

THE GAMBIA HUMAN CAPITAL

REVIEW



The Gambia Human Capital Review

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Acronyms and abbreviations

ASP	Adaptive Social Protection
CBC	Community Birth Companion
CRVS	Civil Registry and Vital Statistics
DHS	Demographic and Health Survey
eCRVS	electronic Civil Registry and Vital Statistics
ECD	Early Childhood Development
ECE	Early Childhood Education
EGRA	Early Grade Reading Assessment
EMIS	Education Management Information System
FGD	Focus Group Discussion
FGM	Female Genital Mutilation
GamSR	Gambia Social Registry
GBA	Greater Banjul Area
GBoS	Gambia Bureau of Statistics
GBV	Gender-based Violence
GDP	Gross Domestic Product
GER	Gross Enrolment Rate
GLMIS	Gambia Labour Market Information System
GMD	Gambian Dalasi
GRM	Grievance Redress Mechanism
HCI	Human Capital Index
HRMIS	Human Resources Management Information System
IHS	Integrated Household Survey
KII	Key Informant Interview
LGA	Local Government Area
LFS	Labour Force Survey
LIC	Low-income country
MICS	Multiple Indicator Cluster Survey
MIS	Management Information System
MoBSE	Ministry of Basic and Secondary Education
MoFEA	Ministry of Finance and Economic Affairs
MoGCSW	Ministry of Gender, Children and Social Welfare
MoHERST	Ministry of Higher Education, Research, Science and Technology
MoH	Ministry of Health
MoLGL	Minister of Local Government and Lands
MoTIE	Ministry of Trade, Industry, Regional Integration and Employment
MoYS	Ministry of Youth and Sports
MPA	Ministry of Public Administration
MSME	Micro, Small and Medium Enterprises
NaNA	National Nutrition Agency
NAT	National Assessment Test
NAQAA	National Authority for Quality Assurance and Accreditation
NCD	Noncommunicable Disease
NDMA	National Disaster Management Agency

NEET	Not in Education, Employment or Training
NHIS	National Health Insurance Scheme
NSPP	National Social Protection Policy
NSPS	National Social Protection Secretariat
NSPSC	National Social Protection Steering Committee
NYC	National Youth Council
NYP	National Youth Policy
PER	Public Expenditure Review
PHC	Primary Health Care
RBF	Results-Based Financing
RDI	Rural Development Institute
SBCC	Social and Behavioral Change Communication
SDI	Service Delivery Indicators
SP	Social Protection
TVET	Technical and Vocational Education and Training
UHCI	Utilization-Adjusted Human Capital Index
VHS	Village Health Service
WASSCE	West African Senior Secondary Certificate Exams
WDI	World Development Indicators

Executive summary

Human capital, which encompasses knowledge, skills, health, and nutrition, is a significant determinant of long-term economic growth and social advancement. Human capital drives economic growth globally, and is responsible for two-thirds of global wealth. COVID-19 led to a sharp decline in human capital in critical stages of life, with children and young people most affected. The Gambia, a low-income country with a predominantly agricultural economy, has for many years seen its efforts to reduce poverty challenged by high population growth and limited access to basic infrastructure. Since the pandemic, poverty rates have increased, and high inflation, driven by food prices, may impact households' ability to invest in and protect human capital. The country is particularly vulnerable to climate shocks, which disproportionately affect the poorest. This review offers an overview of human capital outcomes in The Gambia across the life cycle and identifies the main actions to build, utilize, and protect human capital.

The Gambia's Human Capital Index (HCI) in 2020 was 42.4 percent, indicating that a child born that year will only be 42.4 percent as productive when she grows up as she could be if she had full health and education. Despite this, The Gambia's HCI is higher than the sub-Saharan African average and that of neighboring countries. The HCI for women is higher than for men, with women reaching higher levels in all components, including adult survival rates, health, and school outcomes. The HCI for both men and women increased from 2018, indicating that human capital outcomes were improving before the COVID-19 pandemic.

This review assesses human capital outcomes in The Gambia, identifies key constraints to the development and utilization of human capital,

and offers a cross-sectoral approach toward greater prosperity. It is not intended to be a thorough assessment of the human development sectors. Rather, because human capital is cross-sectoral by nature, it provides an overview of the different sectors and emphasizes their underlying linkages. By design, the review focuses on topics and issues that encompass various sectors to highlight the need for a coordinated multisectoral approach to enhancing human capital. The approach taken by this review is summarized in Figure 1. Following the diagnostics across the life cycle, human development sectors, and the deep dive on youth (ages 15–24), this report identifies four cross-sectoral constraints: financing; coordination—and inefficiencies—in administration; quality; and accessibility. The review concludes by offering priority actions to build, utilize, and protect human capital across the life cycle. Because the constraints to human capital development are cross-sectoral, these actions require strong collaboration across sectors and across the whole of government.

The life-cycle approach to human capital in The Gambia

Human capital outcomes before birth and during childhood have improved in recent years. The Gambia has seen an improvement in maternal health, driven by increased access to prenatal care and birth assistance. Child health outcomes have also improved substantially: child mortality and the prevalence of stunting and wasting among children under five have both decreased, while already high rates of childhood immunization have increased. Nevertheless, inequalities remain. For example, although there have

been significant improvements for poor women in access to prenatal care, wealthier women still have better access to care from doctors, rather than midwives or nurses. Noncommunicable diseases are also on the rise, and anemia rates are worryingly high, particularly for the poorest children. Furthermore, fewer than half of all children ages 0–6 are enrolled in early childhood education, and there are significant regional disparities in educational enrollment across all levels.

Gambian youth face challenges in various sectors. Teenage pregnancy rates are high, especially in rural areas, leading to a high level of unwanted fertility and to young women dropping out of school. Risky health behaviors are on the rise for youth, with overweight and obesity rates increasing, especially among girls, and rising cigarette and alcohol use among boys. Girls are more likely to attend school than boys, but the gender gap then reverses after marriage, for postsecondary education. Youth labor force participation is low, and the proportion of youth not in education, employment, or training is high, undermining the demographic dividend.¹ Educated young people may face greater difficulty in securing jobs, but the quality of the jobs they eventually find is better. In general, The Gambian economy faces low labor force participation rates and a shortage of wage jobs, providing working-age adults with few opportunities to utilize their human capital.

Women and girls face additional constraints in building and utilizing their human capital. Female genital mutilation (FGM) remains high: 73 percent of young girls have undergone this procedure, which affects nearly all other human development outcomes for girls and women, beginning with immediate health impacts (serious illness; even death), to lifelong physical and mental health impacts. Although child marriage is prohibited, it remains

common: a quarter of young women aged 20–24 married early; 17.5 percent were married between ages 15 and 18; and 5.6 percent married before age 15 (DHS 2019–20). As adults, women significantly underutilize their human capital and are more likely than men to be out the labor force. When they are employed, they are less likely than men to have high-quality jobs.

Deep Dive on Youth

Investing in human capital for Gambian youth is crucial for the country's future economic and social success. Currently, 63 percent of the population are younger than 25 years old. As the main recipients of human capital investments and the drivers of tomorrow's economy, youth (15–24 years) require particular attention in the study of human capital in the Gambia. For that reason, a large focus of this review is on youth. A qualitative study conducted for the purpose of this review engaged 250 young people and policy makers across the country on the themes of education, employment, migration, and perceptions of the future. The importance of education in The Gambia is widely recognized by young people and their communities, as it is seen as a prerequisite for employment and personal development. However, the quality of education is a concern due to factors such as poorly qualified teachers, limited facilities, and lack of basic teaching tools (such as computers). Technical and vocational education and training (TVET) centers are increasingly seen as useful for preparing young people for the labor market and as a path toward self-employment rather than as a remedial route for dropouts. The shift in perception is also visible in survey data, showing an increase in the share of people who ever attended TVET. However, respondents noted a disparity between what is taught in schools and centers and what the labor market actually needs (the bedrock of any successful TVET system).

¹ The demographic dividend is the boost in economic growth that would typically be expected to occur when there are growing numbers of people in the workforce relative to the number of dependents.

Box 1: Qualitative Assessment of Gambian Youth

The study engaged 250 young Gambians across The Gambia’s eight Local Government Areas (LGAs) on the themes of education, employment, migration, and perceptions of the future. Ten Key Informant Interviews (KIIs) and three Focus Group Discussions (FGDs) were conducted in each LGA, in a mix of urban and rural areas. The sample was balanced by gender, age, and occupation group. Since migration is a key area for policy in The Gambia, the study also conducted three online focus group discussions with young members of the Gambian diaspora. Additionally, to further contextualize findings, nine interviews were conducted with key policy makers working on human capital. Finally, results were validated during a workshop held with 16 young people who had participated in the research through KIIs or FGDs.

Youth in The Gambia largely depend on informal income-generating activities for subsistence. Most young people who are in the labor force are either self-employed or engaged in informal apprenticeships or petty trades. Youth define a good job as one that earns enough income to take care of their family and community, and a stable salary is the most important attribute of a good job. Skilled technical jobs such as mechanic, carpenter, builder, and tailor are recognized as offering more income and reliability than office jobs. In the absence of labor market intermediation services, youth rely on networks to find a job, particularly in rural areas, where informal apprenticeship schemes rely largely on familial or social networks for recruitment. Despite the passage of the Women’s Act, which formally prohibits discrimination in employment, women still face additional barriers to finding employment and are held back in particular by potential employers’ fear of the (perceived) ubiquity of maternity leave.

Many young Gambians feel marginalized and seek better opportunities overseas. The majority resort to irregular means of migration, with male youth, especially first-borns, under pressure to migrate (and earn) due to familial responsibilities. However, many rural youth also migrate internally to urban areas in search of better economic opportunities and education. The lack of educational avenues or opportunities to develop skills tend to drive both formal and irregular migration. Despite the dangers, most are still willing to risk the journey. A lack of opportunities and limited sense of

agency give them a bleak outlook on the future.

Four main constraints to human capital development: financing, coordination and inefficiencies in public administration, accessibility, and quality.

The Gambia is currently facing inefficient and insufficient funding of its education, health, and social protection systems. The education budget is heavily tilted toward salaries, leaving less funding for infrastructure, equipment, and supplies, such that households bear much of the cost burden. Lack of resources has also resulted in inadequate provision of essential services in both education and health, though a recently passed health insurance scheme offers a promising way forward. The social protection sector has seen important advances in recent years, including the launch of a social registry and the poverty-targeted Nafa program.² However, social assistance programs are largely funded by development partners.

The effectiveness of human capital programs is hindered by limited coordination both within and across institutions and inefficiencies in public administration. There are many diverse implementing agencies across sectors, resulting in overlapping mandates and a lack of accountability. Successful coordination is crucial to ensure implementation, scale-up, and effective learning from past experiences. The lack of coordination within and across institutions leads to discrepancies in accreditation and qualifications, as seen in the

² Nafa means ‘something that benefits you’—an approximate translation.

example of skills training and development, where responsibilities for formal and informal TVET programs are fragmented across multiple ministries and departments.

Limited access to services, justice, and markets remains a significant constraint in The Gambia.

Access to higher levels of education, health care, and to TVET is particularly limited in rural areas, where people must travel considerable distances to reach services. Similarly, lack of access to markets hampers productivity and employment growth in rural areas. The agricultural sector is the mainstay of the Gambian economy and provides for most of the population, but poor road networks and inadequate infrastructure significantly limit productivity. A lack of access to finance also constrains employment creation, particularly for youth and women, and limits business growth.

The quality of service providers in the social sectors is low.

The Gambia is facing challenges in developing quality teachers through preservice and in-service training, resulting in poor academic performance among students. The health care system faces a shortage of medical supplies, equipment, and senior clinical staff, resulting in long waiting times at health clinics, especially in rural areas. The tourism sector, which has high growth potential, is constrained by a lack of highly skilled personnel, especially at the managerial level. Although businesses find it easy to recruit skilled labor and people with technical expertise, there is a shortage of top-level employees with the requisite managerial competence to drive growth and innovation.

The Gambia collects an extensive amount of data on human capital outcomes, but only uses it sporadically, and typically fails to share it across sectors and institutions.

The education sector collects a wide range of data through the Education Management Information Systems (EMIS) but the overall EMIS set-up needs to be decentralized to empower teachers and leaders to utilize data for policy making. The National Assessment Test (NAT) for grades 3 and 8 collects data on learning

outcomes every year, but the results are not necessarily comparable across years and are not used for policy making. The Gambia is making progress toward achieving high-quality universal health coverage, with increasingly integrated health data playing a key role in supporting effective policies. The Ministry of Health is establishing electronic records, including an electronic Civil Registry and Vital Statistics (eCRVS) system and a national health insurance card, with a focus on issuing birth certificates to all citizens. Linking different information systems provides opportunities for evidence-based decision-making across government agencies.

Main actions to build, utilize, and protect human capital

Building human capital requires investments in the early years and improvements in the delivery and quality of social services.

Investments in the early years of children's lives have the highest return. The development of young children can be supported through an increase in the quantity and quality of childcare options, which would also allow mothers to participate in the labor market. Since most children are cared for outside formal childcare centers, it is important to improve the knowledge of caregivers. Current low levels of human capital formation and utilization are attributable to the persistent need to reduce the harmful practice of FGM and enforce the prohibition of child marriage. Social safety nets need to be expanded concurrently to continue strengthening human capital formation of children and vulnerable populations. There is an urgent need to improve teacher quality in the education sector by incentivizing bright and motivated students to enter the teaching profession. On the health side, health insurance provides an opportunity to strengthen the quality of care in the health sector, while also protecting the human capital of the poor and vulnerable. To expand youth's human capital formation and underpin national economic aspirations, there is a need

to diversify and deepen skills through quality TVET training designed to meet labor market demands. Lastly, promoting the timely availability and use of credible, relevant data will allow evidence-based decision making across government agencies.

Strengthening the utilization of human capital requires investments in the business environment and the creation of equal opportunities for women.

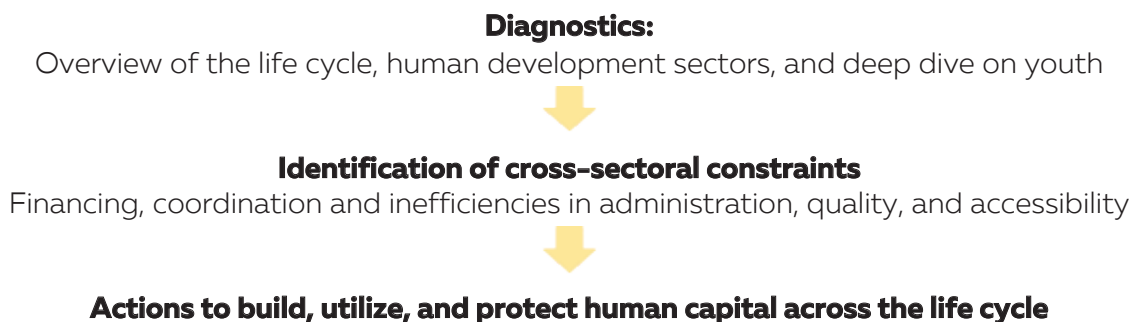
A lack of managerial skills and start-up capital were highlighted as constraints to entrepreneurship throughout the review. While youth increasingly view entrepreneurship as a viable option, they often lack the funds to start a business, highlighting the need to create a thriving business ecosystem to support the scale-up of successful ventures. It is also important to create and expand opportunities for women in the labor market by improving their access to productive assets and strengthening the caregiving profession. Setting up labor-market information systems and collecting data on graduates' transition from school to work could bridge the gap between the supply of and demand for skills and improve the effectiveness of training programs. Democratizing data by expanding its availability to nongovernmental entities could also lead to deeper and more incisive analysis of key development challenges. It is crucial to note that the lack of better employment outcomes seems principally due to a lack of good jobs, rather than to skills shortages. This means that efforts to build workforce skills need to go hand in hand with interventions to remove existing structural barriers to growth and employment creation.





Finally, human capital needs to be protected in the face of personal and societal shocks.

Distance-learning tools and digital health tools have become essential during the COVID-19 pandemic; together with preparedness plans they can support the resilience of social sectors. Insurance mechanisms can support households' resilience to individual shocks, including health shocks that can very rapidly push households into poverty or negative coping mechanisms. Adaptive social protection can support households facing unpredictable

shocks, such as climate shocks, to which The Gambia is particularly susceptible. Across the world, safety net systems are increasingly becoming adaptive, thanks to strong delivery systems, such as social registries. The Gambia is close to instituting a nationwide registry, which can be used to improve the delivery of social interventions at times of crisis. Harmonizing mechanisms across human development sectors would improve their efficiency and the delivery of social services.

Figure 1: Summary of the review’s approach

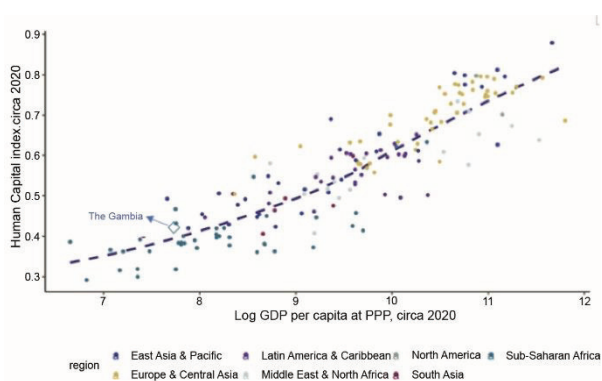


	Early years 	Childhood 	Youth 	Working age 
BUILD	Increase quantity and quality of childcare options	Increase teachers’ content knowledge, and pedagogical skills	Diversify the supply and quality of skills available in the economy (e.g., TVET)	Strengthen lifelong learning and remedial education
	Enforce existing child protection legislation; Increase coverage of social safety nets and roll out to urban poor; Roll out national health insurance; Decentralize social services			
UTILIZE			Create a thriving business ecosystem and strengthen entrepreneurship, but “not everyone is an entrepreneur” Support productivity of informal sector jobs Increase access to labor market and higher quality jobs, particularly for women Promote migration to secondary urban centers	
			Remove legal barriers preventing women from accessing justice and improve their access to productive assets	
PROTECT	Provide health insurance to poor households; Support gender-sensitive adaptive social protection systems to react to climate and other shocks; Offer social insurance options to informal workers; Use digital tools for social sector resilience			

Introduction

Human capital is a key determinant of long-term economic growth and social advancement in the modern world economy. Human capital is the knowledge, skills, nutrition, and health that people accumulate over their lives, enabling them to realize their potential as productive members of society. Human capital has been shown to be a driver of economic growth (Figure 3) across the world and accounts for two-thirds of global wealth (World Bank 2021a), making it the most important component of wealth globally. There are further large rates of return and multiplier effects from human capital investments (World Bank 2021b). Human capital is thus an indispensable means of ‘unlocking’ and protecting human, economic, and social rights by providing the framework required to secure good health, security, economic well-being, and the social and political participation that are crucial for development.

Figure 2: Human capital strongly correlates with GDP per capita



Source: Own reproduction of World Bank, 2021a

The COVID-19 pandemic led to a sharp decline in human capital at critical stages of the life cycle. Across the world, people younger than 25 today—those most affected by the erosion of human capital—will make up 90 percent of the prime-age workforce in 2050 (Schady et al. 2023). The pandemic led to sharp reductions in critical inputs for child development and resulted in school closures: nearly one billion children in low- and middle-income countries missed at least one year of

in-person schooling. The learning losses observed today could reduce future earnings around the world by US\$ 21 trillion. For youth, COVID-19 led to dramatic drops in employment and a worse transition into the labor market. The number of youth neither employed nor enrolled in education or training increased substantially.

The Gambia is a small West African country with a predominantly agricultural economy. It is a low-income country (LIC) with a gross domestic product (GDP) per capita of US\$ 835 in 2021 and an estimated population of 2.4 million. Recent improvements in poverty reduction have been reversed by the COVID-19 pandemic, which in effect pushed Gambia’s poverty rate up to 53.4 percent in 2020, up from 48.6 percent in 2015 (World Bank 2022).³ Poverty remains a predominantly rural phenomenon—seven out of every 10 rural dwellers are poor; compared to three in 10 urban dwellers. Nevertheless, given that more people live in urban areas—in the Brikama Local Government Area (LGA)⁴ in particular—concerns about urban poverty (Figure 4) remain high on the agenda. High rates of inflation, driven by food prices, have had an outsized impact on the poorest and risk impacting households’ ability to invest in and protect human capital.⁵

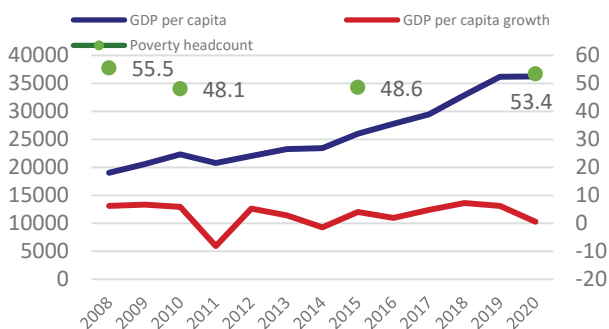
The Gambia has observed rapid population growth, increasing pressure on the economy and national social systems including health, education, and social protection. High desired family size and high levels of adolescent childbearing are some of the drivers of rapid population growth with gender inequality as both a root cause and a consequence of this. In The Gambia, the demographic transition is still in its early stages. As a result, 63 percent of the population are younger than 25 years old.

³ In the absence of COVID-19, the national poverty rate would have declined by about three percentage points from its 2015 levels.

⁴ The Gambia is divided into five administrative regions and Banjul as well as eight Local Government Areas. This report uses LGAs for geographical trends. Education figures are often aggregated at the regional level, meaning that figures for Janjabureh and Kuntaur LGAs are combined.

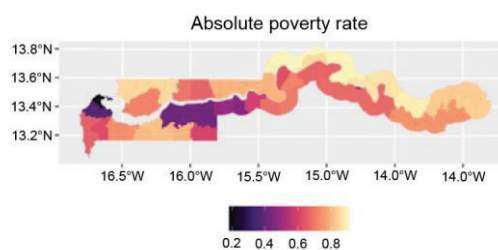
⁵ In December 2022, inflation reached its highest point in a decade at 13.7 percent year-on-year, bringing average yearly inflation to 11.6 percent for 2022, with food and nonfood inflation at 14.5 percent and 8.6 percent respectively.

Figure 3: GDP per capita and poverty rates in The Gambia



Source: Own reproduction based on World Bank, 2022

Figure 4: Estimated absolute poverty rate and number of poor by district



Source: World Bank, 2022

High levels of poverty are closely intertwined with deficits to human capital accumulation and limited access to basic infrastructure. 15.5 percent of the population are multidimensionally poor, reflecting low consumption levels, limited educational attainment, and gaps in access to drinking water, sanitation, and electricity (World Bank 2021d). Access to basic services and facilities is worse in rural areas, with a stark divide between the capital city region and the rest of the country. A study on the effect of human capital on economic growth for a 30-year period in The Gambia (1990 to 2019) showed that the educational element of human capital to the economic growth of The Gambia (Sawaneh 2020).

The Gambia is very vulnerable to climate shocks, which disproportionately affect the poor. According to the Notre Dame Global Adaptation Initiative,⁶ The Gambia has a high vulnerability score and a low readiness score, ranking 141 out of 181 countries on the composite index. The poor are particularly vulnerable to both climate-related changes in living and livelihoods conditions as well as climate-related shocks. This is because they are net purchasers of food, live in low-quality housing in more exposed areas, and have limited access to social safety nets. The main climate shocks experienced by households are rainstorms and floods, with climate shocks

disproportionately reported by poor households (World Bank 2022). Climate change was evident in the 2022 rainy season with thunderstorms causing extensive flooding in the Great Banjul Area (GBA) and the Brikama LGA. Across countries, three of the most common reported coping mechanisms triggered by climate shocks are reducing food consumption, selling assets, and pulling children out of school to save the fees and have the children work (Lawlor et al. 2019).

This review assesses human capital outcomes in The Gambia, identifies key constraints to the development and utilization of human capital, and offers a cross-sectoral approach toward greater prosperity. The review is not intended to be a thorough assessment of the human development sectors. Rather, it provides an overview of the state of human capital in The Gambia, with a deep dive on youth, and identifies priorities for reform (see Figure 1 for a summary of the review’s approach). By design, it emphasizes topics and issues that encompass various sectors to highlight the need for a coordinated multisectoral approach to enhancing human capital. The review draws from data analyses using recent household surveys (see Annex 1) and qualitative research conducted with Gambian youth in October 2022. The report also draws on two reviews: one on the legal barriers to youth and women’s economic empowerment, and the other on existing policies and programs pertaining to human capital (see Annexes 2 and 3); and

⁶ The ND-GAIN measures two dimensions of adaptation: (i) the vulnerability of six life-supporting sectors—food, water, health, ecosystem services, human habitat, and infrastructure; and (ii) countries’ economic, governance, and social readiness to respond to these vulnerabilities.

incorporates feedback from a stakeholder workshop organized in The Gambia in February 2023. The report proceeds as follows: section A provides an overview of the state of The Gambia's human capital across the life cycle; section B provides background on the institutional environment; section C focuses in depth on young people's education, employment, and migration; section D highlights the main constraints; and section E offers actions to build, utilize, and protect human capital.

A. The state of The Gambia’s human capital

Main messages

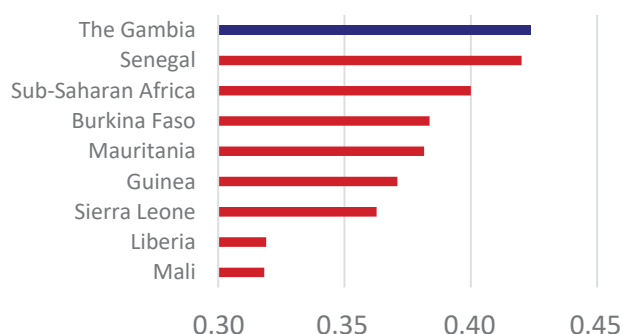
- *The Gambia’s Human Capital Index in 2020 is 42.4 percent, meaning that a child born in 2020 will be 42.4 percent as productive when she grows up as she could be if she had enjoyed complete education and full health.*
- *The Gambia did see significant progress in human capital outcomes particularly in early childhood, but progress was—and remains—constrained by income and regional disparities.*
- *Students’ low performance on standard learning assessments highlights concerns about the quality of education.*

The Human Capital Index

The Gambia’s Human Capital Index (HCI) in 2020 is 42.4 percent, meaning that a child born in 2020 will be 42.4 percent as productive when she grows up as she could be if she had enjoyed complete education and full health (see Box 2 on the definition of the HCI). This is a low value, albeit higher than the scores in neighboring countries (Figure 5), and above the Sub-Saharan African average. The HCI for women (43.7 percent) is higher than for men (41.1 percent), thus women born today are closer than men to reaching their full potential. This discrepancy is not evidently driven by any single component of the HCI—women exhibit higher adult survival rates, as well as health and school outcomes. The increase in the overall HCI from 40.9 percent in 2018 shows that human capital outcomes were improving in The Gambia before the pandemic. This was the case for both men and women, for whom the HCI increased by 1.5 and 1.6 percentage points over that period, respectively.

While the HCI is a useful summary measure, its sectoral focus on four indices in education and health (See Box 2) does not paint a full picture of human capital in a given country. Additionally, it does not take into account regional disparities, which may be significant. The remainder of this section provides a more detailed overview of the state of human capital in The Gambia, by revisiting some of the components of the HCI, analyzing other key human capital outcomes, and examining regional differences.

Figure 5: The Human Capital Index



Source: Authors’ calculations (The Gambia); World Development Indicators (WDI) (other countries)

Box 2: The Human Capital Index

The Human Capital Index (HCI) is designed to capture the amount of human capital a child born today could expect to attain by age 18. It calculates the human capital of the next generation, defined as the amount of human capital that a child born today can expect to achieve in view of the risks of poor health and poor education currently prevailing in the country where that child lives.

The HCI is based on three components: survival, expected years of learning-adjusted school and health:

- **Survival** captures the fact that children born today need to survive until the process of human capital accumulation through formal education can begin. Survival is measured using the under-five mortality rate.
- **Expected years of learning-adjusted school** refers to the quantity of education a child can expect to obtain by age 18, which is combined with a measure of quality. This measure captures how much children learn in school based on countries' relative performance on international student achievement tests.
- **Health** is measured through two indicators for a country's overall health environment: (1) the rate of stunting of children under age five; and (2) the adult survival rate, defined as the proportion of 15-year-olds who will survive until age 60. The first indicator reflects the health environment experienced during prenatal, infant, and early childhood development. The second reflects the range of health outcomes that a child born today may experience as an adult.

The health and education components of the index are combined in a way that reflects their contribution to worker productivity, based on evidence from rigorous empirical economic studies. The resulting index ranges between 0 and 1. A country in which a child born today can expect to achieve both full health (no stunting and 100 percent adult survival) and full education potential (14 years of high-quality school by age 18) will score a value of 1 on the index. From a productivity point of view, an index of 1 implies that the future productivity of the next generation would not be reduced by health and education constraints. A score of 0.70, for example, signals that the productivity as a future worker of a child born today will be 30 percent below what could have been achieved with complete education and full health.

Human Capital over the life cycle in The Gambia

This review adopts a life-cycle approach to human capital. It summarizes the current state of knowledge on human capital in The Gambia by focusing sequentially on the following age groups: before birth, early childhood and childhood, youth, working age, and old age (Figure 6). This framework recognizes the importance of building, utilizing, and protecting human capital through various stages of life, and allows for the identification

of constraints that differ by age category. Importantly, this review begins the life cycle of human capital before birth, since shocks experienced in utero have been shown to have long-lasting impacts on human capital (for an overview, see Lufumpa et al. 2022). The life-cycle approach then considers early childhood and childhood, that is, the period of life between ages 0 and 14 years. Youth is broadly defined in this study as people aged 15–24 years.⁷ Subsequently, the life-cycle

⁷ This definition of youth is that used by the UN. However, it differs from the government of The Gambia's definition, which runs from age 15 as far as 35.

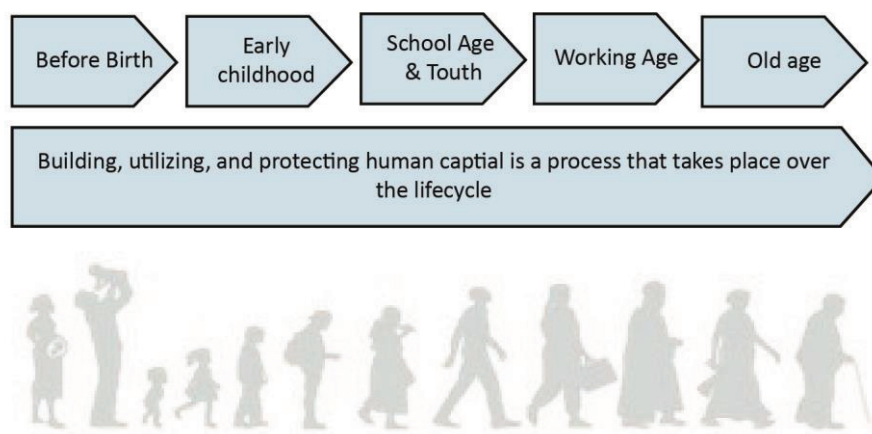
approach considers working age adults (25–64), and old age (over 65).

The life-cycle approach provides selected key results on human capital outcomes for each age group. As mentioned above, it is beyond the scope of this review to provide a thorough detailed analysis of human capital in The Gambia; rather, the results were selected to highlight the most pressing challenges each age group faces in the accumulation, utilization, and protection of human capital. The following overview covers health, education and social protection to highlight the cross-sectoral nature of human capital.

Table 1: Underlying reasons for low human capital outcomes

	Human capital outcomes	Underlying reasons for human capital underperformance
Early years and childhood	High levels of anemia among pregnant women; Childhood anemia.	Access to clinics; Low availability of medicine and supplies in public hospitals and clinics; Lack of access to nutritious foods due to lack of income, or lack of knowledge
	Low learning outcomes	Low content knowledge among teachers, low pedagogical skills, low pay
Youth	High levels of teenage pregnancy; Early marriage; Girls are more likely to attend school than boys until they get married (then the gender gap reverses).	Legal barriers preventing women from accessing justice and improve their access to productive assets; Social and cultural norms.
	Low labor force participation and high rate of NEET	Lack of high-quality jobs; Potential mismatch of labor demand and supply; Lack of access to postsecondary and tertiary education due to distance and cost.
Working age	FGM rates are high; Low female labor-force participation.	Social and cultural norms; Legal barriers preventing women from accessing justice and accessing productive assets; Very few childcare options; Few employment opportunities for women.
	Adult literacy rate remains low.	Almost no opportunities for adult learning.
	Low labor-force participation rates and a shortage of wage jobs.	Lack of high-quality jobs and lack of a thriving business environment to support enterprises; Potential mismatch of labor demand and supply; Urban-rural divide in terms of economic opportunities.

Figure 6: An illustration of the life-cycle approach to human capital



Before birth

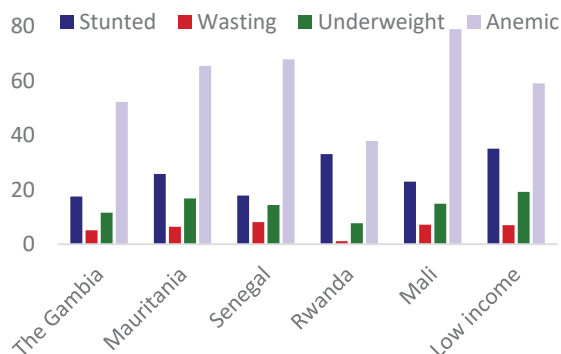
The Gambia has made progress in reducing the prevalence of anemia among pregnant women, which fell by 13.1 percentage points between 2013 and 2019–20, though it remains high at 54.8 percent. Anemia during pregnancy is a major cause of perinatal and infant mortality and increases the risk of premature delivery and low birth weight. To prevent anemia, pregnant women are advised to eat iron-rich food and take iron supplements and deworming medication. The proportion of women who reported taking iron tablets or syrup during the pregnancy of their most recent birth increased from 44.6 to 58 percent between 2013 and 2019, reflecting significant improvements in maternal health. However, those taking deworming medication during pregnancy only increased by 0.3 percent over the same period, and still account for only 40.6 percent (DHS 2013 and 2019–20).

Access to prenatal care and birth assistance from skilled providers increased substantially between 2013 and 2019–20. In 2013, 86.2 percent of women received at least one prenatal care visit from a skilled health provider; by 2019, this was the case for almost all women (97.8 percent). The percentage of births with skilled assistance during delivery increased markedly from 57.2 percent in 2013 to 83.8 percent in 2019–20, well above the Sub-Saharan Africa average of 63 percent. Access to prenatal care from a midwife or nurse increased by almost 10 percentage points for women from the poorest households, more than 16 percentage points for the second quintile, and more than 20 percentage points for the middle quintile, indicating huge improvements in access to prenatal care from formal health care providers for poor women. However, wealthier women remain more likely to obtain care from doctors rather than midwives or nurses. Additionally, there are large regional inequalities in health facility deliveries. Data from the 2019–20 DHS show that the percentage of health facility deliveries is highest in Banjul, Kanifing, Brikama and Kerewan (above 87 percent), and lowest in Kuntaur (63 percent). It is 75 percent in Janjabureh and Basse (DHS 2013 and 2019–20).

Early childhood and childhood

The Gambia has seen an important decrease in child mortality, in line with significant reductions in the prevalence of stunting and wasting among children under five years of age. The prevalence of wasting almost halved in six years (between 2013 and 2019) and decreases occurred in every LGA except Kerawan. All LGAs except Brikama and Kuntaur saw declines in the prevalence of stunting over that period. The incidence of stunting fell from about 25 to 15 percent between 2013 and 2019, with substantial declines for the bottom 80 percent of the

Figure 7: Childhood health outcomes in The Gambia and comparator countries

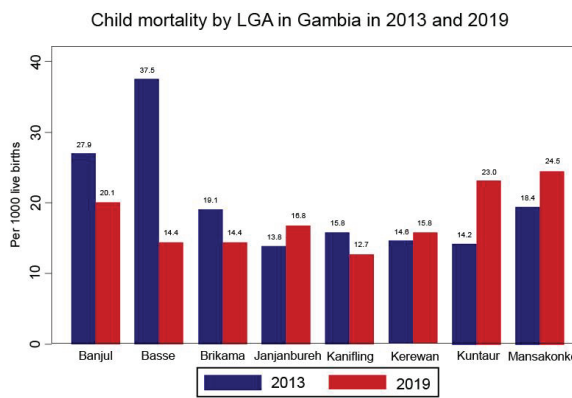


Source: WDI. Latest in 2019–2020.

wealth distribution. Rates of stunting and anemia among children are lower than in most peer countries (Figure 7). For children under six months of age, exclusive breastfeeding increased from 25 percent in 2000 to 54 percent in 2020 (WDI). These significant improvements in child health outcomes are underlined by significant decreases in child mortality in most LGAs (Figure 8).

However, some LGAs have seen increases in under-5 mortality, apparently driven by cruel increases in neonatal mortality.⁸ These are worst in rural areas, particularly Mansakonko, Janjabureh, and Kuntaur (Figure A. 1). Neonatal mortality is often the most difficult indicator to affect as reductions would require specialist care (such as access to emergency obstetric care and neonatal intensive care units). Nevertheless, the decline in neonatal survival remains puzzling, given the improvements in maternal health (higher likelihood of delivering with the assistance of a health care professional, and in a health care facility), maternal nutrition, and child health (88 percent of newborns received a postnatal check within two days of delivery) (MICS 2018.⁹ Information about its validity will become available with the

Figure 8: Change in child mortality by LGA



Source: DHS 2013 and 2019–20

roll-out of accurate and complete vital statistics.

While infectious diseases, neonatal, and nutritional disorders remain the leading causes of premature mortality among children, noncommunicable diseases are on the rise. A striking—and worrying—finding concerns anemia and is consistent with a story of nutritional deficiencies for the poorest children. More than 64 percent of children from the poorest households were anemic in 2019, compared to 30 percent of those in the wealthiest households. Large regional disparities persist, with lower anemia rates in Banjul and Brikama (33 and 30 percent, respectively), and higher rates in Kuntaur (77 percent), Janjabureh, Kerewan and Basse (between 59 and 60 percent) (DHS 2019–20). Given the implications of the symptoms of anemia—lack of energy, headache, jaundice, and slow or delayed growth—these overall rates of anemia are worryingly high, especially for the poorest. Further, while 54 percent of children under six months of age are exclusively breastfed, only 20 percent of children aged 6–23 months received the minimum dietary diversity (Bah et al. 2021). Conversely, obesity is a rising concern: and 2.3 percent of children under five are overweight or obese.

The Gambia has high childhood immunization rates and one of the most successful vaccination programs in the subregion. Already high in 2013, at 76 percent, the share

⁸ Neonatal mortality refers to deaths within the first month of life; under-5 mortality refers to deaths between birth and the fifth birthday.

⁹ Discussions with the reproductive health unit at the Ministry of Health suggest that data quality could be an issue: improvements in data collection for the DHS between 2013 and 2019–20 could have inadvertently led to an increase in the number of deaths reported and the share of deaths reported for the correct age category. The reproductive health team will roll out an administrative data collection capturing institutional deaths, which might help solve this puzzle. Other factors, such as the continued prevalence of child marriage and early pregnancy could contribute to higher rates of infant mortality.

of children who have received all basic vaccinations has increased to 85 percent in 2019–20. The latest available figures for birth registrations are low: roughly half of children under five years old have a birth certificate (GBOS 2019); however, these figures are unlikely to reflect the current situation because a mass registration drive between October 2022 and February 2023 will have increased registration rates substantially.

regional disparities in terms of enrollment and type of service provider. ECE gross enrollment rates range from 30.9 percent in Kerewan LGA to 55.5 percent in the Mansakonko LGA and while most centers are publicly run in the capital area, the trend reverses in areas further inland. In most preschools, interaction between students and teachers is limited due to large size classes (on average 40 children per class) (UNESCO IIEP 2021).

Table 2: Mean EGRA Scores, students in all schools 2016

	Grade 1	Grade 2	Grade 3
Correct letter read per minute	33.2	45.1	58
Correct words read per minute	5.3	9.5	15
Oral reading fluency	5.1	10.8	17.3
Reading comprehension (number correct, 5 question in total)	0.5	0.9	1.4

Source: MoBSE

Less than half of all children ages 0–6 are enrolled in early childhood education. Between February and April 2020, 43.7 percent of children ages 0–6 attended school. As the effects of the pandemic persisted, that figure dropped to 33.2 percent between May 2020 and January 2021 (IHS 2020). While gross early childhood education (ECE) enrollment rates increased significantly from 35.8 percent in 2013 to 44.4 percent in 2019 (Figure 10), they are now stagnating at around 42 percent, despite a 4.5 percent increase in the number of ECE institutions between 2018 and 2021 (MoBSE 2022). There are significant

Figure 9: Percentage of children ages 12–23 months who received all basic vaccinations

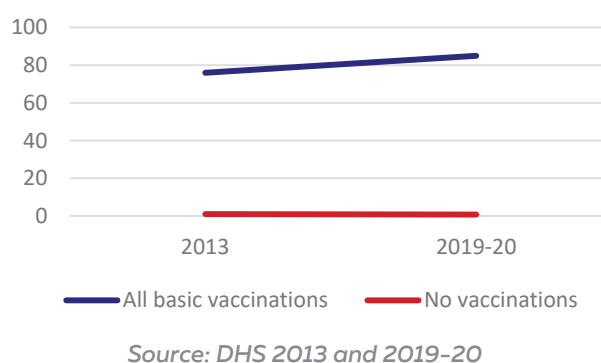
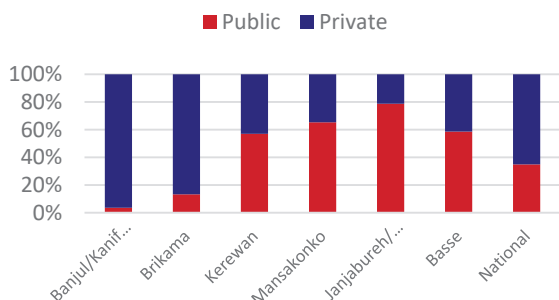


Figure 10: Gross ECD enrollment rate

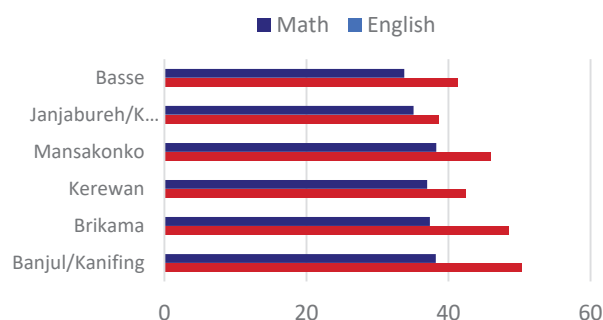


Figure 11: Share of public and private ECD centers



Source: MoBSE, 2022

Figure 12: NAT Grade 8: Average score in English and Math (out of 100), public schools, 2021



Source: MoBSE, 2022

Table 3: Gross Enrolment Rates (GER) and Completion Rates (CR) in % for 2022¹²

LGA	ECE	Lower Basic		Upper Basic	
	GER	GER	CR	GER	CR
Banjul/Kanifing	49.5	122.9	113.4	122.9	102.6
Brikama	46	109.2	94.2	109.2	67.5
Kerewan	30.9	88.7	72.7	88.7	48.1
Mansakonko	55.5	124.6	95.3	124.6	57.6
Janjabureh/Kuntaur	34.1	81	64.3	81	40.1
Basse	40.8	102.2	71.4	102.2	31.4
National	42.9	104.7	88.1	104.7	62.6

Source: MoBSE Yearbook 2022

Large regional disparities exist in educational enrollment across all levels, despite significant increases in school attendance prior to the COVID-19 crisis. Educational enrollment tends to be higher in Greater Banjul (Banjul/Kanifing) (Table 3) where most of the country’s economic activity is concentrated. For example, the 2022 Lower Basic Education Net Enrollment Rate (NER) ranged from 94 percent in Greater Banjul to just 64 percent in Janjabureh/Kuntaur LGAs. These enrollment challenges compound themselves later in the education pipeline. Nevertheless, the rural-urban gap appeared to be decreasing throughout most of the 2010s. Interestingly, this was driven by a decrease in urban schooling as much as by an increase in rural schooling. In terms of gender differences, girls registered higher gross and net enrollment rates at all levels of education as well as higher completion rates at lower and upper basic

levels (however, girls still lag at the postsecondary educational level). Boys’ lower primary school enrollment rates may be due to higher enrollments of boys in majalis/daras¹⁰ (Quranic centers) which are not included in the official school count figures. In 2020, 81 percent of males and 74 percent of females ages 7–24 who had never attended a formal school or a madrassah¹¹ cited religion as the main reason they never went to school (IHS 2020).

¹⁰ The terms “majali” and “dara” are used interchangeably in this report (one is the local language word and the other the Arabic descriptor). They refer to Quranic centers, which are not considered to be formal education centers, and are thus not captured in household surveys. Students attending Quranic centers are considered to have no (formal) education, according to survey data. Also see note below.

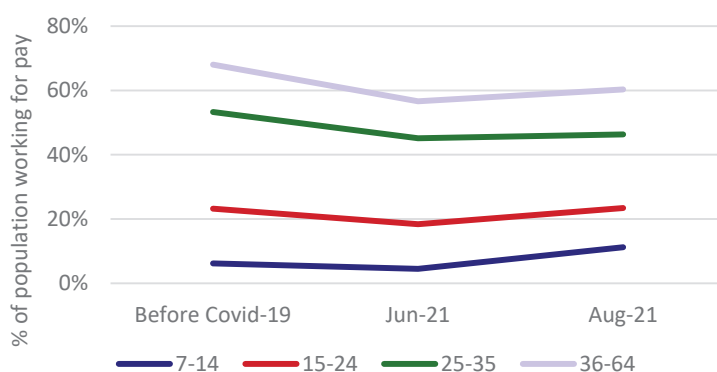
¹¹ A madrassah is an educational institution that provides the same curriculum as public schools plus additional Islamic instruction.

¹² The school system in The Gambia is comprised of ECE (ages 0–6), Lower Basic (7–12), Upper Basic (13–16), and Senior Secondary (16–19).

Improving learning outcomes has been a significant challenge, and foundational learning remains a binding constraint to further skills development. Proxy estimates utilizing the 2020 Education Service Delivery Indicators suggest that approximately 90 percent of 10-year-olds in The Gambia are likely unable to read and understand a short text (World Bank 2020a). Applying Early Grade Reading Assessments (EGRA) to monitor the acquisition of foundational literacy in the early grades showed in 2016 that, on average, students in grades 1–3 answered only 20 percent of questions correctly. Although this

in 2021 scored an average of 40.22 out of 100 in English and 38.37 out of 100 in math. A regional disaggregation reveals considerable variation in learning outcomes by LGAs with lower learning outcomes in the poorer, inland Janjabureh/Kuntaur LGAs and Basse LGA. A similar pattern carries through to grade 8, with students on average scoring less than half of the available points (continuing to score worse on average in math than in English), and Janjabureh/Kuntaur LGAs and Basse LGA being the lowest performing LGAs. School closures during the height of the pandemic are likely to have

Figure 13: Employment during COVID-19



Source: Authors' calculations using the 2020–21 HFPS (household members only).

actually represents a significant improvement in knowledge of letter sounds and word recognition between 2013 and 2016, reading comprehension particularly remains low.¹³

Learning outcomes in later years highlight the struggles with a lack of foundational skills. The National Assessment Test (NAT) is conducted every six months in grades 3 and 5 and annually in grade 8.¹⁴ Students in public schools who took part in the NAT for Grade 3

caused further deterioration of learning outcomes.¹⁵

Despite laws prohibiting child labor,¹⁶ child labor remains prevalent in The Gambia and the share of children working for pay increased substantially during the pandemic.¹⁷ In 2018, one in four children performed some form of labor. Four in five working children performed farm or gardening work, while the remainder helped in

¹³ The last two Early Grade Reading Assessments (EGRA 2013 and 2016) show an overall decline for grade 2 and 3 students in all four components of the test while grade 1 students show an improvement in 2016 relative to the 2013 assessment result. As a measure of learning outcomes over time, the EGRA scores must be interpreted with caution, especially against a backdrop of expanding enrollment, as is the case in The Gambia. During 2013–2016, enrollments increased by 17, 25 and 28 percent in grades 1, 2 and 3, respectively. With wider coverage of the education system, more and more vulnerable children with less favorable socioeconomic backgrounds entered the school system and their performance therefore feeds into the overall EGRA results.

¹⁴ NAT results for grades 3 and 5 reflect how children perform in lower basic schools and the NAT for grade 8 measures learning achievement at upper basic schools.

¹⁵ Schools were closed in March 2020 and reopened in October 2020. By September 2021, almost all children who were in school prior to the closures had returned to the classroom. To support distance-learning, the government developed and broadcast lessons on TV and radio.

¹⁶ Under the Labour Act (2007), the minimum work age is 18, and under the Children's Act (2005) the minimum age to start an apprenticeship is 12 years old.

¹⁷ Authors' calculations using the 2020–21 HFPS and World Bank, 2022. By regional standards, child labor in The Gambia is substantially less than in Guinea, Uganda, and Togo, but more than in Liberia, Mauritania, and Rwanda. Compared with Senegal, The Gambia has lower rates of child labor for boys but higher rates for girls. The rate of child labor in The Gambia fell significantly from 36 percent in 2008 to 24 percent in 2015 but stagnated between 2015 and 2018.

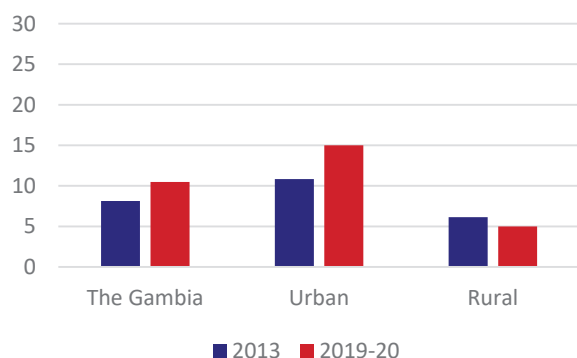
the family business, or were active in employment for cash or in-kind remuneration. For 8.2 percent of working children, households reported that the work activity prevented the child from going to school, thereby significantly impacting their human capital development. The median hours worked among working children is nine hours a week. This figure is higher for boys (12) than for girls (seven).¹⁸ The clear trade-off between schooling and child labor could be observed during the pandemic: when schools were closed there were substantial increases in child labor. Prior to the pandemic, six percent of children ages 7–14 reported working for pay, a share which increased to 11 percent in August 2021 (Figure 13). Similarly, despite child marriage being prohibited, it remains prevalent: one in four young women ages 20–24 having entered marriage as a child. Data show a reduction of child marriage rates over the last 6–7 years though much room for improvement remains.

Youth

Teenage pregnancy continues to be high, increasing total unwanted fertility and contributing to the high level of population growth. In 2019, 43.0 percent of women ages 25–49 had given birth by age 20 and 17.3 percent of women ages 20–24 had had a live birth before age 18. The following rural LGAs experience the highest rates of adolescent pregnancies (ages 15–19): Basse (21.4 percent), Janjanbureh (22.4 percent), and Kuntaur (28.5 percent). Similarly, the median age at first marriage is low, demonstrating that at least half of women ages 25–49 years in these LGAs were married prior to their 18th birthday.¹⁹ Early pregnancies due to child marriage result in higher rates of maternal and infant mortality. The most disadvantaged adolescents have the highest fertility and poorest health outcomes on average, further worsening their situation and perpetuating a cycle of poverty for them and their children. The prevalence of adolescent pregnancy

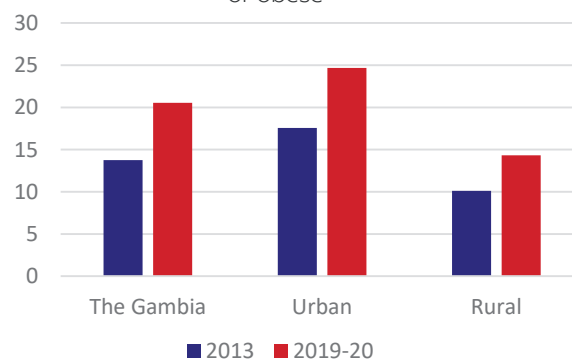
Figure 14: Overweight and obesity rates among young women

a) Percent of women ages 15–19 who are overweight or obese



Source: DHS 2013 and 2019–20

b) Percent of women ages 20–24 who are overweight or obese



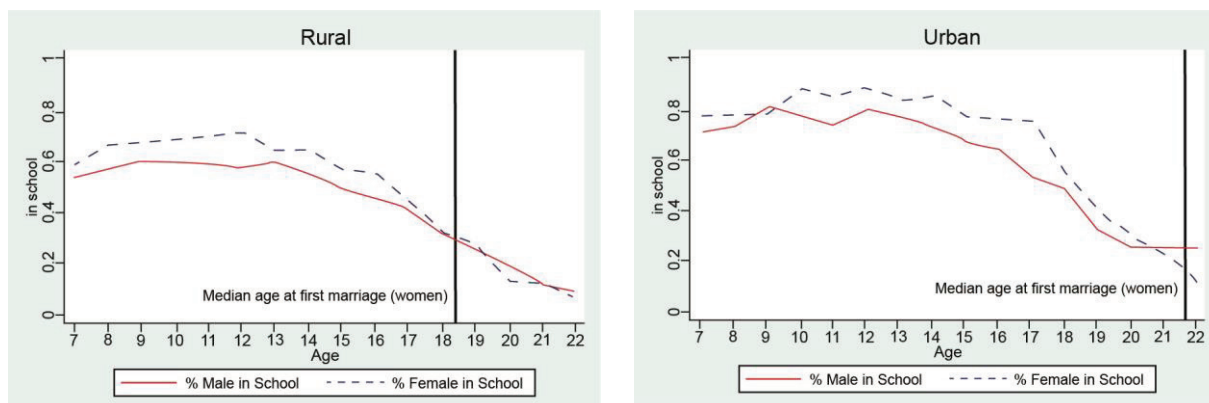
Source: DHS 2013 and 2019–20

¹⁸ Some of these work activities violate international treaties on child rights to which The Gambia is a signatory. The Gambia has ratified the African Charter on the Rights and Welfare of the Child, which aims to safeguard children against all forms of economic exploitation and work that is hazardous, interferes with their education, or compromises their health or physical, social, mental, spiritual, and moral development. By ratifying ILO Convention No. 182, The Gambia has further committed itself to taking immediate action to prohibit and eliminate the worst forms of child labor.

among women who had at most preprimary education (32.1 percent), or some primary education (32.5 percent), is more than four times that among women with secondary or more education (7.7 percent).

¹⁹ 17.7 in Basse, 17.6 in Kuntaur, and 18.0 in Janjanbureh and Mansakonko according to DHS 2019–20.

Figure 15: Gender gap in school attendance: Share of individuals currently attending school by age cohort



Source: IHS 2020²¹

As the population becomes more urban, obesity and risky health behaviors are on the rise for youth.

While the proportion of underweight adolescents has steadily declined in the past four decades, the proportion of overweight adolescents has risen rapidly, particularly among girls (Figure 14), while engaging in risky behaviors is particularly common among young men. Cigarette smoking is particularly high among male youth, with 12 percent of students ages 10–19 reporting having smoked in the past 30 days in 2017 (the prevalence among girls is three percent) (WHO 2021). Alcohol use is also a significant concern, especially for male adolescents: in 2016, 23 and nine percent of adolescent boys and girls respectively were drinkers. Among adolescent male drinkers, 12 percent reported at least one episode of heavy drinking in the previous 30 days in 2016 (WHO 2021). However, HIV rates among youth are low compared to the regional average: in 2020 the prevalence of HIV was 0.5 and 0.2 percent among females and males ages 15–24 respectively the prevalence of HIV was 0.5 and 0.2 percent among females and males ages 15–24 in 2020, respectively compared to 1.7 and 0.7 percent in Sub-Saharan Africa.

Until they get married, girls are more likely to attend school than boys; then the gender gap reverses, highlighting the negative impact of early marriage on human capital formation. Figure 15 shows that the gender gap holds in

both rural and urban areas, and reverses around age 18 in rural areas and 21 in urban areas, which correspond to the median age at first marriage for women in rural and urban areas, respectively.²⁰ As of 2020, women are more likely than men to have completed primary, lower secondary and senior secondary education, but still lag in tertiary education (Figure A. 2). The gender gap reduces as the level of education increases. However, these gains are recent: although women are slightly more likely than men to complete senior secondary among the cohort ages 21–23, the trend reverses among the slightly older cohort ages 24–25. Similar to lower levels of education, secondary enrollment and completion rates lag behind in eastern regions. At the senior secondary level, the completion rate for Basse LGA was 9.7 percent compared to 83.2 percent in the GBA.

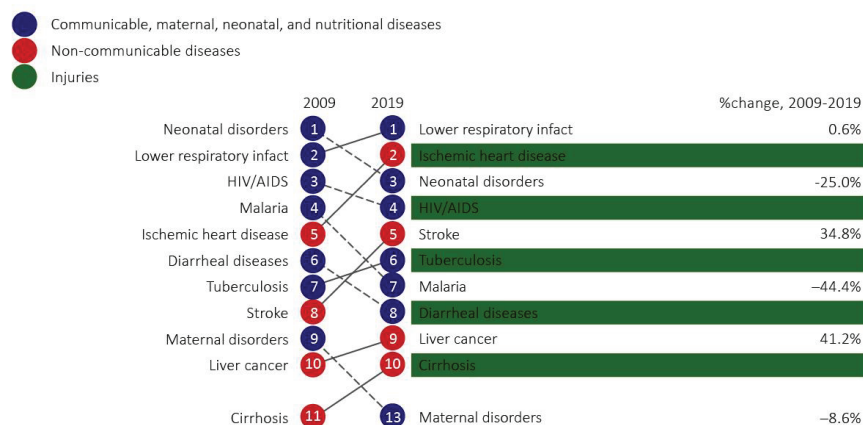
Students’ low performance on standard exams in Grade 12 highlight concerns about the quality of education that youth receive.

In 2022, only 3.94 percent of Gambian students who sat the West African Senior Secondary Certificate Exams (WASSCE) met the University of The Gambia’s entrance requirements, which are to obtain credits in at least five subjects including English and Mathematics (The Point 2022). In the region,

²⁰ School attendance rates: authors’ calculations using the IHS 2020; age of marriage: DHS 2019–20.

²¹ The 2020 IHS was mostly conducted during the COVID-19 pandemic, which influenced school attendance.

Figure 16: Change in the main causes of death between 2009 and 2019
What causes the most deaths?



Source: www.healthdata.org/gambia

the proportion of students across all countries where the WASSCE is held who met this requirement was 76.36 percent (Premium Times 2022). The very low performance of Gambian secondary school students on this standardized exam raises not only concerns about the quality of education until Grade 12, but also about the quality of skilled labor and postsecondary students after these secondary school graduates have either entered the labor market or pursued higher education.

Low labor force participation rates and a high proportion of youth not in education, employment or training (NEET) undermine this demographic dividend. A considerable proportion of youth are NEET, accounting for nearly 37 percent of the age group, for both men and women.²² Youth’s labor force participation is low (34.2 percent for men; 32.8 percent for women, compared to 62.1 percent of the population ages 35–64) and youth face higher unemployment rates than any other age groups (6.4 percent for young men and 5.8 percent for young women in 2020, compared to unemployment rates of 1.5 percent and 0.4 percent respectively among men and women ages 36–64, respectively). There are very strong disparities in young people’s economic participation, with lower

NEET rates in Banjul and Kanifing (18.5 and 20.9 percent, respectively), and higher NEET rates (above 50 percent) in LGAs further from the Greater Banjul Area (Kuntaur, Janjabureh, Basse). In the remaining LGAs, between 30.9 and 38.8 percent of youth are NEET.

Descriptive evidence suggests that better educated young people may face greater difficulty in securing jobs, but that the quality of the jobs they eventually find is better. Youth with some education are slightly less likely to participate in the labor force than youth with no education (33.0 percent versus 34.1 percent), and face higher unemployment rates (8.1 versus 2.2 percent). However, they are more likely to find higher-quality jobs: among those employed, 32.3 percent of educated youth are in wage-employment, as opposed to 20.7 percent of youth with no education. The gap is higher for slightly older individuals: among individuals ages 25–35 in employment, 51.1 percent of those with some education are wage-employed; the corresponding figure for those who have no education is 19.1 percent. Higher education may lead to higher unemployment but better jobs, at home or abroad. Young adults who completed some postsecondary education are more likely to find paid employment, as opposed to unpaid family work or subsistence farming. Youth with higher educational attainment are also more likely to migrate overseas in search of better jobs (World Bank, forthcoming).

²² The 2020 IHS was mostly conducted during the COVID-19 pandemic, which could have forced more youth out of education, employment and training. Nevertheless, the rate of youth who are NEET in 2020 is only two percentage points higher than that in 2018 (using the LFS). However, in 2018, there is a gender gap: 33 percent of young men are NEET, whereas 37 percent of women are NEET.

Working Age

Access to women’s health care improved between 2013 and 2019 and so did women’s health outcomes, but Gender-based Violence (GBV) and Female Genital Mutilation (FGM) remain widespread. Maternal mortality decreased by 36 percent between 2000 and 2017 but remains high at 597 women for every 100,000 live births (and above the Sub-Saharan regional average of 534). The fertility rate has seen a steep decline since 1980, with a notable improvement between 2013 and 2019 (from 5.6 children per woman to 4.4) (DHS 2019–20), declining in both urban and rural areas. Women were also much more likely to be using contraception in 2019 than in 2013, and this increase was largest for the lowest wealth quintiles. Despite these improvements in women’s health, FGM rates are high: 73 percent of women ages 15–49 have undergone FGM, and 46 percent of women ages 15–49 have experienced physical violence at least once since age 15 (DHS 2019–20). The share of women who have undergone FGM only decreased slightly, by 5.7 percent, over the course of 12 years. FGM is associated with a higher maternal mortality rate and long-term health complications, worse school outcomes among girls, and a reduced ability to participate in the labor market, imposing a high cost on society and overall economic development. The WHO estimates the yearly economic cost of FGM-related health complications in The Gambia to be as high as US\$ 4.5 million (WHO 2019).

The Gambia is at the beginning of an epidemiological transition, facing the double burden of both infectious and noncommunicable diseases (NCDs). The last three decades saw substantial improvements in some health outcomes, with the burden of disease reducing.²³ Communicable diseases remain the leading cause of deaths (causing 52.2 percent of deaths versus 37.1 percent for NCD).²⁴ At the same time, NCDs are on the rise.

²³ Disability-adjusted life years (DALY) per 100,000 people reduced from 69,750 to 35,499 between 1990 and 2019.

²⁴ Senegal, for example, is a step further in the transition, with communicable diseases making up 43.8 percent of deaths versus 44.9

Between 2009 and 2019, the incidences of ischemic heart disease and stroke increased by 42.0 and 34.8 percent, respectively. Ischemic heart disease was the second most common cause of death in 2019, after lower respiratory infections (Figure 16). Obesity is a rising concern: 40.2 percent of women are overweight or obese. Urban residence, higher education, older age, and ethnicity were associated with obesity in women (Cham et al. 2020). Given the patterns of urbanization and increasing educational achievements, obesity could soon become a more serious problem.

While the adult literacy rate (15+) has increased from 50.8 percent to 58.1 percent between 2015 and 2021, it remains low. It is markedly higher for men (65.2 percent) than for women (51.2 percent). A second-chance education program for those who have completed higher basic education is currently in place but does not address the large share of older illiterate adults (Keita and Lee 2022).

The Gambian economy faces low labor force participation rates and a shortage of wage jobs, providing working age adults with few opportunities to utilize their human capital. Slightly fewer than half of Gambians ages 15–64 were employed in 2020.²⁵ Only 17.3 percent of that age group were in wage-employment, which is typical in the region. Almost half of the working-age population were out of the labor force. Large proportions were unpaid—but contributing—family workers (12.9 percent) or subsistence farmers (12 percent).²⁶ The Utilization-Adjusted

percent for NCD (WDI).

²⁵ This report uses the current international standard definition of labor force status (ICLS19), whereby subsistence farmers are defined as farmers who produce mainly or only for own consumption and are classified as out of the labor force. In the previous definition of labor force status (ICLS13), subsistence farmers were considered to be employed. The review acknowledges that this definition can be controversial, especially in economies where most labor activities are informal and subsistence farming is prevalent. To mitigate this concern, statistics on subsistence farming are reported separately. Meanwhile, the Gambia Bureau of Statistics’ 2018 Labor Force Report (GBoS, 2018) classified subsistence farmers as part of the labor force but unemployed, even though most subsistence farmers were not looking for another job at the time of the survey interview. This categorization leads to a much higher unemployment rate of 35.2 percent. The World Bank’s 2022 Poverty and Gender Assessment for The Gambia notes that this definition breaks with international standards and ignores the important services that subsistence activities offer for national food security and as a social safety net (World Bank 2022).

²⁶ Agriculture is seasonal and participation in subsistence farming depends on the time of data collection; a significant proportion of the

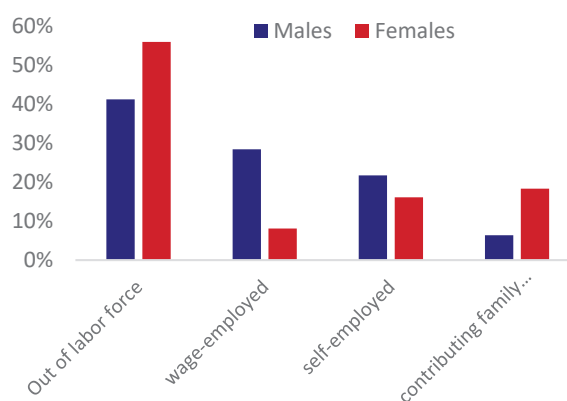
Human Capital Indices (UHCI) account for the underutilization of human capital by considering labor market outcomes alongside human capital outcomes (see Annex 4) (Pennings 2020). The basic UHCI remains low, but it did increase from 18.8 percent in 2018 to 20.9 percent in 2020. The full UHCI, which additionally accounts for the quality of employment, also increased, from 23.8 percent in 2018 to 24.4 percent in 2020. These increases reflect the fact that the proportion of working-age adults who are employed, and in high-quality jobs, increased between 2018 and 2020.

The urban–rural divide in terms of economic opportunities led to greater internal and external migration. While 43 percent of the working-age population live in rural areas, only 35 percent of employment is in rural areas. Workers who moved to urban areas are likely to end up in lower-wage jobs or informal jobs. The high labor mobility from rural areas to the more urban West Coast Region—and from agriculture to services—did not translate into higher wages due to the low productivity of the services sector and predominance of low-skilled and informal jobs (World Bank 2020b). As a result, many have left the country in search of better economic opportunities abroad. Given the limited opportunities in the labor market, one in six households reported that at least one of their members had migrated internationally during the preceding five years (LFS 2018).

Women significantly underutilize their human capital due to large labor market gaps. Women are more likely than men to be outside the labor force (55.9 percent of working-age women versus 41.2 percent of working-age men), and even when employed, they are less likely to be in wage-employment (Figure 17). The high prevalence of early marriage and teenage pregnancy can only make it much more difficult for women to enter the labor market in the first place. Further, women’s access to high-quality jobs worsened between 2018 and 2020: in 2018, 9.2 percent of

working-age women were wage-employed, compared to 8.1 percent in 2020. This could perhaps be attributed to the pandemic, except that the share of men in wage-employment increased from 23.1 percent to 28.4 percent over the same period. These differences are also reflected in the UHCI: while the full UHCI for men increased between 2018 and 2020, it stagnated for women, reflecting an increase in the accumulation of human capital for women alongside a decrease in opportunities to utilize it productively (Table A. 8).

Figure 17: Labor market outcomes for males and females

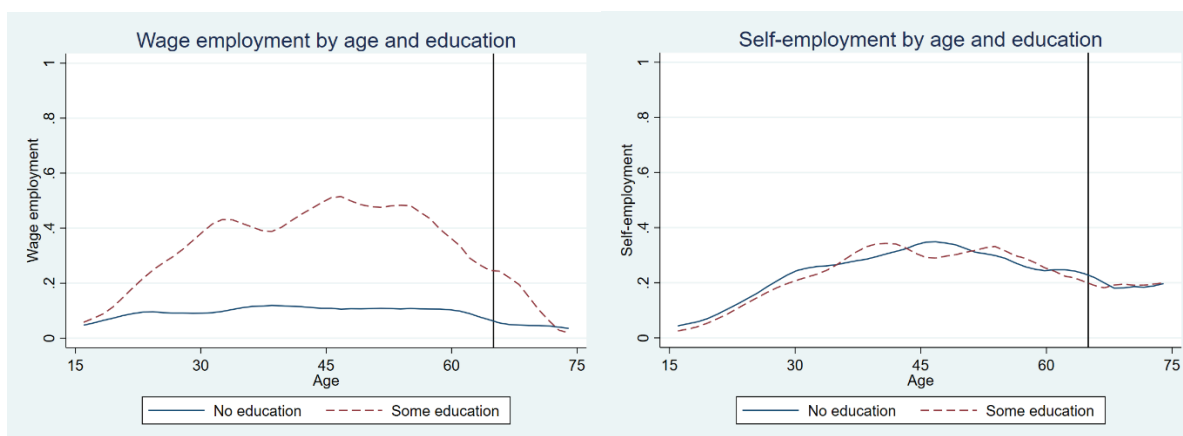


Source: Authors’ calculations using IHS 2020.

Wage-employment is only accessible for educated workers and, among wage workers, returns to education are high for women but low for men. Figure 18 shows that wage jobs are almost unattainable for those with no schooling; however, educated and noneducated adults are equally likely to be self-employed. In contrast, working-age adults with no schooling are substantially more likely to be engaged in subsistence farming over the life cycle. Figure 19 shows that wage levels rise with education. Returns to basic education are higher for men than for women, but the picture reverses for higher levels. Although this is not atypical in the region, returns for men for upper secondary education are particularly low by regional standards. The higher returns for women are

working-age population reported being out of the labor force because they were waiting for a “busy season” (6.2 percent).

Figure 18: Employment type by age and education.



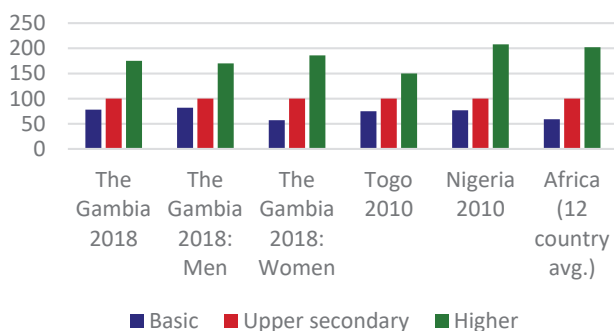
Source: Authors' calculations using IHS 2020. The graphs plot the share of the population in each employment type.

likely caused by the scarcity of job opportunities for educated women, which leads to higher competition and selection of higher-productivity female students for the available jobs (World Bank 2022).

Old age

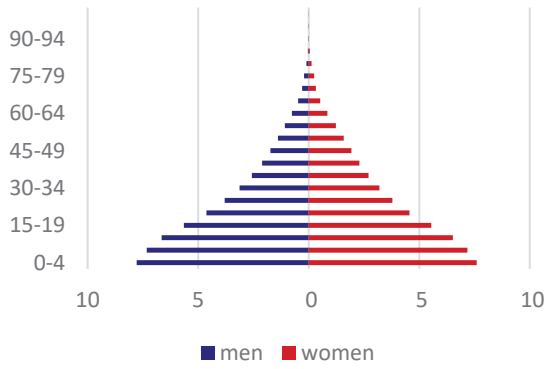
The Gambia remains a young country that is in the early stages of its demographic transition. Economic development and improvements in health care have contributed to a rise in life expectancy at birth over the past two decades from 59 years for women in 2000 to 64.2 years in 2022 (55 for men in 2000 to 61 in 2022). Life expectancy at birth in The Gambia is now higher than the average for Western Africa and indeed for Africa as a whole. Currently, however, those aged 65 years and older represent a mere two percent of the population. As the population is projected to age, the old-age dependency ratio (per 100 persons of working age) is projected to increase from 4.5 to 7.5 from 2022 to 2050, meaning that each old person will be supported by 13 working-age persons in 2050 (as compared to each old person being supported by 22 working persons today). While NCDs and related multimorbidity—meaning more than one chronic health condition—are certainly on the rise, aging remains a less pressing issue for The Gambia now.

Figure 19: Average earnings in US\$ by education category and country



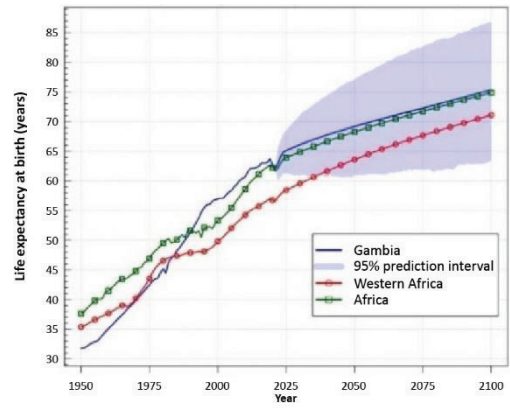
Source: Adapted from World Bank, 2022.
Notes: Average wage relative to upper secondary (+100). Earnings from main job (only wage-employed for The Gambia).

Figure 20: Population pyramid for 2022



Source: UN POP

Figure 21: Life expectancy at birth (both sexes)



Source: UN POP

B. Building human capital: overview of the education, health, and social protection sectors

Main messages

- *About a third of the country's population is currently served by the Ministry of Basic Education, with far fewer learners in higher education or technical education.*
- *The recent introduction of the National Health Insurance Service scheme with its universal coverage presents an important change in the health sector.*
- *The main building blocks of a social protection system have been established in The Gambia in recent years, but some still lack a legal framework.*

Human capital development is one of six strategic objectives of the National Development Plan (NDP 2023–2027). The government formulated the NDP 2023–2027 as a successor to the elapsed NDP 2018–2022. This new planning framework, developed under the leadership of the Ministry of Finance and Economic Affairs (MoFEA) but with a whole-of-society approach, will underpin the recovery of The Gambia from COVID-19 and other shocks, as well as address the medium-term transformational aspirations of the country. The Human Capital Development pillar focuses on six key outcomes (Table A. 4): 1) equitable access to quality and relevant education for all; 2) quality, accessible and affordable health care services delivered for all; 3) improved nutritional status of children under five years and women of child-bearing age; 4) increased access to safe drinking water, proper sanitation and hygiene; 5) appropriate population policies and strategies to harness the demographic dividend; and 6) socioeconomic benefits of migration to national development enhanced and adverse consequences mitigated.

Commitment across government agencies and stakeholder engagement have enabled the progress made in human capital development in the Gambia so far. The National Health Policy of the Gambia (2021–2030) follows the theme “a healthy population is a wealthy population” and aims to contribute to

socioeconomic development and wealth creation by promoting and protecting the health of the population through equitable provision of quality health care within the context of primary health care (Ministry of Health 2022). The Education Sector Strategic Plan (2016–2030) outlines the country's vision and strategic objectives focusing on four intervention areas: access and equity; quality and relevance; research and development; science, technology, engineering, and math (MoBSE and MoHERST 2017). Finally, the National Social Protection Policy (2015–2025) aims to provide a comprehensive and integrated social protection system that will promote social inclusion and human development, focusing on the welfare of the poorest and most vulnerable populations; protecting vulnerable populations from transitory shocks; promoting livelihoods and income of the poorest and vulnerable, economically active populations; reducing people's exposure to social risks and vulnerabilities, including discrimination and exclusion; and strengthening leadership, governance and social protection systems in order to design and deliver effective and efficient programs (MoHSW 2020).

Overview of the education sector

The Gambia's education system is overseen by two ministries: the Ministry of Basic and Secondary Education (MoBSE) and the Ministry of Higher Education, Research, Science and Technology (MoHERST). MoBSE is structured as 3-6-3-3, meaning three years of Early Childhood Development/Education (Levels 1 to 3, ages 4 through 6), six years of Lower Basic Education (Grades 1 to 6), three years of Upper Basic Education (Grades 7 to 9), and three years of Senior Secondary Education (Grades 10 to 12). MoBSE oversees over 3,300 private, public, and religious schools serving 740,000 students, about a third of the country's population. MoHERST is responsible for the provision of nontertiary, tertiary, and higher education, including technical and vocational education and training (TVET), research, science, technology and innovation for socioeconomic development. It oversees private and public higher, tertiary, and nontertiary education institutions serving more than 10,200 learners. MoHERST is the reporting ministry for the National Authority for Quality Assurance and Accreditation (NAQAA), which is responsible for the regulation, supervision, and monitoring of public and private training programs and institutions (ITC 2019).²⁷

The Gambia College School of Education (teacher training college) is responsible for training all basic education teachers and is the main provider of preservice teacher training in The Gambia. However, the quality of preservice teacher training is low, and this creates considerable challenges once teachers are in the system given that they are poorly prepared for the classroom and often themselves lack even basic minimum competencies in math and English (including reading instruction). The 2020 Education Service Delivery Indicators found that virtually

²⁷ NAQAA evaluates all training and student assessments through additional external examination. The NAQAA Governing Council is dominated by government representatives, with few private sector counselors and no labor union representatives. Government representatives include permanent secretaries of MoHERST, MoBSE and MoTIE. Private sector representatives include the CEO of the Chamber of Commerce and Industry (CCI).

none of the current teachers assessed reached the minimum defined competency.²⁸ Looking at new teachers shows a similar picture: only 40 percent of preservice teachers scored above the benchmark of 50 percent on the Gambia College External Competency Exam.

TVET in The Gambia is provided by public and private institutions, catering to a relatively small segment of all youth. As of 2021, MoHERST reported that 3,800 learners were enrolled in TVET programs around the country. Registered institutions that offer TVET programs generally fall into one of three categories: (i) nontertiary institutions offering certificate and foundational programs; (ii) tertiary institutions offering diploma and advanced diploma programs; and (iii) higher education institutions offering degree programs.

Various nonformal training initiatives and providers exist, but data on their nature and scope remain limited. Also, some registered TVET institutions provide both formal, accredited training and nonformal training, with the latter more likely covering training of relatively short duration and targeting less-skilled beneficiaries. Informal apprenticeships also exist in the country. This complex landscape—different ministries, different types of TVET institutions, and different types of TVET programs—makes it difficult to interpret and present TVET-related data (even ostensibly simple enrollment and financing data) and becomes all too evident in the various currently available reports and sources that cite conflicting data.

Overview of the health sector

The Ministry of Health (MoH) is responsible for overall policy formulation, planning, organization and coordination of the health sector at national, regional, district and community levels. To facilitate efficient and effective coordination of the sector, the

²⁸ It should be mentioned that the competency test included in the SDI is not an easy one: on average, only 12.7 percent of teachers across countries included reach the minimum competency threshold.

following coordination structures have been established. At the central level, there is the Department of Medical Health and the Department of Social Welfare. At the regional level, Regional Health Directorates are headed by Regional Directors of Health Services, who are directly responsible to the Permanent Secretary through the Director of Health Services. Regional Directors of Health Services are responsible for coordinating policy interpretation, planning and implementation of health services, and monitoring and evaluation of health service delivery, within their respective regions. At the community level, the village health services were established in the early 1980s to provide primary care.

The Gambia's health care delivery system is three-tiered with an abundance of health care facilities that are unevenly distributed. There are approximately 1,019 health care facilities mostly located in the Central River Region due to the high number of village health services (VHSs). Each tier of service refers patients up to the next tier. The primary tier consists of VHSs and community clinics for promotive and preventive health care. The VHSs are staffed by village health workers and community birth companions. The community clinics are run by community health nurses or midwives. The secondary tier includes minor and major health centers. Minor health centers provide core health services, including basic emergency obstetric and neonatal care; when cases are beyond their capacity, they refer patients to major health centers. Major health centers provide minor surgery, comprehensive emergency obstetric care, radiology, and laboratory analysis, among other services. Hospitals comprise the tertiary level of care; the highest-level referral facility is the teaching hospital in Banjul, the capital city. The formal private health care sector is concentrated in the GBA and is much smaller than the public health sector. While almost all of the nurses and environmental health officers who are working in The Gambia are graduates of its health care training institutions, less than 10 percent of the doctors are Gambians (MoH recruits large number of Cuban doctors to fill the vacancies). Postgraduate training courses for nurses and doctors remain limited. Four

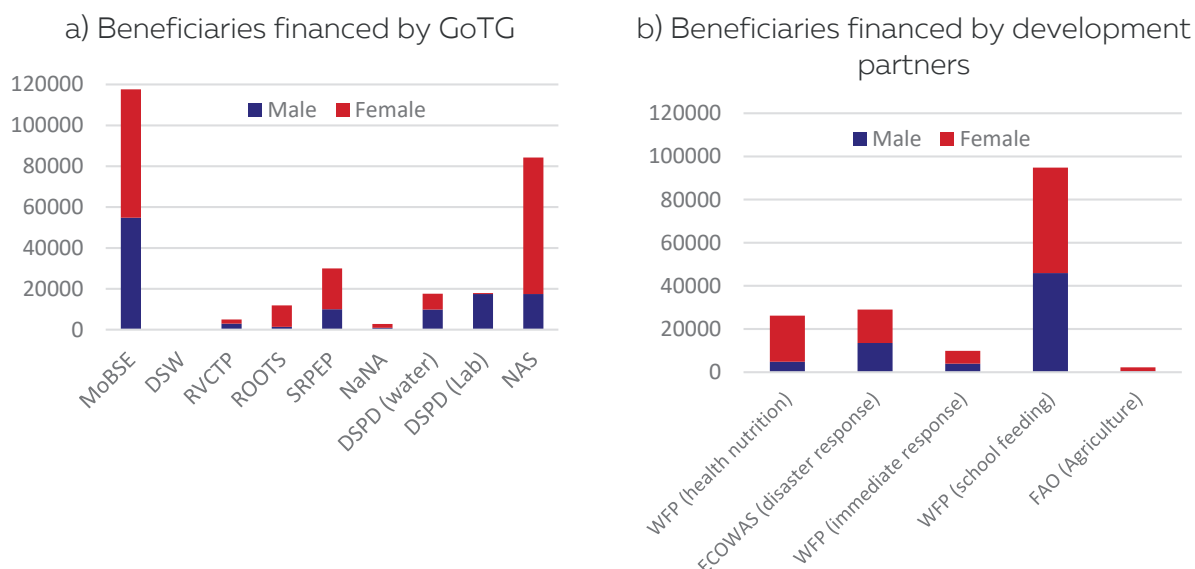
training courses for nurses have recently been offered, supported by the World Bank.

The Gambia recently paved the way for national health insurance. The National Health Insurance Scheme (NHIS) Act was passed by the National Assembly on November 8, 2021, and preparations are underway for establishment of the national health insurance authority. The scheme will have universal coverage and an exemption of contributions for the following categories of members: i) children under five years of age; ii) persons in need of prenatal, delivery, and postnatal services; iii) persons living with mental illnesses; iv) persons classified as 'indigent'; v) differently abled persons; vi) pensioners; vii) persons above 65 years of age; and any other persons as designated by the ministerial committee. Development is underway for a benefit package and actuarial studies. The health benefits package is based on the national Essential Health Care Package, which was validated in February 2023. A mass birth registration and health insurance registration was carried out between October 2022 and February 2023.

Overview of the social protection sector

The government of The Gambia formulated a National Social Protection Policy (NSPP) with the goal of creating an integrated and inclusive social protection system in The Gambia. The Government has approved a National Social Protection Policy (2015–25), which defines social protection as a comprehensive and cross-cutting agenda and proposes a set of priority actions to guide the gradual establishment of the Social Protection system, as well as the steps it will take to broaden coverage to those in need. With an increased focus on social protection, a new Ministry of Gender, Children and Social Welfare (MoGCSW) was established in 2019, bringing together the Women's Bureau and the Department of Social Welfare. The government also established the National Social Protection Secretariat (NSPS) under the office of the Vice President, to support the National Social Protection Steering

Figure 22: Social Assistance Support implemented by the government and partners



Source: NSPS (2022).

Notes: World Food Programme (WFP); Food and Agricultural Organization (FAO)

Committee (NSPSC) in providing leadership and coordination across the sector in The Gambia.

Social assistance programs are largely represented by in-kind and cash transfer programs. Social assistance programs cut across a broad range of categories that include cash transfers, school feeding programs, nutrition, education, and shock response. The largest program in terms of beneficiaries is a school feeding program, run by MoBSE. The Department of Social Welfare’s family strengthening program targets vulnerable adults (in old age), who receive cash to bolster their resilience.

The poverty-focused Nafa social assistance program was successfully launched in 2021 and played a critical role in the COVID-19 response. In June 2020, government food aid was complemented by a Nafa quick cash transfer program reaching 78,422 households in 30 rural districts for four months. The regular Nafa program started with a pilot in September 2021. Since July 2022, the Nafa Program has been reaching 17,036 households across 20 districts. In addition to cash transfers, beneficiaries receive social and behavioral change communication (SBCC) interventions to improve early childhood development and enhance human capital development. Early analyses find positive impacts of the Nafa program on beneficiaries. First results from the follow-up survey of a panel study revealed an increase in the overall

food consumption score by seven percentage points, and two-thirds of beneficiaries reported increased knowledge on parenting and child protection, GBV, entrepreneurship and financial literacy. The proportion of people who now regularly saved money increased from 13 percent to 40 percent.

Social security covers only the small formal sector. There are two formal social security systems in the country covering: 1) civil servants, including the security forces, who have access to a noncontributory scheme supported by the central government, and 2) formal sector employees, who pay social security contributions. In 2021, a total of 2000 workers (1,200 men and 800 women) were beneficiaries of the contributory schemes (NSPS 2022).

The social registry is almost a nationwide registry. The Gambia Social Registry (GamSR) currently has census data available in 39 districts, with data collection initiated in the final two urban districts. Data collection across the country is expected to be completed by early 2024. The registry represents a promising tool for targeting social programs; it is already providing data to three programs. However, the GamSR is not currently governed by any legal framework to define its scope, program coverage, and targeting. Further, there is currently no mandate to use the GamSR for targeting of all social programs and emergency responses by the Government.

C. Deep dive: youth education, TVET, employment and migration

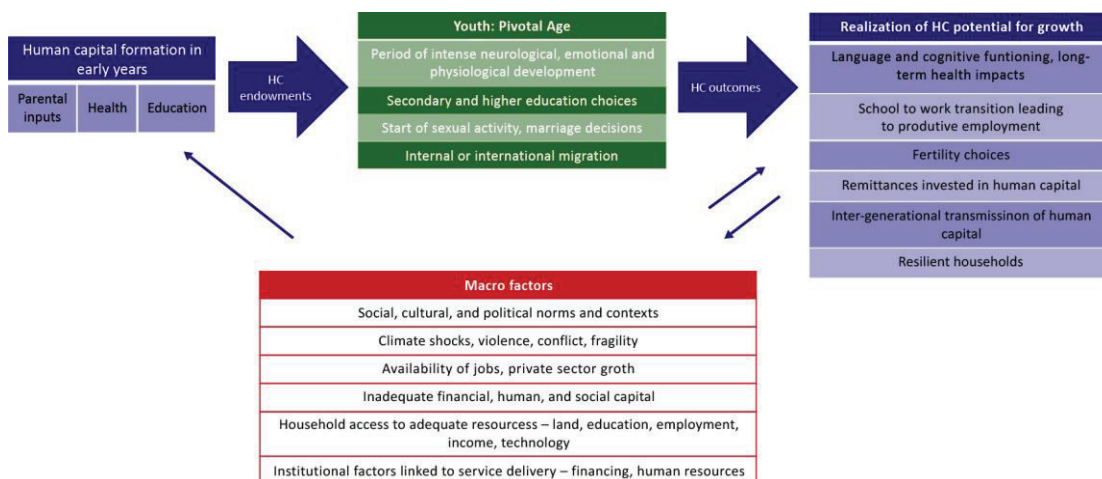
Main messages

- Youth value education, but are concerned about quality and accessibility. Technical and vocational training is increasingly seen as a promising path for gainful (self-) employment.
- Most youth are engaged in the informal sector, as opportunities for formal employment remain limited.
- Faced with limited job opportunities at home and peer pressure, young Gambians' desire to migrate remains high.

"I stopped going to school at 13 years because my brother was not in a position to pay my fees [...]. I tried different jobs and failed, I tried being a mechanic, carpenter, then succeeded at being a motorcycle mechanic [...]. I want to be an entrepreneur but in the future, as my boss hasn't released me from my apprenticeship yet. [...] I know of youths who have set up businesses [...]. The ones who get help from family—it is easy for them, but the ones who have to fund the business on their own—it is hard for them." – Interview with a young male urban respondent in Mansakonko LGA.

As the main recipients of human capital investments and the drivers of tomorrow's economy, youth (ages 15–24) require particular attention in the study of human capital in the Gambia. At a pivotal period during which human capital endowments laid in the early years come to their full realization and critical decisions affect lifelong outcomes (see Figure 23 for an illustration of this conceptual framework), youth bear a disproportionate burden of the country's economic and social challenges. Investments or divestments in human capital are long-lasting and have long-lasting repercussions on future generations. Given the large youth

Figure 23: Youth as a pivotal age for realizing human capital endowments



bulge in The Gambia (63 percent of the population are at most 25 years old), it is crucial to enable young Gambians to realize their full potential now. This will preclude a return of fragility and start a positive cycle of transmission of human capital to the next generation, allowing the country to reap its full potential demographic dividend.

Youth play a key role in The Gambia's politics and economy. The National Youth Policy 2019–2028 is designed to provide guidelines and direction for all stakeholders involved in the implementation—to be led by government—of policies, programs, and projects for the development of young people in The Gambia. It aims to develop and empower the youth, increasing their employability and entrepreneurial skills for optimal contribution to national growth and development. This is underpinned by recognition that young people need more opportunities to develop the skills required for participation in the labor market (IOM 2020). Meanwhile, young people feel marginalized, with little control over their lives due to a lack of economic opportunities and an inability to fulfill their traditional roles as prescribed by prevailing social and cultural norms. According to a recent Afrobarometer study, only 22 percent of young people felt that the government is taking effective action to address their most urgent needs (Afrobarometer 2022).

Qualitative data was thus collated to better understand the challenges facing young people in The Gambia today. The qualitative research focused on four main areas: youth engagement and experience with education (including with TVET); employment; migration; and perceptions about the future. Data was gathered through 80 semi-structured key informant interviews and 24 focus group discussions, held across the eight local government areas of the country with young people between the ages of 15 and 24 and two online focus group discussion with diaspora. Further details on the sample can be found in Annex 5. The main findings were

presented at a validation workshop held with 16 youth drawn from all over the country.²⁹ In total, the study engaged more than 250 young people, as well as key policy makers and experts working on youth issues across The Gambia. In general, respondents were well dispersed across the sampling categories identified,³⁰ though it did prove more difficult to identify and engage NEET youth (just 7.5 percent of the total) and secondary school students (14 percent); 60 percent of respondents were either current or recent students (26 percent) or working in the informal sector (34 percent). At least 20 percent in each category were women. The following subsections present the main findings from the qualitative work (CRPD 2022) and complement it with findings from the literature and household surveys.

Youth value education, but are concerned about quality and accessibility

“People complete schools and they don't get employment. This reduces the motivation to attend school when there are still costs—school fees, school materials such as books and pens and lunch money.” – Interview with a young male urban respondent in Basse LGA.

Formal education is seen as an important precursor to obtaining employment, especially well-paid employment. Other reasons for the importance of education highlighted by young people include learning to read, write and speak English; gaining valuable knowledge and improving their understanding of the world they live in. As

²⁹ While the data collection tools were drafted in English, many interviews and discussions were held in Mandinka and Wolof, the two most widely spoken local languages. Rather than translating the research tools into these languages, the research team identified key terms, words and phrases and how to translate them into local languages in order to ensure consistency in questioning across both the key informant interviews (KIIs) and focus group discussions (FGDs).

³⁰ The following subgroups of youth were recruited into the sample: final-year secondary school students or students of majalis/daras; current students/recent graduates of TVET or university; those running a small business, self-employed or employed in the formal sector; individuals working in the informal sector; and youth not in education, employment or training (NEET).

one of the interviewees put it, “Going to school is important for several reasons. Education helps me think differently from those who didn’t attend school. It helps people in their business management since they can read and write on their own which is needed for business record keeping.” Education is highly valued among the home communities of the interviewees, males and females alike.

While young people generally valued education, they expressed doubts about its quality. Poorly qualified teachers, limited numbers of teachers, poor teaching facilities and a lack of basic teaching tools such as computers were cited as challenges to quality education. Private or after-school classes are very common (with the same teachers, but for which payment is required). According to one young person, the “school system is flawed, that’s why there is so much after school classes. Sometimes there is no standardization. Sometimes what they teach you is totally different; different teachers will teach you contradicting stuff.”³¹ Most agreed that attending these extracurricular classes was key to doing well in school, as many of the areas covered in these sessions appeared in exams and tests, placing poorer students who cannot afford the fees at a significant disadvantage.

Nonattendance is more likely to be an indication of straitened family circumstances than indifference toward education (this holds especially true for girls). One focus group participant in Banjul explained that “many are not going to school because of finances but they still value education.”³² Financial factors were cited as the main reason for dropping out of school. The interviews repeatedly revealed the need to start earning to support their families, sometimes driven by family pressure, and this lay behind their decision to drop out of school. Respondents noted how the increased cost of living meant that most of the family income went on grocery shopping with

little left for educational needs such as uniforms, books, school lunch money and transportation.

Other reasons for nonattendance at secondary school included a desire to use alternative education structures such as daras³³ (8.3 percent), child marriage (6.9 percent), teenage pregnancy (4.2 percent), and the need to help parents with work, accentuated by the demotivational effect of widespread unemployment (5.6 percent). Over 40 percent of respondents agreed that Quranic education increased knowledge and understanding of Islam and Shari’a, which are viewed as important. Reasons for dropping out frequently overlap, as expressed by a young male respondent in Basse: “people complete schools and they don’t get employment. This reduces the motivation to attend school when there are still costs—school fees, school materials such as books and pens and lunch money.”³⁴

Social norms and customs continue to place girls at a disadvantage. According to a female focus group discussant in Banjul, “due to traditional beliefs and practices, some students are removed from school, some are asked to stop by their husband or families because their culture values marriage more than education.”³⁵ Although child marriage is prohibited, it remains common: a quarter of young women aged 20–24 married early; 17.5 percent were married between ages 15 and 18; and 5.6 percent married before age 15 (DHS 2019–20). Some traditional framing of the lack of opportunities for female education is gradually shifting in a direction that could improve prospects for the next generation. This is in line with the observation that the “traditional” gender disparities in enrollment have been eliminated in The Gambia, with boys now falling behind girls in school enrollment and completion (for example, see Figure A. 2), and 88 percent of Afrobarometer respondents agreeing with the statement that ‘girls and boys have equal opportunities

³¹ FGD with mixed urban respondents, Banjul LGA.

³² FGD with mixed urban respondents, Banjul LGA. While there are no fees or user charges at the lower levels, other costs of education such as school uniforms, lunch, and transportation expenses remain. Fees and user charges continue to apply to tertiary and higher education institutions.

³³ Daras are seen as more cost-effective (but also more conducive to personal value development than to employment).

³⁴ Interview with urban male respondent, 18–21, Basse LGA.

³⁵ FGD with all-female urban respondents, Banjul LGA.

to get education'. Nonetheless, widespread patriarchal social norms persist. In the same survey, half of all respondents think that it is preferable for a woman to have the main responsibility for the home and children, 40 percent agree that men have a stronger right to a job when jobs are scarce, and 23 percent agree that men make better political leaders than women (Afrobarometer 2018). Among youth who were interviewed, there was the perception that girls were more likely to be withdrawn from school in instances where financial pressures on a family became more acute.

There is a need to improve practical elements of learning to enable young graduates to be competitive on the labor market. Respondents remarked on the disparity between what is taught in school and the needs of the labor market. "School merely teaches you to pass exams and not to be able to find employment. If we depend on the school alone, you will not have the skills."³⁶ This concern held true across all levels of formal education and was also shared by those attending TVET centers and by policy makers.

Technical and vocational education are seen as useful, but often out of reach

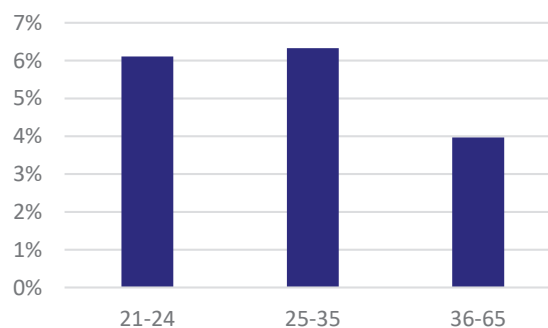
"TVETs are the future, we have lots of financial sector or political science university graduates, but we need more people with practical skills [...] we also need to make sure that the curriculums of these TVETs are aligned with the market needs and that they are well equipped to ensure all students get regular time to practice skills" – Interview with a NYC representative

With formal secondary education struggling to meet the needs of young people and prepare them for employment, many youth

³⁶ FGD with mixed urban respondents, Banjul LGA.

are increasingly turning to TVET to acquire knowledge, skills and pathways to employment. Almost all the young people interviewed (92 percent) knew or had heard of TVET centers, and, when prompted, cited technical skills that can be learned at TVET centers. For example, one female respondent from the most distant LGA from the capital city noted that "TVET centers teach skills like tailoring, catering, computer skills,"³⁷ while another highlighted skills "like welding, tiling, carpentry and construction,"³⁸ or "prepares people for work such as solar, satellite, electrical installations, and hairdressing."³⁹ The perception that youth are increasingly turning to TVET is supported by quantitative data: the share of people who ever attended TVET is higher among younger generations (Figure 24).

Figure 24: Share of age group that has ever attended TVET⁴⁰



Source: IHS 2020

TVET is perceived as a formal channel that is useful for preparing youth for the labor market, a marked shift from past perceptions. Traditionally, TVET had been perceived as offering a route to employment for dropouts.⁴¹ One of the focus group

³⁷ Interview with urban female respondent, 18–21, Basse LGA.

³⁸ Interview with urban female respondent, 18–21, Basse LGA.

³⁹ Interview with urban male respondent, 18–21, Basse LGA.

⁴⁰ It is impossible to identify TVET education with any precision in the 2020 IHS and 2018 LFS. A technical discussion with MoHERST representatives led to the following education categories being defined as TVET: "Vocational (Technical)" and "Diploma" in the 2020 IHS, and "Vocational Certificate" and "Diploma" in the 2018 LFS. While these categories are likely to include non-TVET courses, and TVET courses could be included in other categories, this categorization was chosen to cover most TVET courses and exclude few.

⁴¹ One respondent explained that "this stems from the fact that there used to be a two-tiered secondary school [system]—grammar versus technical—in which technical was seen as lesser." Interview with NYC representative, October 2022.

discussions (FGDs) held with a group of young females in Banjul highlighted the shift in perception of TVETs. Respondents agreed with one statement that “it offers training to all classes of students including those at university who want a second income”⁴², as young people are more and more realizing that income from monthly employment salaries are not adequate to take care of their needs and are beginning to venture into small-scale side businesses to supplement low monthly salaries.” Skills taught at TVET centers are now seen as providing youth with a path toward self-employment.⁴³ In addition to imparting skills, the awarding of certificates by TVET institutions appealed to many young people because it was perceived to help them secure good jobs, even if no respondents could draw a direct link. In many ways, changing attitudes to TVETs are simply “reflecting economic realities in which people are seeing the value of skills and the opportunities they give for making money” in the view of one policy maker.⁴⁴

While most respondents state that males and females had the same opportunities to learn a skill, certain trades remain gender-connnotated. For example, “hairdressing is mostly for females, whilst satellite, solar and wiring are mostly for male students”⁴⁵ was one view, while another stated that “men are more prevalent in skills that require strength than women, like auto mechanics.”⁴⁶ Other respondents also echoed the view that women are underrepresented in fields that are perceived as requiring physical strength. Gender stereotypes regarding acceptable trades also affect young men. In fact, one respondent noted that, conversely, it is hard for young men to pursue careers that are generally seen as the domain of women as this can “lead to people seeing them as gay.”⁴⁷

⁴² FGD with all-female urban respondents, Banjul LGA.

⁴³ This contrasts with the results from a 2013 tracer study on TVET, where only 8.8 percent of TVET graduates were self-employed. The study found that 53 percent of TVET graduates were wage-employees with a permanent/long-term contract, while 18 percent were wage-employees with an informal or no contract, and 29 percent were wage-employees with a fixed-term contract (World Bank 2013).

⁴⁴ Interview with official from President’s International Award, Gambia, October 2022.

⁴⁵ Interview with urban male respondent, 18–21, Basse LGA.

⁴⁶ Interview with rural male respondent, 18–21, Basse LGA.

⁴⁷ FGD with male urban respondents, Banjul LGA.

Though gender distribution of students among TVET institutions is surprisingly skewed toward females, women remain underrepresented in high-paying technical fields. TVET surveys conducted in 2017 and 2019 showed that girls and women comprised almost 60 percent of enrolled learners and graduates. More recent data from the TVET Monitoring and Information System show an even larger share of female learners, 62 percent, compared to 34 percent of male learners. Although this makes The Gambia a positive outlier in the region, the underrepresentation of women in technical occupations and industries remains a key challenge. According to the 2018 Labor Force Survey, women make up only 25.8 percent of technicians and associate professionals, 9.5 percent of machine operators, and 18.2 percent of craft workers (GBoS 2018). Overall, the construction industry employed less than one percent of women, compared to 12.5 percent of men. The lack of female representation in high-earning TVET fields on the one hand, and industry on the other, can create a mutually reinforcing cycle of exclusion. When TVET institutions fail to attract women into technical fields, it can affect access and participation of women in key occupational areas. Similarly, low female representation in technical occupations and industries can lead to a shortage of role models and impact the selection of TVET courses by girls, parents, and guardians.

Almost all TVET centers are in the Greater Banjul area, making access difficult for noncoastal residents. For some female respondents relocating to an urban area by themselves or with limited family support is simply not an option, as it could expose them to the risk of sexual harassment and abuse. Costs were highlighted as challenges: the price of tuition and payment for technical resources, but more pertinently the relocation costs of attending a center. For those in Banjul, TVET centers are perceived as “more accessible because the fee is not much compared to other higher institutions.”⁴⁸ For those outside the capital city, “they [the costs]

⁴⁸ FGD with mixed urban respondents, Banjul LGA.

are also expensive for poor people to afford especially in the rural areas. It is hard to enroll if you don't have sponsorship."⁴⁹ A respondent from Basse explained how "I have been there myself to seek enrolment, but they are asking for GMD 12,500 [US\$ 200] which is very expensive for me."⁵⁰

Compounding access challenges are issues of poorly equipped facilities with limited or insufficient learning materials and a curriculum that remains too theoretical and remote from the needs of the labor market.

The lack of opportunities to study at TVETs is aggravated by the fact that facilities are "poorly equipped to meet up with young people's demands or those of the market [when it comes to mechanics, electronic diagnostic tools are what is needed]". Here the private sector can be encouraged to "help fund new and improved centers that also meet their needs for employees,"⁵¹ argued a leading civil society figure. It was generally agreed that the curriculum at all levels, but particularly in TVET centers, needed to be revised to be brought in line with the demands of prospective employers. These perceptions echo findings from TVET systems across Sub-Saharan Africa.

The lack of better employment outcomes seems principally due to a lack of good jobs, more than to skills shortages of the workforce.

This means that efforts to build workforce skills need to go hand in hand with interventions to remove existing structural barriers to growth and employment creation. These include a lack of labor demand, given a sluggish economy, low and declining productivity in agriculture, and a lack of manufacturing and skilled service jobs (World Bank 2022). In addition, countries like The Gambia that are still in the early stages of economic transformation require a two-pronged approach to skills development and TVET including, on the one hand, a focus on higher-level, formal TVET in well-selected catalytic sectors with strong growth potential, and a strong private-sector interest in

partnerships and, on the other hand, supporting TVET for low-skill occupations and mostly self-employment in the informal sector (Arias et al. 2019). More can also be done to connect these skills centers with informal apprenticeships—the most common way that rural male youth learn a skill—and with the private sector.

Informal apprenticeships are widely recognized as an alternative way of learning technical skills, with respondents citing it as an easily accessible method of gaining relevant skills for the labor market.

Informal apprenticeships are predominantly accessible to male youth and are common in rural areas, where this might be the only option. They allow youth to learn and earn an income at the same time and are cheaper than TVET. According to one respondent who is learning his trade as a mechanic through an informal apprenticeship his arrangement is common: "You go meet the owner, often on the recommendation of a family member, who then takes you under his care to help you learn a trade."⁵² However, apprentices are highly dependent on their master: "You can learn fast depending on the master's engagement and contracts"⁵³ explained one current apprentice in Basse, or "you can be sitting down for a long time without being trained because the work depends on contracts of the master. For example, I have been sitting all these days without working because my boss did not have a contract. This can make it take a long time before I qualify."⁵⁴ The close relationship between master and apprentice further makes the apprentice vulnerable. One respondent raised concerns that although the informal apprenticeship "helps you become independent and take care of your family—as the money earned can help the household—you are sometimes harassed by the boss especially if you make a mistake."⁵⁵ Other perceived disadvantages included low pay, poor working conditions, including extensive periods of hard manual labor with little to no

⁴⁹ Interview with urban female respondent, 22+, Mansakonko LGA.

⁵⁰ Interview with urban male respondent, 18–21, Basse LGA.

⁵¹ Interview with official from YMCA, Gambia, October 2022.

⁵² Interview with rural male respondent, 18–21, Mansakonko LGA.

⁵³ Interview with urban male respondent, 18–21, Basse LGA.

⁵⁴ Interview with urban male respondent, 18–21, Basse LGA.

⁵⁵ Interview with rural male respondent, 18–21, Mansakonko LGA.

break, and the lack of certification; this latter makes it difficult to use the training and education to apply for formal sector jobs.

For lack of a thriving business environment, jobs tend to be in the informal sector

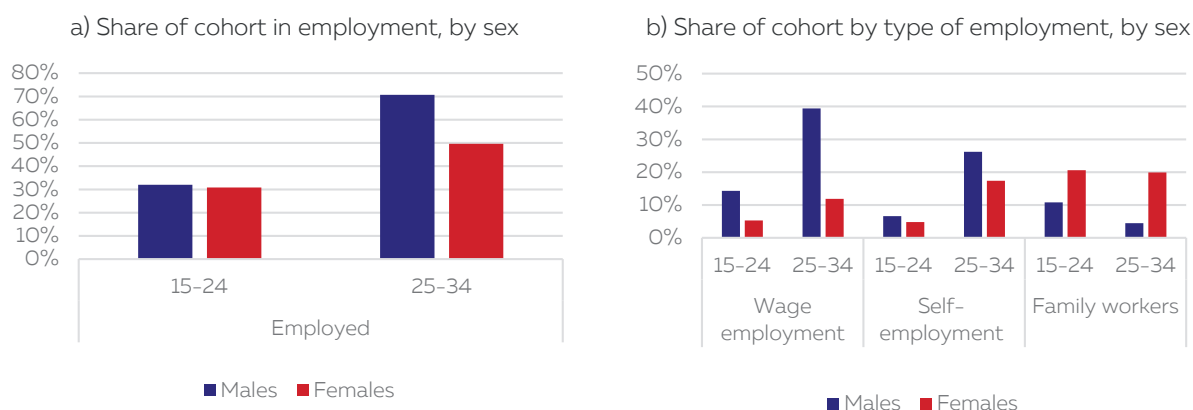
“If you give people skills but fail to create an environment in which they can use them effectively you are only solving half the problem.” – Interview with a technical and vocational educator.

Youth across the country largely rely on informal income-generating activities to subsist. The 2020 IHS survey identified key sectors in which young people are employed in The Gambia: agriculture, accommodation and food service, wholesale, retail trade and vehicle repair, and construction. Interviews show a similar picture. Among those no longer in formal education, few have been able to secure full-time formal sector positions, with the majority self-employed or, particularly in more rural areas, engaged in informal apprenticeships or petty trades. In fact, as noted above, this difficulty in securing employment following an extensive period in education is increasingly becoming a factor in

the decisions that individuals or families take about whether to stay on in school (in addition to the costs, lack of access or societal barriers). Quantitative data support this point: Figure 25 shows that the transition into employment is only happening for the slightly older cohort. The type of jobs available to the younger cohort (ages 15–24) are mostly of lower quality, such as self-employment, or supporting the family. Only 9.5 percent of youth are wage-employed (IHS 2020). Figure 26 shows that young people’s wages are low in many economically significant sectors, including transportation and storage; wholesale and retail trade, repair of motor vehicles and motorcycles; and accommodation and food services activities. Low wages also explain youth’s reliance on income generating activities in the informal sector.

In the perception of youth “a good job is one that earns you income that allows you to take care of your family and community.”⁵⁶ Having a good and stable salary is the most important attribute of a good job and highlights not only the existence of intergenerational social cohesion, but also the economic and employment burden faced by youth. While some youth prefer an office job to manual labor, the perception of office jobs as being normatively ‘better’ than skilled work

Figure 25: Transition into employment



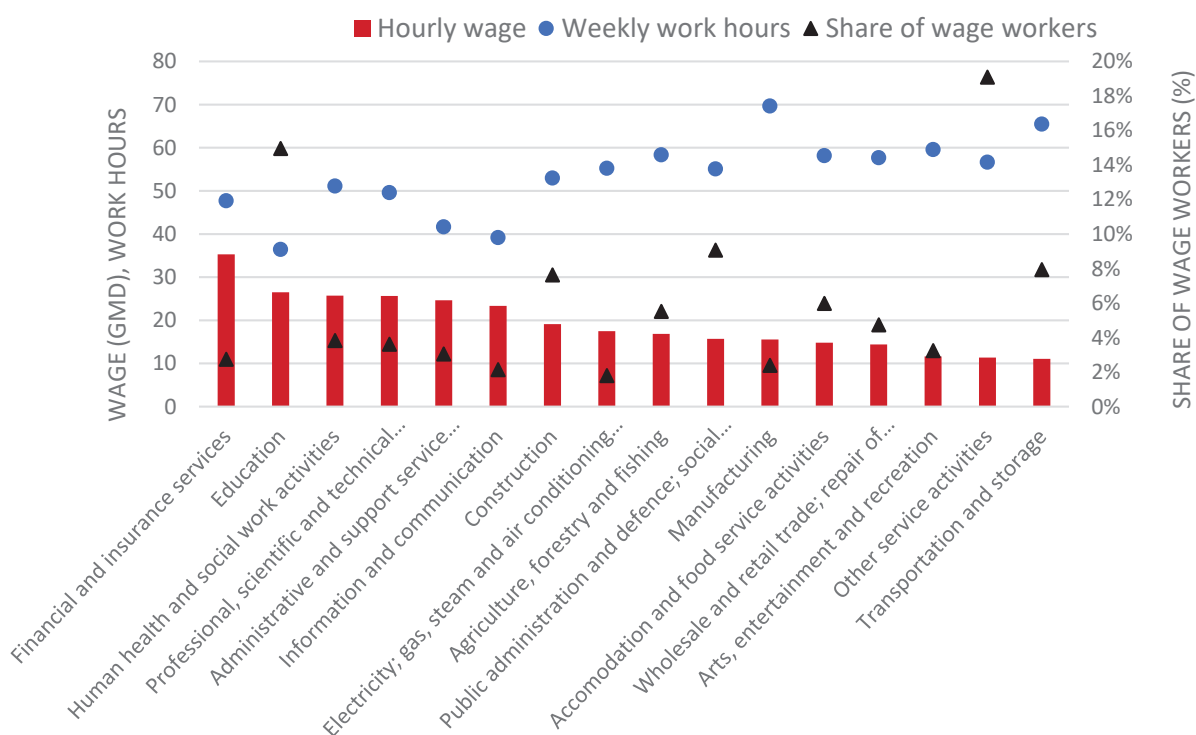
Source: IHS 2020

⁵⁶ Interview with urban male respondent, 18–21, Basse LGA.

seems to be shifting. When asked to give examples of individuals young people look up to, this ranged from medical doctors and nurses to mechanics and goods vendors. In fact, there appears to be a growing recognition that employment requiring technical skills—mechanics, carpenters, builders, tailors—can actually offer more, in terms of income and reliability, than office jobs. One respondent, working as a mechanic, argued that “jobs such as tailoring and construction are good because you can make as much money as possible if you work hard. You can even earn more than those in offices.”⁵⁷ A focus group discussant in Banjul noted in addition that “[technical] skilled jobs, unlike office jobs, are very secure. You can be fired at any moment in office jobs but with a [technical] skilled job you have your skills instilled in you and that will serve you better in the long term.”⁵⁸ Furthermore, skilled wages are paid more frequently than (monthly) office salaries.

In the absence of labor market intermediation or employment services, young people need to rely on networks to find a job. One female respondent from Brikama noted: “you have to know someone that works at the place you want to work in because most times you have good grades but because you do not know anyone you may never get the job.”⁵⁹ This was a sentiment shared by a focus group discussant in rural Kerewan who argued that “family or friend connections is usually the best way, people tend to employ you based on if someone puts in a good word for you.”⁶⁰ This is particularly the case in rural parts of the country, with informal apprenticeship schemes largely reliant on familial or social networks when it comes to recruitment. In urban areas, some respondents heard about employment opportunities on the radio or through social media but there was a general acceptance that the key to finding employment was less about what you know

Figure 26: Wages and job quality across major economic sectors (wage-employed, ages 15–35)



Source: LFS 2018

⁵⁷ Interview with rural male respondent, 18–21, Janjanbureh LGA.
⁵⁸ FGD with mixed urban respondents, Banjul LGA.

⁵⁹ FGD with all-female urban respondents, Brikama LGA.
⁶⁰ FGD with all-female rural respondents, Kerewan LGA.

and more about who you know. The Ministry of Trade, Industry, Regional Integration and Employment (MoTIE) has recently begun holding job fairs—confined for now to the GBA, where the country’s only operational job center is also located.⁶¹ However, respondents throughout the country highlighted a reliance on networks for securing employment.

Women face additional barriers in finding employment, especially in high-paying fields.

“Sometimes it is difficult for women to be employed, especially with the coming of maternity leave. Some institutions hardly employ women at a childbearing age having the belief that they can go for maternity leave at any time”⁶² argued one urban female respondent, despite the Women’s Act prohibiting discrimination against women in employment.⁶³ In general, youth are supportive of female employment. “Women should work and bring income. Because we are all human beings and need income. Not everyone thinks like that in my society, but I think it’s very important that women work,”⁶⁴ said one male respondent, whose sentiments were representative of many male and female respondents, particularly those in urban areas (though more traditional views might prevail in rural areas). Although gender differences were not seen as significantly pronounced by the majority of youth respondents, a policy maker took a different view in arguing that “the face of growth in The Gambia is still male [...]. There are still further education courses or careers that are not deemed available to women such as STEM or mechanics.”⁶⁵

Given the demographic profile of the Gambia population, there is an urgent need to create

more jobs. Entrepreneurship is deemed to be the potential driver of job creation. In general, survey respondents were positive about the idea of being their own boss, but many seemed to interpret entrepreneurship more as a chance for self-employment than an opportunity to create employment for others too.⁶⁶ Young people and policy makers alike highlighted the need for targeted support in developing business skills (for example: “technical skills are important because you need to know what to do; managerial skill so as to manage people and your business; people skills to establish the connections for the business; and also financial capital to start up”⁶⁷) and to provide start-up capital for those looking to start their own business.

Several small-scale, predominantly donor funded initiatives, have sought to bridge this gap by providing initial capital or tools,⁶⁸

but for individuals trying to raise capital outside of donor projects there are few viable ways to access credit from formal financial, or even microcredit, institutions. Young people who knew of individuals who had started entrepreneurial ventures said that they had been able to raise the necessary capital through informal means—friends and family—and viewed this as the most likely way that they too would be able to start their own business.⁶⁹ Some respondents argued that TVET institutions should provide students with resources to start their own business after graduation in ways that would allow them to employ other young people. The challenge of access to finance was amplified by a representative of the Startup Incubator, which has worked extensively over the past five years to support entrepreneurs in The Gambia, who noted that “some businesses struggle to move from micro and small enterprises to larger operations, with the challenge of access to capital a major issue—

⁶¹ A second center located in Basse (far east of the country) was almost operational as of October 2022.

⁶² FGD with mixed urban respondents, Kanifing LGA.

⁶³ Sections 16–24 of the Women’s Act prohibit discrimination against women in employment. The Act ensures that women are accorded equal opportunity and equal rights in the field of employment. It also ensures that adequate support services and facilities are put in place for women to continue to take part in nation building during the crucial period of pregnancy, lactation, childbearing and upbringing in general. The provision recognizes the contribution of women during the period of maternity and makes mandatory adequate compensation during this period.

⁶⁴ Interview with urban male respondent, 18–21, Basse LGA.

⁶⁵ Interview with official from Ministry of Gender, Children and Social Welfare, Gambia, October 2022.

⁶⁶ Less than 10 percent of those interviewed for the qualitative survey classified themselves as entrepreneurs.

⁶⁷ Interview with urban female respondent, 18–21, Brikama LGA.

⁶⁸ For example, the European Union funded Youth Empowerment Project or the Startup Incubator program.

⁶⁹ Interview with urban male respondent, under 18, Mansakonko LGA.

bank interest rates are at 15 percent even when they have a good business plan.”⁷⁰

The lack of an enabling environment was also cited as a significant challenge. “Technical skills are important because you need to know what to do; managerial skill so as to manage people and your business; people skills to establish the connections for the business; and also financial capital to start up,”⁷¹ argued a female respondent. One respondent highlighted their direct experience of the challenge of setting up a business that can be competitive in local markets, “the lack of required materials and high cost of those materials is a setback for entrepreneurship in The Gambia. Looking at it, most of the raw materials are either imported from our neighboring country, Senegal or from the West. Gambia has little or no raw materials at all, so we have to purchase them elsewhere.”⁷² This is critical if the entrepreneurship model is to move from subsistence enterprises to those that can create significant employment for others.

Entrepreneurship can be part of the solution to create much needed employment in The Gambia, but one policy maker cautioned that “not everyone is an entrepreneur” and that this focus should not detract from the need “to build companies and industries that create jobs.”⁷³ Indeed, the danger of seeing entrepreneurship as a key tool for solving the employment challenges facing the country is that it risks putting the responsibility for solving employment shortcomings on youth themselves: the idea being that if they have the skills and knowledge to run a business, they can create their own employment. But as the youth surveyed for this study highlighted, either from their direct experience or that of their friends, coming up with an innovative business idea and then actually realizing it is very difficult and can be constrained by the wider business environment. As one focus group discussant based in the diaspora

argued, “entrepreneurship is a viable option. However there needs to be more financial support, mentorship, business plan development and spaces for creative ideas. And the government, area councils, and private sector needs to be involved. This can make a supportive environment.”⁷⁴

Young Gambians are still keen to migrate

“I believe people take the backway to Europe and America because things are difficult in the country, as you would go to school and finish, but will never be employed. Out there you have job opportunities” – Interview with a young male urban respondent in Kanifing LGA.

Faced with a growing feeling of marginalization, young Gambians often migrate overseas in search of better opportunities. The Gambia has a long history of regular and irregular migration, both within the subregion and to Europe. One in six households has a member living overseas, and it has been estimated that as much as seven percent of The Gambia’s population lives abroad, mainly in Western Europe (Bah et al. 2021a; Altrogge and Zanker 2019). It is estimated that 62.6 percent of persons who left The Gambia used irregular means of migration (the ‘backway’) (GBoS 2018). These numbers have been reduced by several factors: significant efforts to raise awareness of the dangers and risks that this journey can entail, endorsed by migrants returning forcibly or voluntarily; a reduced likelihood of being granted asylum since the end of President Jammeh’s regime; and border closures during the height of the COVID-19 pandemic.⁷⁵ However, the prevailing economic hardship is still driving young Gambians to seek pastures new, either within the country or abroad.

⁷⁰ Interview with representative of Startup Incubator, Gambia, October 2022.

⁷¹ KII interview with urban female respondent, 18–21, Brikama LGA.

⁷² FGD with mixed urban respondents, Banjul LGA.

⁷³ Interview with official from YMCA, Gambia, October 2022.

⁷⁴ FGD with all-male diaspora respondents, Germany.

⁷⁵ While COVID-19 has disrupted the migration channels, especially to Europe, Gambians’ willingness to migrate remains high. In a large-scale study of Gambian men’s disposition toward migration conducted during the COVID-19 pandemic, 65 percent of respondents were likely or very likely to try to migrate to Europe (Bah et al. 2022a).

A large majority of those interviewed either wanted to migrate or knew somebody who had migrated. Although most of those interviewed had not personally migrated (only 29 percent had done so), a large majority either wanted to migrate (80 percent) to the urban areas or Europe for studies and job opportunities or knew someone (71 percent) who had. Youth were less keen on migrating within the West Africa region largely due to the perception that these countries are not much different from The Gambia. One respondent noted that, if he were to choose between regional migration and staying put, “I’d rather stay in the Gambia because the conditions are the same in all West African countries, same hardship, and lack of opportunities.”⁷⁶

Male youth, particularly those who are first-born, face the strongest pressure to migrate.

First-born male youth are called on at an early age to contribute to the family’s income. As one focus group discussant explained, “if you are the only male son in your family and the family is very poor that’s the reason youth do migrate through the ‘backway’. If you don’t have support from anywhere and the family is big, and the parents are old you must go out and find something to support the family.”⁷⁷ Though the majority of those taking ‘the backway’ were male, a handful of participants described how their aunts, sisters and grandmothers had used irregular routes, which pose additional dangers to female migrants.⁷⁸

Lack of economic opportunities fuels high rates of internal migration from rural to urban areas.

“I would love to go to Kombo [GBA] to continue working” noted one rural youth respondent, but he was clear that “if I have income that can take care of my needs and my family’s needs then I can stay.”⁷⁹ A recent study using mobile phone data to track internal migration shows that Brikama and Kanifing

receive more than 80 percent of internal migrants. Across the country, migration within LGA is more common than migration across LGA (Arai et al. 2023). In fact, recent increases in urban poverty observed from household surveys especially in the Brikama LGA, are driven by internal mobility of individuals from poorer districts within the LGA—and not rural residents from other LGAs migrating to urban settlements of Brikama.

Lack of education and skills development opportunities was further regularly cited as a main driver of formal and irregular migration.⁸⁰

Rural young people’s preferred destination for studies are institutions in urban centers within the country, whereas urban youth are looking outward to countries like Ghana, China, Turkey, the United States, and the United Kingdom. For example, a female respondent in Basse, currently enrolled in an IT program expressed a desire to further her studies at the Management Development Institute in Kanifing.⁸¹ But geographic considerations are not a primary concern for these young people, as one urban female respondent explained, “my main concern is furthering my education, so wherever that takes me is fine.”⁸² Migrating to further education is not only common to those in formal education; young people also migrate within the Senegambia region to learn the Quran through the majalis/dara system.

Offering alternative pathways to improving livelihoods can have large impacts on migration intentions and behavior.

A recent randomized study found that providing young men with the opportunity to enroll in a free vocational training program and informing them about the risks of ‘backway’ migration reduced intentions to attempt irregular migration and increased migration to Senegal, to some extent crowding out internal migration (Bah et al. 2022b). However, only 12

⁷⁶ Interview with urban male respondent, 22+, Banjul LGA.

⁷⁷ FGD with mixed rural respondents, Janjanbureh LGA.

⁷⁸ A key driver of regular migration within the Gambia, and the wider Senegambia region, among female youth are family-sanctioned processes linked to marriage. The expectation from a family and community is that women should relocate to be with their husband (for example, a female respondent in Mansakonko noted that she will only migrate if required to when she is married).

⁷⁹ Interview with urban male respondent, under 18, Mansakonko LGA.

⁸⁰ Migrating to further education is not only common to those in formal education. There has been a history of migration within the Senegambia region whereby young people cross the border to learn the Quran through the majalis/dara system. The decision to leave and where to go is usually influenced by the family’s religious networks within Senegambia.

⁸¹ KII interview with urban female respondent, 18–21, Basse LGA.

⁸² KII interview with urban female respondent, 22+, Banjul LGA.

percent of participants enrolled in the vocational training, and only 29 percent of those who enrolled were eventually certified by the program,⁸³ due to lack of funds to cover transportation, subsistence costs, and the opportunity cost of their time. Despite the low take-up of vocational training, the fact that the intervention increased migration to Senegal suggests that the vocational training intervention increased the salience of the construction and small appliance occupations for which training was provided, which were available in neighboring Senegal—but not in the rural areas of origin.

Most irregular ('backway') returnee migrants do not bring back skills; instead, they suffer from lack of skills, unemployment, and mental health problems. Another interviewee said that “most of them are not doing good. They don’t even mingle with people like before and they are ashamed. They did not return with any skills; it is now that they are trying to acquire some skills to better their lives.”⁸⁴ Three narratives emerged as to how young people saw returnee irregular migrants: i) youth who understand the condition of migrants and are pitiful; ii) youth who feel that returnee ‘backway’ migrants have wasted their time and are now actively disrupting society; and iii) youth who feel that returnees receive additional, and perhaps undeserved, benefits.⁸⁵ The fact that ‘backway’ migrants who have returned are struggling with substance abuse and mental health issues, and have not returned with any new skills, is weakening some young people’s resolve to go—but most are still willing to risk the journey. While most ‘backway’ migrants are male, a handful of survey participants shared stories of female relatives who used irregular routes to highlight the risks of sexual abuse, rape, and unwanted pregnancies.

Youth want to be heard, and see few positive changes

“We are getting tired of people meeting us, taking valuable information from us, and there is no change” – Interview with a female urban respondent, Basse LGA.

A lack of education and employment opportunities—and a sense of frustration that young people’s concerns around these issues were being ignored—tended to leave them with a bleak outlook on the future. The 80 young people interviewed as key informants were asked to reflect on, and rank, their current predicament by considering a ladder with steps numbered from zero at the bottom (representing the worst possible reality) to ten at the top (representing the best). The average score provided was 4.65 (out of 10), with little difference across the country, by age group, or by gender. Youth engaged for this study provided a range of suggestions as to what could be done to improve their situation when it comes to education and employment. However, many youth feel that their voice is not heard. Frustration at not being listened to was expressed clearly by a focus group discussant in Basse—the district furthest from the capital city—who argued that “the government is not listening to the voices of the young, we say this because we feel that we have been telling the government about our constraints for the longest period but nothing much has been done to change the status quo.”⁸⁶

⁸³ Qualitative interviews with participants highlighted lack of funds to cover transportation, subsistence costs, and the opportunity cost of their time as reasons why they did not complete vocational training.

⁸⁴ KII interview with urban female respondent, 22+, Kanifing LGA.

⁸⁵ Some ‘backway’ returnee migrants benefit from targeted reintegration programs run, or funded, by development partners.

⁸⁶ FGD with female urban respondents, Basse LGA.

D. Main constraints to human capital development

Main messages

- *Spending on human development in The Gambia is inefficient and inadequate, leading to low-quality service delivery.*
- *The broad spectrum of actors operating on human capital in The Gambia clearly requires effective coordination; however, administrative inefficiencies render this difficult.*
- *Lack of access to services, markets, and justice is a constraint to human capital development.*
- *The low quality of teachers, health care services, and the labor force are limiting service delivery and economic growth.*

Beyond targeted interventions in key sectors, cross-cutting bottlenecks must be addressed to improve the enabling environment for human capital development in the Gambia.

Four primary constraints emerge from the overview of human capital in The Gambia presented above, highlighting the need for cross-sectoral, systematic solutions. Adequate and efficient financing is a fundamental prerequisite for the implementation of initiatives aimed at building more human capital, especially among children and youth. However, even with proper resourcing of key interventions, lack of coordination can impede successful implementation and any inefficiencies in public administration will inevitably constrain the most efficient use of scarce resources. Furthermore, the country's limited access to schools, health care services and (labor) markets represents a significant obstacle to the delivery of essential services to its population and the utilization of human capital. Lastly, poor service delivery undermines sustainable development and progress on human capital outcomes.

vulnerable groups such as children, women, and people living in poverty. The situation has been further exacerbated by the economic impact of the COVID-19 pandemic. Without adequate investment in these areas, the country's human capital development will be impeded, and its population's well-being will be compromised. A comparison between the approved budget for 2023 (as per the 2023 Finance Law) and projections in the revised budget for 2022⁸⁷ (because estimates for 2022 actual/realized budget figures are not yet available) reveals reduced spending on human development sectors. Current spending as a share of total budgeted spending on health and education is projected to reduce by 1.8 percentage points, largely driven by the education sector (social protection is not tracked separately) (MoFEA 2023).

The country's education budget is heavily tilted toward salaries, leaving a small proportion for investment in critical infrastructure, equipment, and supplies. High salary and staff compensation costs accounted for a substantial part of recurrent education spending, translating to 82 percent for primary, 81 percent for lower secondary, and 82 percent for upper secondary, leaving ministries with limited discretionary funds for

Financing

Spending on human development in The Gambia is inefficient and inadequate, leading to low quality in service delivery. As a result, access to these critical social services remains restricted or of limited quality, particularly for

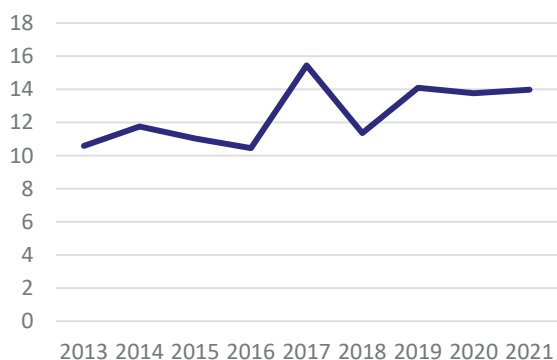
⁸⁷ It is important to note that these budgets refer to planned expenses, which do not necessarily reflect executed spending.

investment. Lack of funding has resulted in inadequate resources being provided for essential services such as teacher training, curriculum development, and learning materials, which are critical for improving the quality of education. About 90 percent of the education budget in 2020 was devoted to basic and secondary education. Despite the substantial increase in enrollment at lower basic levels, spending shares between basic and secondary education have remained relatively unchanged. Given the lack of foundational skills and the progressive nature of spending on lower levels of education, strengthening lower basic education is paramount. Only four percent of expenditures on lower basic education was spent on early childhood education (with much of that an indirect consequence of spending on lower basic schools, which often have ECD centers as annexes). Albeit low, and below the 10 per cent

benchmark recommended by UNICEF, this is somewhat higher than the two percent seen in other low-income countries (UNESCO IIEP 2021). Spending on early childhood is generally seen as having the highest potential returns and should be a priority going forward.

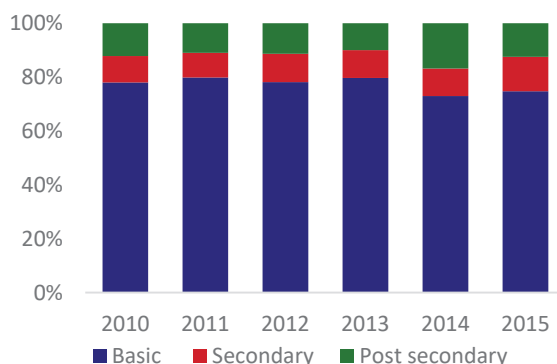
Households share a high burden of the cost of education. For example, in 2020, households were responsible for 77 percent of spending on ECE (Figure 30), a share that has increased over the years (UNESCO IIEP 2021), raising major equity and sustainability issues. Increased levels of enrollment in private ECD centers may account for some of the increase. Households in the richest quartile spend nearly twice as much on ECE as households in the poorest quartile (UNESCO IIEP 2021) instituting inequality of opportunity early in life. Households with a member who is in school spent on average 4.8 percent of their expenditure on education in 2020 (IHS 2020), a figure that could be an underestimate due to school closures during the COVID-19 pandemic.

Figure 27: Government expenditure on education, total (% of government expenditure)



Source: WDI

Figure 28: Budget allocation by level of education



Source: MoBSE and MoHERST, 2022

Figure 29: Unit cost of education, by education level, 2020, in GMD Dalasi

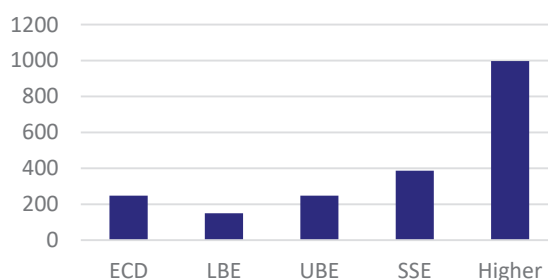
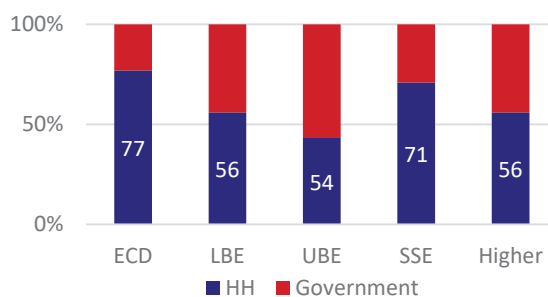


Figure 30: Household and government contribution to education unit cost, 2020



Source: MoBSE and MoHERST, 2022

Overall public spending on education in The Gambia is regressive. The poorest quintile (20 percent) of the population receives only 16 percent of expenditure on education, while the richest quintile receives 24 percent (World Bank 2020c). At the primary education level, meanwhile, the distribution of public spending appears to be largely equitable with almost all quintiles receiving roughly 20 percent (thus equivalent to their share of the population), except for the richest quintile, which received four percent less than its population share. However, this trend is reversed at the senior secondary and higher education levels where enrollment among poor families starts to decline. For example, at the senior secondary level, while the richest quintile receives 30 percent of total spending, the poorest quintile receives only 10 percent. Similarly, 49 percent of the total spending in higher education went to the richest quintile compared to seven percent for the poorest quintile. Education expenditures at the primary level are ‘poverty neutral’ whereas postprimary expenditures are regressive (they tend to favor the nonpoor). Poor households with a member in school spend a larger share of their total expenditure on education than do richer households: while the poorest quintile in rural areas devote 5.4 percent of their out-of-pocket expenditure to education, compared to only 2.5 percent among the richest rural quintile. The same pattern holds for urban areas (albeit involving higher sums): urban households in the poorest quintile devote 7.2 percent of their expenditure to education, compared to 4.4 percent among their counterparts in the richest quintile. (IHS 2020).

Similarly, in the health sector, there are significant constraints to the effectiveness, and equity of public health expenditures in The Gambia that have led to inefficiencies in service delivery. The Gambia spends less on health than do Sub-Saharan Africa countries that have the same HCI (Figure 31). Minor health centers deliver up to 70 percent of the basic health care package, including basic emergency obstetric care, yet only nine percent of the total health budget in 2018 was allocated to primary health care. In contrast, 43 percent of the budget was allocated to the

country’s 10 hospitals (of which five are in the two urban regions). Several issues were identified, which include: inequitable access to and use of quality health services; little or no financial protection for the poor; a significant imbalance in allocations to primary, secondary, and tertiary health care; a weak fiduciary management system; highly centralized budget management systems leading to delays in execution; and weak budget information management systems. Only 3.5 percent of households spend on health out-of-pocket, but this minority devotes a not inconsiderable 5.1 percent of their average total expenditure to health. In rural areas, the share of expenditure that households spent on health is highest among the poorest quintile. In urban areas, it is highest among the two richest quintiles.

Figure 31: General government expenditures on health (percentage of GDP), 2019

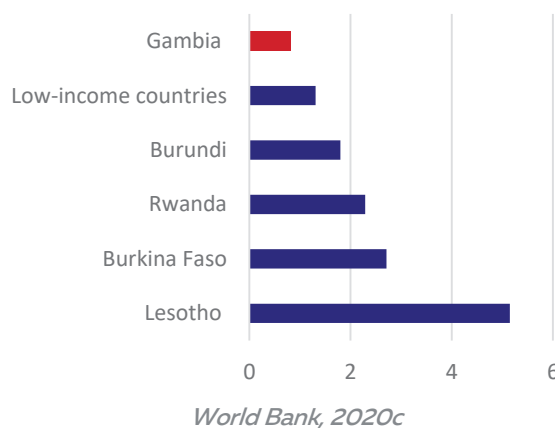
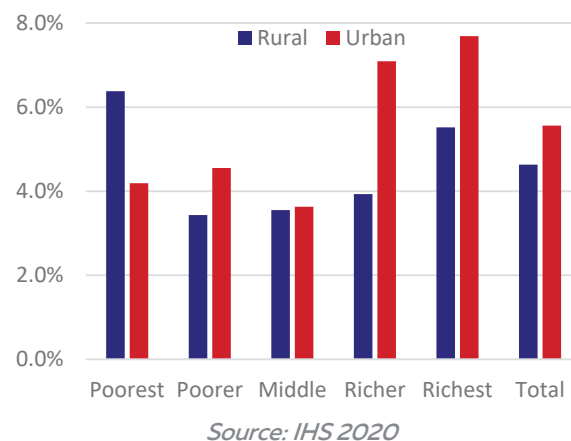
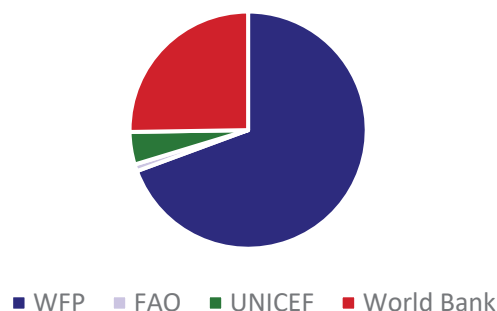


Figure 32: Share of household expenditure spent on health by quintile



Spending on social protection is dominated by expenditures by development partners—the government’s own spending is low. According to the latest data available, spending on social protection amounted to 2.7 percent of government expenditures (in 2019); however, this includes spending on civil service pensions, which take up the lion’s share (World Bank 2022c). In comparison, in 2022, The Gambia spent 1.4 percent of GDP on untargeted fuel subsidies. Spending by development partners is significant: in 2021, the four biggest partners spent more than US\$ 10 million on social assistance programs in The Gambia, a figure which increased further in 2022 with the roll-out of the World Bank-supported Nafa program. The COVID-19 pandemic and the recent increases in food prices have highlighted the need for a strong social protection sector that can protect the poorest. The government will be taking a crucial step in this direction if and when it increases its spending on social protection.

Figure 33: Social assistance spending by development partners, 2021



Source: NSPS (2022)

A review of 52 programs relating to human capital in The Gambia identified financial constraints as one of the main factors precluding successful implementation of numerous programs, since limited funding disrupted both the reach and intensity of human capital measures (See Annex 3). Lack of funding has resulted in inadequate resources being provided for essential services such as teacher training, curriculum development, and learning materials, which are critical for improving the quality of education. Similarly, in the health sector, there is a lack of resources to scale up proven interventions and programs,

which would significantly improve health outcomes in the country. For example, MoTIE currently lacks funding to implement the policies in its new National Employment Policy and Action Plan (NEPAP) to address the gaps between labor supply and demand. Addressing these financing challenges requires a multifaceted approach, including increasing domestic resource mobilization, improving governance and accountability, and mobilizing resources from international partners. In the absence of additional resources, it would be appropriate to reprioritize spending in social sectors that focus on the lower levels of service delivery and programs that have proven effective.

Coordination and inefficiencies in administration

Because human capital is, by nature, multidimensional and cross-sectoral, effective policies and programs must ensure successful coordination among a wide range of actors and institutions. In The Gambia, limited coordination both within and across institutions hampers the effectiveness of human capital programs. A review of 52 programs relating to human capital (see Annex 3) identifies many diverse implementing agencies, including national and local institutions, civil society, national cooperatives, enterprises, bilateral and multilateral partners. Across sectors, programs were often designed without explicit consideration for other (existing or future) human capital measures, leading to overlapping mandates and a lack of accountability. Additionally, programs funded and implemented by nongovernmental institutions were subject to little oversight from state ministries.

The diversity and huge number of actors operating on human capital in The Gambia heightens the need for effective coordination to ensure successful implementation, scale-up, and learning from past experiences. The following examples illustrate the overlap in the type of timing of programs implemented across institutions:

1. **Skills Training and Development.** Although postsecondary and tertiary education are overseen by MoHERST, responsibilities for formal and informal TVET programs are fragmented across multiple ministries and departments, including MoBSE, Ministry of Youth and Sports (MoYS), and Ministry of Gender, Children and Social Welfare (MoGCSW) and its Department of Community Development (DCD), which can create discrepancies in accreditation and qualifications. For example, the Rural Development Institute (RDI) offers two-year training programs in community development at the diploma level and is overseen by DCD. However, students wishing to pursue their studies at the Bachelor level at The University of The Gambia, which is overseen by MoHERST, are required to repeat the first two years of study, despite having already taken similar courses at the RDI. The co-existence of public, private, formal and informal TVET institutions, and formal and informal apprenticeships, further complicates coordination.

2. **Information Management Systems.** The Gambia Labour Market Information System (GLMIS) was established to provide quantitative and qualitative information related to employment in the Gambia. While the NAQAA is responsible for assessing and disseminating information on training needs, the scope of the GLMIS is broader, as it covers information on industrial relations, labor law, occupational safety, and health. The GLMIS is under the jurisdiction of MoTIE, and its governing committee includes representatives from MoBSE, the NAQAA and the MoYS. However, the GLMIS faces many challenges in fulfilling its mandate. Limited financial and human resources restrict its ability to conduct surveys, and inadequate cooperation with partner institutions makes the exchange and dissemination of data difficult.

Coordination often comes down to direct interactions between different service delivery agents from different agencies with diverging interests. The health sector provides an

example of the potential benefits of successful coordination. The results-based financing health project aimed to increase the share of pregnant women who deliver in health facilities (rather than at home), since it increases the chances of skilled birth attendance and mothers' access to essential equipment and supplies. This required coordination between village health workers and community birth companions (CBCs); other countries have reported competition between the two groups. In the case of The Gambia, however, the number of births attended by CBCs fell and the number of pregnant women referred to health facilities by village health workers and CBCs for delivery and complication management tripled in six years, highlighting the potential for increased coordination on strengthening human capital.

Administrative inefficiencies are present across the public administration. Limited oversight of public revenues and expenditures impacts the efficient allocation of resources for service delivery. Tax administration is weak, and a lack of comprehensiveness, coverage, consistency, and timeliness of financial statements has impacted oversight of public expenditures. The Gambia scored 35 out of 100 in the Open Budget Index for 2021, indicating significant underperformance in terms of coverage and timeliness, opportunities for participation, and adequate oversight. Public employment management practices do not currently allow for strategic planning, budgeting, recruitment, and deployment within the public sector. There is no comprehensive personnel registry with up-to-date and reliable information on public employment. Most ministries maintain outdated establishment lists, incumbents are not mapped to budgeted positions, and enforcement of annual staffing ceilings is a challenge. In the absence of accurate establishment data, recruitment decisions are not based on an assessment of actual needs. Finally, limited transparency and opportunities for citizen engagement undermine oversight and accountability in service delivery. Various Management Information Systems (MIS) have been introduced to maintain statistical and administrative data but suffer from weak data infrastructure (for example, much data—including service users and records—is

generated in paper format, thereby limiting its use) and a lack of interoperability. In addition, data are not made available to external stakeholders in a consistent, timely, or readily available manner—limiting citizen oversight and accountability. In terms of citizens’ engagement, grievance redress mechanisms (GRMs), for example, are not harmonized across sectors, with uneven coverage across the country.

Accessibility

Access to services, markets, and justice is crucial for the well-being of individuals and the development of a country. In The Gambia, however, limited access to these resources remains a major constraint. Lack of access to basic services such as health care and education, coupled with limited job opportunities, result in widespread poverty and inequality. Additionally, the justice system in The Gambia is not always reliable or accessible, leading to a lack of accountability and perpetuation of human rights violations. Addressing these challenges requires a commitment to improving infrastructure, expanding employment opportunities, and strengthening the rule of law.

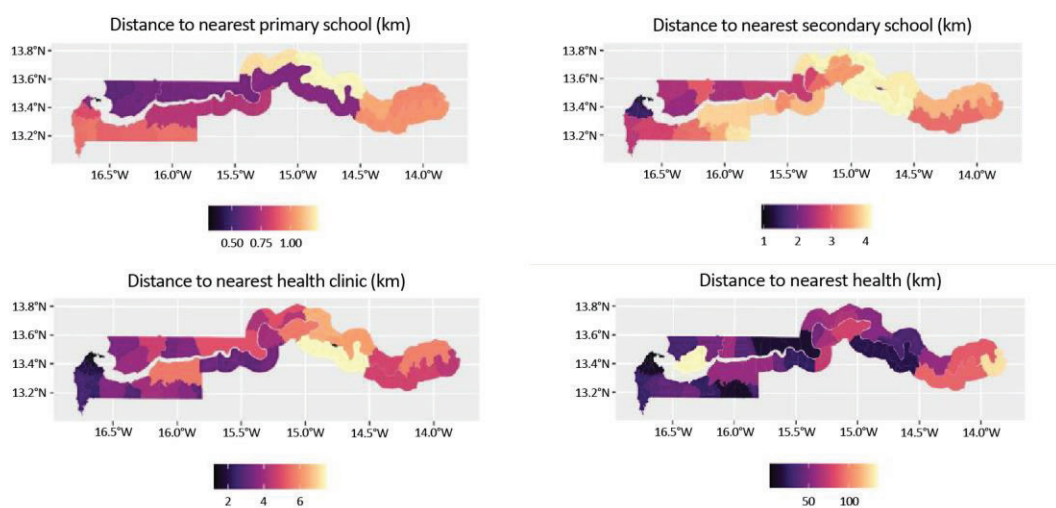
Access to service points

Access to education remains limited for those who are outside of The Gambia’s urban and

capital region. Estimates of the average distance to the nearest facility show that there are regional disparities in access to schools. In this respect, Kerewan LGA performed noticeably worse for primary schools, whereas people living in the middle regions of the country appeared to be located farthest from secondary schools. The situation is similar for TVET as approximately 75 percent of registered TVET providers are in the GBA. Moreover, access to TVET for the poor and disadvantaged is constrained by factors including cost, opportunity cost, and lack of educational prerequisites.

Young individuals in rural areas are particularly vulnerable given the inadequate public service delivery. As migration typically begins with individuals leaving rural areas in search of better educational and occupational opportunities, improving and decentralizing service delivery to rural areas ought to be prioritized. “We need to focus on getting youth in rural areas to acquire their skills there, this will reduce migration. Addressing the roots causes of migration, that people leave rural areas first and foremost, is critical but for it to succeed in rural areas we need better equipped [TVET] centers, start-up capital and in the case of agriculture some sort of guarantee or agreement that they can access land locally to farm,” said an office-holder who participated in the qualitative study.

Figure 34: Small area estimates of average distance to nearest facility (district level)



Source: World Bank, 2022. Small area estimates based on 2020 IHS and geospatial indicators.

There are similarly large spatial disparities in access to health clinics and hospitals. People living in the middle regions are located particularly far from health clinics, while people living in the far eastern corner of the country, in Basse LGA, are located particularly far from hospitals. Given the difficulties associated with traveling long distances in rural areas, some of these distances are considerable. Notably, these distances are population weighted, indicating that the average person in these districts lives quite far from the nearest tertiary care hospital.

Access to markets

Lack of access to markets is a significant barrier to productivity and employment growth in rural areas. The Gambia has poor infrastructure, particularly in rural areas, significantly hampering productivity in the agricultural sector which supports most of the population (nearly three-quarters of the poor and more than 90 percent of the extreme poor are farmers). Agricultural production zones are connected to secondary towns and economic centers mostly through gravel surfaced roads, most of which are in poor condition. This poor road network is a major constraint on access to markets for smallholders and SMEs, leading to high post-harvest losses and transportation costs. The agricultural sector is also slow to adopt new technologies and modern farm practices. There is strong potential domestic, regional, and international demand for its agricultural products, including rice, groundnuts, cashews, vegetables, and fruits.⁸⁸ However, while there are many producer associations and cooperatives (for vegetables, cashews, rice, and poultry, among others), the agricultural value chains are not organized to connect buyers and sellers and improve competitiveness.

The concentration of digital businesses in urban areas of The Gambia is a significant barrier to market access for entrepreneurs in rural areas. With the majority of the population residing in

urban areas many rural communities are left without access to the digital ecosystem. This disparity is further perpetuated by the limited economic opportunities and underdeveloped infrastructure in rural areas, such as unreliable electricity and digital connectivity. The lack of access to technology has also limited productivity in the agricultural sector (for example, the transfer and adoption of productivity-enhancing and climate-smart technologies).

Access to finance

Lack of access to finance constrains employment creation, especially for youth and women. In 2018, only 6.7 percent of businesses received a loan or line of credit in the previous year; among those who did, only one in four received it from a bank or a financial institution (World Bank 2022). Even among nonagricultural formal firms, arguably the most likely to access loans/credits, the majority cite access to finance as their biggest obstacle, even though almost all of them have a formal bank account (World Bank 2018). Lack of access to finance means that 85 percent of formal firms finance their investment internally, substantially constraining their growth potential. Women also lack access to financial services: only 15 percent of women have an account at a formal bank, compared to roughly 30 percent of men. As a result, they are more likely to borrow from microfinance institutions and rotating communal savings associations (UNCDF 2019). Young people cited facing challenges in accessing loans from financial institutions, limiting their ability to engage in productive activities.

A lack of interaction with the financial operating environment reduces business ability to grow. A recent survey of tourism Micro, Small and Medium Enterprises (MSMEs) highlights that over three-quarters of the owners of the MSMEs characterized interest rates on loans as prohibitively high (MoTC, forthcoming). The perceived high interest rates in The Gambia⁸⁹ could well explain why

⁸⁸ The National Export Strategy targets groundnuts, cashews, horticultural crops, and fish as the most promising sources of export growth. World Bank (2019) further identifies rice and poultry, which could substitute for imports, as significant sources of growth.

⁸⁹ The Gambia's benchmark interest rate for November 2022 published

to date very few MSMEs have taken out loans from banks and financial institutions. Indeed, more than half of the MSMEs surveyed (58 percent) indicated that were not sure about how easy or difficult it is to access loans from banks or financial institutions in The Gambia.

Most business are not registered, further reducing their ability to access finance. The weak state of formalization and maturity of Gambian businesses makes it difficult for them to comply with the requirements of financial support structures, thereby limiting their access to funding. Additionally, registering a business currently requires travel to the GBA, which is a significant burden. MoTIE is currently decentralizing the procedure by setting up an office in Basse from which businesses can be registered. According to 2018 LFS, half of the workers in The Gambia are self-employed and only 3.6 percent of those self-employed report having registered their business with the Gambia Chamber of Commerce and Industry (GCCCI). As a result, the majority of businesses receive credit from informal sources (70 percent of male-owned businesses and 30 percent of female owned business have received a loan from a friend or relative) (World Bank 2022).

Access to finance is even harder in rural areas. Lending to agriculture represents less than five percent of all lending. The rural banking network is limited, the cost of managing small loans is high, and the perceived risk of lending is high due to unstable revenue flows, lack of collateral, and limited legal avenues for enforcing contracts. The lack of diversity in financial services, particularly the lack of products and services designed for agriculture and agribusiness, is a big constraint on investment. Rural Gambians are further unlikely to own a bank account; only six percent of rural women and 14 percent of rural men⁹⁰ have an account at a financial institution

by the Central Bank of Gambia was 12 percent. Although this compares favorably with other Sub-Saharan African countries such as Ghana (27 percent) or Nigeria (16.5 percent), it is higher than rates in neighboring countries such as Senegal (4.5 percent), Mauritania (7 percent), or Burkina Faso (4.5 percent).

⁹⁰ In contrast, 21 percent of urban women and 33 percent of urban men have an account (DHS 2019–20).

(DHS 2019–20).

Equal access

The pluralistic legal system contains mutually contradictory legal provisions that place women at a disadvantage, while social norms further hamper women's access to justice. Although many provisions in Gambian law guarantee equality of rights between men and women, all matters relating to personal law, including marriage, divorce inheritance and general family matters are governed by customary and Shari'a law. Over 90 percent of matters relating to family law are adjudicated in the Cadi or Islamic courts, where the evidence of one male is equivalent to that of two females, or in district tribunals, where adjudicators are usually male. As a result, court rulings tend to disadvantage women and girls (UN Women 2020) and persisting social norms—such as Female Genital Mutilation (FGM)⁹¹ and child marriage⁹²—prevent the enforcement of laws that protect human rights, an issue that is particularly pressing for women and girls. Women are severely limited in exercising their voice: 47 percent of women ages 15–49 do not participate in any major decisions in the household (DHS 2019–20). Annex 2 provides a more detailed overview of the legal barriers to the economic empowerment of women and youth.

Although pregnant girls cannot, in law, be banned from attending school, the continued prevalence of child marriage and the social stigma attached to early pregnancy renders the relevant legal provision ineffective. While early pregnancy effectively prevents girls from continuing their schooling, it is boys who are generally more likely to drop out. One possible reason for this relates to child labor, which is more prevalent among boys: 29 percent of boys ages 7–14 versus 22 percent of girls are working, and nine percent of boys report that work prevents them from going to school. In addition to labor, religion is a major reason for not attending formal school (for

⁹¹ FGM is widespread: 73 percent of women ages 15–49 have undergone FGM (DHS 2019–20).

⁹² Among young women (ages 20–24) 23 percent had been married by age 18 (DHS 2019–20).

both boys and girls). Women further face *de facto* challenges in accessing services. Among women who reported facing challenges in accessing health care, the share who reported that they did not want to go alone increased in both urban and rural areas between 2013–2019/20 (with shares in urban areas doubling).

Women face challenges in accessing land.

Although the agricultural labor force is largely female gender disparities constrain their productivity. For example, customary land right systems are highly inequitable: although mandated in the Land Act, women’s right to land is not sufficiently implemented in rural areas. Women generally must access land under customary law, through “user rights” conferred by husbands or communities.⁹³ Because these rights tend to be seasonal or annual, women can grow only short-cycle food crops and no perennial crops. Secured access to, ownership, and control over land further hampers women’s ability to initiate and expand agricultural enterprises.

the Gambia currently faces a shortage of skilled teachers, which has resulted in poor academic performance among students.

Another area that needs improvement is quality of the health care system.

The Gambia faces a shortage of medical supplies and equipment, resulting in long waiting times at health clinics, especially in rural areas. Young people perceived health facilities to be expensive and poorly staffed (Box 3). The Gambia further faces a shortage of skilled health care personnel at higher levels: only 10 percent of doctors are Gambia, with the MoH importing doctors from other countries.

Finally, a quality labor force is a major determinant of business development and growth.

Tourism, one of the sectors with the highest growth potential in the country, is constrained by a lack of highly skilled personnel. Admittedly, a survey of MSMEs involved in the tourism sector indicates that they find it easy to find skilled labor to support their businesses (74 percent agree) and to find people with technical expertise (65 percent agree). However, less than half of surveyed businesses (41 percent) are of the view that people in the tourism industry in The Gambia have the requisite managerial competence (MoTC, forthcoming). This suggests that although employees with basic to middle level skills may be readily available, those with the requisite managerial competence to be innovative and drive growth are lacking.

Quality

Developing quality teachers, both through preservice and in-service training, remains a challenge in the Gambia.

For new teachers, 40 percent of student teachers scored above the benchmark of 50 percent on The Gambia College Teacher Competency Exam. According to the 2020 Service Delivery Indicator survey, no teacher in the Gambia reached the minimum defined competency. Unfortunately,

Box 3: Perception of health service delivery from qualitative youth survey

Youth perceive health facilities to be expensive, poorly staffed and in some cases difficult to access. One respondent described how “the price of medicine is expensive, and doctors are not in hospitals and sick people don’t have beds to be admitted on as some sleep on the floor or are discharged even when they are not well.” This experience of the health care system was shared by a large number of respondents, with frustration voiced at the nonavailability of drugs at public health care facilities. This means that people must either go to pharmacies and purchase the necessary medication at their own expense, or rely on herbal remedies.

Source: CRPD, 2022

⁹³ Eight percent of women own land (either alone or jointly) versus 30 percent of men (DHS 2019–20).

Using data effectively to improve human capital outcomes

The Gambia collects an abundance of data; however, utilization remains low, reducing its usefulness to track human capital outcomes.

The data compass provides a snapshot of the indicators to be collected to track intermediate human capital outcomes, across time and different socioeconomic groups. The Gambia collects most suggested indicators (22 out of 29 suggested indicators are available or partially available, see Table A. 5). However, the data collected are neither used for decision-making nor shared across sectors and institutions.

Data collection in the education sector is extensive, but usage for policy making low.

Although service delivery indicators show The Gambia performs relatively well on the availability of inputs and teaching staff, educational outcomes remain poor, and even qualified teachers lack the skills and knowledge they need. While the government has made strides to leverage data to improve policy making, the two Education Management Information Systems (EMIS) operate independently of one another, remaining fragmented and yet excessively centralized. Currently, MoBSE's EMIS does cover all regions of the country and collects a wide range of data on student enrollment, completion rates, teacher qualifications, and more. However, all EMIS operations are centralized in Banjul, with limited data capacity in schools and regions. MoBSE has expressed the need to decentralize the EMIS system and empower teachers and leaders at the school, cluster, and regional levels to utilize data to inform school improvement plans, monitor disability inclusion, tailor support to at-risk student groups, and identify data gaps. The education sector further collects data on learning outcomes every year through the NAT (for grades 3 and 8). The NAT provides a wealth of data that is unfortunately of only limited use for policy making because test items change every year to assure fairness, and therefore results are not necessarily comparable across years. Among education policy makers, there is

no awareness of NAT results, and they do not serve policy making (for example, to facilitate comparisons across schools or funding allocations). Reducing the frequency of the NAT collection would free up human and financial resources that could be redirected to utilizing data for educational policy making. Additionally, data collection processes and definitions are inconsistent across government entities. For example, the education categorizations that GBoS employs in household surveys do not follow the categorizations that MoHERST utilizes. They do not identify TVET students and graduates, rendering any analysis on the returns to TVET difficult.

Programs aiming to enhance human capital need to learn from the education sector and enhance their regular data collection efforts.

Essential data to track the reach of programs is often lacking. Data on the number of beneficiaries was unavailable for 22 out of 52 human capital programs reviewed for this report. Cost data was unavailable for 31 of these programs, although it is possible that implementers may have been unable or unwilling to share information that had in reality been collated (see Annex 3). Few of the programs profiled had robust monitoring and evaluation frameworks. Some had results frameworks measuring outputs and a small number had impact assessments. Advances have been made in collecting data on the social protection sector. The NSPS has published its first Annual Report of the Social Protection Sector (covering the year 2021), which includes an overview of programs, including beneficiary numbers, actors, and sources of funding (see Table A. 3 for an overview of social assistance actors). An M&E framework development is also underway. These coordinating efforts will provide an overall picture of the sector and can provide the basis for evidence-based policy making.

The GamSR needs to contain quality data to be a useful source for accurate targeting of social programs or to reliably underpin research. The quality of the data is important. 'High quality' means that the data are up to date, and will give rise to workable

predictions. Over time, wealth approximations in the social registry are likely to become outdated, and the registry may also not reflect population movements or changes in contact details. More dynamic (or adaptive) intake and registration processes, with on-demand mechanisms built in for the regular updating of records, may help to maintain the relevance of the data for targeting emergency assistance. Information about the GamSR further needs to be publicly available to ensure its efficient and effective use. The GamSR contains sensitive information on beneficiaries—however, the data could be anonymized and would then be an up-to-date, nationwide database on households' socioeconomic status, a prime source for researchers.

The Gambia is making progress toward achieving quality universal health coverage, with increasingly integrated health data playing a key role in supporting effective policies. The country has transitioned from paper-based records to more integrated datasets, resulting in a wealth of data sources in the health sector. The use of results-based financing (RBF) mechanisms has improved outcomes and provided valuable data on the quality of care, underscoring the importance of primary health care. The Ministry of Health is also establishing electronic records, including an electronic Civil Registry and Vital Statistics (eCRVS) system and a national health insurance card, with a focus on issuing birth certificates to all citizens. To build on these efforts, the government should link the eCRVS and National Health Insurance Scheme (NHIS) systems to other government systems (such as the GamSR to enable the targeting of contribution-exempt members under the health insurance act), improve data quality and digitize data sources for monitoring and evaluation, and make better use of household survey data to strengthen service delivery. Conversely, the data collected through the eCRVS can also support updating the GamSR on issues such as household size.

Data on those responsible for the provision of services is scarce. The coverage and reliability of human resources data is low. For example, administrative data on public employees and

pensioners is not digitized and no human resources management information system (HRMIS) currently exists. This makes it difficult to maintain records on public vacancies and identify human resource gaps in service delivery sectors. Establishing an HRMIS and linking it to other information systems, such as the EMIS, would facilitate the usage of administrative data in preparing sectoral budgets (for example, calculation of school-level operational budgets based on a consistent school registry, and corresponding enrollment and population data), monitoring of service delivery performance (for example, measurement of spending efficiency relating inputs and outputs), and the release of comprehensive information to the public to enhance vertical and horizontal accountability.

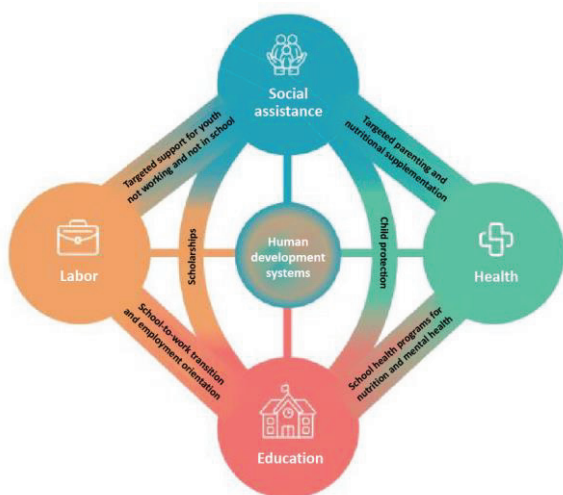
The lack of accurate data on youth needs and the limited transparency in data flow from the local to the central government is a significant area for improvement in the Gambia. Despite the existence of local council structures and the nationwide presence of the National Youth Council (NYC), a qualitative study raised questions about the effectiveness of informing the central government about youth situations and concerns. Several discussions suggest that local councils may not accurately convey youth situations or concerns to the center, potentially providing a distorted picture. This indicates a need for better ways to capture and reflect young people's knowledge and experiences, which are critical to addressing the challenges they face and improving their perception of the future. Young people in the Gambia demonstrate a strong understanding of their challenges and have clear ideas for solutions. Therefore, improving data collection methods and transparency in data flow can enable effective policy-making and better outcomes for youth in the country.

Opportunities for citizen engagement are restricted, including mechanisms for collecting citizen feedback and responding to complaints. At both the central and sector levels, no policies, procedures, or mechanisms exist to collect citizen feedback in a consistent and timely manner. Similarly, no tools exist to

collect end-user feedback in real time at the point of service—whether through SMS, phone surveys, comment cards on levels of satisfaction with services rendered. Relatedly, grievance redress mechanisms (GRM) are not harmonized across sectors (health, education, and social protection sectors all have their own GRMs). The lack of citizen engagement reduces participatory inputs into the design and planning of public services, including those focused on human development. For example, despite the abundance of data collected in the education sector, none is used to engage with parents. Innovative data collection methods were introduced to gather feedback during the height of the COVID-19 pandemic, such as high frequency phone surveys. Such tools could collect real-time user feedback to gauge citizen satisfaction with services.

Improving human development outcomes will require collaboration across ministries and a culture of data usage and digital literacy. For example, the lack of integration between and across various management information systems is a major impediment to taking a whole-of-government approach to improving human capital outcomes. The absence of a national interoperability framework to support the country's digital platforms and data exchange limits the connectedness required to achieve optimal results.⁹⁴ To address this, cross-sectoral steering committees should be established, including representatives from key sectors with sufficient power to balance political pressures. These committees can coordinate joint strategies to respond to the human capital crisis and manage shared databases that multiple programs can use to identify and target affected populations rapidly with appropriate programs. The use of shared data platforms and technology can also bolster coordination across different stakeholders and agencies and facilitate joint decision-making. Such initiatives can enhance collaboration and improve the overall effectiveness of evidence-based policies aimed at promoting human development outcomes in The Gambia.

Figure 35: An integrated human development system



Source: Schady et al. (2023)

Human development systems that integrate policies and activities across social sectors are more impactful. Human development is by nature multisectoral. Figure 35 illustrates the coordination required between different sectors and programs to increase the impact on beneficiaries.

⁹⁴ In February 2020, the Cabinet approved a Data Protection and Privacy Policy and Strategy, and the Ministry of Information and Communication Infrastructure has drafted related legislation, pending enactment.

E. Main actions for human capital across the life cycle





Main messages

- Human capital development requires a whole-of-government and a whole-of-World-Bank approach with strong collaboration between ministries and global practices inside and outside of the human development sectors.
- Priority actions should aim to build human capital throughout the life cycle, utilize it fully in the economy and society, and protect it so that individuals are safe, healthy, and able to reach their full potential, free from violence, discrimination, or other forms of harm.
- Data is useful to track human capital outcomes. The Gambia collects an abundance of data but needs to improve its utilization.

To ensure human development across the life cycle, priority actions are needed to build, utilize, and protect human capital in the Gambia. These priority actions are summarized in Table 4. Building human capital involves investing in education, health, and other essential services that help individuals develop the knowledge, skills, and abilities needed to contribute to their societies. Utilizing human capital involves creating an environment that enables people to participate fully in the economy and society. Protecting human capital involves ensuring that individuals are safe, healthy, and able to reach their full potential, free from violence, discrimination, or other forms of harm. Human capital development requires a whole-of-government

and a whole-of-World-Bank approach with strong collaboration between ministries and global practices outside of the human development sectors. For example, strengthening access to (social) service points might require collaboration and coordination between education or health and at least the following sectors: infrastructure (rehabilitating roads or offering transport), governance (strengthening citizens' ability to report on access issues), and gender (addressing fears related to journey to access point). Similarly, improving access to market would require involving social protection and jobs, agriculture, infrastructure, and finance, competitiveness, and innovation sectors.

Table 4: Summary of priority actions for human capital across the life cycle

	 Early years	 Childhood	 Youth	 Working age	Data
BUILD	Increase the quantity and quality of childcare options Increase knowledge of caregivers	Increase teachers' content knowledge, and pedagogical skills Improve teaching practices	Diversify the supply of skills available in the economy Strengthen quality and diversity of TEVT courses Decentralize availability of TVET and other services	Adult learning	Create a culture of data usage Interoperability of MIS (e.g., link MoBSE + MoHERST EMIS + GamSR to target vulnerable children)
	Enforce existing child protection legislation (child marriage and child labor) Increase coverage of social safety nets, roll out to urban poor Increase knowledge and skills of health care providers Roll-out of national health insurance				
UTILIZE			Create a thriving business ecosystem <ul style="list-style-type: none"> ○ Lower cost and improve accessibility of registering a business ○ Strengthen financial infrastructure, especially for MSMEs ○ Increase financial information ○ Offer start-up capital and life skills training for young entrepreneurs and support growth of businesses by focusing on managerial skills—but “not everyone is an entrepreneur” Increase access to labor market and higher quality jobs Strengthen caregiving profession to expand work opportunities for women Promote productive informal sector jobs Promote migration to secondary urban centers		Use information on labor market needs to determine TVET course content; strengthen labor market information system
			Remove legal barriers preventing women from accessing justice and improve their access to productive assets		
PROTECT	Expand health insurance to protect households from health expenditures which can push them into poverty Develop social insurance options for informal workers ('missing middle') Support shock-responsiveness of SP system to be able to react to climate and other shocks (e.g., floods, pandemic) Ensure gender-sensitive nature of ASP Digital payment solutions for social assistance Digital health tools and preparedness plans Distance learning tools in education and preparedness plans				Interoperability of MIS (e.g., link GamSR with health insurance data to target vulnerable populations)

Build

The early years lay the foundation for lifelong outcomes. Investments in the early years are generally thought to have the highest return on investment (see for example Heckman and LaFontaine 2007). It is therefore crucial to continue supporting the development of young children through both direct and indirect investments in their caregiver's well-being and knowledge as well as to effectively enforce legislation protecting children (and particularly girls).

There is a need to increase the quantity and quality of childcare options available. Quality childcare contributes not just to the cognitive and socioemotional development of children, but also allows mothers to participate in the labor market. However, further evidence is needed on how quality childcare can be expanded. A recent evaluation of increasing access to childcare services and strengthening the quality of childcare services found that neither intervention had an impact on average child development outcomes (Blimpo et al. 2022). The lack of impact could be due to a high student-teacher ratio across both interventions and a focus on relatively short-term impacts; nevertheless, more evidence is needed to better understand how to provide childcare services at scale (and if services, for example, need to be combined with health or nutrition elements to be effective, see Bernal and Ramirez 2019).

As most children are cared for outside of formal childcare centers, the knowledge of caregivers needs to be strengthened. The Playful Parenting intervention introduced caregivers to toy making using locally available materials and singing for their children, both of which were stimulating for the target children. A recent evaluation of that program has shown that it helps reduce parenting stress and increase parental confidence, leading to better parent-child interactions and more positive child outcomes (Odhiambo 2022). The intervention enhanced caregiver knowledge and skills and improved male participation in childcare and men's involvement in playing

with children. The intervention was implemented as part of the broader SBCC program under the Nafa cash transfer in the poorest district of the Gambia. Replicating the intervention in additional districts would provide evidence of its scalability.

Enforcing existing child protection legislation is needed to ensure that harmful practices such as child labor and child marriage are reduced. Girls are affected by harmful practices such as FGM and child marriage, with severe consequences for their human capital development, beginning with health impacts (trauma, serious illness, even death) and lifelong consequences for educational attainment (the physical scars of FGM severely affect the ability of girls to go to school). Child marriage has similar impacts. Women who have been mutilated and/or have early pregnancies due to child marriage face higher rates of maternal mortality and their children face higher rates of infant mortality. It is therefore of utmost importance that existing legislation prohibiting child marriage and child labor be enforced effectively.

The coverage of social safety nets needs to be expanded to continue strengthening human capital formation of children and vulnerable populations. Social safety nets have been shown to have long lasting impacts on human capital accumulation. Safety nets that combine cash transfers with SBCC have been successful in improving household income and (childhood) nutritional outcomes, including dietary diversity (for example, see Maffioli et al. 2023). If the flagship safety net program, the Nafa program, were extended into urban areas to cover the urban poor, it could be fairly described as a truly national safety net program. It will also help close the large economic regional disparities that persist. This recommendation is particularly pertinent given the challenges introduced by the war in Ukraine. The resulting spillover effects on global supply chains and rising (food) prices have an outsized effect on the poorest who spend over 60 percent of their income on food items. As a result, poor households might engage in negative coping strategies that

include disinvestments in human capital (for example, by taking children out of school). Expanding the coverage of social safety nets is thus necessary to strengthen human capital formation and protect households from disinvestments in human capital.

In the education sector, there is an urgent need to improve teacher quality, that is, a need to increase teachers' content knowledge, and pedagogical skills (among preservice and in-service teachers alike). A recent randomized controlled trial in two regions of the country showed that substantial improvements in teacher quality are possible through a multipronged approach that combined para-teachers, scripted lessons and materials, and frequent monitoring and coaching. After three academic years, children in treatment villages performed 46 percent better than children in the control group (Eble et al. 2021). MoBSE has recognized the merits of this intervention and expressed interest in integrating its "lessons learned" into the formal education system via structured pedagogy—however, it remains to be seen whether the success of the intervention can be reliably replicated at scale.

It is crucial to build on and expand recent successes in the education sector to ensure these gains are preserved in the long-term. The recent improvements in girls' education outcomes have been achieved thanks to policies and programs that actively sought to lower the costs of education, such as the President's Empowerment of Girls Education Project (PEGEP) and school improvement grants. Additionally, advocacy and awareness-raising activities have kept girls from entering into early marriage and dropping out of school. For teacher recruitment, it is important to incentivize bright and motivated students to enter the teaching profession. Based on data showing the relatively low proportion of qualified lower basic teachers in remote areas the government initiated allowances giving qualified teachers in remote areas a salary premium of about 40 percent, in addition to improved teacher accommodation. These measures will hopefully incentivize more qualified teachers to work in remote areas and

would contribute toward lowering regional inequalities in education.

The recent health insurance scheme provides an opportunity to strengthen the quality of care in the health sector. Postgraduate courses in select subject-areas were recently introduced for nurses. These investments in the human capital of frontline service deliverers together with the introduction of the health insurance and results-based financing are expected to improve the quality of care. Indeed, public insurers responsible for financing coverage expansions have the financial leverage to influence the quality of care (Mate et al. 2013). In the results-based financing model, health care centers that offer higher quality of service based on a checklist (which includes quality of health personnel) receive more funds. Likewise, more funds flow to centers that have a higher usage. As such, it is crucial to support the implementation and roll-out of the health insurance.

Investing in technical and vocational training can provide youth with the skills they need to find gainful employment, as long as the supply of skills meets the demands of the labor market. The Gambia can take advantage of its relatively small and new TVET system to introduce best practices from the start, which can be easier than having to reform a large existing system. TVET centers and courses should target training on jobs that will exist and should only be expanded when quality and relevance can be ensured. Given the lack of knowledge on the effectiveness of existing interventions in The Gambia, ensuring quality necessitates strong monitoring and evaluation frameworks to identify what works and what does not. Strong engagement with employers, from governance to design and delivery, will ensure that the skills produced meet employers' needs and can exploit complementarities between training centers and employers, for example, through the creation of internships and apprenticeships. It is crucial to ensure the certification of skills acquired through TVET to allow youth to signal their abilities on the labor market.⁹⁵

⁹⁵ The literature has shown the value of certification in signaling skills;

Finally, particular attention must be paid to gender-specific barriers and vulnerable groups, to ensure that the opportunities provided reach all youth. This also extends to spatial inequalities: decentralizing the availability of TVET can promote equitable access to and improve the quality and relevance of TVET.

There is a need to decentralize service delivery further to close the large regional inequalities in economic and human capital outcomes. Given that migration within LGAs is more common than migration across LGAs in The Gambia, investing in decentralized services in headquarters of rural LGAs could help improve access to services and thus help reduce rural poverty and inequality. Strengthening rural institutions to enhance service delivery and increase economic opportunities—especially in and around the LGA headquarters—may help improve the wellbeing of rural households, reduce unequal access to basic services, and increase incentives for investments in rural areas.

Data can help build human capital

The Gambia needs to create a culture of data usage so that data collection efforts genuinely support programs and deliver results. Linking various data management systems (such as at MoBSE and MoHERST, EMIS, GamSR, eCRVS), will allow for better targeting and just-in-time assistance to the population. By promoting the timely availability and use of credible, relevant data, it will allow evidence-based decision-making across the government agencies. Currently, there are two education management information systems, which do not link to each other nor to a human resources MIS. Linking these databases would support teacher deployment and management. Additionally, harmonizing the definitions of education categories across GBoS and the education ministries would allow for better utilization of household data in the formulation of education policies. In the health sector, the Government has launched the National Identification card and a digital Civil

Registry and Vital Statistics database (eCRVS). Linking these systems to the GamSR would allow it to capture changes in household size and structure in real time, keeping its basic records up to date. There will still need to be periodic surveys or on-demand service centers allowing households to update the full socioeconomic data associated with each household.

Service delivery score cards can support citizen engagement and allow government to identify specific service delivery bottlenecks. Sector-specific reports providing information at local levels for human development sectors, including budgets, sectoral performance indicators, and citizen satisfaction, would make use of the wealth of data collected and would strengthen accountability for service delivery.

Utilize

Managerial skills and start-up capital can be offered to young graduates to support their entrepreneurship ideas. Although youth increasingly view entrepreneurship as a viable option to support themselves and their families, they typically lack the funds to start a business. For example, TVET graduates often cannot afford the equipment they need to work independently. Interviews with stakeholders and employers also highlighted the importance of soft or “life skills” to enhance the employability of graduates (CRPD 2022). Such skills could be integrated into technical courses, and a small entrepreneurship grant could be offered competitively to a selected sample of postsecondary graduates.

However, “not everyone is an entrepreneur”, and the focus on entrepreneurship should not detract from the need “to build companies and industries that create jobs.”⁹⁶ Youth typically see entrepreneurship as self-employment, as opposed to an opportunity to create employment for others. It is vital to create a

see, for example, Alfonsi et al. (2020) on the labor market outcomes among graduates of (certified) vocational training and (uncertified) firm-provided training.

⁹⁶ Interview with a representative of the National Youth Council, The Gambia, October 2022.

thriving business ecosystem that would not only facilitate enterprise creation but support the scale-up of successful ventures. This can be achieved by decreasing the cost and complexity of business registration, simplifying business taxation procedures, and strengthening the financial infrastructure, especially for MSMEs. Increasing entrepreneurs' financial literacy and access to information on financing opportunities is also crucial to allow small informal business to grow. Investments in digital infrastructure would improve the efficiency of existing enterprises, especially those in the tourism and digital business sectors, which have a high potential for growth.

Promoting the productivity of the informal sector can provide employment opportunities beyond self-employment. The informal sector accounts for most employment in The Gambia. Some, particularly large and established informal firms, have the capacity to formalize and should be incentivized to do so. Others, such as subsistence businesses, or start-ups are unlikely to join the formal sector. Instead, the focus should be on growing informal sector firms and supporting them in becoming more productive, recognizing that the informal sector can play an incubator role for the creation of new enterprises. Strategies toward increasing the productivity of informal firms would depend on the characteristics of the firms. Among subsistence business, productivity enhancing measures, such as those provided by productive economic inclusion programs could tackle some of their constraints. Businesses with growth potential might benefit from consulting services on technical and managerial aspects (financial and administrative, human resources); the provision of matching grants; or facilitation of connection to higher value markets. Incentivizing collaboration between firms could further lead to efficiency gains.⁹⁷ Household enterprises in the agricultural sector could benefit from interventions such as land registration and titling, vouchers to the poor or

youth to buy agricultural inputs, or cash transfers to the most vulnerable combined with productive inclusion measures to enhance their productivity and earnings.

However, an increase in (wage) jobs will not occur without addressing some of the structural problems that the Gambian economy faces. These include weak labor demand in most sectors, low and declining agricultural productivity, and a lack of manufacturing and skilled service jobs. Only few sectors have been able to increase value addition by connecting to interregional or global markets and producing at a larger scale. Tourism was for some years an exceptional and thriving example, but the sector was decimated during the COVID-19 pandemic and will play a key role for employment recovery (World Bank 2022). The large regional disparities, whereby LGAs farthest from the Greater Banjul Area lag behind in terms of employment and economic opportunities, must also be addressed.

Migration can be leveraged as a powerful force for development by encouraging workers to find better opportunities within The Gambia, and providing realistic avenues for legal international migration. Decentralization and investment into urban areas outside of the GBA can promote internal migration from rural to secondary urban centers, allowing workers to benefit from greater opportunities without further deepening inequalities between the interior and the GBA. Investment into employment-relevant skills, such as TVET, can provide youth with labor opportunities inside The Gambia, as long as the training offered is designed to meet private sector needs. Providing realistic avenues for legal migration can help reduce the need for young Gambians to put themselves in the hands of human traffickers (and thus reduce the economic and human toll of 'backway' migration). Concurrently, providing reintegration support to returnee migrants who were unsuccessful in their migration attempts—often trauma survivors now confronted by stigma—could help them become active and productive members of society and benefit the community more broadly.

⁹⁷ Bassi et al. (2022) highlight the importance of firm-to-firm interactions in understanding technology adoption and firm growth through the example of an active rental market for large machines between small firms in informal clusters in Uganda.

There is a need to create and expand opportunities for women in the labor market. Although women are accumulating more human capital than men, they are more likely than men to be out of the labor force or in lower-quality jobs. Women’s share of full-time workers in the formal sector is below the Sub-Saharan African average.⁹⁸ This underutilization of half the population’s human capital constitutes a missed opportunity for growth. Women face specific constraints, such as childcare, which, if tackled more holistically could actually increase their access to the labor market and productive employment. For example, strengthening the caregiving profession could not only free up women’s time to engage productively in the labor market, but would also expand work opportunities for women as childcare providers. Scaling-up existing programs that promote women’s economic inclusion offers opportunities to reach those who are more vulnerable. In doing so, it is crucial to provide an initial capital grant that is sufficient to allow vulnerable women to overcome their poverty trap.

To allow women to achieve their full potential, the legal system must be reformed to better protect women’s rights, both *de jure* and *de facto*. Resolving the contradictions within the pluralistic legal system would provide improved women’s access to productive assets (such as land) in cases of inheritance, divorce, or separation, and thus allow them to benefit from better employment opportunities (see Annex 2). Only eight percent of women own land (either alone and/or jointly), as opposed to 30 percent of men (DHS 2019–20). Additionally, efforts to change the norms around FGM and GBV must be actively pursued. The macroeconomic losses resulting from GBV are huge: in Ghana, it is estimated that the national loss in productivity through missing work and/or being less productive due to GBV was equivalent to 4.5 percent of all women in effect not working (Duvvury et al. 2021). Improving women’s access to justice, strengthening the implementation of the law,

and concurrently shifting social norms around practices harmful to women, would enable women to fully utilize their human capital and maximize their potential.

Data can help utilize human capital

Data on employers’ needs for skills is limited.

The latest enterprise survey was conducted in 2018; as in most countries, the enterprise survey covered formal sector, nonagricultural firms with at least five workers. In addition to being outdated, the narrow focus of the enterprise survey also excludes most workers and firms in The Gambia. The NAQAA should commission enterprise surveys on a regular basis to assess labor market needs and skills shortages. In addition, specific informal sector surveys of MSMEs would offer a more holistic view of the Gambian labor market. It would further enable an understanding of the diverse nature of informal businesses (comprising, for example, subsistence businesses, start-ups with low levels of productivity but a high growth potential, or larger, established informal firms) and the development of targeted policy options.

Setting up labor market information systems and using them to design youth training programs could bridge the gap between the supply of and demand for skills, thus improving the employability of young graduates and boosting their productivity. Currently, data on skills gaps and mismatches is limited. It is not collected structurally, or comprehensively. The MoTIE has developed a Labour Market and Migration Information System; as of February 2023 it was not yet functional because indicators were being developed and finalized. MoTIE’s new Employment Policy also includes the creation of a tripartite body constituting government, academia, and industry, to audit training and industry needs, which is an important step in ensuring coordination across the education and training entities supplying the skills, and the private sector institutions demanding those skills. In TVET, sector skills councils are being piloted in the construction, agro-processing, and ICT sectors. Their envisaged role is, among others, to articulate skill

⁹⁸ Only 19.8 percent of full-time employees in formal firms in The Gambia are female, compared to 26.9 percent across Sub-Saharan Africa (World Bank 2018).

demand and support the development of relevant qualifications, linking the demand for and supply of skills.

These labor market information systems could be further strengthened by linking them to data on graduates, for example through tracer studies. Although MoHERST is currently working to improve data collection at central and institution level, the lack of data on graduates' transition from school to work and the lack of clear linkages between institutions and industry remain a challenge. Collecting this data would enable policy makers to assess the relevance of training programs, improve their effectiveness, and allow for potential reskilling programs to address labor gaps. It would also lead to an improved understanding of student demand and regional variations in skills development needs.

Democratizing data can lead to better-formed insights into key development challenges in a cost-effective way. Despite the depth and breadth of data collected by government agencies, few stakeholders actively utilize it, due to low capacity, lack of coordination or clear mandates across institutions, and lack of access by nongovernment stakeholders. Providing access to integrated administrative data to practitioners, academics, and others would allow for technical analysis conducted directly by multiple parties, thus improving capacity and leveraging external expertise at little extra cost. Research conferences and symposiums could be organized to facilitate exchanges between academics and policy makers. For example, Sierra Leone has a model whereby data scientists from their Directorate of Science Technology and Innovation use predictive analysis, data visualization, and machine learning to analyze administrative data. Such efforts require greater government-wide investment in developing statistical capacity and data-sharing protocols.

become increasingly important in education during the COVID-19 pandemic, highlighting the need for preparedness plans that include access to digital tools for remote learning. Similarly, digital health tools have played a significant role in providing health care services remotely, especially in areas with limited health care resources. Additionally, digital payment solutions for social assistance programs have been important in ensuring that those in need receive timely support.

Insurance mechanisms can support households' resilience to individual shocks. Costs related to health shocks can push households into poverty (Wagstaff et al. 2017) or force them to engage in negative coping mechanisms, with potentially long-lasting and intergenerational impacts on human capital accumulation. Negative coping mechanisms include taking children out of school or reducing nutritional intake or diversity to cope with the financial burden. In principle, the health insurance plan for the Gambia is the solution to these problems. It provides contribution-free access for vulnerable groups, such as people classified as 'indigent', or pensioners, and free prenatal, delivery, and postnatal visits for mothers and babies. Going forward, it will be important to assure that the health insurance successfully covers not only those who are in poverty, but also those who are vulnerable, and therefore at risk of falling into poverty because of a health shock. Relatedly, insurance mechanisms should reach all areas of the country to lower regional inequalities. Linking the health insurance MIS and the GamSR further offers opportunities to refine the targeting mechanisms that determine who receives contribution-free access.

Many of those who derive their income from the informal sector are invisible to the current social protection system. They are neither poor nor enrolled in the social protection schemes offered by formal employment. This makes them highly vulnerable to shocks. Social insurance schemes for these households, the 'missing middle' of social protection, are currently being piloted in other countries (such as Ghana or Benin). The pilots show a way forward to the protection of

Protect

Building resilience in social sectors is crucial in ensuring the well-being of individuals and communities. Distance learning tools have

workers, entailing voluntary savings schemes for those with the resources to contribute, or noncontributory social health insurance or shock-responsive safety nets for those who cannot.

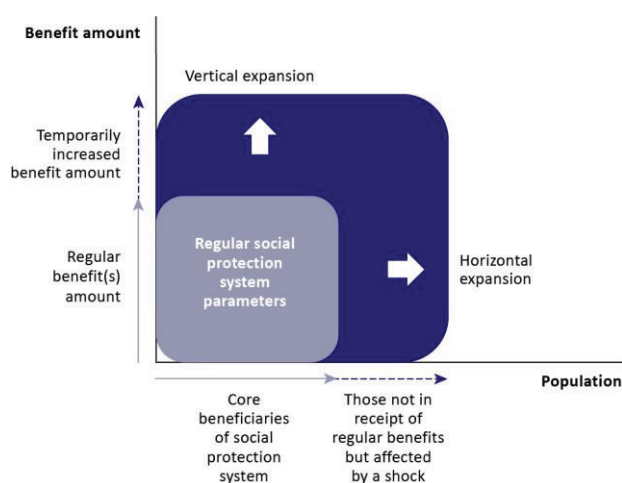
Adaptive social protection supports households face unexpected shocks that affect a wider range of populations. Adaptive social protection (ASP) has emerged as a major approach in the field of social protection, and it involves building the resilience of poor and vulnerable households and responding to shocks. A household’s vulnerability to poverty depends on the shocks it experiences (including weather-related or climate-induced shocks) and its ability to cope after the occurrence of the shock (for example by using savings, assets, or social capital). Although many shocks cannot be prevented, their effect can be minimized if there is sufficient preparedness to act early and provide timely and well-targeted support. The ability to act in a timely manner can also be significantly more cost-effective in building household resilience than the provision of ongoing humanitarian assistance (Cabot Venton 2018). Safety net programs and systems are increasingly becoming adaptive by developing the capacity to “scale up and out” in times of shock, through tools that allow the programs to expand in two possible ways (Figure 36):

- Vertical expansion of an existing program, involving a temporary increase in the benefit value or duration of the program for some or all existing recipients. New components may also be added.
- Horizontal expansion of an existing program, involving the temporary inclusion of new beneficiaries from affected communities that have become transitorily poor or vulnerable.

Scaling-up the Nafa social safety net program will be an important step in supporting and protecting the poorest. The recent increases in food prices due to the war in Ukraine and related supply chain challenges hit the poorest hardest. In response, one could imagine both a vertical expansion (increasing the benefit level

of current beneficiaries to keep the real value of the transfer constant) as well as a horizontal expansion of the Nafa social safety net program (that is, enrolling new beneficiaries that have become poor and vulnerable due to the higher food prices). Nafa should further expand into urban areas, which are subject to lower poverty rates, but house significant poor populations, to make it an effective program in reducing poverty, protecting human capital and increasing resilience.

Figure 36: Vertical and horizontal expansions of social safety net programs



Source: Bowen et al. 2020

Rolling-out an adaptive social protection system requires close collaboration between the social protection and disaster risk management agencies. In The Gambia, the mandate for disaster response falls under the National Disaster Management Agency (NDMA). The Gambia is currently undertaking an update of its disaster-risk management and financing strategies: a perfect opportunity to strengthen the institutional and operational aspects and developing a roadmap for an adaptive social protection system. This includes strong coordination between NSPS and NDMA and integrating this coordination into policies, strategies, and contingency plans to develop conducive systems, common approaches, and standard procedures in disaster responses. The GamSR will play a unique role in facilitating targeting for regular support to the poorest and most vulnerable as well as a shock-responsive

social protection program. Institutionalizing the GamSR is crucial as are procedures for regular updating of its data base to ensure that it remains a valid base for targeting.

Finally, ASP needs to be sensitive to the needs of women and girls. Women are overrepresented in farming and therefore particularly affected by climate change. Women are less likely to access information on disaster preparedness and on evacuation and are underrepresented in disaster risk management (World Bank 2021e). This means that women's specific needs and concerns might not be properly considered. During natural disasters, for example, the risk of GBV might discourage women from seeking shelter during natural disasters. Then in the wake of disasters, women experience an increased burden of domestic work and heightened risks of GBV (Erman et al. 2021). Gender-sensitive ASP requires a vulnerability and capacity assessment to evaluate the exposure and resilience of different communities, followed by the application of frameworks for gender-responsive social protection (UN Women 2021).

Data can help protect human capital

Interoperability between information systems facilitates the identification of those affected by shocks and improves the delivery of social interventions. Social registries, that is information systems that support outreach, intake, registration, and determination of potential eligibility for one or more social programs, have both a social policy role, as inclusion systems, and an operational role, as information systems. To enable their role as coordination platform, the data must be sufficiently granular and up to date to underpin predictive accuracy. Over time, wealth approximations in the social registry are likely to become outdated, and the registry may fail to reflect population movements or changes in contact details. Integrating the GamSR with the eCRVS offers a great opportunity for updating demographic information. Integrating the GamSR and the health insurance system allows for the targeting of vulnerable individuals.

Additionally, harmonizing GRM mechanisms across sectors would improve their efficiency and the delivery of social services.

Table 5 presents the proposed lead agencies and the timeframe for implementation for the suggested priority actions. 'Lead agency' here simply refers to the agency that would be in charge of pushing for the policy change; it does not connote sole implementing agency, because, as clearly highlighted in this report, cross-sectoral collaboration is required, not only between agencies but also with the private sector and nongovernmental organizations. The suggested timeframe for implementation recognizes the perceived urgency of the reform, its potential impact, and the fiscal implications, where feasible. For example, informational actions such as increasing financial information will be cheaper, while others might require larger interventions including the purchase of materials (for example, the estimated fiscal implications of the actions under the data section are estimated at around US\$ 20 million).⁹⁹ The recommendations do however imply increased financing for human development sectors.

⁹⁹ World Bank Staff estimates for the proposed The Gambia Public Administration Modernization Project (P176924).

Table 5: Agencies concerned and priority for implementation of recommendations

	Priority action	Proposed lead agency	Timeframe for implementation
BUILD	Increase the quantity and quality of childcare options Increase knowledge of caregivers	MoBSE NAQAA for licensing	Short term (1–2 years)
	Increase teachers’ content knowledge, and pedagogical skills; Improve teaching practices	MoBSE for in-service MoHERST for pre-service	Immediate
	Diversify the supply of skills available in the economy Strengthen quality and diversity of TVET courses Decentralize availability of TVET and other services	MoHERST, in collaboration with others such as MoTIE, MoBSE	Short term (1–2 years)
	Adult learning	MoBSE and MoHERST	Medium term (3–5 years)
	Enforce existing child protection legislation (child marriage and child labor)	MoGCSW	Immediate
	Increase coverage of social safety nets, roll out to urban poor	NSPS in collaboration with others such as NaNA	Short-term (1–2 years)
	Increase knowledge and skills of health care providers Roll out national health insurance	MoH	Immediate
UTILIZE	Create a thriving business ecosystem: – Lower cost and improve accessibility of registering a business – Strengthen financial infrastructure, especially for MSMEs – Increase financial information – Offer start-up capital and life skills training for young entrepreneurs and support growth of businesses by focusing on managerial skills	MoTIE	Short-term and Medium term
	Strengthen caregiving profession to expand work opportunities for women	MoGCSW	Short term (1–2 years)
	Promote productive informal sector jobs	MoTIE	Medium term (3–5 years)
	Promote migration to secondary urban centers	MoLGL and LGA councils	Medium term (3–5 years)
	Remove legal barriers preventing women from accessing justice and improve their access to productive assets	MoGCSW	Short-term (1–2 years)
PROTECT	Support shock-responsiveness of SP system to be able to react to climate and other shocks (e.g., floods, pandemic) and ensure gender-sensitive nature of ASP	NSPS and NDMA	Short term (1–2 years)
	Develop social insurance options for informal workers (‘missing middle’)	NSPS	Medium term (3–5 years)
DATA	Create a culture of data usage	MPA in conjunction with key stakeholders, such as GBoS	Short-term (1–2 years)
	Interoperability of MIS	MPA in conjunction with other Ministries	Short-term (1–2 years)

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Annex 1: Description of surveys and additional tables and figures

Description of the main surveys used for data analysis

Integrated Household Survey (IHS 2020): The 2020 Integrated Household Survey was collected between February 2020 and January 2021 in order to measure poverty and other socio-economic characteristics of the population. The IHS was collected over a period of 12 months to capture the effect of seasonality on the income and expenditure of households. The sampling frame was based on the 2013 population census and population projections. A total of about 13,488 households were surveyed. The IHS data is representative of the population- as well as at LGA, and district levels. The main respondent is mostly the household head.

Demographic and Health Surveys (DHS, 2013 and 2019/20): The DHS collects data on basic demographic and health indicators. The sample is representative at the national level, as well as urban and rural areas, and the 8 Local Government Areas (LGAs) of The Gambia. The 2013 and 2019/20 DHS were the first and second DHS surveys conducted in The Gambia, respectively. The surveys were implemented by the Gambia Bureau of Statistics (GBoS). Fieldwork was conducted between February and April 2013, and between November 2019 and March 2020. In 2013, the survey covered 10,233 women ages 15-49 and 3,821 men age 15-59. In 2019-20, a total of 11,865 women ages 15-49 and 4,636 men age 15-59 were interviewed.

Gambia Labor Force Survey (GLFS, 2018): The GLFS was conducted by GBoS between July and September 2018. The objective of the survey was to collect labor market information and other socioeconomic data to inform evidence-based policy making. The survey used the 2013 census to sample 6,260 households across the county. The survey collected information about internal and international migration, household characteristics, and employment outcomes of individuals 15 years and above from each household.

High Frequency Phone Survey (HFPS, 2020/21): The HFPS survey, collected between August 2020 and December 2021, was implemented to monitor the impact of the COVID-19 pandemic on households across the country. A sample of 1,500 households was drawn from the 2018 Gambia Labor Force Survey (GLFS). The HFPS is representative at national level as well as at the three strata: Banjul and Kanifing, other urban areas and rural areas. In each household, the most knowledgeable household (typically the household head) was interviewed via phone call. The survey collected data on different topics across ten waves. Topics included employment, knowledge about COVID-19, income, access to basic services, household wellbeing, food security, social cohesion, coping and social safety, remittances and social assistance, housing, vaccine, poverty, COVID-19 effects on children, climate events and agriculture.

Additional figures and tables

Figure A. 1: Neonatal mortality by LGA

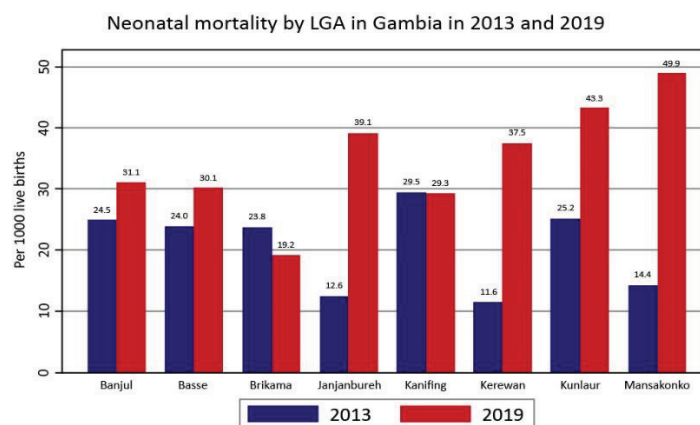


Figure A. 2: Educational attainment by sex and level of education

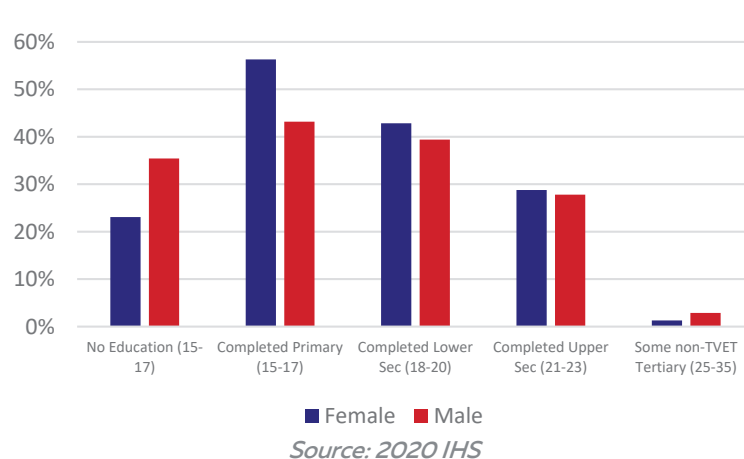


Table A. 1: Senior Secondary gross enrollment rate and completion rates

LGA	Senior Secondary	
	GER	CR
Banjul/Kanifing	100.1	83.2%
Brikama	58.8%	48%
Kerewan	30.7%	27.7%
Mansakonko	42.7%	36.5%
Janjabureh/Kuntaur	32.2%	26.4%
Basse	13.7%	9.7%
National	52.7%	44.1%

Source: MoBSE

Table A. 2: Main occupation, share of working-age adults (15-64)

	All	Females	Males
Employed	49.3%	42.9%	57.1%
<i>wage-employed</i>	17.3%	8.1%	28.4%
<i>self-employed (incl. employers, own-account workers, commercial farmers)</i>	18.6%	16.1%	21.7%
<i>contributing family workers (unpaid)</i>	12.9%	18.3%	6.4%
Unemployed	14%	1.2%	1.7%
Out of labor force	49.2%	55.9%	41.2%
<i>subsistence farmers</i>	12.0%	11.9%	12.2%
<i>in education</i>	12.8%	12.7%	12.9%
<i>homemaker</i>	9.3%	16.9%	0.1%
<i>no chance to get a job</i>	3.0%	2.8%	3.3%
<i>waiting for busy season</i>	6.2%	5.8%	6.7%
<i>other reason</i>	5.9%	5.8%	6.0%

Source: authors' calculations using 2020 IHS.

Table A. 3: Social Assistance support by institution, sector, mode of delivery, and source of funding

Institution	Sector of Intervention	Mode of Delivery	Source of Funding
MoBSE (School Feeding Program)	Education	In- Kind Support	Government of The Gambia
DSW (Family Strengthening)	Livelihood Support	Cash Delivery	Government of The Gambia
MoA (RVCTP)	Agriculture	In- Kind Support	African Development Bank and Government of The Gambia
MoA (ROOTS)	Agriculture	In-Kind and Cash Transfer	International Fund for Agricultural Development Rural Poor Stimulus Facility 1
MoA (Input Subsidy)	Agriculture	In-Kind Support	Government of The Gambia
MoA (SRPEP)	Agriculture	Fund transfer	Islamic Development Bank and Government of The Gambia
NaNA (Nafa program)	Livelihood Support	Cash Transfer	World Bank and Government of The Gambia
DSPD (PACD)	Livelihood Support	In-Kind Support	Government of The Gambia
NAS	Health	In-Kind Support	Global Fund to Fight AIDS Tuberculosis and Malaria
GAFNA	Livelihood Education Gender	Cash Delivery	UNHCR
United Purpose	Agriculture	In- Kind Support	European Union
CRS	Health	In- Kind Support	Global Fund
SOS	Education Livelihood Health	Cash Delivery and In- Kind Support	German Federal Ministry, SOS Children's Villages UK, SOS Children's Villages Finland, SOS Children's Village International; European Union
ChildFund	Health Education Livelihood	Cash Delivery and In- Kind	Grants ChildFund Subsidy
HePDO	Health	In- Kind Support	Global Fund
Action Aid International	Livelihood	Cash Delivery	Child Sponsorship - CS
World Food Programme	Livelihood support (Disaster response)	Cash Transfer	ECOWAS
Food and Agriculture Organization	Agriculture	In- Kind Support	European Union
UNICEF	SP Coordination (NSPS)	Fund Transfer	UNICEF
World Bank	Livelihood support (NaNA) SP coordination (NSPS)	Fund Transfer	World Bank

Source: NSPS Annual report 2021

Notes: GoTG institutions are marked in **black**. NGOs are marked in **orange**. Development partners are marked in **blue**.

Table A. 4: The Human Capital Pillar of the NDP (2023–2027)

Outcomes	Programme Priorities
<p>Outcome 4.1: Equitable access to quality and relevant education for all</p>	<p>Basic and Secondary Education</p> <ul style="list-style-type: none"> • Equitable access to education, • Quality and relevance of all education and training programmes, • Research, innovation, and development, • ICT and TVET • Adult and non-formal education <p>Tertiary and Higher Education</p> <ul style="list-style-type: none"> • Equitable access and retention • Quality and relevance of all education and training programmes, • Research, innovation, and development, • STEM (Science, Technology, Engineering, and Medicine – including Agriculture) • TVET (Technical and Vocational Education and Training)
<p>Outcome 4.2: Quality, accessible and affordable health care services delivered for all.</p>	<ul style="list-style-type: none"> • Towards universal health coverage: quality and equitable essential health services for all • Financial risk protections and equity • Environment, health promotion and social determinants of health • Integrated health Information systems and research • Partnerships
<p>Outcome 4.3: Improved nutritional status of children under five years and women of child-bearing age is assured</p>	<ul style="list-style-type: none"> • Reduce stunting, wasting and obesity in children under 5 years old through improved nutritional and health interventions • Improve nutrition and health status of women of child-bearing age • Building resilience of poor/extremely poor households through social safety net programmes for improved food and nutrition security
<p>Outcome 4.4: Increased access to safe drinking water, proper sanitation and hygiene</p>	<ul style="list-style-type: none"> • Improve access to safe drinking water; • Improve access to sanitation facilities; and • Improve good hygiene practices.
<p>Outcome 4.5: Appropriate population policies and strategies to harness the demographic dividend</p>	<ul style="list-style-type: none"> • Accelerate the attainment of the demographic dividend • Integration of demographic variables into sectoral plans and policies for socio-economic development • Promote access to quality universal SRH services and information for all to make informed choices • Manage fertility for a meaningful age structure to address the dependency burden
<p>Outcome 4.6: Socioeconomic benefits of migration to national development enhanced and adverse consequence mitigated</p>	<ul style="list-style-type: none"> • Enhance the contribution of migrants and diasporas to national development and provision of consular, protection assistance and cooperation throughout the migration cycle • Manage borders in an integrated, secured and coordinated manner. • Prevent, combat and eradicate trafficking in persons and smuggling of migrants internationally • Minimize adverse drivers and structural factors contributing to irregular migration and enhance availability and flexibility of pathways for regular migrants. • Reduce rural urban migration through decentralization of basic and social amenities

Table A. 5: Suggested indicators for the evaluation of intermediate human capital outcomes
The recommended frequency for data collection is every 2-3 years.

INDICATOR	SOURCE	DATA AVAILABILITY
PHCPI access index (summary index of perceived financial and geographic barriers to access)	The data available via the PHCPI for the Gambia remain very limited.	Unavailable
Proportion of women of reproductive age (15-49) who have their need for family planning satisfied with modern methods.	Data for this indicator are available via the DHS survey. The latest DHS surveys date from 2019 –2020 and 2013.	Available
Percentage of pregnant women receiving all guideline-recommended actions during antenatal (prenatal) care visits (including iron-folic acid supplementation, immunizations, STI screening and advice on breastfeeding, complementary feeding and weight gain during pregnancy)	Data for this indicator are available via the DHS survey. The last DHS surveys date from 2019 –2020 and 2013.	Available
Proportion of births attended by skilled personnel	Data for this indicator are available via the DHS survey. The last DHS surveys date from 2019 –2020 and 2013.	Partially Available
Proportion of women receiving oxytocin within 1 min of birth of infant (denominator includes out-of-facility births).	Data for this indicator are not currently available in the Gambia but could be collected through surveys such as DHS.	Unavailable
Share of target population covered with all vaccines included in national program	Data for this indicator are available via the DHS survey. The last DHS surveys date from 2019 –2020 and 2013.	Partially Available
Proportion of children under 5 receiving appropriate Vitamin A supplementation	Data for this indicator are available via the DHS survey. The last DHS surveys date from 2019 –2020 and 2013.	Available
Percentage of women who receive appropriate routine cervical cancer screening	Data for this indicator are not currently available in the Gambia but could be collected through surveys such as DHS.	Unavailable
Prevalence of normal blood pressure, regardless of treatment status.	Only data on self-reported blood pressure are available from the DHS survey (2019- 2020).	Partially Available
Enrollment rate at preprimary level.	Data for this indicator are not currently available in the Gambia but could be collected through surveys such as DHS.	Unavailable
Enrollment rate at primary level	Data for this indicator are available through the DHS surveys and the IHS Survey.	Available
Drop-out rates at end of primary	Data for this indicator are available through the DHS surveys and the IHS Survey.	Available
Enrollment rate at secondary level	Data for this indicator are available through the DHS surveys and the IHS Survey.	Available
Foundational skills for children upon entering schools	Data for this indicator are available via the MICS survey. The last MICS surveys date from 2018 and 2011.	Available
Prevalence of early marriage	Data for this indicator are available through the DHS surveys and the IHS Survey.	Available
Prevalence of early pregnancy	Data for this indicator are available through the DHS surveys and the IHS Survey.	Available
Prevalence of violence (GBV, including violence by teenagers)	Data for this indicator are available via the DHS survey. The last DHS surveys date from 2019-2020 and 2013.	Available

Perceptions/awareness of parents and children on value of education.	Data for this indicator are not currently available in the Gambia but could be collected through surveys such as IHS	Unavailable
Percentage of children reading by age 10	Data for this indicator are available through the DHS surveys and the IHS Survey for self-reported data and EGRA and NAT for learning assessments.	Available
Drop-out rates at end of secondary	Data for this indicator are available via the MICS survey. The last MICS surveys date from 2018 and 2011.	Available
Percentage of children with disabilities currently excluded from the schooling system	Data for this indicator are partially available via the IHS survey. Indeed, these surveys have the capacity to disaggregate the results for persons with disabilities. However, data is rarely used and analyzed. The disability module could be added to the DHS survey. A census will be conducted in 2024.	Partially Available
Percentage of children not attending school	Data for this indicator are available through the IHS Survey.	Available
Incidence of child labor	Data for this indicator are available through the IHS 2020 Survey and LFS 2018 Survey.	Available
Learning gaps between majority and minority/indigenous children and between the bottom and top quintile I	Data for this indicator are partially available. The data by ethnicity can be disaggregated in the IHS, LFS and DHS surveys.	Partially Available
Coverage of the social registry, as measured by the share of the country's population covered, share of the bottom quintile covered, or share of the poor registered.	Data for this indicator are available.	Partially Available
Coverage of safety net programs, measured as share of population which benefits (or number of beneficiaries) and share of poor households (or households in the bottom quintile or bottom 2 quintiles) who are beneficiaries of programs).	The number of beneficiaries of some safety net programs is available through the Nafa MIS and GamSR.	Partially Available
Poverty impact of social safety nets, measured by the difference in pre- and post-transfer poverty incidence, poverty gap, and consumption of the poor.	Data for this indicator are not currently available. It could be simulated through with the IHS.	Partially Available
Coverage of labor market programs, measured by the number of beneficiaries of programs that foster the labor force participation or earnings of women and/or youth.	Data for this indicator are not currently available.	Unavailable
Coverage of shock-responsive social protection programs measured by the share of shock-affected poor and vulnerable households supported by programs during the most recent large-scale covariant shock	Data for this indicator are not currently available. Some data is available of the number of beneficiaries of shock-response transfers implemented by development partners.	Unavailable

Annex 2: A Review of the Legal Barriers to the Empowerment of Women and Youth

The Gambia has committed to implementing several global and continental conventions¹⁰⁰ and has enacted laws¹⁰¹ that support the growth and protect the human capital of its people. *De jure*, all Gambians enjoy equal rights and receive protection from several legislations. However, *de facto*, several systemic factors serve as barriers to the economic empowerment of vulnerable groups, especially women and children. Many provisions guaranteeing equal rights are subject to personal laws (customary and Shari'a laws), which weakens their applicability. Additionally, legal prohibitions alone are not sufficient to uphold equality due to entrenched patriarchal norms and beliefs, lack of institutional capacity, and vulnerable groups' limited knowledge of their rights.

A Pluralistic Legal System

The Gambian legal system is a tripartite system consisting of common law, customary law, and Islamic/Shari'a law. The common law mirrors the English legal tradition and deals with laws adopted by Parliament and interpreted and administered by the Judiciary. Customary and Shari'a law govern all matters relating to personal law, including marriage, divorce, inheritance, and general family matters. Customary law also governs land tenure and clan leadership and is administered by village councils (Dalton et al., 2020) or district tribunal (UN Women, 2020). Shari'a law, which has to some extent, displaced customary law, governs issues

relating to Muslim marriage, divorce, and inheritance. With over 95 percent of the Gambian population practicing Islam, over 90 percent of matters relating to family law are adjudicated in the Cadi or Islamic courts. Cadi courts and district tribunals are presided over by persons who may not be familiar with human rights norms and principles. As a result, court decisions tend to discriminate against women and girls.

Discrimination

The Gambian Constitution guarantees equality before the law and protects all persons from discrimination. However, this provision does not apply "with respect to adoption, marriage, divorce, burial, devolution of property on death or other matters of personal law" (Section (33) (5)).

Inheritance, marriage, divorce, and separation

The Women's Act (2010) guarantees a woman's right to inherit an equitable share of the property of her husband and parents, and stipulates that both men and women enjoy equitable rights in the case of separation, divorce, or annulment of marriage. Similarly, the Children's Act guarantees a child "reasonable provision out of the estate of a parent." However, in both Acts, these provisions are "subject to personal law," which is governed by customary and Shari'a law.

Parenthood and parental leave

The Labour Act (2007) prohibits the dismissal or disciplinary action against women due to pregnancy or having to take maternity leave. Maternity leave is also guaranteed by the Women's Act (2010); however, there are inconsistencies in the number of days each Act stipulates. The Labour Act provides 12 weeks of maternity leave for all women, while the Women's Act stipulates 6 months of maternity and 2 weeks of paternity leave. These provisions are most likely to be adhered to by formal businesses, and not necessarily businesses in the informal sector, where the majority of women (73.8 percent compared to 55.3 percent for men) in The Gambia are engaged. Additionally, there is

¹⁰⁰ These include, but are not limited to, the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), the Convention on the Rights of the Child (CRC), the Sustainable Development Goals, the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (the Maputo Protocol), the African Union Solemn Declaration on Gender Equity in Africa, the African Youth Charter, the Abolition of Forced Labour Convention, the Equal Remuneration Convention, and the Discrimination (Employment and Occupation) Convention.

¹⁰¹ These include, but are not limited to, 1997 Constitution, the Women's Act (2010), the Sexual Offences Act of 2013, the Domestic Violence Act of 2013, the Labour Act (2007), the Children's Act (2005), the Trafficking in Persons Act (2007), and the Tourism Offences Act (2003)

limited evidence regarding the enforcement of laws that prohibit disciplinary action against women due to pregnancy – both in the formal and informal sectors.

Unequal access to justice

Since the provisions guaranteeing equal rights are subject to personal law and most of the population practice Islam, most cases relating to family law are heard in Cadi (Islamic) courts. The Shari'a does not necessarily uphold the tenets of equality. For example, under the Cadi Courts, the evidence of one male is equivalent to that of two females. In the case of district tribunals, the adjudicators are usually male unless a local chief takes the initiative to have women appointed, which only happened in the district courts in Niamina East, Niamina Dankunku, and Niamina West (UN Women, 2020). Similarly, few women are in state institutions of justice. Out of the seven Supreme Court Judges, one (1) is female, while no woman heads a district tribunal (MoGCSW, 2019).

Domestic and sexual violence

The Domestic Violence Act (2013) seeks to provide protection for survivors of all forms of violence or abuse, including emotional, psychological, sexual, and verbal abuse, in current or previous relationships. The Act also guarantees survivors the freedom to settle domestic violence issues out of court. Most cases are resolved through alternative mechanisms because domestic violence is viewed as a private matter. While the option to resort to alternative mechanisms signals survivors' agency, it is also necessary to ensure that survivors can exercise this right voluntarily, free from societal pressures surrounding domestic violence.

The Sexual Offences Act (2013) was legislated to amend procedures and laws relating to rape and other sexual offences. Not only does the Act provide a broad definition of rape, but it also broadens the circumstances under which a person may be charged with it. However, the Act does not prohibit marital rape. This provision

contravenes global and continental conventions such as the CEDAW and the Maputo Protocol.

Education

The right to education is protected by Gambian law. The Constitution of The Gambia specifies that basic education shall be free, compulsory, and available to all, while secondary and higher education shall be made accessible to all. The Children's Act (2005) also guarantees the right of every child to free compulsory basic education. Despite these legal provisions, educational outcomes in The Gambia remain low, and 33.2 percent of youth (ages 15-24) have no education (IHS 2020).

Child marriage

The Gambia, through the 1997 Constitution¹ and the Children's Act (2005)², sets 18 years as the minimum age for marriage. The Children's Act (2005)² and Women's Act (2010)³ prohibit child marriage and also prohibit parents and guardians from withdrawing their wards (especially girls) from school to give the child in marriage. The Gambia has also ratified the Convention on the Rights of the Child and the Convention on the Elimination of all Forms of Discrimination against Women (CEDAW), which prohibit child marriage. Despite these legal provisions, a quarter of young women aged 20-24 married early: 17.5 percent were married between ages 15-18, and 5.6 percent married before age 15 (DHS 2019-20).

Early pregnancy

The Gambia's Women's Act (2010) prohibits the expulsion of girls from school on the grounds of pregnancy. Also, The Gambia adheres to a re-entry policy (2006 Re-entry Policy), which enables girls who dropped out of school due to pregnancy and/or marriage to return to school. Additionally, the Education Sector Policy (2016-2030) states, "the re-entry policy for girls who dropped out as a result of pregnancy and early marriage will be sustained" (MoBSE and MoHERST, 2017). Although schools do not ban pregnant

girls from attending school, the social stigma attached to early pregnancy renders this legal provision ineffective.

Child Labor

The Gambia's Labour Act (2007) sets the minimum work age at 18, in line with the requirement for countries to establish the minimum age for entry into work. In comparison, the ILO Convention No. 138 on Minimum Age (C138) recognizes 15 as the minimum age for work. Both the Children's Act (2005) and Labour Act (2007) prohibit child labor - children's engagement in economic activities that harm their health, safety, education, morals, or development (UNICEF, 2017). Under the Children's Act, the minimum age to start an apprenticeship is 12 years old. This is in accordance with the provision in C138, which permits light work (i.e., work that does not interfere with children's schooling or their ability to benefit from it and that is not harmful) (ILO, 2018) for children younger than the minimum age for work. Despite these provisions, children in The Gambia between ages 5 – 17 experience some form of child labor, which is slightly more prevalent among girls than boys.

Recommendations

The Gambia's current legal system could be strengthened to better protect women and young people's access to education, health, and justice, both *de jure* and in practice. The following are some proposals for the amendment of some provisions in the reviewed legal instruments:

- Harmonize national legislation, including the Women's Act, Shari'a and customary law, by repealing all discriminatory provisions to ensure equal rights for children, women, and men in all areas of life
- Include and criminalize marital rape as a form of rape in the Sexual Offences Act (2013)
- Address discrimination against children born outside marriage (Children's Act, 2005)
- Harmonize the legislation on maternity leave in the Labour Act (2007) and Women's Act (2010)
- Advocate for improved access to land ownership to promote equality and ensure equal benefit
- Promote equal representation in matters adjudicated by district tribunals
- Enact legislation on sexual harassment in employment
- Enact legislation to mandate equal remuneration for work of equal value

Additionally, policies and programs should raise awareness of the negative impacts of entrenched socio-cultural norms, such as child marriage, on women and children. It is also crucial to improve vulnerable groups' awareness of their rights and concurrently improve institutional capacity so that they may exercise these rights.

Annex 3: A Review of Policies and Programs Pertaining to Human Capital in The Gambia

Summary

Children born in The Gambia are currently expected to reach less than half of their future productive potential. What opportunities exist to further strengthen and protect human capital within The Gambia?

This policy brief details the findings of a stock-taking activity of human capital measures in The Gambia conducted for the purposes of this review. Importantly, this document highlights opportunities to strengthen human capital throughout the life cycle, fostering economic development. We review existing policies and programs examined through interviews with key stakeholders in the public, private, and non-profit sector, highlight challenges in program design, implementation, and assessment, and provide recommendations to further strengthen and protect human capital in The Gambia.

1. Methods: Stock Taking Activities and Interviews

After identifying a comprehensive list of policies and programs on human capital development in The Gambia in the last 5 years through desk research, 39 individuals associated with these programs and policies were initially identified for interviews. The list of policies and programs was expanded as more programs were identified throughout the interviews. To represent the diversity of actors in human capital development, six of the identified interviewees were from ministries, nine were from autonomous or semi-autonomous state institutions, one interviewee was affiliated with a municipality, and the remaining were from the private and non-profit sectors. In total 33 individuals were interviewed, some of them being in the same organization. While most of the interviewees

are stationed or have their headquarters in the Greater Banjul Area (GBA), we also interviewed 3 stakeholders outside of the GBA, one from the Lower River Region, North Bank Region and West Coast Region.

A summary of all the programs reviewed is available upon request.

2. Existing Human Capital Measures

From the interviews, 52 programs and policies on health, education, social protection, jobs and employment were examined. While some of the programmes such as Fandema (2009) have been ongoing for over a decade, others such as the Youth Empowerment Project (YEP) are more recent (2018). Furthermore, although 40 of these programmes are still being implemented, 12 them have been completed. For many of the government-affiliated programs and policies, MOTIE, MoHERST, MoBSE and/or MOYS provide some oversight. However, for many programs/projects being funded and implemented by nongovernmental institutions, there seems to be little or no oversight responsibility by state ministries. Implementing agencies include national and local institutions, civil society, a national cooperative, enterprises, bilateral partners and multilateral partners.

Most of the programs reviewed are focused on increasing skills/knowledge, employment opportunities and income of beneficiaries, and mainly target youth, returnees, potential emigrants, and students. A summary of the programs reviewed (theme and age groups targeted) is provided in Table 1. Components of the programs range from training in skills/trades, provision of start-up capital (in the form of loans/grants), apprenticeship, strengthening of academic and vocational institutions, market linkages and information, cash transfers, health behavioral change campaigns and antenatal care. Generally, 15 of the programs reviewed can be classified as education-focused; 27 of the programs relate

to jobs, employment, income creation and/or skills development, 6 programs focus on health, and 4 programs focus on social protection. It is important to state that some of the programs do contain components that are not centered on human development. Funders of the programs reviewed include government (Special Needs Education, Scholarship to UTG students), international bodies such as UNICEF (nutrition), the World Bank, and the European Union. While many interviewees did not disclose the cost associated with their programs, costs disclosed range from US \$50,000 to US \$3.9 million.

Although program implementers, whether within or outside of government, regarded their programs as very successful, few provided any data to back these assertions. In particular, no information on the number of beneficiaries could be provided for 22 programs (see Table A. 7). Some cost data was provided for only 21 programs out of the 52, although it is possible that interviewees were not willing to share cost data due to its sensitive nature. While a few programs collected some monitoring data to show contributions to human development (e.g., YEP), most programs reviewed collect limited data on program impact and effectiveness.

3. Challenges and Opportunities

3.1. Program Conception and Design

First, to our knowledge, there was limited coordination in the conceptualization and design of human capital measures both within and across institutions. Across sectors, programs were designed without explicitly accounting for other existing or future human capital measures. This was compounded by limited vocalization of connections between the work being conducted and human capital outcomes. Human capital was not included in the conceptualization of programs and their associated impact. Correspondingly, no clear theories of change were presented. A notable exception is NaNA, where the interviewees were very clear about how the Baby friendly Health facility informed the baby friendly community initiative and how both the Building Resilience through Social Transfers for Nutrition Security (BReST) and Social Safety Nets project are connected to drive one or more components of human capital. Likewise, the interviewee at the MoHERST was very clear in the connections between the programs. However, most of the interviewees could connect their past and present programs. While longevity could contribute to this, it appears that projects that are simultaneously ongoing within the

Table A. 6: Number of Programs, by Theme and Age Group

	Prenatal	0 – 14 y.o.	15 – 35 y.o.	36 – 70 y.o.	70+ y.o.
Education		5	10	7	
Health & nutrition	2	6	6	3	
Social Protection		2	4	2	1
Employment			26	17	0

Table A. 7: Number of programs by theme and data availability on number of beneficiaries

	Number of Beneficiaries available	Number of beneficiaries not available
Education	8	7
Health	2	4
Social Protection	3	1
Employment	17	10

same institutions lack coordination for efficiency. In some instances, one person running a particular project did not know or could not provide information on impacts or actions being done in the same institutions on human capital. While different sources of funding could contribute to different scopes and strategies, there is a need for improved coordination of programs within the same institution. Additionally, there is need for a clear national human capital strategy developed with input from all relevant stakeholders and sectors. A coordinated approach, realized through a national human capital strategy, would ensure that multiple aspects of human capital are being addressed; minimize overlapping programs; and encourage more efficient use of limited financial resources.

Second, in many instances, stakeholders highlighted financial constraints and the associated implications on program design. Although most stakeholders did not disclose program-related costs, they detailed how limited funding disrupted both the reach and intensity of human capital measures. For example, the Ministry of Trade, Industry and Employment has referred to 9 policies, bills and strategies that it has recently developed; nonetheless they are currently without funding for implementation. Another state agency also disclosed that all the funding it gets for implementation of human capital programs comes from donors, mainly multilateral and external donors, decrying that its sectoral allocation is meant to cover overhead cost (salaries and office functioning). For state training institutions, while the infrastructure was available, the student fees were found to be too costly for the average citizen/resident. At present, many human capital measures target populations in specific locations and the number of beneficiaries reached has remained somewhat small. Most of the programs where the number of beneficiaries was disclosed, the total number of beneficiaries ranged from a few hundred to a thousand. Additionally, the delivery

platforms being used and the amount and type of services being provided depend heavily on the available budget. With limited funding, institutions are having to balance both costs. Where feasible, there is a need to increase the amount of funding being allocated to human capital measures in The Gambia. Increased funding could result in program designs that have both wider reach and increased intensity.

Third, and specific to programs providing youth and returnees with job skills training, stakeholders especially employers have observed limited impact on employment rates. Following completion of these short-term programs, youth and returnees still struggled to find employment. This is reflective of a sentiment among employers that the trained youth and returnees did not possess skills which were relevant to their industry or available positions. Participation in these six-month programs had limited impact on the marketability of youth and returnees. Whereas trainees would like to expand or increase their skills in the area where they have had basic training, training at advanced levels is often lacking, which does not enable them to build a competitive advantage. There is a need to ensure that training programs are designed with input from potential employers. This is an important way to make sure that youth and returnees are developing and strengthening skills that will increase their likelihood of employment.

3.2. Program Implementation

First, and in addition to experiencing limited funding, a few stakeholders experienced disruptions with the disbursement of funds. Stakeholder concerns were centered around where funds were disbursed from, lack of revolving funding, and sudden disruptions to funding disbursements. In some instances, stakeholders detailed prefinancing program components and receiving reimbursements late. These factors ultimately disturbed the implementation of human capital measures,

largely with regards to the intensity of programs. In some cases, the type of services provided were altered due to difficulties retaining staff. **There is need to revise existing systems for funding disbursement to further improve the impact of human capital measures.** Importantly, with regards to programs that have proven to be effective in similar settings, addressing these concerns could strengthen program implementation, impact, and effect.

Second, we identified a few small-scale programs which evidence suggests are or could be effective. Most of these programs currently have very narrow targeting criteria. Specifically, most of these programs target populations not exceeding 2000 in a few geographic locations such as URR and LRR. An example is the Work for Peace project being implemented by YMCA which had targeted 400 people, a 100 people every year. Start-up Incubator Gambia entrepreneurship training also takes in a batch of 40 trainees every cohort because of its limited space and funding. This is an efficient strategy when piloting a program or managing limited funding. However, in instances where robust evidence suggests positive impacts on human capital, scaling up these programs could improve program reach and national impact. **There may be opportunities to further strengthen human capital measures by identifying and scaling up smaller programs that have proven to be effective.**

Third, we observed some overlap in the type and timing of programs implemented across institutions. This was largely in regard to programs targeting youth and returnees. Some programs, with similar objectives, were introduced around the same time with limited or no coordination between relevant actors. Furthermore, there are programs and institutions, focused on training and skills development, which are not under the Ministry of Higher Education Research Science and Technology. For example, the

Rural Development Institute (RDI) offers training programs in community development; however, it is overseen by the department of Community Development. Specifically, the department of Community Development supports program operations and appoints and deploys lecturers. This has caused situations where students who obtained the Higher National Diploma from the RDI, after two years of studying courses in development studies, were still required to spend four years studying if they choose to enroll for the BSc in Development Studies at the University of The Gambia. This is the case despite having already taken about half of the courses. This results in a less efficient use of available funds and a non-comprehensive approach to improving human capital outcomes. Another example is that the Personnel Management Office has overall duty to ensure capacity development for government employees at different levels. However, other sectors with duties or oversight on education are not aware about the exact conditions of these civil servants. We also observed that most stakeholders could not provide details on scholarships being offered by bilateral partners to the Gambia government or citizens and the disciplines. More knowledge and understanding of these scholarship packages could help the state in better planning and usage of resources. **There is need for better coordination among actors working in The Gambia to improve human capital outcomes.** This, alongside the implementation of a clear national human capital strategy would help ensure that human capital measures are comprehensive and have improved reach.

3.3. Program Assessment

Many stakeholders involved in smaller programs were unable to share data detailing the impact of their programs on human capital related outcomes. Instead, a few stakeholders provided anecdotal evidence about individual participants' experiences with the program. Importantly, this is mostly the case for

programs that received a smaller amount of funding. This may be due to limited funding for regular/thorough program assessments or program designs that do not include monitoring and evaluation components, in addition to instances where implementers were reluctant to provide actual data. Furthermore, impacts and project details on beneficiaries and project cost were not readily available on the sites of partners, hence the lack of communicating impacts of human capital programs to wider audiences.

To make sure that programs are having the intended impact, there is need to ensure that programs and policies are being monitored and evaluated intentionally and regularly. This provides opportunities to strengthen program implementation and impact. Importantly, when unexpected adverse events occur, a well-established monitoring and evaluation component allows stakeholders to observe the impact of these events on program effectiveness and identify opportunities to strengthen program impact. Furthermore, such reporting should be considered and adopted as a norm in promoting transparency and accountability in implementing human capital programs.

4. Conclusions and Implications for Future Human Capital Approaches

Our examination of human capital measures in The Gambia revealed that, importantly, concerted efforts have been made to improve human capital outcomes in the country. In comparison to the average in countries of the same income group and from the same regions, human capital outcomes are largely better in The Gambia. However, we identified a few key opportunities to further strengthen The Gambia's efforts to improve human capital outcomes, which are: i) develop a comprehensive national human capital strategy which includes the input and efforts of relevant institutions across the public, private, and non-profit sectors; ii) identify and provide solutions for funding constraints and

their associated implications on program design and implementation; and iii) ensure adequate monitoring and evaluation components are included in future programs and scale up programs that have proven to be effective.

Annex 4: The Utilization-Adjusted Human Capital Index

A main limitation of the HCI is that it implicitly assumes that when today's child becomes a future worker, she will be able to find a job—which may not be the case in countries with low employment rates. Moreover, even if today's child is able to find employment in the future, she may not be in a job where she can fully use her skills and cognitive abilities to increase her productivity. In these cases, human capital can be considered underutilized, because it is not being used to increase productivity to the extent it could be.

To account for the limitations of the HCI, a complementary index was developed: **the Utilization-Adjusted Human Capital Indices (UHCI)**. While the HCI is an index of supply of a factor of production (in the future), the UHCIs are a hybrid between an index of factor supply (capturing investment in human capital), and a productivity index (capturing how efficiently that human capital is used in production). The UHCI is defined as the product of the HCI and the utilization rate of human capital:

$$UHCI = Utilization Rate \times HCI$$

Utilization can be measured in two ways, which leads to two different UHCIs based on a "basic" or "full" utilization index:

1. The **basic UHCI** captures the **income gains from employing all potential workers**. The basic utilization measure is the employment-to-working-age-population ratio. The basic UHCI has the advantage of simplicity, ease of construction and measurement.
2. The **full UHCI** also takes account of the **income gains from moving workers to jobs where they can better use their human capital to increase productivity** ("better employment").

The full UHCI is a weighted average of the HCI score for those in the better employment (who are as productive as their human capital allows), and the theoretical minimum HCI for the rest of the working age population (who are underutilizing their human capital):

$$UHCI (full measure) = BER \times HCI + (1-BER) \times (minimum HCI)$$

The "Better employment Rate" (BER) is defined as the share of the working-age population working as non-agricultural employees or employers; these categories are proxies for higher-quality jobs.

The theoretical minimum HCI is assumed to be around 0.2 and represents the relative productivity of "raw labor", before it is boosted by human capital.

Table A. 8: The UHCI by sex in The Gambia

	Basic UHCI (in %)			Full UHCI (in %)		
	All	Females	Males	All	Females	Males
2018	18.8	17.1	20.6	23.2	21.7	24.6
2020	20.9	18.7	23.4	23.8	18.7	23.4

Annex 5: Locations of the youth surveyed in the qualitative assessment

Key Informant Interviews

LGA	Rural	Urban
Banjul	N/A	7 males, 3 females
Basse	2 males, 3 females	2 males, 3 females
Brikama	1 male, 1 female	3 males, 5 females
Janjabureh	2 males, 2 females	3 males, 3 females
Kanifing	N/A	5 males, 5 females
Kerewan	2 males, 2 females	2 males, 4 females
Kuntaur	2 males, 1 female	6 males, 1 female
Mansakonko	5 males, 1 female	1 male, 3 females

Focus Group Discussions

In addition to the KIIs, 24 FGDs were undertaken – three in each LGA – with at least one engaging only with female participants.



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