



Tourism, Diversification, and Resilience in The Gambia Project (TDRGP) Gender Assessment Report and Workplan



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ACRONYMS

ACCOSCA	African Confederation of Co-operative Savings and Credit Association
AfDB	African Development Bank
AG	Accountant General
CBG	Central Bank of The Gambia
CDA	Conflict and Development Analysis
CBOs	Community Based Organizations
CPCU	Central Project Coordination Unit
CSOs	Civil Society Organizations
DCD	Department of Community Development
DHS	Demographic and Household Survey
ESMF	Environmental and Social Management Framework
FFI	Fiduciary Financial Institution
FGDs	Focused Group Discussions
FGM	Female Genital Mutilation
GAP	The Gambia Aid Policy
GBV	Gender Based Violence
GLFS	The Gambia Labour Force survey
GMD	Gambian Dalasi
GMIS	Gender Management Information System
GoTG	Government of The Gambia
GT Board	Gambia Tourism Board
JSF	Jobs, Skills and Finance
KIIs	Key Informant Interviews
LoCAL	Local Climate Adaptive Living Facility
LGs	Local Governments
MoFEA	Ministry of Finance and Economic Affairs
MoLRG	Ministry of Lands and Regional Government
MOGCSW	Ministry of Gender, Children and Social Welfare
MSME	Micro-, Small and Medium-sized Enterprises
NACCUG	National Association of Co-operative Credit Union
NBFI	Non-Bank Financial Institution
ODA	Official Development Assistance
PBCRG	Performance Based Climate Resilient Grant
PRA	Participatory Rural Appraisal
PRP	Poverty Reduction Project
SDF	Social Development Fund
SEA	Sexual Exploitation and Abuse
SH	Sexual Harassment
PAD	Project Appraisal Document
PIU	Project Implementation Unit
RF- NDP	Gambia Recovery Focused National Development Plan (2023-2027)
TDA	Tourism Development Area
TDRP	Tourism, Diversification, and Resilience in The Gambia Project
ToR	Terms of Reference
UNCDF	United Nations Capital Development Fund

UNICEF	United Nations International Children Emergency Fund
UNFPA	United Nations Population Fund Agency
USD	United States of America Dollars
WDC	Ward Development Committees
WOCCU	World Council of Credit Unions

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PART A: GENDER ASSESSMENT

1. INTRODUCTION

1.1 The Country Context

1. Over the years, The Gambia has made significant efforts towards mainstreaming gender into national policies and strategies. In fact, the Constitution of The Gambia recognizes the rights of women and states that women should be accorded the same rights and equal treatment as men and further recognizes that men and women should be given equal opportunities in all activities i.e. political, economic, and social. As revealed, the extent of gender inequality in The Gambia is evidenced by the 2023 Global Gender Gap Report, where The Gambia is ranked 119 out of 146 countries globally and 29th out of 35 countries in Sub-Saharan Africa¹.
2. In the quest towards attainment of gender equality and the empowerment of women, The Gambia has made significant gains over the years, most importantly, the Women's Amendment Act (2010) and its amendment bill that prohibits Female Genital Mutilation in 2019 and the Children's Act (2015) and Amendment to include prohibition of Child Marriage in 2016². These two legislations complement the Constitution (1997), the Trafficking in Persons Act (2007), the Tourism Offences Act (2003), the Domestic Violence Act (2013), the Sexual Offences Act (2013), and the Labor Act (2007) which have all been promulgated to address the rights of women and children and to combat discrimination in all its forms.
3. Further to support the enforcement of these laws and protocols, a Network Against Gender-Based Violence made up of relevant Government Ministries and Civil Society organizations was established. This organization supported and maintained Nine One-Stop-Centers in Major and District Hospitals for the provision of medical, legal, and counseling support to victims/Survivors of Sexual and Gender Based Violence (SGBV).
4. Notwithstanding the gains made in formulating the aforementioned legal instruments and institutions, the absence of legal quotas in some of them and especially the Women's Act, are contributory factors that hinder gender representation. The gender gaps that have persisted over time have weakened women's resilience in the face of shocks and pandemics³. This has been evident during the COVID-19 pandemic, where women in the informal sector reported income loss with female-headed households experiencing higher levels of food insecurity than their male counterparts.
5. From the evidence, gender disparities exist in all works of life from political representation and leadership, education, economy, asset ownership, etc. These disparities are exacerbated by deep-rooted cultural practices such as GBV, child marriage, and harmful traditional practices. Therefore, enhancing gender inclusivity

¹ WEF 2021.

² Revised National Gender Policy, 2024-2033

³ The Gambia National Food Security Survey Report p. 3 – WFP

within the TDRP and the Tourism Sector in particular is an essential strategic intervention. Pursuing targeted approach to integrate gender actions and activities will immensely contribute to narrowing the gender disparities within the Tourism Sector. Leveraging local and global knowledge and experience in tourism recovery and strengthening Micro, Small and Medium Enterprises (MSMEs) along the tourism value chain will have impactful results.

1.2 TDRGP's focus in preventing GBV/SEA/SH

6. The Tourism, Diversification, and Resilience in The Gambia Project (TDRP) aims at improving the diversification and resilience of The Gambian tourism sector by strengthening institutional and policy frameworks, improving capabilities and access to funds for tourism-related MSME and suppliers. It also aims at building resilience through the strengthening of sustainable coastal infrastructure and rehabilitation of existing tourism sites.
7. From the evidence and as cited in the Project Appraisal Document (PAD), TRDP is conscious of the level of gender disparities in The Gambia and the tourism sector in particular. As such, its design encompasses intervention strategies earmarked to contribute to narrow the gender disparity gap. Its indicators as articulated in the results framework are gender disaggregated to facilitate collection and analysis data for women employed in the tourism sector and to monitor progress and assess the impact of the gender-targeted interventions. The project also envisaged to providing training to women entrepreneurs for enhanced business development skills coupled with tailor-made mentoring through the development of a women entrepreneurs' network.
8. Equally, the project intends to address the risks of GBV, including risks of Sexual Exploitation and Abuse (SEA) and Sexual Harassment (SH) within its operational zones and in particular those affecting actors within the tourism value chain. Women's leadership, voice, and agency will be enhanced through the Gender Action Plan activities with additional actions focusing on strengthening legislation to prohibit SH in the workplace and creating obligations for tourism industry employers to have anti-sexual harassment policies⁴.
9. In demonstrating its commitment to elimination of SEA/SH, the TDRP in 2023 adopted the (SEA and SH at Work Policy. The policy addresses Sexual Exploitation, Abuse, and Sexual Harassment (SEA/SH) within the workplace, encompassing both office premises and external locations where staff or representatives of the Project Implementation Unit (PIU) carry out their duties. It delineates the definitions of sexual exploitation, abuse, and sexual harassment, outlines reporting procedures, establishes mechanisms for investigating SEA/SH incidents, provides support for complainants, and stipulates sanctions for perpetrators⁵.
10. As part of its operational safeguards, the project in 2022 formulated a comprehensive Environmental and Social Management Framework (ESMF)⁶ within which GBV/SEA/SH complaint and grievance mechanism is elaborated. The mechanism provide guidance in dealing with complaints and grievances related to issues including

⁴ TRDP Appraisal Document

⁵ *TDRP Sexual Exploitation, Abuse and Sexual Harassment, (SEA&SH) at Work Policy, 2023.*

⁶ *TDTP Environmental and Social Management Framework (ESMF), 2022*

GBV/SEA/SH that might be encountered during the implementation of the TDRP. The Complaint Mechanism strongly emphasized that gender-based violence complaints be handled in a confidential, ethical, and survivor-centered manner, including how data will be safeguarded to ensure that names of survivors or alleged perpetrators will not be shared.

11. The above highlights amply demonstrate the importance attached to tackling incidences of GBV/SEA/SH hence justifying the gender assessment and its accompanying workplan.

1.3 Purpose of the assessment

12. The overarching purpose of the assignment is to support the meaningful integration of gender into tourism operations and women-led businesses. The goal is to develop a gender assessment focused on the tourism sector, designing interventions that increase inclusiveness, close relevant gender gaps, and identify corresponding sex-disaggregated indicators.
13. Specifically, the assessment identifies women's future skills needed across the Micro-, Small and Medium sized Enterprises (MSMEs) skills continuum. It further highlights overarching gender disparities, challenges including risks of gender-based violence (GBV), Sexual Exploration and Abuse and Sexual Harassment (SEA/SH) and their associated social norms.
14. The assessment culminates in the identification of additional women friendly economic activities and the development of a workplan with actionable recommendations for addressing the identified economic needs and gender-related gaps and risks.

1.4 Structure of the report

15. The report present findings, conclusions and recommendations of the gender assessment undertaken to support the implementation of a special fund allocated by the TDR Project for interventions that relates to promoting gender equality and in prevention and mitigation of GBV/SEA/SH. It is formulated in accordance with the aims and deliverables of the assignment as embedded in the approved Terms of Reference (ToR). The report further culminated to development of an actional workplan and budget that will guide the execution of related activities during the project lifespan.
16. Specifically, the report is structured in two parts (A&B) as discussed below. Part A elaborates on a detailed analysis of issues related to gender disparities in The Gambia zooming into drivers of GBV/SE/SH, associated risk factors and mitigation measures. It also discussed the capacity gaps impacting prevalence of GBV with analysis on livelihood opportunities especially for women entrepreneurs along the tourism value chain. Part A also dilated on existing financing options for implementation of similar interventions in The Gambia with major conclusions and recommendations that inform the workplan and budget accompanying the assessment report.
17. The workplan as depicted in part two highlights the intervention strategies and their accompanying activities. It also identified the relevant stakeholders, means of verification and resource requirement for the implementation of each activity. The

workplan is accompanied by a logical framework with defined targets and indicators to facilitate effective monitoring and tracking of results.

2. METHODOLOGY

2.1 Design approach

18. The design of the assessment entailed a mixed-method approach with combination of qualitative and quantitative data collection instruments. As part of the desk review, relevant documents were referenced including the PAD, ESMF, National Gender Policy and related special studies on GBV/SEA/SH conducted in The Gambia.
19. A two-stage stratified sampling procedure was adopted reaching out to; institutions, associations and GBV Service Providers along the tourism value chain. The first stage was in the form of administering relevant Participatory Rural Appraisal (PRA) tools with stakeholders proportionately identified in each of the project intervention areas (TDA1 and Kunta kinteh Island). The second stage centered on discussion with institutions and others key stakeholders connected to tourism development in the country and the project in particular.
20. Aimed at targeting specific GBV/SEA/SH service providers, a purposive sampling method was used to compliment the other applied methods. This was meant to enhance inclusivity of those service providers as the victim and one-stop centers routinely tackling cases of GBV. The GBV service providers' map was used to identify and interview the respective questionnaire respondents.

2.2 Sample size and data collection instruments

21. On the overall, the assessment ended with 108 individual questionnaires, 27 Key Informant Interviews (KIIs) and 6 Focused Group Discussions (FGDs). The individual questionnaire respondents were sampled from the associations in which the FDG sessions were held while the KII respondents represented the sampled list of GBV service providers.

2.3 Data analysis and presentation

22. In drafting and finalizing the assessment report, a combination of data collection and analysis tools were used. While Kobo Collect online platform was deployed as electronic data entry screen, Microsoft Excel was used to generate the tables and related illustrations. These generated tables and charts were finally imported into word version as presented in the assessment report.
23. Data quality control measures were applied at the onset of data collection process. Prior to the field mission, enumerators were trained on the data collection instruments with a simulation exercise to better understand the assessment tools. In addition, a lexicon was developed and a field pre-test conducted; all geared towards improving the data quality.

The electronic data collection tool were also designed with necessary checks and control measures to minimize data entry errors.

3. ANALYSIS AND INTERPRETATION OF FINDINGS

24. This section presents the findings as generated from the various data collection instruments used during the assessment. It is structured in accordance with the expected outputs of the assessment and presented in sub-sections with highlights of secondary data followed by the findings from the actual field work conducted during the assessment.
25. The sub-sections are analyzed and interpreted to the extent possible; flagging issues that need attention during the TDRP implementation. The conclusions and recommendations drawn from the assessment finally guided the development of the actionable work plan and budget.

3.1 Demographic information about respondents

26. On gender representation of respondents, 83% and 82% in Kunta Kinteh and TDA 1 are respectively women as represented in table below. Majority of the respondents falls within the age category of 35-50yrs with female representing 55% and male being 57%. Only 19% of the female respondents are youths (18-35yrs). The sex disaggregation by intervention area also revealed a similar pattern whereby 65% of the respondents from the Kunta Kinteh area and 54% of the respondents from the TDA 1 are within the age category of 35-50yrs.

Table 1: Category of respondents by gender, age and location

Age of respondents	Sex		By Intervention Area	
	Male	Female	TDA	Kunta Kinteh
18 – 35yrs	7%	19%	16%	24%
35 – 50yrs	57%	55%	54%	65%
Above 50yrs	36%	26%	30%	12%

Source: Gender assessment field data - 2024

3.2 Policy and regulatory frameworks

27. The legal, regulatory, and institutional framework of the tourism sector is the main system that consists of government rules and regulations and the intermediating institutions governing how the sector functions⁷. Under the GTBoard Act, 2011, The Gambia Tourism Board is responsible for the coordination, administration, and marketing of destination Gambia and connected matters.
28. While a host of Policy and Legal frameworks exist to protect women against GBV/SH/SEA, evidence has shown the inadequacy of these instruments to guarantee

⁷ Gambia Recovery Focused National Development Plan (2023-2027)

the full rights of women and girls. Additionally, implementation has been impeded by a host of factors which include existing gender norms and institutional factors, etc.

29. Absence of adequate measures to address discrimination in all sectors of employment and an absence of adequate reporting and monitoring mechanisms for failure to comply with the provision of legal instruments e.g. compliance on reporting child marriage. Some legislative frameworks also failed to make clear definitions and adequate provisions to protect women against certain types of GBVs such as marital rape. Policy/legislative gaps also exist in protecting women against sexual harassment in places of work.
- BOX 1: 'There is need for enforcement of existing laws and establishing stronger legal frameworks to protect victims and punish offenders. This includes improving reporting mechanisms and ensuring that perpetrators are held accountable'*
Source: FGD Participants TDA 1
30. The above statements corroborate findings of the assessment as respondents in both TDA 1 and Kunta Kinteh Island emphasized the need to strengthen the legal frameworks as echoed in Boxes 1 and 2.
 31. Male participants in both TDA and Kunta Kinteh Island agreed that enforcement of existing laws must be strengthened to protect women against all forms of GBV/SEA/SH. This suggests policies exist, but enforcement has been weak, also gaps exist in the existing legal framework meant to fully protect the rights of women. Examples of gaps in existing policies and legal frameworks include the absence of gender quotas at all levels of decision-making to enhance women's participation in politics and leadership in public offices.
- BOX 2: "Strengthen the enforcement of existing laws and policies related to GBV and SE. Ensure that legal frameworks are robust and provide clear mechanisms for reporting and addressing incidents of violence and exploitation."* *Source FGD Participants Kunta Kinteh Island*

3.3 Gender disparities

3.3.1 Decision making

32. Inequalities mostly disadvantage women, stifling their effective participation and contribution towards national development. The extent of the gender gap is shown in the limited representation of women in leadership (senior-level) positions within the public sector. Where only 27% of women are in leadership positions in the Government, compared to 73% of men holding leadership positions across the Government⁸.

⁸ Monographs on Women Political Participation in The Gambia, 2018 and extracted from the National Gender Analysis for The Gambia– UNFPA 2022 (Page 22 and Table 4

33. Furthermore, despite the low participation of female candidates in the 2022 legislative elections, where 19 female candidates contested, only 3 candidates representing 15.8% were elected, failing to elect 16 candidates (84%). Women constitute 13.6% of the cabinet appointments. Therefore, the absence of legal quotas and gaps in existing legal instruments such as the Women's Act, are all contributory factors that hinder women's representation in decision-making, in addition to the deep-rooted patriarchal nature of Gambian society and preference for male leaders as decision-makers in all aspects of our socio-cultural affairs.
34. A 2019 UNCDF publication⁹ reported that 38% of men surveyed in their study believe that they should have control over their wives' financial decisions. This shows that such norms limit women's access to financial services, especially where women prefer to keep their husbands out of such decisions but need their permission to access financing to establish or expand their businesses. The report also mentioned that evidence exists to show that income generated by women is mostly channeled back towards household needs such as supporting the education of their children, daily household expenses, and investing in business ventures.
35. On assessing the decision-making authority in the household across men and women, the findings as tabulated below shows that except for marriages (girl child in particular), women when asked claimed to be making decisions on economic and livelihood activities, daily food ration, health service provision, and sending children to school. While men respondents in all types of decisions, claimed to make decisions jointly with their spouses.

Table 2: Household decision making authority by gender

Type of decision	Decision Making Authority by Gender									
	Female					Male				
	Husband	Wife	Both	Single	Others	Husband	Wife	Both	Single	Others
Economic and livelihood activities	19%	24%	24%	28%	5%	29%		50%	21%	
Daily food ration (quantity & intervals)	6%	48%	16%	23%	7%	21%	15%	43%	21%	
Health service provision	14%	35%	24%	24%	3%	31%		46%	23%	
Marriages (girl child in particular)	43%	14%	20%	12%	11%	9%		73%		18%
Sending children to school	22%	32%	21%	23%	2%	17%		67%	8%	8%

Source: Gender assessment field data – 2024

36. Differentiating decision-making patterns at TDA1 and Kunta Kinteh, the data as tabulated below shows that apart from daily food rationing, all other decisions in the Kunta Kinteh Island area are made by husbands. Meanwhile, in the TDA1, most

⁹ : Power Assessment of Women's Economic Empowerment in The Gambia - UNCDF 2019

respondents are single by status, and therefore the decisions taken are influenced by this factor. Therefore, decisions related to economic and livelihood activities, daily food ration, and health service provision are more of an individual decision.

37. However, 30% of respondents stated that husbands make decisions about marriage, similarly, 30% of respondents also stated decisions about marriage are joint decisions between spouses. On the decision to send children to school, 32% of respondents claimed that wives make these decisions, while 32% also claimed that such decisions are a joint responsibility of both partners.

Table 3: Household decision making authority by Project Area of Intervention

Type of decision	Decision making authority by Project Area of Intervention									
	KUNTA KINTEH					TDA1				
	Husband	Wife	Both	Single	Others	Husband	Wife	Both	Single	Others
Economic and livelihood activities	65%	18%	17%			12%	24%	29%	33%	2%
Daily food ration (quantity & intervals)	6%	88%	6%			9%	34%	21%	28%	8%
Health service provision	41%	29%	30%			11%	31%	27%	29%	2%
Marriages (girl child in particular)	76%		6%		18%	30%	17%	30%	12%	11%
Sending children to school	71%	23%	6%			11%	32%	32%	22%	3%

Source: Gender assessment field data – 2024

3.3.2 Employment opportunities

38. As cited in The Gambia's Recovery Focused National Development Plan, tourism products of The Gambia are old and worn out in the sense that the same products have been around since the beginning of the industry. There is a need to diversify tourism products to meet the changing demands of tourists. Such diversification should be encouraged both within the core product base and for other tourism products and niches, such as culture and heritage, traditional ceremonies, domestic tourism, community tourism, eco-tourism, conference and incentive travel, sports and recreation tourism, culinary tourism, medical and wellness tourism, and all-inclusive packages. With such diversification, "Destination Gambia" will be more attractive to tourists, whilst overcoming the limitation of seasonality¹⁰.
39. The participation rate of men in formal employment is higher than that of women with only 43% of women being economically active compared to 64% men (UNCDF, 2019) The report further highlighted an average earning difference of USD700 in favour of men compared to women counterpart. Furthermore, Labor Force participation is higher with men (53.2%), compared to women at 37.8%, which impacts productivity and the contribution of women to economic growth. Unemployment is higher in women at 12.6% versus men at 6.7%.

¹⁰ Gambia Recovery Focused National Development Plan (2023-2027)

40. The share of economically active (employed and unemployed) is higher for males at 76.3% compared to females at 53.8%. Disparity in employment opportunities also exists among male and female youths in terms of paid employment opportunities, where 17.5% of male youths were in paid employment compared to only 10% of female youths.
41. Findings from desk review further revealed that participation of women in the ICT sector is lower when compared to that of men. In natural science women represent only 20% compared to men at 80%, similarly, with engineering technology, men represent 79%, while women only represent 21%. As we move towards a world of digital economy and digital services, it is important to bridge this gender gap to reduce inequality in employment opportunities for women.
42. As shown in the table below, 95% of female respondents are self-employed the rest are either an employee or unemployed, while 100% of men interviewed are self-employed. The data validate the disparity in employment opportunities and economic advantage men have over women in the tourism sector across both TDA1 and Kunta Kinteh Island.

Table 4: Employment Status by gender along the tourism sector

Employment status	Percentage	
	Female	Male
Employee	2%	
Self-employed	95%	100%
Unemployed	3%	

Source: Gender assessment field data - 2024

43. Furthermore, and as illustrated below, while 64% of women reported that their jobs are seasonal, only 43% of men classified their jobs as seasonal. In addition to that, more men still reported being in a full-time job at 57%, compared to 31% of female respondents reporting being in a full-time job. Women need more stable and reliable sources of income through more targeted interventions to bridge the gender gap. More women participate in informal employment at 84.7% compared to men at 74.7%. This limits women's financial autonomy as they continue to be affected by lower profits operating in informal markets.

Table 5: Nature of job by gender and project intervention area

By Sex	By Intervention Area
--------	----------------------

Nature of Job	Female	Male	TDA 1	Kunta Kinteh Island
Seasonal	64%	43%	32%	47%
Part-time	5%	0	5%	0
Full time	31%	57%	62%	53%

3.4 Pertinent GBV/SEA/SH challenges

44. Gender-based violence (GBV), sexual exploitation and abuse (SEA), and sexual harassment (SH) are significant challenges in The Gambia. Despite legal frameworks and efforts to address these issues, they remain pervasive due to deep-rooted cultural norms and societal attitudes.
45. The widespread prevalence of GBV, with many women and girls experiencing various forms of violence, including domestic violence, rape, and female genital mutilation. As revealed, 46% of women aged 15-49 have experienced physical violence at least once since age 15. GBV is significantly high, with FGM at 73% of all women and girls aged 15-49¹¹.
46. Cultural Norms in the form of traditional beliefs and practices perpetuate gender inequality and violence. The assessment further revealed and cited in the DHS (2019-2020) that, a significantly greater percentage of women (55%) than men (40%) agree that a husband is justified in hitting or beating his wife under one or more specified circumstances. This is aggravated by weak enforcement of existing legal and institutional instruments. Under such circumstances, survivors are confronted with stigma and lack access to justice and support services.
47. Awareness on GBV is generally low and as revealed, 70% of the female and 57% of the male respondents have low knowledge and understanding of GBV/SEA/SH as highlighted in the table below. Correspondingly, 68.7% and 67.39% of the respondents in Kunta Kinteh and TDA 1 intervention sites respectively have low knowledge and understanding too. On gender dimension, 70% of women have low level of GBV/SEA/SH awareness compared to 57% men. The results highlight the necessity of sensitizing the project beneficiaries in the intervention areas on the GBV/SEA/SH issues and matters.

Table 6: knowledge and understanding of GBV/SEA/SH issues

How would you rate your knowledge and understanding of GBV/SEA/SH issues	By Sex (%)		By Intervention Area (%)	
	Female	Male	TDA 1	Kunta Kinteh
High	5	0	4	6
Low	70	57	68	69
Medium	25	43	28	25

¹¹ Demographic and Health Survey 2019-2020

Source: Gender assessment field data - 2024

48. Furthermore, and to triangulate findings from other sources, during the field data collection exercise, respondents were asked to provide a list of the types of GBV/SEA/SH they are acquainted with. Notwithstanding the low level of awareness, they lamented existence of numerous types as tabulated below:

Table 7: Types of GBV/SE/SH by gender

Respondents	Types of GBV/SEA/SH
Female	Rape: Persistent issue of sexual violence, with survivors often facing significant trauma and stigma.
	Domestic Violence: Includes wife battering and physical abuse, reflecting ongoing issues of intimate partner violence.
	Sexual Harassment: Includes inappropriate touching and verbal harassment, affecting individuals in various settings.
	Child Marriage and Exploitation: Early and forced marriages, along with exploitation of children, undermine their rights and well-being.
	Sexual Exploitation and Abuse (SEA): Particularly noted in contexts where individuals are coerced into sexual acts, such as in exchange for employment.
	Physical Assault: Includes various forms of physical abuse, such as stabbing and general assault, impacting individuals' safety and health.
	Emotional and Psychological Abuse: Involves emotional violence and psychological torture, contributing to long-term mental health issues.
	Power Imbalance: Contributing to GBV through unequal power dynamics, often exacerbated by socio-economic factors.
Male	Gender Based Violence (GBV): Includes various forms of violence directed at individuals based on their gender, such as physical assault and emotional abuse.
	Forced Marriage: The practice of marrying individuals against their will, often violating their rights and autonomy.
	Wife Battering: A form of intimate partner violence where women are physically abused by their spouses.
	Sexual Exploitation: Occurs when individuals are coerced into sexual activities, often in exchange for employment or other benefits.
	Rape: Non-consensual sexual acts that have severe psychological and physical consequences for survivors.
	Intimate Partner Violence (IPV): Includes various forms of abuse within intimate relationships, such as physical and emotional violence.
	Sexual Abuse: Encompasses any non-consensual sexual activity, including sexual harassment and assault.

Source: Gender assessment field data - 2024

49. As tabulated below, majority of the respondents (78% female and 79% male) reported the existence of GBV/SEA/SH cases. The same pattern is also revealed by an analysis of the respective intervention areas, showing 76% and 78% of the respondents in Kunta Kinteh and TDA 1 respectively.

Table 8: Prevalence of cases of GBV/SEA/SH by gender and area of intervention

Prevalence of cases of GBV/SEA/SH	By Sex		By Intervention Area	
	Female	Male	TDA 1	Kunta Kinteh Island
No	22%	21%	22%	24%
Yes	78%	79%	78%	76%

50. The results indicated that majority of the respondents (89% female and 86% male) have never attended any training or sensitization program on GBV/SEA/SH as shown in the table below. This is also translated by the analytic results of the two intervention sites with TDA 1 showing 90% and Kunta Kinteh 75%. Building the capacities of the beneficiaries through training and sensitization programs is a critical deliverable that the project should undertake.

Table 9: Training or sensitization on GBV/SEA/SH by gender and area of intervention

Have you ever attended training or sensitization on GBV/SEA/SH?	Percentage			
	Female	Male	TDA 1	Kunta Kinteh
No	89%	86%	90%	75%
Yes	11%	14%	10%	25%

51. Although the respondents are aware of GBV/SEA/SH cases, 62% and 93% of the female and male respondents are not aware of any reporting mechanisms for such cases as in the **table** below. This justifies the need for the GBV component of the project to embark extensively towards sensitising beneficiaries on the reporting mechanisms

Table 10: Awareness of the existence of reporting mechanism for GBV/SEA/SH cases by gender

6. Are you aware of the existence of any reporting mechanism for GBV/SEA/SH cases	Percentage	
	Female	Male
No	62%	93%
Yes	38%	7%

52. The assessment reveals that 70% and 71% of the female and male respondents respectively do not know off any organization working with victims of GBV/SEA/SH or addressing issues concerning GBV/SEA/SH in their communities as depicted in the table below. However, by intervention area, whilst 77% respondents in the TDA 1 said no, 65% of the respondents in Kunta Kinteh are aware of organisations working with victims of GBV/SEA/SH and addressing related concerns.

Table 11: Knowledge on organizations working on GBV/SEA/SH matters

Do you know of any organization working with victims of GBV/SEA/SH or generally addressing issues concerning GBV/SEA/SH in this community	By Sex		By Intervention Area	
	Male	Female	TDA	Kunta Kinteh
No	71%	70%	77%	35%
Yes	29%	30%	23%	65%

53. The table below reveals that 74% and 67% of the female and male respondents respectively are not aware of any counseling services for victims of GBV/SEA/SH. A closer analysis by intervention areas however shows different results. Whilst 81% of the respondents reported no knowledge of counseling services for victims, 75% of the respondents reported the availability of counseling services for victims.

Table 12: Existence of counseling services for victims of GBV/SEA/SH

Are there any counseling services for victims of GBV/SEA/SH in this area	By Sex		By Intervention Area	
	Female	Male	TDA 1	Kunta Kinteh
No	74%	67%	81%	25%
Yes	26%	33%	19%	75%

3.5 Women livelihood opportunities

54. The Government recognized gender equality and women empowerment as a key enable to the attainment of sustainable development. The tourism sector in The Gambia is labor-intensive and has high female participation rates. Most women are involved in various roles, from hospitality and services (selling fruit, juices and handicrafts) to management and entrepreneurship. Efforts have been made to linking women's horticultural producers to hotels and restaurants. Additional investments are made to achieve broader based benefits in the tourism sector
55. According to The Gambia Labour Force survey (GLFS 2022-23) women account for 39.6% of the labour force¹². The GLFS (2022-23), further highlighted that women work in low-quality jobs, on average eight in ten women work in the informal sector,

¹² The Gambia Labour Force survey (GLFS 2022-2023)

predominantly in those activities requiring low levels of skill and capital, accounting for 70% of unskilled laborers, earning less than men. In the tourism sector, they work in craft and trade related activities with opportunities for the establishment of micro and small enterprises as start-up cost are very low.

56. This is corroborated by the Gambia Poverty and Gender Assessment (2022) by the World Bank, reporting a stark gender gap in labor market outcomes despite the progress made in boosting girls' educational attainment. Three out of four women (75%) of working age have no access to own earnings, as opposed to nearly half of men¹³. The lack of economic empowerment weakens the position of women in both the household and political life. Gender norms and male influence contribute to limitation of women's access to financial services and other assets limiting their participation in income generating and livelihood activities.
57. The table below shows the main economic and livelihood activities of the respondents in the tourism sector. The findings reveal that 100% of male respondents are mainly engaged as craft vendors. The female respondents are also engaged as craft vendors (52%), fruit and juice sellers (27%), hairdressers (14%), hospitality (1%) and others (6%). An analysis of the two intervention areas, reveals that 60% and 50% of the respondents in TDA 1 and Kunta Kinteh Island respectively are craft vendors followed by fruit and juice sellers (26% for TDA 1 and 6% for Kunta Kinteh Island). Whilst 6% of the respondents are employed as hospitality workers, there are no hospitality worker among the TDA1 respondents.

Table 13: Main Livelihood activity in the tourism value chain

Main Livelihood activity in the tourism value chain	By Sex		By Intervention area	
	Female	Male	TDA 1	Kunta Kinteh
Craft vendor	52%	100%	60%	50%
Fruit and juice seller	27%	0	26%	6%
Hairdresser	14%	0	13%	6%
Hospitality	1%	0	0	6%
Others	6%	0	1%	31%

58. In terms of educational levels, 42% of the female and 57% of the male respondents attained secondary education. Only 8% of the female respondents achieved tertiary education and no male respondent attained tertiary education. 47% of the TDA 1 area and 24 % of the Kunta Kinteh Island attained secondary education. Respondents for the TDA 1 area (8%) and Kunta Kinteh Island (6%) attained tertiary education.

Table 14: Highest level of formal education by gender and area of intervention

By Gender	By Intervention Area
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¹³ Gambia Poverty and Gender Assessment Report (2022)

Highest level of formal education	Female	Male	TDA 1	Kunta Kinteh
None	14%	14%	14%	12%
Other	17%	7%	10%	53%
Primary	18%	21%	22%	6%
Secondary	42%	57%	47%	24%
Tertiary	8%		8%	6%

59. The average annual incomes for the respondents are GMD 36,750 and GMD17,807 in the TDA 1 and Kunta Kinteh Island respectively as presented in the table below. The annual highest income of GMD 200,000 in the TDA 1, more than doubles that of Kunta Kinteh Island (GMD 96,000). Similarly, the mean income value of the female respondents is GMD 32,206 lower than that of the male respondents (GMD 42,222). From the findings, men have the highest average annual income compared to the women which is also another manifestation of gender disparities of income levels in favor of men.
60. Similarly, the same trend of income disparity exists between rural and urban tourists value chain actors as those from TDA1 tend to have higher average annual income. This income differential is explained by the lesser tourist arrivals and products in the rural compared to urban centers. This finding is alluding to the need to expand, decentralize and diversify tourism products and services to the rural communities; an opportunity for the TDRGP to invest.

Table 15: Estimated annual income by gender and region

Approximate Average Annual Income – GMD			
Area	Lowest	Mean	Highest
TDA1	1,200.00	36,750.00	200,000.00
Kunta Kinteh	1,000.00	17,807.00	96,000.00
Female	1,000.00	33,206.00	200,000.00
Male	5,000.00	42,222.00	150,000.00

61. Evidence from the assessment reveals that 82% of the female and 86% of the male respondents did not receive any financial support to boost their businesses in the last three years. As tabulated below, no respondent in the Kunta Kinteh Island benefited from financial support compared to only 20% of the TDA 1 respondents who claimed to have benefitted. A big challenge is lack of financial resources and access to credit to improve business operations. Improving access to capital and the terms of credit could also support women in transitioning into more capital-intensive male-dominated sectors and support their performance once there. Interventions could promote savings or seek to improve the terms of loans that women entrepreneurs can receive through

tools such as credit guarantee schemes or psychometric testing in absence of collateral¹⁴.

Table 16: Access to financial support by gender and area of intervention

Any form of financial support to boost your enterprise in the last three years	By Sex		By Intervention Area	
	Female	Male	TDA 1	Kunta Kinteh
Can't Remember	1%	0	1%	0
No	82%	86%	78%	0
Yes	17%	14%	20%	0

62. The findings also reveal that grants were given to respondents by the GT Board and Africell, with 92% of it provided by GT Board as shown in the table below. Of the total grants allocated, women received 59% of GT Boards' grant and the men benefitted 41%. The total grant of Africell was given to the women. Supporting micro and small businesses accessing the TRDP's matching grant scheme would be an exciting opportunity to boost their businesses. Programs that enable women to have access to greater capital may support entry into male-dominated sectors with higher start-up capital requirements. Facilitating access to credit may also help women stay and thrive in these sectors¹⁵.

Table 17: Source of grants by gender

GRANTS – GMD						
Source	Amount	% of grant provided	Female		Male	
			Amount Received	%	Amount Received	%
GT Board	29,000	92%	17,000.00	59%	12,000.00	41%
Africell	2,500	8%	2,500.00	100%	0	0
TOTAL	31,500.00	100%	19,500.00		12,000.00	

3.6 Risk factors and driver of GBV/SEA/SH

Risk factors associated with GBV/SEA/SH are factors that can potentially increase the incidence of GBV happening. These factors can either relate to or occur as a result of individual, societal, or economic factors. Some of these are discussed below¹⁶.

63. **Economic dependency** – when women depend entirely on their husbands (in this case as housewives exclusively), this can be a catalyst for GBV or related incidences, as men with more financial control and power can use this to abuse their spouses who are

¹⁴ Breaking Barriers – Female Entrepreneurs Who Cross Over to Male Dominated Sectors – WB 2021

¹⁵ Breaking Barriers – Female Entrepreneurs Who Cross Over to Male Dominated Sectors – WB 2021 -P71

¹⁶ Risk factors for violence against women in high-prevalence settings: a mixed-methods systematic review and meta-synthesis. *BMJ Global Health*, 7(3),

economically dependent on them for everything. Relating this to the tourism sector, women entrepreneurs in the tourism industry given the seasonal nature of their jobs, may have to economically depend on their husbands fully during off-season periods. Thus, making them vulnerable to GBV/SEA/SH, especially when they are in polygamous marriages.

64. **Women's limited awareness about their rights** can be partially linked to lower levels of education as this is identified as a factor that can explain women's limited awareness of their basic rights enshrined in the relevant acts and policies in the country. Consequently, this makes them more vulnerable to the different types of GBV/SEA/SH. Lack of knowledge about the relevant warning GBV/SEA/SH signs can also be attributed to lower levels of awareness of GBV issues.
65. **Acceptance of some societal norms** –Societies that are heavily leaning towards patriarchal norms, have a high tendency to accept certain types of GBV/SEA/SH example intimate partner-related violence, which are considered part of marriage and widely accepted as inevitable, failing to recognize the well-being of women. The existence of these norms to some extent promotes GBV/SEA/SH
66. **Economic dependency on Tourists**– The tourism industry is a key contributor to economic growth in The Gambia. It creates direct and indirect employment for many Gambians, among these are women entrepreneurs providing different services. High dependency on tourists for economic gains may have consequences that include sexual exploitation, especially for boys and girls and even women. Gambia has been accused as a sex tourist destination and this negative image is a consequence of the high dependency on tourists for economic gains.
67. Overall structural issues such as gender inequality, and widespread poverty are contributory factors in communities where violence against women is prevalent, in such environments, there are high tendencies for violence against women to be accepted especially in highly patriarchal societies. Therefore, interventions supporting the closing of the gender gap become imperative.

3.6.1 key Risk Drivers of GBV/SEA/SH

68. The assessment examined the most prevalent GBV/SEA/SH risk drivers within the project area of intervention as tabulated in the risk matrix below:

Table 18: GBV/SEA/SH risk assessment matrix

Specific Risks	Probability			Impact	Mitigation
	L	M	H		
Risk driver 1: High rate of unemployment					
Exacerbates stress and	HIGH			Frustrations and increased vulnerability to women job seekers hazards of	Investing in skills and entrepreneurship development for women

economic dependency.		GBV/SEA/SH. This driver also leads to illegal migration with its detrimental consequential effects on women.	and youth along the tourism value chain. Diversifying tourism related products and services will add value
Risk driver 2 : High cost of living			
The economic strain with individuals struggling to meet basic needs	HIGH	Increased financial pressures and potential exploitation or abuse on girls and women	Promoting alternative sources of livelihood and facilitating access to financial serves and especially for women entrepreneurs.
Risk driver 3 : Harmful Cultural Norms			
Cultural practices and norms that perpetuate gender inequality. violence against women, and discrimination.	MEDIUM	Associated negative effects include early child marriage, forced marriage and school dropout especially for girls.	Extensive sensitisation, intergenerational dialogue and advocacy on the enforcement of existing GBV/SEA/SH Laws
Driver 4: Power imbalances			
Power Imbalances leading to inequal decision making especially on distribution of wealth	LOW	Those rooted in gender inequality and economic dependency are crucial factors that lead to exploitation and abuse of economic resource and social structures.	Continuous advocacy on allocation of quotas in the distribution of decision-making position

69. These drivers are consistently highlighted as the primary contributors to gender-based violence (GBV), sexual exploitation and abuse (SEA), and sexual harassment (SH) by respondents. While other factors like migration and climate change were also mentioned, the combination of high unemployment, high cost of living, and power imbalances appears most frequently. The intersection of these key drivers further exacerbates the risk of GBV/SEA/SH.
70. The findings of the assessment in terms of the most common risk factors of GBV/SEA/SH align with the report findings presented in the 2024 updated Conflict and Development Analysis (CDA). Specifically, the CDA highlighted the drivers of risk including high cost of living, marriage, and domestic issues. GBV was attributed to the high cost of living which affects the man's ability to provide for the needs of the family, especially where more than one wife is involved. Marriage and domestic issues become prevalent during economic hardship, leading to increased domestic violence at home and increased competition among wives for limited resources. This becomes worse when the husbands take sides, leading to physical assault¹⁷.

¹⁷ Updated Conflict and Development Analysis Report – UN-WB HDDP Facility - 2024

3.6.2 Types of GBV, SEA/SH prevalent in project interventions sites

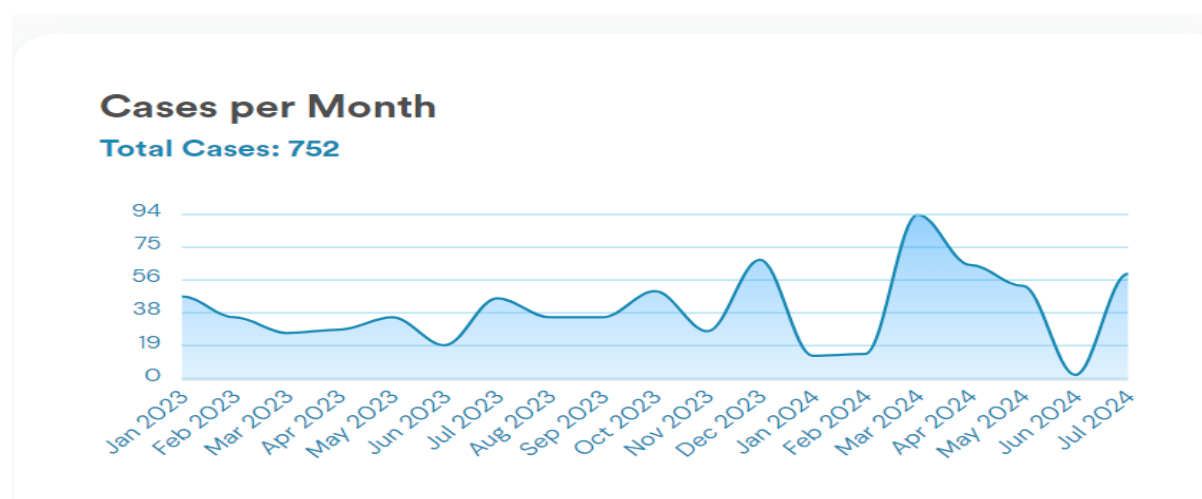
71. In this sub-section, respondents were asked to identify the GBV risk factors and associated mitigation measures. As revealed, there is consensus among male and female respondents at 93% and 84% respectively on the existence of GBV/SEA/SH risk within their communities. In this regard, respondents identified the following as the most common GBV/SEA/SH in their community:
- Sexual Assault
 - Physical Violence
 - Denial of resources/opportunities and services
 - Forced Marriages
 - Rape
 - Emotional Abuse
72. On the overall, respondents agreed that women are primarily the victims of sexual and physical violence and proposed mitigation of these incidences through **immediate and medium-term priorities** as articulated in the box below:

Table 19: Proposed GBV/SE/SH response mechanisms

BOX 3: Proposed GBV/SE/SH response mechanisms	
Immediate priorities	Medium term priorities
<i>Sensitization campaigns to raise awareness on issues of GBV/SEA/SH</i>	<i>Empowering women through livelihood skills training</i>
<i>Enforcing laws and strengthening policies against physical violence, sexual assault, and rape.</i>	<i>Promoting intergenerational dialogue to create open communication and understanding on matters of GBV among generations and cultures</i>
<i>Capacity building for both men and women to better handle and prevent GBV/SEA/SH.</i>	<i>Providing employment opportunities, especially targeting youth and women, to enhance financial independence.</i>
<i>Providing psychosocial support for survivors and enforcing strict punishment for perpetrators.</i>	<i>Education initiatives to enlighten the community to support girls' education to curb early marriages and improve child protection.</i>
<i>Enhancing security measures to protect vulnerable groups.</i>	<i>Providing access to better hygiene and sanitary with better toilet facilities to reduce vulnerability to incidence of sexual exploitation and abuse</i>

73. The suggested mitigation measures from respondents above, align with the focus of the TDR project, which emphasizes the importance of sensitization, legal enforcement, and community engagement to reduce the risks associated with gender-based violence and improve the overall safety and empowerment of women and children.
74. Data triangulated from the Gender Management Information System (GMIS) has to a larger extent confirmed existence of GBV cases. As generated by GMIS, 752 cases were reported between January, 2023 to July, 2024.

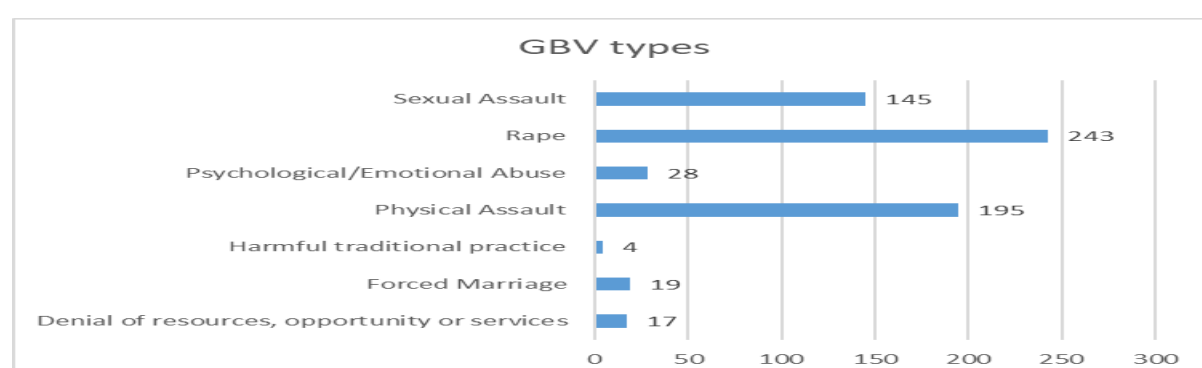
Figure 1: Reported GBV cases [Jan – 2023 to July, 2024]



Source: GMIS, The Gambia

75. Furthermore, and as generated from GMIS, of the reported case, rape (243) emerged to be highest, followed by physical assault (195) and sexual assault (145). This trend seems alarming and calls for concerted and immediate efforts towards tackling the challenges of GBV/SEA/SH.

Figure 2: Types of reported GBV cases



Source: GMIS, The Gambia

76. In light of the above, the TRDP should ensure that adequate strategies and systems are enforced to prevent and respond to incidences of Gender Based Violence/Sexual Exploitation and Abuse/Sexual Harassment. The implementation of the Workplan as presented in part 2 of this report will be quite useful in addressing GBV challenges and threats as articulated in the assessment.

3.7 Option analysis of financing models

77. This section presents findings from existing in-country categories of financing models examined during the conduct of the gender assessment. As revealed and presented below, there are four possible financing models the TDRP could adopt to implement the GBV/SEA/SH component of the project:

- Option 1: Central Government Model;
- Option 2: Development partner Model;
- Option 3: Semi-government/Govt Agencies
- Option 4: Non-government Model;

Option 1: Central Government Model

78. The Government's overall economic policy objectives, associated legal and institutional frameworks through which such objectives are achieved are vested under the custody of the Ministry of Finance and Economic Affairs (MoFEA). Towards the execution of its mandate, MoFEA established the Directorate of Aid Coordination responsible for promoting the effective utilization of aid resources. The Gambia Aid Policy (GAP) under the responsibility of the Directorate of Aid Coordination provides the institutional, regulatory, and operational and accountability framework for sourcing and managing external aid resources, especially grants and loans, that qualify as Official Development Assistance (ODA).
79. GAP is also drawn in line with the Monterrey Consensus on Financing for Development (2002), the Rome (2003) and Paris (2005) Declarations on Aid Effectiveness, the Accra Agenda of Action (2008) and in the spirit of the statements of the Busan Outcome Document (2011). These initiatives provide a framework for increased resources, harmonisation, alignment and coordination as the fundamental principles of ODA management that entrench a recipient country's ownership and leadership, in implementing national development goals and priorities.
80. The assessment revealed that self-accounting and non-self-accounting projects are the two broad categories through which donor funding can be administered (receive, disburse and reported upon) by the government. Just as the case of TDRP, Self-Accounting projects operates outside the central government's accounting and administrative system and usually managed by dedicated Project Coordination Units (PCUs) that either operate as standalone Project Implementation Units (PIUs) or streamlined into the Central Project Coordination Unit (CPCU) arrangement.
81. Non self-accounting procedure on the other hand has no strict definition but they are generally projects of short duration and small budget size compared to the self-accounting project. Such projects can maintain both Central Bank of The Gambia (CBG) and commercial bank accounts in line with requirements set out under section 13 of the Public Finance Act (2014) and section 21 of the Financial Regulations (2016).

Option 2: Development Partner Model

82. Under the development partner category, the Local Climate Adaptive Living Facility (LoCAL) facility adopted by United Nations Capital Development fund (UNCDF) during the implementation of the Jobs, Skills and Finance (JSF) for Women and Youth

in The Gambia Programme was reviewed. The LoCAL facility is global financing mechanism, which exclusively targets Local Governments (LGs) and their adaptation capacities in a systematic manner. The LoCAL model seems quite suitable for the GBV interventions of TDRP given that it uses the decentralized structures and build their capacities to become efficient in managing their development interventions. It focusses on addressing poverty, vulnerability and climate change challenges and promotes fiscal decentralization.

83. Using a structured disbursement channel, funds flow from UNCDF to the bank account designated by the Accountant General at the Central Bank. The Ministry of Lands and Regional Government (MoLRG) through the Department of Community Development (DCD) inform the Technical Committee of the Performance Based Climate Resilient Grant (PBCRGs) amount for each ward and prepare a schedule with the Ward Development Committees' (WDCs) names and bank accounts in a format prescribed by the Accountant General (AG). Upon request of the Technical Committee, the Accountant General transfers the funds. The PBCRG are transferred to the WDCs bank accounts on annual basis. The AG/MoFEA issue letters of transfers to inform each WDC, and report to UNCDF that funds are transferred to beneficiary account within two weeks upon request.
84. Some of the **advantages** associated with the LoCAL model includes the promotion of participation of the grass roots in planning and development as well as strengthening decentralization as enshrined in the local government 2002 Act. LoCAL also promotes accountability and transparency at the local level and encourages partnership that creates employment opportunities for women and youth. The model also empowers women economically hence increasing their economic independence.
85. A distinguished **disadvantage** of the model is that quality of development intervention may be compromised in the absence of close supervision and continuous capacity building of local structures. In addition, management of funds by local communities requires a degree of literacy which is absent in many beneficiary communities. This calls for continuous capacity building especially on financial literacy which is an added cost for project implementation and sustainability.

Option 3: Semi-government Agencies Model

86. Regarding semi-government option, the Social Development Fund (SDF) was assessed found to be the largest wholesale microfinance intermediary in The Gambia, and has extensive experience in managing grant funds and credit schemes. SDF was established in 1998 under the African Development Bank (AfDB) funded Poverty Reduction Project (PRP) to manage the micro-finance component of the Grant. Based on the successful implementation of the project's micro-finance component of the said Grant as informed by the recommendations of the Project Completion Report commissioned

by AfDB, the Government of the Gambia approved the transformation of the SDF into a Fiduciary Financial Institution, (FFI).

87. Under this arrangement it was transformed into a Trust Company which enables it to operate as a not-for-profit Company registered under the Companies Act 2013 as a specialized institution for microfinance and related operations in The Gambia. As a Trust Company, the SDF identifies and mobilizes resources and manage funds in trust for and on behalf of donors and the Government of The Gambia (GOTG) for disbursement to MSMEs, women groups, community-based organizations, youth groups etc.
88. Based on the review, SDF has the required institutional arrangement, outreach and experience to support the implementation of the GBV/SEA/SH aspects of the TDRP. However, further consultations would be required on engagement terms and conditions.

Option 4: Non-government Model

89. Under this option, the financial mechanism adopted by National Association of Co-operative Credit Union (NACCUG) was reviewed. NACCUG was formed and legally registered in August 1992 as the apex body for Cooperative Credit Unions with the Registrar of Cooperative in The Gambia and has the mandate to promote and support the development of credit unions across the country. It is licensed by the Central Bank of The Gambia as a Non-Bank Financial Institution (NBFI) to engage in financial intermediation services. NACCUG is also an affiliate of the World Council of Credit Unions (WOCCU) based in Madison in the US and also a member of African Confederation of Co-operative Savings and Credit Association (ACCOSCA).
90. In view of the above findings, NACCUG has the required potentials to support implementation of the project's GBV/SE related activities. However, it is worth noting that it charges management fees for its services in the range of 5% to 10% of the total funds disbursed.

4. CONCLUSIONS AND RECOMMENDATION

4.1 Conclusions

91. The Government of The Gambia is committed to addressing all forms of GBV and will need continuous support and partnership to sustain its ongoing advocacy and sensitization programs. The articulation of GBV,SEA/SH in the implementation of the TRDP is not only inline with the World Bank safeguard standards but timely and strongly aligns with government priorities to addressing gender GBV as articulated in the Recovery-Focused National Development Plan.

92. Women in The Gambia have limited access to formal financial services thus the need for strategic interventions to support their entrepreneurship pursuits. This corroborates findings of the assessment which reveals that 82% of the female and 86% of the male respondents did not receive any financial support to boost their businesses in the last three years. Because of flexibility and convenience, they mostly rely on informal microfinance services to access credit. The demand for collaterals, high interest rates and complicated transactions are some of the reasons advanced for not accessing credit. Against these challenges, it is vital facilitating linkages between financial institutions (microfinance institutions) and women owned MSME to access credit at affordable rates.
93. The legal framework governing laws and protocols against GBV/ SEA/SH is well noticeable but enforcement has been challenged to some extent. Some of these laws are quite liberal; the Sexual Offences Act 2013, the Domestic Violence Act 2013, Women's Amendment Act 2015 and the Children's Amendment Act 2016 among others.
94. High prevalence of GBV/SEA/SH, low levels of training and capacity on GBV/SEA/SH, limited awareness of the existence of reporting mechanism for GBV/SEA/SH cases requires strategic interventions to tackle them. As revealed during the assessment, cases rape, physical and sexual assault are high and trend seems alarming. Within a period of 19 months (January, 2023 – July 2024), seven hundred and fifty two (752) have been reported. This calls for concerted and immediate efforts towards tackling the challenges of GBV/SEA/SH.

4.2 Recommendations

Against the findings and conclusions of the gender assessment, the following recommendations are made:

95. **Recommendation 1: Public sensitization, training and advocacy:** Moving forward, the TRDP in collaboration with other stakeholders including the Ministries of Gender and Tourism should embark on massive sensitizations to inform people of the existing laws against GBV. For instance, the Criminal Code provides for traditional offenses relating to sexual violence against women such as rape. According to section 122, the maximum punishment for rape is life imprisonment, and the maximum punishment for attempted rape is 7 years. Additionally, the Sexual Offences Act criminalizes every form of sexual assault, exploitation and harassment. Increasing public awareness and providing comprehensive training on GBV and SEA prevention, including legal rights and support services will have lasting effects toward controlling GBV. Such interventions will help in educating communities and fosters a culture of respect and understanding.
96. **Recommendation 2: Capacity building of Service Providers:** Service Providers have pivotal role in addressing GBV,SEA/SH and are confronted with several operational

challenges. As such, there is need to build the capacity of health workers and Police on GBV,SEA/SH case management and on GBVSEA/SH, security and case handling respectively. Improving their capacity will have lasting effects in the prevention of GBV within the designated project intervention area the the and surrounding communities.

97. **Recommendation 3: Strengthening institutions:** At the institutional level, efforts should be made to revitalize and strengthen existing systems. The Gender Management Information System (GMIS) established in partnership framework between Ministry of Gender, Children and Social Welfare (MOGCSW), United Nations International Children's Emergency Fund (UNICEF), and United Nations Population Fund Agency (UNFPA) has been found quite useful and needs increased resources for its sustained operations. Given its importance, capacity development for GMIS users and the software developers to improve in data entry, management and analysis is urgent. The mobile app of the GMIS has not been developed and the training on the GMIS functionalities has been carried out only once in The Gambia. Additionally, increasing the functionality of GMIS with added systems features as automatic call recording and referral will increase efficiency. Popularization of GMIS and one stop centres will increase utilization rate of the facilities.
98. **Recommendation 4: Economic empowerment and employment creation:** Tourism products and services should be diversified and decentralized for better outreach coverage.. Also Linking women vegetable producers to tourism operators will lead to increased opportunities for women and as well reduces dependency on imported commodities to supply the tourism and hospitality industry. The above economic empowerment pathways will consequently reduce vulnerability and dependency, which can decrease the incidence of GBV and SEA. Furthermore, the establishment of women cooperatives provide another avenue of resource mobilization for women, that making it possible for easy access to matching grants. The cooperatives could provide guarantees for the matching grants or individuals use their savings to fulfill the matching grants requirements. The project should also support in building the entrepreneurship skills and capacities of the targeted women in order to make the right decisions in managing their businesses and prepare business proposals to access finance. Women also have limited access to resources such as land and credit and are overrepresented in unpaid labor, with rates of participation in the labor force of 53.2 percent and 37.8 percent for men and women, respectively¹⁸.
99. **Recommendation 5: Strengthen Law Enforcement:** Enhance the enforcement of existing laws and establish stronger legal frameworks to protect victims and punish offenders. This includes improving reporting mechanisms and ensuring that perpetrators are held accountable.

¹⁸ 2013 Population and Housing Census. The Gender Report."
http://www.gbos.gov.gm/uploads/census/2013/Gender_Report_Final.pdf.

100. **Recommendation 6: Improving sanitary conditions of tourism value chain actors:**
Providing access to better hygiene and sanitary with better toilet facilities to reduce vulnerability to incidence of GBV/SEA/SH.

PART B: ACTIONABLE WORKPLAN

THE GBV/SEA/SH WORKPLAN [2024-2027]

Overview

101. The workplan as presented below highlights Gender and GVB/SEA/SH focused activities that needs to be undertaken between 2024 and 2027. It will be implemented by the PIU under the technical leadership of the GBV Specialist in partnership with respective stakeholders including the Ministry of Gender. The plan has annualised targets supported by logical framework with measurable indicators.
102. Alignment with Project Document and Environment and Social Management Plan (ESMF)

Table 21: The Workplan alignment matrix

Activity of the GBV, SEA/SE Workplan	Corresponding activity in the Project Appraisal Document	Corresponding activity in the ESMF
Activity 1.1a Review and updating of legal instruments 1.1b Support the MOTC to develop a workplace SH Policy	Women leadership, voice, and agency will be enhanced through the Gender Action Plan activities with additional actions focusing on strengthening legislation to prohibit SH in the workplace and creating obligations for tourism industry employers to have anti-harassment policies, (Ref: PAD Para 56 , Page 26)	4. Strengthen Institutional capacity for SEA and SH risk mitigation and response -Coordinate with stakeholders on common communication or advocacy actions/ events/ policies/ protocols to prevent and respond to GBV, SEA/SH risks (<i>Ref: Annex 4SEA/SH response Action Plan</i>)
Activity 1.2 Training of Health Workers in project sites on GBV,SEA/SH Case Management	Targeted capacity building and/or quota for women, public officials, and relevant tourism stakeholders to participate in dedicated trainings. (Ref: table 3.2. Gender Actions)	4. Strengthen Institutional capacity for SEA and SH risk mitigation and response 4b Support capacity of local systems to respond to SEA and SH (e.g., police, health, legal, CDOs, CBOs) <i>Ref: Annex 4SEA/SH response Action Plan</i>
Activity 1.3 Training of Police in the TDA1 and Jufueh/Albreda on GBV,SEA/SH and project risks		Review GM to ensure that its description includes confidential channels for reporting SEA/SH cases, it is survival centered, and has

Activity of the GBV, SEA/SE Workplan	Corresponding activity in the Project Appraisal Document	Corresponding activity in the ESMF
		referral pathways linked with quality GBV service providers. <i>. Strengthen Institutional capacity for SEA and SH risk mitigation and response</i> <i>4b Support capacity of local systems to respond to SEA and SH (e.g., police, health, legal, CDOs, CBOs) Ref: Annex 4SEA/SH response Action Plan)</i>
Activity 1.4 Strengthening GMIS reporting mechanisms & procedures	The project will strengthen the public institutions through staff training, efficient organization, and the provision of adequate support for tourism service delivery. (Ref: PAD para 65, page 27)	Support capacity of local systems to respond to SEA and SH (e.g., police, health, legal, CDOs, CBOs)
Activity 2.1 Conducting TV and Radio talk-shows on GBV/SEA/SH in line with the project communication strategy.	The GM also includes a confidential, survivor-centered, efficient, and ethical channel to address SEA/SH complaints which also considers access to quality legal, health, and psychosocial support services for survivors, which will be developed as part of the SEA/SH Prevention and Response Action Plan and mapping of such services. This process will be carried out using dedicated communication materials, which will be developed to help stakeholders become familiar with the grievance redress channels and procedures. (Ref: Para 96; page 36)	6. Inform project stakeholders about SEA/SH risks and mitigation procedures 6 Awareness raising to inform project stakeholders including project host communities on SEA/SH risks and mitigation strategies
Activity 2.2 produce and distribute posters, Banners, Mugs, Stickers on GBV,SEA/SH in tourism destinations of TDA1 and Kunta Kinteh Island		Conduct awareness raising outreach campaigns to publicize SEA/SH reporting channels and response procedures in project host communities and with separate meeting with women and girls.
Activity 2.3 Conduct sensitization of community members of GBV,SEA/SH and the project risks		Design relevant communication and information materials including posters and sticker on zero tolerance of SEA/SH to support sensitization
Activity 2.4 Video documentary on GBV/SEA/SH.		

Activity of the GBV, SEA/SE Workplan	Corresponding activity in the Project Appraisal Document	Corresponding activity in the ESMF
		exercise Ref: Ref: Annex 4SEA/SH response Action Plan page 201)
Activity 2.5 conduct training/ refresher training for community grievance committee members on GBV,SEA/SH and how to respond to a GBVSEA/SH Disclosure refer cases to service providers and or escalate to the project Sexual exploitation and abuse compliance Team SSCT	Beneficiary public officials and relevant tourism stakeholders that received capacity building support (Ref: PAD Results Framework, page 43)	
Activity 2.6 Support capacity of GBV service providers to respond to SEA and SH (e.g., police, health, legal, CDOs, CBOs)		Support capacity of local systems to respond to SEA and SH (e.g., police, health, legal, CDOs, CBOs)
Activity 2.7 Conduct stakeholder workshop to Review and update the medical report form		Ensure that the Grievance Resolution Committee comprises of persons with experience in working on GBV and train them on the SEA/SH complaint management.
Activity 2.8 Support Quarterly stakeholder forums and coordination meetings of Service providers in KK and TDA1to strengthen a survivor centred referral and response mechanism		Organize and conduct annual refresher training for all project workers to enhance capacity for continuing SEA-SH mitigation, prevention, and response.
Activity 2.9 - Training of social Workers on psychosocial counselling and mental health issues so that they have the skills to provide effective services to victims		grievance mechanism (GM) and will work in parallel to ensure the confidentiality and safety of SEA/SH survivors by ensuring accessible channels for reporting, referral to relevant, locally based, GBV service providers and to ensure access to medical, legal, and psychological care and the socio-economic reintegration of survivors

Activity of the GBV, SEA/SE Workplan	Corresponding activity in the Project Appraisal Document	Corresponding activity in the ESMF
		while ensuring that their dignity is protected.
Activity 3.1 Provide separate facilities for men and women along the TDA1 and Juffereh intervention areas		Provide separate facilities for men and women and display signs, posters and pamphlets around the project site that signal to workers and the community that the project site is an area where SH is prohibited
Activity 4.1 – Train women on entrepreneurship (Proposal development, book-keeping, financial management, business management, etc.)	Facilitate women-owned MSMEs' access to matching grants and capital mobilized from the private sector.	
Activity 4.2 – Conduct training on product diversification and marketing to increase income earning opportunities for actors along the tourism value chain	Enable women-led or managed MSMEs to adopt recommended practices to meet buyer requirements.	

Table 22: Matrix of GBV/SEA/SH workplan and budget

Intervention strategies/activities	Activity target	Responsible stakeholders	Implementation Timeline				Funding (USD)		
			2024	2025	2026	2027	Amount	Source	
Project Development Objective (PDO): To support the diversification and climate resilience of the tourism sector at selected destinations									
Outcome 1: Improved institutional capacity for enhanced GBV legal framework and reporting mechanism									
Activity 1.1a Review and updating of legal instruments	Tourism Offences Act (2003) needs to be updated given Covid 19 Pandemic and the Vision of government as stated in the National Development Plan	<u>Ministry of Tourism and Culture (Lead)</u> , Ministry of Justice (MoJ) Ministry of Gender, Tourism Operators etc. With technical support from the ministry of justice and consultant. NGOs and Service Providers to provide inputs	XX	XX	XX	XX	3,000 plus 7,000	TDRP 3,000 from WB and 7,000 from counterpart funding.	
Activity 1.1b Support the MOTC to develop a workplace SH Policy	The MOTC to have SH policy in place that clearly communicate the ministry position on SH	<u>PIU GBV Specialist, with support of a Consultant</u>		X	X		7,000	TDRGP-WB	
Activity 1.2 Training of Health Workers in project sites on GBV,SEA/SH Case Management	Targeted service provider institutions are trained to become more responsive to the needs and aspirations of their clientele	<u>PIU to lead</u> , with technical support of a consultant and collaboration and support from MoG		XX		XX	9,000	TDRP-WB	

Intervention strategies/activities	Activity target	Responsible stakeholders	Implementation Timeline				Funding (USD)	
			2024	2025	2026	2027	Amount	Source
Activity 1.3 Training of Police in the TDA1 and Jufueh/Albreda on GBV,SEA/SH and project risks	Service providers and the police in particular are equipped with pre-requisite skills to become more responsive	<u>PIU to lead</u> with technical support of a consultant and participation of selected police officials	XX		XX		8,000	TDRP
Activity 1.4 Strengthening GMIS reporting mechanisms & procedures	Updating GMIS functionality with additional features of data capture and reporting. System users will as well be trained for operational efficiency	<u>Ministry of Gender as Lead</u> , PIU, UNFPA, UNICEF	XX				10,000	TDRP
Outcome 2: Strengthened capacity of project stakeholders through training, advocacy and sensitization on GBV/SEA/SH matters								
Activity 2.1 Conducting TV and Radio talk-shows on GBV/SEA/SH in line with the project communication strategy.	Quarterly TV Talk-shows and weekly radio talk-show (1 hour airtime each)	<u>PIU as Lead</u> , GRTS/QTV, MOG, and other radio FM stations	XX	XX	XX	XX	5,000	TDRP
Activity 2.2 produce and distribute posters, Banners, Mugs, Stickers on GBV,SEA/SH in tourism	Advocacy and sensitization materials aimed at preventing GVB,SEA/SH	<u>PIU to Lead</u> and outsourcing services of a printing company	XX				2,000	TDRP
Activity 2.3 Conduct sensitization of community members of GBV,SEA/SH and the project risks	Conducted at least once a year targeting as sensitization programs for women groups youth,	<u>PIU to Lead</u> , Traditional Communicators (TAKATITI), etc...		XX	XX	XX	10,000	TDRP

Intervention strategies/activities	Activity target	Responsible stakeholders	Implementation Timeline				Funding (USD)	
			2024	2025	2026	2027	Amount	Source
	Informal Tourism sector Workers, Women rice Growers along the Coastal beaches, Hotel Workers in entertainment, room and food and beverage services. Community elders and men in Jufureh/Albreda							
Activity 2.4 Video on documentary GBV/SEA/SH.	A documentary to publicize the project GBV,SEA/SH risks, mitigation interventions & strategies including the grievance mechanism, challenges and lessons learnt. Aired on social media and occasionally on TV	<u>PIU to lead</u> with support of a Media documentary Consultant			XX		7,000	TDRP
Activity 2.5 Conduct training/ refresher training for community grievance committee members on GBV,SEA/SH and how to	At least 10 community focal points are trained	<u>PIU to lead,</u> MoG, consultant		XX	XX	XX	7,000	TDRP

Intervention strategies/activities	Activity target	Responsible stakeholders	Implementation Timeline				Funding (USD)	
			2024	2025	2026	2027	Amount	Source
respond to a GBVSEA/SH Disclosure refer cases to service providers and or escalate to the project Sexual exploitation and abuse compliance Team SSCT								
Activity 2.6 Support capacity of GBV service providers to respond to SEA and SH (e.g., police, health, legal, CDOs, CBOs)	Print GBV Registers and distribute to health facilities within project sites	The <u>PIU to lead</u> procurement of printing with support from the Network against gender based violence for distribution		XX	XX		7,000	TDRP
Activity 2.7 Conduct stakeholder workshop to Review and update the medical report form	Review and update the medical report form	<u>The SSCT at the PIU to coordinate</u> with a consultant or lead resource person and with the collaborative efforts from the Ministry of Interior and Ministry of Health and Ministry of Women, children and gender and inputs from NGOs and other serviced providers.	XX	XX			7,000	TDRP
Activity 2.8 Support Quarterly stakeholder	Police gender and children welfare	<u>PIU as Lead</u> , Network Against Gender Based		XX	XX	XX	10,000	TDRP

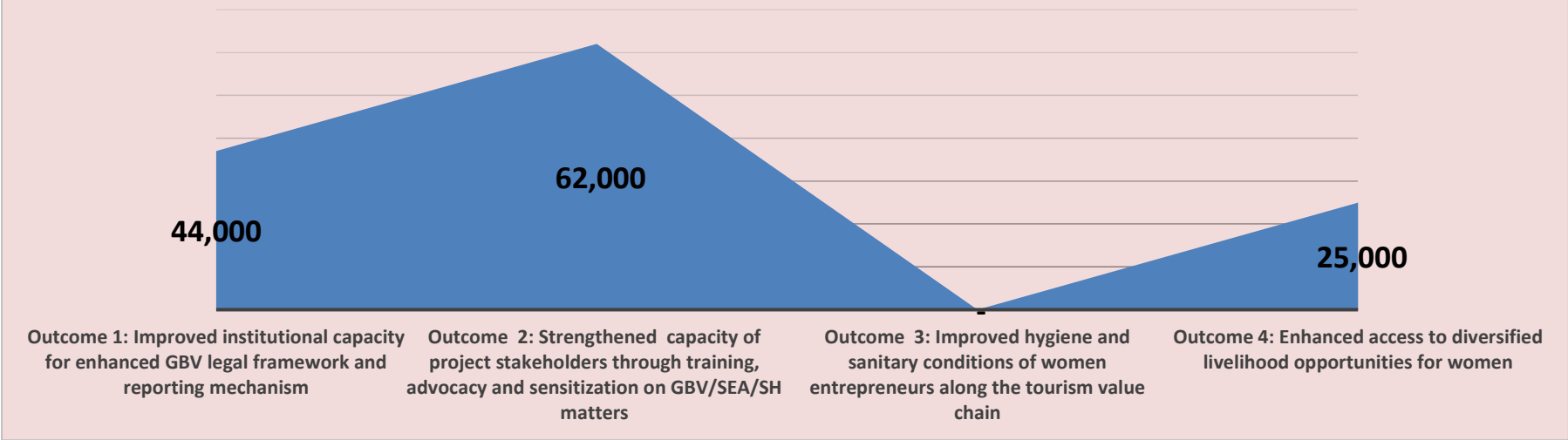
Intervention strategies/activities	Activity target	Responsible stakeholders	Implementation Timeline				Funding (USD)	
			2024	2025	2026	2027	Amount	Source
forums and coordination meetings of Service providers in Kunta Kinteh and TDA1 to strengthen a survivor centred referral and response mechanism	officers, health and Social Workers at outpatient, emergency and gynecology units who handle cases of GBV,SEA/SH and the Network Against Gender Based Violence for coordination.	Violence and GBV service providers,						
Activity 2.9 - Training of social Workers on psychosocial counselling and mental health issues so that they have the skills to provide effective services to victims	Selected survivors in different regions are given necessary mental health support and guidance	<u>PIU to coordinate,</u> Peace of Mind (PoM), victim centers		XX	XX		7,000	TDRP
Outcome 3: Improved hygiene and sanitary conditions of women entrepreneurs along the tourism value chain								
Activity 3.1 Provide separate toilet facilities for men and women along the TDA1 and Juffereh intervention areas	Direct Project Workers and side visitors	<u>Contractors to lead</u> with coordination from the PIU and support from , Community Members,			X		0*	Contractors
Outcome 4: Enhanced access to diversified livelihood opportunities for women								
Activity 4.1 – Train women on entrepreneurship (Proposal development, book-keeping, financial	Targeted women entrepreneurs including women vegetable growers cooperatives to	<u>PIU to coordinate</u> and consultant -IBF		X	X		15,000	TDRP

Intervention strategies/activities	Activity target	Responsible stakeholders	Implementation Timeline				Funding (USD)	
			2024	2025	2026	2027	Amount	Source
management, business management, etc.)	enable them compete to TDRP matching grant facility.							
Activity 4.2 : Conduct training on product diversification and marketing to increase income earning opportunities for actors along the tourism value chain	Women will be trained on various livelihood and income generating activities	<u>PIU to coordinate</u> with support from IBF and Women Initiative Gambia (WIG)		XX	X		10,000	TDRP

* Budget for this activity is included in the contract fee of the contractor identified to conduct the works.

Figure 3: Workplan budgetary allocations by outcome (USD\$)

Workplan Budgetary Allocations by Outcome (USD\$)



RESULTS FRAMEWORK OF THE WORKPLAN

Table 20: The logical framework

Result Area	Indicator	Description of indicators		Means of Verification	Responsible stakeholders
		Baseline	Target		
Outcome 1: Improved institutional capacity for enhanced GBV legal framework and reporting mechanism					
Output 1.1a Relevant tourism legal instruments are updated	Number of tourism Acts updated	0	1	Gazette notice	MoJ, MoTC, Consultant
Output 1.1b Workplace Sexual Harassment Policy for public sector-Specifically MOTC is developed	Workplace policy with unequivocal position of the MOTC on SH at work, with clear reporting and management process	0	1	The policy document	PIU, Consultant and MOTC
Output 1.2 Health-work service providers in project sites are trained on GBV,SEA/SH Case Management	Number of health workers trained % of which are female	0	TBD	Training report, participant register	PIU
Output 1.3 Police officials in TDA1 and Jufueh/Albreda are trained on project associated GBV,SEA/SH risks	Number of Police officials trained % of which are female	0	TBD	Training report, participant register	PIU
Output 1.4 The Gender Management Information System (GMIS) reporting mechanisms and procedures are strengthened	GMIS systems functionality in reporting GBV,SEA/SH cases disaggregated by type, gender, region and age	TBD	TBD	Systems generated reports	PIU and Ministry of Gender
Outcome 2: Strengthened capacity of project stakeholders through training, advocacy and sensitization on GBV/SEA/SH matters					

Result Area	Indicator	Description of indicators		Means of Verification	Responsible stakeholders
		Baseline	Target		
Output 2.1: TV and Radio talk-shows on GBV/SEA/SH at held quarterly	Frequency of talk-shows	0	12	Contracts signed with media houses	PIU, GRTS and other private media houses
Output 2.2: Posters, Banners, Mugs, Stickers on GBV,SEA/SH in tourism are produced and distributed in targeted sites	Number of promotional materials distributed by type	0	TBD	Distribution reports	PIU
Output 2.3: Community members are sensitized on GBV,SEA/SH and associated project risks	Number of communities reached	50	300	Sensitization reports	PIU
Output 2.4: A Video documentary on GBV/SEA/SH is produced	Number of documentaries	0	1	Contract signed with a media consultant	PIU and a media consultant
Output 2.5: Community grievance committee members trained on GBV,SEA/SH response referral and disclosure mechanisms.	Number of committee members trained	0	10	Training reports and participants' register	PIU
Output 2.6: Enhanced capacity of GBV service providers to respond to SEA and SH (e.g., police, health, legal, CDOs, CBOs)	Capacity enhancement support by type and quantity	0	TBD	Delivery and goods receive notes from suppliers and recipients respectively.	PIU and related service providers
Output 2.7: Conduct stakeholder workshop to Review and update the medical report form	Medical report form reviewed and updated	0	1	Utilization rate of updated medicals reports	SSCT/PIU/MoH/MoG/MoI /NGOs

Result Area	Indicator	Description of indicators		Means of Verification	Responsible stakeholders
		Baseline	Target		
Output 2.8: Quarterly stakeholder forums and coordination meetings of Service providers in Kunta Kinteh and TDA1 are held	Number of forums and coordination meetings conducted	0	12	Minutes of meetings and participants' register	PIU, Network Against gender based violence and GBV service providers
Output 2.9: Social Workers are trained on psychosocial counselling and mental health issues.	Number of social works trained on psychosocial and mental health issues	0	50	Training reports and participants' register	PIU/MoH/Peace of Mind (POM)
Outcome 3: Improved hygiene and sanitary conditions of women entrepreneurs along the tourism value chain					
Output 3.1: Separate toilet facilities are constructed for men and women along the TDA1 and Juffereh intervention areas	Number of toilet facilities constructed disaggregated by gender usage	0	4	Certificate of Completion and supervision mission reports	PIU and contractors
Outcome 4: Enhanced access to diversified livelihood opportunities for women					
Output 4.1: Women are trained on entrepreneurship (Proposal development, book-keeping, financial management, business management, etc.) skills to enhance their competitiveness	Number of women on Trained on entrepreneurship and access to finance	0	25 from Jufureh, 75 from TDA1	Training reports on entrepreneurship and access to finance	PIU/consultant -IBF
Output 4.2 :Training on product diversification and marketing is conducted for actors along the tourism value chain	Number of women trained on diversified livelihood and income generating activities	0	25 from Jufureh, 75 from TDA1	Training reports on diversified livelihood and income generating activities	PIU/ IBF/Women Initiative Gambia (WIG)

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PART C: ANNEXES

Annex 1: Assessment instruments

Annex 1.1 Key Informant Interview guide of institutions

Key Informants Interviews (KII) - Organisations

Gender Assessment and Workplan Development within the project-targeted communities for tourism sector development

Key Informants Interview (KII) for Organisations

Guiding Questions

Identification

- Date-----
- Name of Organisation -----
- Type of organisation -----
- Location of organisation -----

List of participants

Name	Designation	Gender		Telephone contact
		Male	Female	

Introduction and Context:

- Discuss the organization's influence in the tourism sector
- Discuss any intervention that relates GBV/SE implemented over the years

Policy and legal frameworks on GBV/SE:

- Please elaborate on the existence of policy and safeguards against GBV/SE
- To what extent are these policies (if any) enforced?

Gender Disparities:

- Discuss the extent to which gender disparities (if any) exist in your organisation

- How do these disparities impact women's participation and opportunities?
- Do women occupy decision making positions in your organisation
- If any, what gender-related challenges do you encounter?

Stakeholder Engagement:

- How engaged are women in decision-making processes within the tourism industry?
- What could be done to engage women more in more jobs and decision-making processes within the tourism industry?
- Are there efforts to involve women in shaping policies and strategies?

Financial resources and capacity building

- Please discuss the if women have access to such resource?
- Please discuss possible limitations (if any) towards accessing such resources?

Social risk and opportunities

- Discuss any GBV/SE risk factors and their mitigation measures ?
- What measures can be taken to minimize or avoid these risks?

Recommendations:

- Please provide at least three (3) recommendations that would contribute towards addressing challenges that relates to GBV/SE
- What possible interventions can be embarked on address GBV/SE in the tourism sector ?

Annex 1.2 Key informant interview guide for service providers

Key Informants Interviews (KII) – Service Providers

Gender Assessment and Workplan Development within the project-targeted communities for tourism sector development

Key Informants Interview (KII) for Service Providers

Guiding Questions

Identification

- **Date**-----
- **Name of Service provider** -----
- **Type of Type of service** -----
- **Location of organisation** -----

List of participants

Name	Designation	Gender		Telephone contact
		Male	Female	

Types and Frequency of Cases:

- *Question:* "Can you describe the types of GBV, SEA, and SH cases that your organization most commonly receives, and how frequently do these cases occur?"
 - *Purpose:* To understand the variety and prevalence of cases handled by the service provider.

Demographic Information of Affected Individuals:

- *Question:* "Who are the most affected individuals by GBV, SEA, and SH in terms of gender, age, socio-economic background, and other relevant demographics?"
 - *Purpose:* To identify which groups are most vulnerable and require targeted support.

Constraints and Support Needs:

- *Question:* "What are the main constraints or challenges your organization faces in providing effective services to GBV, SEA, and SH survivors?"
 - *Purpose:* To uncover barriers that hinder optimal service delivery.

Financial and technical capacity

Question: "How would be rate the financial and technical competency of your organisation in proving GBV/SE services ?"

- *Purpose:* To understand the organisational capacity and existing gaps for possible intervention

Collaboration and Support Opportunities:

- *Question:* "How can our tourism project, with its grievance mechanism, collaborate with your organization to better support GBV, SEA, and SH survivors?"

- *Purpose:* To explore potential areas for partnership and support.

Recommendations for Improvement:

- *Question:* "Based on your experience, what recommendations do you have for improving services and support mechanisms for GBV, SEA, and SH survivors within the context of our tourism project?"
 - *Purpose:* To gather actionable suggestions for enhancing the project's impact and support structures.

Annex 1.3 Focused Group Discussions guide for association

Annex 3: Focused Group Discussions (FGDs) – Associations

Gender Assessment and Workplan Development within the project-targeted communities for tourism sector development

Focused Group Discussions (FGDs) –Associations Guiding Questions

IDENTIFICATION

- **Date**-----
- **Name of Association** -----
- **Type of Association** -----
- **Location of Association** -----

List of participants

Name	Designation	Gender		Telephone contact
		Male	Female	

ROLES AND RESPONSIBILITIES:

How would you describe your role within the context of the tourism activities in your community?

Discuss the livelihood activities of the members and especially those that relates to tourism

What opportunities are there that needs to be strengthened?

KNOWLEDGE AND CAPACITY GAP ANALYSIS

Would you discuss and elaborate on any existing capacity gaps that hinders the execution of your functions?

Has there been any training received on GBV/SE/SH

If yes, who benefited and how many of them?

How can the TDR project intervene in strengthening your capacity on GBV/SE

GBV/SE AND SH RISK ASSESSMENT

Discuss the GBV/SEA risks in your community

Identify the risk (low, medium or high) drivers and their mitigation measures

Who are mostly affected by the identified risks?

Are there any potential risks associated with TDR implementation?

GBV/SE Risk Ranking Matrix

- List risks
- Identify criteria for Ranking (clue why it is a risk?)
- Give score to each within each criteria (use 10 stones for scoring)

Risk Drivers	Ranking Criteria							
		Scale of impact on affected person(s)	Causes other problems in community	Easier to address	Likely-hood community can solve the problems	Chance of finding help from outside	Total Score	Rank
Driver 1:								
Risk 1.1								
Risk 1.2								
Risk 1.3								
Total		10	10	10	10	10	xxxxx	
Driver 2:								
Risk 2.1								
Risk 2.2								
Risk 2.3								
Total		10	10	10	10	10	xxxxx	

GENDER DISPARITIES

Are there gender disparities in tourism related services provision?

Who are affected the most and under which services?

How can the TDR project intervene in addressing such disparities

FINANCING MECHANISM

Explore the financing mechanisms applied in the implementation of activities of the association.

Did you receive any financial/capacity support over the past years?

If yes, please discuss funding modality

IMPLEMENTATION STRATEGIES AND WORKPLAN

INTERVENTION STRATEGY RANKING/ANALYSIS

Steps:

- List possible strategies for solving the GBV/SE Risks
- Develop criteria for scoring
- Give scores to each solution for each criteria (use 10 stones/criteria)
- Rank the solutions

Strategies	Cost <i>(Financial cost involved)</i>	Skills in community to participate fully in the solution	Productivity <i>(Solution fully address the problem)</i>	Equitability <i>(Fair distribution of benefits from the solution)</i>	Sustainability <i>(Solution continue to work as long as it is needed)</i>	Overall assessment
Strategy 1						
Strategy 2	↓	↓	↓	↓	↓	
Strategy 3						
Strategy 4						
Total						

Other possible criteria:

- Time perspective of Benefits (urgency of benefit)
- Resource availability (external funds, skills etc)
- Existing potentials and capacities in the communities
- Social acceptability
- Contribution to reduction of inequalities (GBV/SE/SH)

WORKPLAN

Please identify activities needed to be carried out to address GBV/SE issues

When each activity should be completed

Identify resources (material, financial, skill etc.) to complete each activity

Who is responsible for that particular?

Activities	Completion date	Resources needed	Sources/how would be obtained	Who is responsible
Intervention strategy 1:				
Activity 1.1				
Activity 1.2				
Activity 1.3				
Etc.				

Annex 1.4 Individual questionnaire for sampled association members

Annex 4: Individual Questionnaire

Gender Assessment and Workplan Development within the project-targeted communities for tourism sector development

Individual Questionnaire

JUNE, 2024

Consent

My name is Mr./Ms.....representing TDR Project to conduct a gender assessment. The findings of the assessment will support the meaningful integration of gender into a tourism operation for women-led businesses. It will also assist to better understand emerging challenges of GBV/SE and how to mitigate them during the implementation of the TDR project. You have been selected to objectively respond to some of the assessment questions pertinent to you and your community as an esteem project stakeholder. We will appreciate your

participation in this assessment and assure you that all the information collected will be treated with confidentiality and used only to help us plan for the activities related to TDR project. Your participation is voluntary.

Do you agree to take part in this assessment ?

Respondent agrees to be interviewed..... Yes No

If YES, start the interview

If NO, thank the respondent and go to the next selected respondent

IDENTIFICATION

Name of enumerator ----- Tel-----

Day/Month/Year Date: .../...../.....

Name of Respondent: Tel:

Gender Male [1] Female [2]

Age of respondents = 18 – 35yrs [1] Above 35- 50yrs [2] Above 50yrs [3]

Highest level of formal education: = None [1] } Primary [2] } Secondary [3], Tertiary,[4]

What is your main activity along the tourism value chain?

1= Craft vendor, 2= Hairdresser , 3= Fruit and juice seller. 4= Hospitality, 5= Entertainment
6= Tailoring 7= Others

Location = TDA 1[1] Juffureh [2]

GBV/SE SITUATIONAL ANALYSIS

1. In your opinion, are there cases of GBV/SE in this community? 1= yes , 2= No

2. If yes, please list the commonest types

3. Who are **mostly** the victims 1=Men 2=Women = 3 Girls 4=Boys

4. Are there any counselling services for victims of GBV in this area? 1= yes , 2= No

5. Do you know of any organization working with victims of GBV or generally addressing issues concerning GBV/SE in this community ? 1= yes . 2= No
6. Are you aware of the existence of any reporting mechanism for GBV cases ? **Yes =[1], No=[2]**

KNOWLEDGE AND CAPACITY GAP ANALYSIS

7. How would you rate you knowledge and understanding of GBV/SE issues ?
1= Low, 2= medium, 3= high
8. Have you ever attended training or sensitization on GBV/SE/SH?
1=yes, 2=no
9. How can the TDR project intervene in strengthening your capacity to better operate as an actor of the tourism value chain?

LIVELIHOOD OPPORTUNITIES

10. What do you consider to be your employment status?
1= Employee, 2= self-employed, 3= unemployed
11. What is the nature of your job?
1=Seasonal, 2=Part-time, 3= Full time
12. What is your average annual income? GMD -----
13. Have you benefitted from any financial support to boost your enterprise in the **last three** years?
Yes= [1], No= [2] can't Remember = [3]

13b) If yes, please complete the following table:

Source of fund	Amount	Loan	Grant

HOUSEHOLD DECISION MAKING AUTHORITY

14. Do you have a say in household decisions? 1= Yes [] 2= No []

15. Who makes the following decisions in your household? Complete the table.

Type of decision	Decision maker (who makes the decisions)		
	Husband	Wife	Both
Economic and livelihood activities			
Daily food ration (quantity & intervals)			
Health service provision			
Marriages (girl child in particular)			
Sending children to school			

GBV/SE RISK FACTORS

16. In your view are there GBV/SEA risks in your community

1=yes, 2=no

16b) If yes, please identify at least 3 risk factors by completing the table below:

GBV/SE Risk	Level (Low, medium or high)	Who is affected <u>THE MOST</u> ? (men, women or children)	What can the TDR project do to mitigate the risk?

RECOMMENDATIONS

17. Please give at least three (3) recommendations that will reduce the incidence of GBV/SE (if any) in your community

1-----

2-----

3-----

Thank you!