuse and neglect. The Community Child Protection Committee works as a forum where actors agree on how the community and the different services and professional groups should co-operate to safeguard children, and make sure that arrangements work effectively to bring about good outcomes for children. Regarding, the complexity of Child Protection, the scope of the Committee is required to be multi-sectoral, so that it can contributes to an integrated approach and to facilitate a joint strategy in addressing child protection issues at the community level.

Both Farafenni and Soma have their proper CCPC established as a result of the above.

* **Impact of Covid 19:**

From the survey, we note that institutional actors declare that they have been impacted by the Covid19 pandemic.

In terms of service delivery: The hospital concentrated more on covid 19 than other related issues that affect children and young migrants. Some offices were closed, and number of organisations had to scale down their activities due to the pandemic and, as such, the effective service delivery was affected. The major area that some community actors highlighted is that the Covid19 has affected the funding for the organisations, restrictions of movement have hampered the identification process of migrants in catchment areas. Schools where closed and it opened more space for children to move around.

CYM were affected as some of them were quarantined and tested for Covid19. They were mostly affected by the closure of business and movement restrictions. Institutional response focus has been more on survival and ensuring good health.

# Key Findings and Recommendations

The main Ministry responsible for child protection is the Ministry of Women, Children and Social Welfare, through the Department of Social Welfare (DSW). However, the capacity of DSW in terms of human and financial resources is limited.

There are few social workers in the Gambia and their level of initial training is insufficient. Other ministries with responsibilities for child protection include the Ministry of Health, the Ministry of Basic and Secondary Education, the Ministry of the Interior, the Ministry of Justice and the Ministry of tourism and culture. The responsibilities of these different actors are not always well defined.

**Recommended actions:**

* Strengthen capacities through training on the available child protection services, on child protection issues and rights, on the available laws for the protection of children and young migrants, on the referral pathway for referring cases relating to children, on the roles and responsibilities of key stakeholders in the child protection systems in The Gambia.
* Strengthen cooperation structures (like the National Child Protection Steering Committee) in order to insure the effective complementary actions between the responsible stakeholders.

In most cases, Child Protection services are concentrated in the Banjul area, with little staff at the regional level and a limited decentralization of services.

Regarding the lack of services in the project area (Soma and Farafenni), community actors have a crucial role to play in the protection of CYM. They are recognized within the legal framework as key actors and are organized through the diverse committees supported by the Government. Nevertheless, the interviews led with the community actors show a gap of knowledge on Child Protection legislation. As a matter of fact, most community actors refer CYM cases to institutional actors as they don’t know how to respond to their need.

**Recommended actions:**

* Strengthen community actors capacities on CYM protection.
* Promote community practices through dialogue and collective reflections.
* Guarantee the coordination between institution and community actors through the VDC and the WDC.

Foster care is limited to the Children Court competency. Moreover, community actors do not dare to shelter children. Contrary to its neighbor countries, foster families are not a usual community practice in The Gambia. It worth noting that Soma and Farafenni’s respective regions (South River and North Bank) don’t have Children Court. This makes legal foster care even more difficult for unaccompanied children identified in those two towns.

**Recommended action:**

* Under the NCPSC supervision, revitalize and broaden the foster government program of foster families: identification of families, training and follow up.

Emergency placement is limited to the Bakoteh centre located in Banjul area and ran by the DSW.

**Recommended actions:**

* Strengthen the DSW offices and the CWU in Farafenni and Soma police stations in terms of mobility (means of locomotion) so that identified children can be referred to shelters.
* Strengthen synergies with SOS children village, IOM and COOPI so that vulnerable CYM identified in Soma and Farafenni can take advantage of the existing shelters.

Reintegration programs are not always adapted to CYM concerns and do not target returnee migrants who have returned from the backway on their own. Those CYM do not receive any help, except for those who decide to join a quranic school where they seem to find a kind of spiritual peace. Regarding children, it appears that there are no recreative programs proposed to them.

**Recommended actions:**

* Elaborate life projects counting with the participation of the CYM. It seems to be crucial to target returnee migrants from the backway who do not respond to the IOM criterions.
* Implement child friendly spaces. Also, it would be relevant to sensitize community actors, like marabouts, on the importance of playing on the child development.

Sensitization on the prevention of illegal and dangerous migration appears to mainly focus on the persuasion of the children and young people. Nevertheless, it has been proven that there is no point in trying to convince anyone on his or her life project.

**Recommended actions:**

* The focus of the sensitization should be the instauration of debates, the information delivery in a neutral way.

There are gaps of services for girls and young women migrants who earn a living through prostitution. They don’t know where to report abuses because they believe they don’t have the right to do so and because they don’t know any service they could receive. On the meantime, medical care is conditioned by a police requisition.

**Recommended action:**

* Regarding the significance of prostitution in the Gambia, and the risks to which sex workers are exposed to, it would be relevant to implement a specialized care unit in the Farafenni Hospital, with free access to medical care, including psychological support.
1. “Migration in the Gambia, a country profile 2017”, IOM, 2017. [↑](#footnote-ref-1)
2. The backway is name given to the pathways to Europe, wether by the sea or by land (Senegal, Mali, Niger, Libya, Italy) [↑](#footnote-ref-2)
3. Direzione generale dell’immigrazione e delle politiche di integrazione Divisione II (Ministero del Lavoro e delle Politiche Sociali), REPORT MENSILE MINORI STRANIERI NON ACCOMPAGNATI (MSNA) IN ITALIA, Dati al 31 ottobre 2017 [↑](#footnote-ref-3)
4. Source: Ecpat, Global Monitoring status of action against commercial sexual exploitation of children The Gambia EXECUTIVE SUMMARY, 2015 [↑](#footnote-ref-4)
5. Source: The Gambia Child Protection System, Mapping and assessment report, January 2014. [↑](#footnote-ref-5)
6. Until January 2019, the DSW was under the Ministry of Health and Social Welfare and the Women Council under the office of the vice president. The MoWC&SW was created to gather those two key departments under the same Ministry. [↑](#footnote-ref-6)
7. Children’s Act 2005; Agim, 2010 [↑](#footnote-ref-7)
8. Orphanage mainly supported by “les amis de la Gambie », a Luxembourg based organisation. [↑](#footnote-ref-8)