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ACRONYMS

ART  Antiretroviral Therapy
ASRH  Adolescent Sexual and Reproductive Health
BEmONC  Basic Emergency Obstetric and Newborn Care
CBD  Community Based Distribution
CBDs  Community Based Distributors
CEmONC  Comprehensive Emergency Obstetric and Newborn Care
CIP  Costed Implementation Plan
CM  Child Marriage
CP  Country Programme
CPD  Country Programme Document
CPR  Contraceptive Prevalence Rate
CREFAT  Centre for Applied Research in Economy and Finances of University of Thiès
CSE  Comprehensive Sexuality Education
DD  Demographic Dividend
DoA  Delivering as One
EFSTH  Edward Francis Small Teaching Hospital
ELMIS  Electronic Logistics Management Information System
FGM  Female Genital Mutilation
FP  Family Planning
GFPA  Gambia Family Planning Association
GoTG  Government of The Gambia
IEC  Information, Education and Communication
LMIS  Logistics Management Information System
MDR  Maternal Death Audit Reviews
MMR  Maternal Mortality Rate
MoHSW  Ministry of Health and Social Welfare
NDP  National Development Plan
NGO  Non-Governmental Organisation
NPS  National Pharmaceutical Services
NYC  National Youth Council
PSB  Procurement Service Branch
RH  Reproductive Health
SDGs  Sustainable Development Goals
SDP  Service Delivery Points
SRH  Sexual and Reproductive Health
TFR  Total Fertility Rate
UN  United Nations
UNDAF  United Nations Development Assistance Framework
UNDP  United Nations Development Programme
UNFPA  United Nations Population Fund
UNICEF  United Nations Children’s Fund
Ending the unmet need for Family Planning, ending preventable maternal deaths and ending Gender-Based Violence, the three ambitious and transformative results that the United Nations Population Fund (UNFPA) works to achieve, although may seem difficult, are possible, if we strategically position our investments and efforts in young people, women and adolescents. This is what guides our work in The Gambia.

UNFPA support to The Gambia, dates back to 1972. Since then, support from UNFPA to the country has been through successive Country Programmes (CP), the current programme being the eighth.

The Country Programme has been designed to support national efforts to harness the Demographic Dividend (DD) of a youthful population, through high impact investments in sexual and reproductive health and the elimination of gender-based violence, which hinder the potential of adolescents and youth, especially girls, to effectively contribute to poverty reduction and national development in general.

Guided by the Sustainable Development Goals (SDGs), our Country Programme aims to target highly vulnerable women and youth in selected regions of the country. In the interest of maximal programme impact, it has been decided to concentrate programme effort at two outcome areas, namely Sexual and reproductive health and Adolescents and Youth.
As a result, this annual report, will take you through our 2018 journey, highlighting significant achievements recorded, in our efforts to realise the agency’s transformative results.

In 2018, the Country Office invested in the expansion of the Community-Based Distribution Programme, reaching an additional twenty (20) hard-to-reach communities, with Family Planning (FP) information and services.

Since the provision of Basic Emergency Obstetric and Newborn Care (BEmONC) is a primary health care initiative strategy used to reduce maternal and newborn mortality, the agency supported the upgrading of seven (7) health facilities into BEmONC delivery centers and trained fifty (50) midwives from selected health facilities on how to perform the seven signal functions for a BEmONC facility.

Additionally, during the course of the year, Fifteen Thousand, Two Hundred and Twenty-Three (15,223) young people were reached with information on Adolescent Sexual and Reproductive Health (ASRH), while Ten Thousand, Four Hundred and Sixty-One (10,461) youth in schools, were reached with information on the benefits of family planning.

Furthermore, through our programming, we supported 10 Maternal Death Audit Reviews (MDR) in hospitals and major health centers across the country and also supported 19 Obstetric Fistula repair surgeries, a move geared towards giving women living with this condition, a chance to restore their dignity and hope for survival.

While major results were recorded in 2018, we look forward to continue delivering for The Gambia in 2019 and beyond, results for the benefit of key populations – women, youth and adolescents, accompanied by our partners and the communities we serve.
The Gambia is one of the smallest countries on mainland Africa, with about 2 million inhabitants and a land area of 10,120 kilometers square. With a population density of 174 persons per square kilometer, the country is amongst the most densely populated in sub-Saharan Africa. 41% of women aged 20-49 in the Country, are married by age 18 according to the 2013 Demographic and Health Survey (DHS), indicating a high rate of child marriage with risks of longer lifetime fertility and its consequences on socio-economic development. With a current Total Fertility Rate (TFR) of 5.6 as per the DHS 2013, Contraceptive Prevalence Rate (CPR) of 9% and unmet need for Family Planning of 24.9%; the population is projected to double by 2030, as the current population growth rate is estimated at 3.1 per cent, per annum, with a higher population concentration in urban areas.

One of the factors contributing to the rapid increase in population, is the high level of fertility in the country which could be attributed to the youthful age structure of the population and the low use of contraceptives among women of childbearing age. Furthermore, significant barriers stand in the way of women and girls’ ability to thrive. This is because, sexual and gender-based violence remain a problem, despite government initiatives to formulate legislation to tackle this menace. Women and girls are underrepresented in economic and political decision-making; they face barriers to equal participation in the formal economy, earn less than their male counterparts, have unequal access to assets and property, and are less likely to complete secondary school than boys. Exposure to early marriage and childbearing, have been associated with high dropout rates for girls from school, which has the potential to impede efforts aimed at the realisation of the full potentials of girls, with the median age at first marriage estimated at 18.6 years and 18 per cent of girls aged 15-19 having children or pregnant with their first child.

Therefore, scaling up our family planning programming, can support the country in harnessing the Demographic Dividend and ultimately reducing poverty, which will create a greater chance for reducing the high fertility rate and propelling more people into the working class population, to enhance economic growth. Additionally, there will be a reduction in maternal mortality and early or teenage pregnancy, while girls will stay in schools for much longer, thus helping them to realise their potentials.
CHAPTER ONE: PROGRAMME IMPLEMENTATION
Despite the high knowledge levels on family planning, the uptake of services remains low and the unmet need for family planning continues to be high. The low uptake of family planning is largely attributable to the many challenges faced by young women and girls such as, cultural and religious barriers, common misconceptions related to the association of contraception with promiscuity, leading to stigmatisation, poor understanding of contraceptive methods resulting in fear of long term effects, competition amongst wives in polygamous settings often resulting in the desire to have many children, coupled with factors such as low educational attainment of women and differential access to family planning services across the country.

UNFPA is the main provider of contraceptives in the country. Procured through the Procurement Service Branch (PSB), the supplies are stored and distributed by the Ministry of Health through their distribution channels across the country. Supplies are distributed to public, private, NGO and community managed health facilities, and are dispensed to the general public free of charge, with all efforts geared towards reducing maternal deaths and conditions associated with too frequent deliveries and the need for improvement in the overall wellbeing of the family.

Low contraceptive prevalence rate, access to skilled birth attendants, high fertility rate amongst adolescent are some of the factors contributing to high maternal mortality.

With the Contraceptive Prevalence Rate (CPR) of about 9 per cent and unmet need for family planning of 25 per cent, the country has a crude birth rate of 40.5 per cent and Total Fertility Rate (TFR) of 5.6. As a result, the country office during the course of 2018, focused on key strategies to address these.
The expansion of the Community Based Distribution programme extending to an additional twenty hard-to-reach communities boosted the confidence, recognition and acceptability that CBDs received in their various communities, and also increased access to family planning services. The CBD programme has contributed in extending FP services to hard-to-reach communities to improve availability and accessibility of FP services. CBDs have intensified IEC at the community level to influence behavioral change by conducting sensitization meetings, home visits and individual talks. Family Planning commodities were available and accessible at service delivery points, including health facilities, outreach and community-based distribution programme. This is expected to have a multiplier effect on the quality of services and to contribute to increased uptake of services, particularly among young people.

The training of fifty service providers on CHANNEL by MOH in collaboration with the National Pharmaceutical Services (NPS) helped in providing a comprehensive LMIS solutions. The software helped in ensuring accurate forecasting of stocks, timely ordering of drugs, reproductive health commodities and medical supplies in the right quantities and quality, and ensured timely distribution to the regional stores, health facilities and to the consumers. Findings from the 2018 Reproductive Health Commodity Security (RHCS) survey indicates that all Service Delivery Points (SDPs) covered on the day of the survey did not experience stock outs of at least five modern methods of contraception.

In the course of the year, UNFPA Supplies supported the improvement of timely and quality data generation for making informed decisions, fifty tablets were procured to support this process. Computer APP for "Real Time" data would be developed and installed in the tablets to strengthen the Electronic Logistics Management Information System (eLMIS) and ease reporting through the supply chain in 2019.
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A National Family Planning Policy with a rights-based approach was developed and validated. The Government of The Gambia, in the National Health Strategic Plan (2014-2020), has articulated a need to reduce maternal and new born morbidity and mortality in the country using family planning as a key strategy for realizing this goal. This National Family Planning Policy (2019-2026) aims to give greater visibility to family planning as a strategy for national development and provides the necessary guidance on family planning issues in the country.

UNFPA Supplies supported the development of a Costed Implementation Plan (CIP) which is the first of its kind for the country. It is hoped that the plan would motivate The Government of The Gambia (GoTG) to increase commitment of resources to the national family planning (FP) programme. Such investment would avail the public, including adolescents, the opportunity to access sexual and reproductive health (SRH) information and services, and also welcome the involvement of partners in contributing towards the funding of the Family Planning Programme.
RESULTS

01 National Family Planning Policy was developed and validated

02 A Costed Implementation Plan (CIP) for the Family Planning Policy was developed

03 31,130 unintended pregnancies averted

04 146 maternal deaths averted

05 119,942 couple years of protection generated

06 30 service providers were trained on Contraceptive Technology and Family Planning

07 A 3.7% increase in new Family Planning acceptors compared to 2017 observed

08 60 youth peer health educators (YPEs) were trained on contraceptive technology, STI/HIV/AIDS prevention and treatment, teenage pregnancy, FP counseling and anatomy and physiology
UNFPA Representative shares his thoughts on the imperatives of Family Planning

Kunle Adeniyi
Two years ago, specifically in April 2016, I arrived in The Gambia to lead the UNFPA team. It was a time of immense political tension and strife. The April riots had just happened, leading to the death of some political activists. People did not talk and it was difficult to get an honest and reasoned opinion on anything. Fast track two years later, and a whole lot has changed. The country ended 22 years of dictatorship, returned to participatory democracy, citizens freely express their freedom of speech, association and other fundamental human rights. A lot has really changed in the positive. Indeed, The Gambia received a breath of fresh air.

Sadly, this change appears muted for the people most in need, the demography that is almost always forgotten in the grander scheme of things. Ironically, these people are the bedrock of our society, the cornerstone in the home, the care givers, home makers, and handlers of the care economy - The Gambian woman and girl!

Across, the world, many development interventions are designed and implemented, without particular attention to women. Same can be said of sub-Saharan Africa, where The Gambia belongs. While issues affecting women and girls’ empowerment are varied and include access to education, work, equal pay, quality healthcare, gender-based violence and many more, in this piece, I will focus on family planning, its importance to The Gambian woman in particular and the nation in general.

Despite the misconceptions about family planning, millions of people still wonder, why family planning.

So really, why Family Planning?

Available evidence suggests that, women who choose spaced childbirth by using modern contraception, are healthier and face lower risks of maternal death. Too many women die of preventable causes while trying to bring life. While progress has been made, maternal mortality is still high in The Gambia. Let’s view it this way, for every 150 deliveries in The Gambia we lose a mother to preventable causes. The death of a mother results in vulnerable families and even when the infants survive, they are more likely to die before reaching their second birthday. Equally, children born to women who space their pregnancies are more likely to be healthier and face reduced risks of death in their first five years of life. Hence, family planning remains one of the most effective tools to end the preventable death of our mothers.

Family planning is the most cost effective anti-poverty strategy as it creates conditions that enable and free up women to enter into the labour force, while encouraging families to devote more resources to each child, thereby improving family nutrition, and educational level and by extension living standards.
This year, The Gambia will be blessed with nearly 80,000 babies. 46% of the Gambia’s population is under the age of 15 and over 65% below age 25. These are age brackets with limited productivity, but require critical investments in health, education and social services. By adding 80,000 to our population annually, we will require 2,600 classrooms annually on the average. This is besides hospital beds, roads, water, power and other services. With the global and national economic realities, how much of this can the Government afford to provide? Given that, effective family planning programmes slow down the population growth rate, thus reducing the cost of providing social services as demand eases for water, food, education, health care, housing, transportation and jobs. Most importantly, it allows the policy makers to focus on qualitative education and services as opposed to quantity.

As a result, it should be noted that, universal access to voluntary family planning, requires commitment from a broad range of partners: men as well as women, religious and traditional leaders, international organizations, Government, civil society and the media, as the right to family planning permits the enjoyment of other rights, including the rights to health, education, and the achievement of a life with dignity. Should we be able to walk the talk, the Gambian woman can indeed begin to reap the dividend of democracy, rather than being left behind. It will demonstrate that we care for our caregivers, and demonstrate our commitment to holistic women empowerment.

All the benefits of family planning uptake mentioned earlier, drive us to one point - the need to educate our young ones about their reproductive health and to prepare them to make informed choices in future. As such, when I return with another publication, we will discuss Comprehensive Sexuality Education. Do not hurry to condemn this idea. I am sure we will agree fully after understanding what it entails and the value it has in the lives of our soon to be adults.
UNFPA Representative Shares His Thoughts on the Imperatives of Family Planning
Maternal Mortality Rates (MMR) remain amongst the highest in the world estimated at (433/100,000) live births, with infant mortality estimated at 34/1,000 live births and under-five mortality at 54/1,000 live births.

UNFPA has provided equipment and supplies, including maternal lifesaving drugs to seven major health facilities to facilitate the provision of BEmONC. Series of trainings were also supported. The training on Emergency Maternal and New-born Care Signal Functions was aimed at building the capacities of service providers to enable them monitor the progress of labour cautiously.

The inability of health facilities to perform manual removal of placenta, removal of retained products and assisted vaginal delivery, severely limits the capacity of health facilities to save lives of women and babies when complications occur and it places an undue burden on the referral system. The training consisted of a strong practical element which enabled all the participants to have practical experience of conducting vacuum assisted deliveries.

Upon completion of training, equipment needed for the provision of BEmONC were distributed to the health facilities (Sanyang Health Centre; Kerewan Health Centre; Illiassa Health Centre; Sukuta Health Centre; Gunjur Health Centre; Baaja Kunda Health Centre and Brikamaba Health Centre).

Maternal Death Audit Reviews (MDRs) have been institutionalized in the health system in The Gambia to better understand the causes of maternal deaths with efforts aimed at averting the high maternal mortality.

Key findings emanating from the reviews as factors contributing to maternal deaths are: Eclampsia, Hemorrhage, retained placenta, late referrals, inefficient blood transfusion services and insufficient documentation from referring facilities.
Obstetric Fistula continues to debilitate the lives of many women, preventing them from participating in economic, household and social activities. Most of these women are stigmatized and discriminated by their communities and would suffer in shame and solitude. In 2018, UNFPA supported fistula repairs for nineteen women living with the condition. Fistula patients were identified through routine screening at Bafrow Medical clinic and Edward Francis Small Teaching Hospital. Women underwent counselling which forms an integral component of fistula care services. The counselling addressed issues related to fistula prevention, treatment and social reintegration. EFSTH and BAFROW were supported to conduct 9 and 10 fistula surgeries, respectively. Patients at EFSTH were operated by a team of four competent surgeons whilst the procedure at BAFROW was presided by Consultant Surgeons from Ghana who were supported by a team of Gambian Doctors.

The BAFROW intervention included a rehabilitation and re-integration component. Some of the women were trained on income generating activities and literacy skills. The skills training ranged from sewing, bakery and soap making. After the skills training women, were provided with seed money to start up small business upon return to their communities.

The country office has supported Government in undertaking in-service training of various cadre of service providers in the health system. There is high staff attrition rate within the public health system, as trained service providers often migrate to Europe/America or leave for the private sector in the urban area for better working conditions, ultimately leaving facilities without the requisite staff to be fully operational which impedes the quality of service delivery.

The training programmes helped build capacities of service providers in order to:
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The training programmes helped build capacities of service providers in order to:

- Demonstrate better knowledge and understanding of the major causes of obstetric and neonatal emergencies and complications.
- Demonstrate better understanding and competence in performing vital procedures and skills required to manage major maternal and neonatal emergencies and complications.
- Demonstrate competence in executing a structured approach to managing obstetric and neonatal emergencies and complications.
- Deliver comprehensive SRH services including ASRH services and family planning.
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- Demonstrate competence in executing a structured approach to managing obstetric and neonatal emergencies and complications.
- Deliver comprehensive SRH services including ASRH services and family planning.

RESULTS

01. 22 health care workers were oriented on the Adolescent Sexual and Reproductive Health (ASRH) Guidelines

02. 22 health care workers were trained on Cervical Cancer screening

03. 30 health care workers were trained on Adolescent Sexual and Reproductive Health counselling, including family planning.

04. 19 Fistula Repair surgeries were conducted

05. 50 midwives from selected health facilities were trained on how to perform the seven signal functions for a BEmONC facility

06. 10 maternal death audits were conducted in hospitals and major health centers across the country

07. 7 health facilities were provided with equipment required to perform BEmONC services:

- 1 Vacuum extractor
- 1 Stethoscope
- 1 Doppler (Sonic Aid)
- 1 Sphygmanometer

Maternal Life-saving medicines
I love being a midwife. I used to be a general practicing nurse but I later built interest in helping women bring their bundles of joy into the world. This was why I went back to study midwifery.

These were the words of Diminga Mendy, a midwife at the Sukuta Health Centre, in the Kombo North District of The Gambia’s West Coast Region. The facility, situated in the small town of Sukuta, about twenty-two kilometres from the capital city, is one of the busiest public health facilities within the district, recording an estimation of over 500 deliveries per month.

Of course Midwives – and people with midwifery skills – are the main caregivers for women and their new-borns during pregnancy, labour,
conditions of the labour wards
and to donate maternal
life-saving equipment,
including Vacuum Extractors,
Foetal Heart Dopplers, Blood
Pressure Machines and
Stethoscopes. This, is part of
many efforts to support health
facilities to deliver at least
Basic Emergency Obstetric
and Neonatal Care (BEmONC)
services.

On our stop at the Sukuta
Health Centre, we met
Diminga, performing her daily
tasks, going in and out of the
labour ward and rendering
assistance to the women and
their new born babies. Having
seen the equipment, we
brought with us, the
excitement she expressed with
her colleagues could not go
unnoticed. “These came at the
right time. Having all the
equipment we need, makes our
job easier.” were the words
they uttered as we presented
the material to them.

For the past eight years,
Diminga has supported the
delivery of thousands of
babies at this facility, living her
dream and helping save the
lives of women. According to
her, midwifery is her calling;
hers duty to serve humanity
through the profession and to
bring back hope in our health
care systems as far as
maternal health is concerned.
Thus, since her graduation
from the Gambia College’s
School of Nursing and
Midwifery in 2010, she has
directed her energy and
passion to helping save the
lives of women and supporting
them through their pregnancy
and motherhood journeys.

It goes without saying that,
well trained midwives can
provide comprehensive sexual
and reproductive health
information and services,
including antenatal, safe
delivery and post-partum /
post-natal care, because they
offer one of the most
cost-effective and culturally
sensitive paths to achieving
universal health care. Yet,
midwives continue to face
numerous challenges in
delivering their services,
including lack of adequate and
properly-functioning
equipment to support their
work.

In The Gambia, between 50% -
74% of births are attended to
by skilled personnel including
midwives. As such, there is a
need to build the capacities of
midwives as well as to provide
them with the necessary
equipment they need to
perform their daily duties
because #MidwifeSaveLives!
UNFPA Gambia Supported the Gambia National Youth Council (NYC) to draft a country programme of Action on Youth for the next two years. The Youth Action plan was designed around eight thematic areas which includes:

- Youth leadership and political participation;
- Youth employment and entrepreneurship;
- Youth in Agriculture;
- Curbing youth irregular migration;
- Access to information and anti-corruption;
- Information and Communication technologies;
- Peace and security; and
- Gender-based violence and Sexual and Reproductive Health rights

Through the Regional Youth Centres, UNFPA supported GFPA in the provision of ASRH Services. There is still need to further strengthen sensitization activities on stigma and discrimination as volunteers complain of being discriminated against after undergoing the test.

In 2018, the Country Office supported two main activities in the area of comprehensive sexuality education (CSE). To build the capacities of teachers in the teaching of CSE in primary and secondary schools, the Country Programme supported the training of two hundred and ninety-nine teachers in the teaching of the subject. The group of teachers benefiting from this training formed the core team of teachers who are expected to participate in the step-down training of additional teachers. To complement the teaching of the subject in schools, two life lessons were developed on selected topics. The first life lesson conducted in June 2018 was designed to sensitize children on the dangers of gender-based violence and child marriage, and these lessons were conducted nationwide. In November 2018, the second life lesson was conducted with the theme HIV and AIDS - Know Your Status. These lessons targeted all schools in the country.

Additionally, in order to harness the Demographic Dividend, strategic investments must be made into our most important resource – young people and to do this effectively, an understanding of the current profile of the country must be mapped out.

In West and Central Africa, UNFPA through the technical support of the Regional Institute for Population Studies (RIPS) of the University of Ghana, Accra, the Department of Economics of the Kwame Nkrumah University of Science and Technology, Kumasi, Ghana; University of Ibadan in Nigeria and the Centre for Applied Research in Economy and Finances of University of Thiès (CREFAT) assisted the governments of the 23 countries covered by the UNFPA Regional Office (WCARO) to create the window of opportunity to harness the demographic dividend (DD).

As part of capacity building efforts for countries in the sub-region, WCARO organized the training of national experts in the development of demographic dividend profiles in Accra Ghana, 15-27 April 2018. The overall objective of the training workshop was to provide the national experts from WCARO English speaking countries the necessary capacities and tools to be able to measure the demographic dividend through the national transfer accounts (NTA) methods. The Gambia was one of the participating countries. The Gambian team was able to produce a draft national DD profile report. There are plans to initiate a review of the draft report in 2019, with specific focus on the assumptions built into the model. The revised report would then be validated before being disseminated to stakeholders.
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RESULTS

01. A draft National Demographic Dividend Profile has been developed

02. 15,223 young people were reached with information on ASRH

03. 164,500 pieces of condoms were dispensed, representing a 13.96% over 2017 figure, showing an increase in demand for condoms

04. 10,461 youths in school were reached with information on the benefits of family planning.

05. 299 teachers trained on Comprehensive Sexuality Education

06. 6461 young people visited the centers seeking for different ASRH Services including family planning, HIV/AIDS, STI prevention and utilization of the resource center, amongst which 3630 were male and 2831 female

07. 196 HIV/AIDS tests were conducted through the UNFPA supported Youth Centers run by the GFPA. 5 people tested positive and were referred to ARTs Centre for further evaluation and treatment

2018 RESULTS: DELIVERING A GAMBIA WHERE EVERY YOUNG PERSON’S POTENTIAL IS FULFILLED
“I am inspired by young people of The Gambia”

UN Youth Envoy addressing a Youth Town Hall Meeting

The UN Secretary General’s Special Envoy on Youth, Jayathma Wickramanayake, met with young people at the Faculty of Law Auditorium of The University of the Gambia. The event provided an opportunity for the Envoy to have an open dialogue with young people of the country, as those in attendance comprised of both members of the National Youth Council, students, and young journalists.

The meeting began with a moderated discussion with the Youth Envoy, followed by a plenary with an excited audience. Young people were happy to have the envoy visiting The Gambia, noting that her presence galvanised their efforts to push for youth development outcomes in the country. The key thematic issues to emerge from the plenary included migration, peace and security, human trafficking, youth participation, and, sexual and reproductive health – particularly in regards to addressing harmful practices such as female genital mutilation and child marriage.

In an enthused exchange, young people expressed a keen interest in learning from the Envoy’s experiences since assuming her duties and how her mandate relates to the challenges shared in the plenary.

Speaking on the issues raised, the Youth Envoy noted that the progress on the Global Compact for Migration were showing encouraging developments. Additionally, the unanimous adoption of United Nations Resolution 2250 (2015) looking at Youth, Peace and Security was a welcome development. For the first time, young people are recognised as integral in the peace building process, and not just as victims or actors in conflict drivers. On female genital mutilation and child marriage, the envoy reiterated her central message delivered on 5th February during the International Forum on Developing Strategies to Eliminate Female Genital Mutilation, emphasising that harmful practices are part of social norms that we must change. She further stressed that in order to empower young girls and women, all countries need to protect their rights – rights to sexual and reproductive health, bodily integrity, make decisions on their own health, and protection from harm.

The Envoy impressed on the audience that these concerns were shared by the UN and the international community, and as such, what her visit to the country was meant to address. “My work is mostly about bringing the UN closer to young people, and young people closer to the UN.”
But honestly, I have been inspired by the young people of Gambia, how you have been able to stand up and bring about this new democratic transition, and how well you are taking the opportunities that you have had.”

On their part, participants of the Town Hall meeting challenged the Youth Envoy to push for greater involvement and participation of young people in the global south in UN processes and meetings. They called on the envoy to ensure the outcomes from youth meetings, such as the recently concluded ECOSOC Youth Forum, become a meaningful part of the broader discussions on youth development at the United Nations. And on a personal level, participants called on the envoy to explore opportunities to mentor young girls who would benefit greatly from her story, experiences, ideas and guidance.

Jayathma Wickramanayake
The UN Secretary General’s Special Envoy on Youth
CHAPTER TWO: PARTNERSHIPS AND ADVOCACY

BUILDING STRATEGIC PARTNERSHIPS FOR RESULTS

The objectives of the 8th CPD cannot be achieved by UNFPA without partnerships for co-financing and cooperation among development partners, as enshrined in the SDGs – Goal 17. This goal promotes North-South and South-South partnerships to create synergy and maximise resources to achieve development objectives at global and country levels by all development partners including the public, private and donor community.

In 2018, UNFPA The Gambia strengthened its partnerships across different partners which resulted in the signing of new partnership agreements with the UN Peacebuilding Fund for a joint project with UNICEF The Gambia to promote women and youth participation in decision making processes worth $1.3m for two years and another project with IOM The Gambia to strengthen reintegration of young returnee migrants at community level worth $1.3m. These projects combined, resulted to a partnership agreement with the UN Peacebuilding Fund worth $1,230,000 to be implemented in 2019 and 2020.

In its drive to promote the One UN Agenda, the Country Office has signed co-financing agreements with UNDP The Gambia and UNICEF The Gambia for contributions to the implementation of the 2019 Demographic Health Survey (DHS) worth $600,000 and $50,000, respectively. The Country Office continues to engage in the UNICEF-UNFPA Joint Programme for the Accelerated Abandonment of Female Genital Mutilation to support the implementation of activities to eliminate the practice in the country. In addition, two proposals were submitted to two funding organisations worth $4.3 million for partnership on programme delivery on sexual and reproductive health, which are currently awaiting feedbacks on possible partnerships.
In 2018, the Country Office strengthened its communication and visibility across the country. Through its social media platforms – Facebook, Twitter, Instagram, YouTube and the CO website, a vibrant following has been developed and continues to be provided with daily content and updates on our work in The Gambia. In 2018, 491,859 impressions and 452,676 engagements were recorded on Twitter. The country office Facebook page generated 1,209 more likes and 187,031 impressions.

To enhance our external communication with partners, donors, beneficiaries and the public in general, Statements, Press Releases and Op-eds were published on various local newspapers on key International Commemorations, as well as on various thematic areas of our work in The Gambia. Given the power of positive messaging to promote social change communication, four (4) billboards with messaging on our programme interventions and priorities, were erected in 4 strategic locations within the Greater Banjul Area.

In August 2018, the Country Office hosted the Regional Change Management Workshop and the Regional Communication and Advocacy Retreat bringing together Representatives and communication focal points from all twenty-three (23) countries in the West and Central Africa region, as well as Regional Office staff. The events were graced by key government officials, including the Vice President and the Minister of Information and Communication Infrastructure. The event was concluded with a grand dinner hosted by Her Excellency the First Lady of the Republic of The Gambia – Madam Fatoumatta Bah-Barrow, under the theme ‘Safe Motherhood for Gambian Women’ which highlighted the importance of access to quality maternal health services for women to ensure safe motherhood. The event was attended by government officials and development partners in the country.

As a member of the UN Communications Group under the Chairpersonship of the UNFPA The Gambia Representative, the Country Office was actively part of the commemoration of the 2018 UN Day Celebration and supported the UN Information Centre in Dakar’s commemoration of the International Decade for People of African Descent, organised in The Gambia.

In commemoration of Sixteen (16) Days of Activism against Gender-Based Violence, the Country Office officially released its music album dubbed ‘Worlds Apart’, named after the 2017 State of World Population Report. The album which contains six(6) entertaining yet educative songs, features prominent Gambian artists who have decided to use their art to advocate for Family Planning, speak up against Gender-Based Violence, promote the condomize campaign against HIV/AIDs and call for adequate investments in and empowerment of women and girls of The Gambia.