

IHP+ 2016 MONITORING ROUND

COUNTRY REPORT

COUNTRY	The Gambia
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1 Process of the 2016 IHP+ Monitoring Round

The IHP+ monitoring of Effective Development Cooperation (EDC) practices started later in The Gambia than in other countries (on 6 June 2016 following the signing of the contract with 'hera'). This was followed by a briefing meeting on 8 June 2016 between the IHP+ Senior Adviser and the National Expert on the IHP+ monitoring processes and guidelines. This was followed by the identification and selection of civil society organisations (CSOs), development partners (DPs) and the private sector (PS) to participate in the process.

The process was led by the IHP+ focal person Mr. Omar Bun Njie of the Ministry of Health supported by a National Expert, Mr. Dawda M. Joof. Quantitative and qualitative information on the 8 EDC practices for government, development partners and the private sector was collected through a CSO online survey and focus group discussions (FGDs) with the PS and key informant interviews with DP. The data was validated by the Ministry of Health (MoH) focal point and discussion of findings and analysis by the national expert and IHP+R.

20 (57.1%) of health CSOs identified completed the online survey. Out of the 22 health CSOs, ten (10) were shortlisted to participate in the FGD and 5 (50%) attended the meeting to validate the data.

A total of 8 DPs were identified by the MoH and invited to participate in the process. Only 4 (50%) DPs were supportive and agreed to participate in the process.

Out of 4 private sector associations 3 (75%) participated in the FGDs. The IHP+ focal point was very effective in working closely with the Nation Expert to support the process. The mechanism used for the process included consultation with the IHP+ focal point and a letter of introduction to all participating DPs, CSOs and PS representatives. The list of participants (DP, CSO and PS) was discussed and approved by the IHP+ focal point.

The main challenge faced during the process is the difficulty to convene a stakeholders' meeting with broad participation to design and manage the process with the DPs, CSOs and PS and to discuss the findings in an existing forum at the national level. The development cooperation landscape in The Gambia is a particular one given that only very few development partners are present in the country.

2 Commitment to establish strong health sector strategies which are jointly assessed and strengthen mutual accountability

The Gambia has a costed National Health Strategic Plan (NHSP) 2014 – 2020. The NHSP was developed through a participatory approach with the participation of the Development Partners, government departments, NGOs, CSOs and the private sector. The NHSP was subject

to a Joint Assessment of National Health Strategies (JANS). The DPs agreed on national priorities reflected in the NHSP, through a process of inclusive development and joint assessment. DPs are already buying into the NHSP to support interventions in the health sector. The United Nations Development Assistance Framework (UNDAF) strategies and actions align with the NHSP to address national health priorities.

There exists a good working relationship and co-operation between DPs, national stakeholders and the government of The Gambia. The support provided by DPs is in line with national priorities but the contributions from individual DPs are not reflected in the national health sector budget. 75% of participating DPs confirm that sufficient support on PFM systems strengthening and capacity building is in place.

2.1 EDC Practice 5: Mutual accountability is strengthened

The Gambian government and DPs do engage in joint monitoring, evaluation and reporting activities. There is no agreed mechanism in place for mutual accountability. There is no aid policy or strategy agreed between the government of The Gambia and development partners; nor are there any specific country-level aid effectiveness targets agreed between those parties.

3 Commitment to improve the financing, predictability and financial management of the health sector

3.1 Practice 2a/b: Health Development Cooperation is more predictable

The Paris Declaration calls on donors to provide reliable, indicative commitments of aid over a multi-year framework, and to disburse aid in a timely and predictable manner according to agreed schedules. During the 2015 fiscal year, 84% of DP funding was disbursed according to agreed schedules to the Ministry of Health. The Global Fund has indicated that the disbursement of funds depends on the programmatic and financial performance of the supported program (performance based funding). The financial absorption capacity of GF Principal Recipients has been below the set budget in 2015. Government should be able to predict aid disbursements in terms of how much and when the aid will be delivered. This is important to enable governments to manage public finances and undertake realistic planning for development.

3.2 Practice 2c: Health Aid is on budget

The DPs indicated that health aid flows to the government are not fully reflected in the national health development budget except for inflows from the Global Fund which are currently reported on government budget. To improve this situation, the Ministry of Health should improve participation of DPs in its budget process. Government should also implement its plan to introduce a medium-term expenditure framework (MTEF).

4 Commitment to establish, use and strengthen country systems

4.1 Practice 3: PMF systems are used and strengthened

The Gambia lacks a medium-term fiscal framework (MTFF) and a medium-term expenditure framework (MTEF) to direct public expenditures. The Country Public Financial Management (PFM) and procurement systems are weak. The DPs (UN system) in country co-ordinate some of their work and use their own financial and procurement systems. The Gambia has signed on

to the IHP+ and has developed a NHSP 2014 - 2020 (see above). A country compact has also been developed in line with the principles of the IHP+ global compact. However, presentation of the country compact by Government to partners is still outstanding. While 75% of participating DPs confirmed that sufficient support on PFM systems strengthening and capacity building is in place, DPs do not use the country financial management systems. This is due to limited efforts by government in this regard.

4.2 Practice 4: Procurement systems are used and strengthened

The Gambia Public Procurement Act (GPPA) 2001, seeks to provide a system for transparent, efficient and economic public procurement. Government entities, project Implementation Units, local government authorities, and parastatals are responsible for their procurement.

50% of participating DPs confirm that sufficient support on procurement or supply systems strengthening and capacity building is in place. The health sector is sometimes constrained in that emergency purchases are inadvertently delayed due to the need to follow the GPPA procedures.

DPs have indicated that there is no joint or harmonized procurement system among them. The IHP+ principles call for alignment and or harmonization of procurement procedures. Developing common procurement guidelines at the country level to support procurement cooperation among government and DPs would contribute to improving the effectiveness and the efficiency of procurement activities. Government should therefore direct more efforts to further engage with DPs to strengthen alignment and harmonization of procurement systems.

4.3 Practice 6: Technical support is coordinated and SSC and TrC supports learning

The Government of The Gambia in collaboration with its traditional donors like India, Venezuela, Cuba, Nigeria, Egypt, Taiwan and multilateral organizations has facilitated South-South initiatives through the provision of funding, training, and management and technological systems as well as other forms of support. The MoH has benefited traditionally from WHO and UNAIDS in terms of technical assistance (TA) to develop policies, strategic plans and manuals. Doctors, nurses, managers and health technicians received training as part of SSC by countries like India, Venezuela, Cuba, Egypt or Taiwan.

5 Commitment to create an enabling environment for CSO and PS to participate in health sector development cooperation

5.1 Practice 7: Engagement of CSO

The Government of The Gambia has provided an enabling environment for civil society to organise themselves and operate freely. The CSOs that are directly involved in health and health-related service delivery are invited to participate in health policy development.

The only challenge faced by some CSOs is that their activities are closely monitored by the NGO Affairs Agency. The latter is under the office of the President in The Gambia and this has resulted in some CSOs - particularly those NGOs working with HIV at-risk groups whose activities are associated with or are considered to be criminal acts in The Gambia - exercising self-censorship. Despite being registered under the office of the President and the challenging legal environment, CSOs are structurally and financially independent from the state.

The Government of The Gambia recognises the contribution of CSOs in national development especially in the health sector and government is being called to increase transparency, improve CSOs access to relevant information, as well as to promote CSOs contribution to government decision-making processes.

5.2 Practice 8: Engagement of PS

The private sector consists of autonomous professional bodies. They regulate the education and practice of their professions in the country. According to PS representatives, the government has provided very limited space to the PS to participate in health policy development. Private sector representatives reported that Individual health professionals are usually invited based on their level of expertise rather than as representatives of professional associations. These health professionals do not represent any interest groups, nor any platform or professional associations. The FGD participants indicated that the private sector only participates in meetings and workshops, which had to do with the development of specific cadre standard operating procedures and practices which directly affects the cadre and even with that the associations are not always invited.

PS representatives advised that The Government should engage its councils and associations, private family practitioners and promote dialogue. There are numerous challenges faced by the private sector in terms of financing, restructuring and improving health services. More dialogue and engagement is required between the government and the private sector. The MoH should strengthen its co-ordination mechanism with the private sector by identifying a focal person to be responsible for working with the private sector when it comes to policy development.

6 Other observations

Though health funding is steadily growing, it is not adequate for financing essential health care services. The main sources of health funding are the government, donors, NGOs, and private out-of-pocket expenditures. Per capita spending on health in 2002 was only \$26.6 and \$29.3 in 2003 and thus less than the World Health Organization (WHO)'s recommended \$34 in 2001, which was revised to US\$ 60 by 2015.

There has been a steady increase in Total Health Expenditure over the years as indicated by the NHA report 2013. In nominal terms, health expenditure increased from US\$ 32,840,676.09 in 2002 to US\$ 52,850,928.23 in 2013, signifying a 60.93% increase. Twenty-eight percent came from government funds, the remaining 72% were from donor other domestic payments includes private employer (3.91%), and households funds accounts for of the total health expenditure. The main sources of health funding were donors (46.7%), government (28%) and households (21.21%) (Source: National Health Accounts 2016).

The Gambia Programme for Accelerated Growth and Empowerment - PAGE 2012-2015 - is costed at US\$ 651 million over a four year period, of which Government committed to generate about 35% of required investments; the remaining 65% is to be funded by development partners and public private partnership initiatives. These figures indicate The Gambia's heavy dependency on external aid resources to achieve its development and poverty reduction goals as articulated in Vision 2020 and PAGE strategic documents (Source: UNDP Human Development Report 2014).

There has been a downward trend in aid inflow generally and particularly in international health aid to the Gambia over the years due to governance challenges. As a result, DFID's bilateral aid programme in the Gambia came to an end in 2012, and the EU cut its aid to the Gambia due to poor human rights records.

Several participating stakeholders expressed their satisfaction with and support to the ihp+ results monitoring process. It was nevertheless observed that only four out of eight Development Partners (WHO, UNICEF, The Global Fund and GAVI) supported the process.

7 Discussion of findings

The results from the IHP+ 2016 monitoring round could not be discussed at a multi-stakeholder meeting at country level due to the political situation in the country during and after the Presidential elections of December 1, 2016. It was therefore agreed by the Ministry of Health Focal point and the lead Development Partner on Health (WHO) to share the country report and Visual aid with key country stakeholders that had contributed to the findings (government, bilateral, multilaterals, civil society and the private sector) to comment on the findings, develop recommendations and identify next steps.

The draft country report and Visual Aid were shared with the following stakeholders:

1. Ministry of Health IHP+ Focal Person
2. WHO Lead Development Partner on Health
3. ActionAid International The Gambia
4. Catholic Relief Services
5. Future In Our Hands
6. CIAM – Public Health Research and Development Centre
7. Health Promotion and Development Organisation (HePDO)
8. Nova Scotia Gambia Association (NSGA)
9. Sightsavers International
10. Gambia Red cross society
11. Gambia Food & Nutrition Association (GAFNA)
12. SOS mother and Child Clinic
13. The Gambia Association of Public Health
14. Pharmaceutical Society of The Gambia
15. Medical and Dental Association

The following comments and feedback were received from this Group:

- There is no mutual accountability process in the health sector, there is no active DP forum with Government and CSOs. The need for mutual accountability through more inclusive health policy dialogue and through joint health sector review and country compact monitoring exercises was highlighted.
- There is the absence of institutional mechanisms to coordinate the roles of the private sector and of civil society to enforce accountability among partners.
- The lack of participation of CSOs in health policy development is an issue and this affects effective engagement with CSOs. There is need to improve routine monitoring of health sector cooperation.
- The Financial and Procurement Management efficiency in the public sector are weak.
- The Country PFM and procurement systems are weak as indicated by the PFM audit on procurement in health which found substantial irregularities.

- In contrast to the WHO has recommendation of \$34 - \$60 per capita health expenditure the 2016 National Health Accounts findings indicate a per capita health expenditure in the Gambia of \$28.08.

Recommendations by the Group:

1. The Policy Analysis Unit office of the President and the Directorate of Planning and Development should be strengthened to enhance accountability and regular exchange of information between DPs and Government to improve mutual accountability processes.
2. The Ministry of Health and Social Welfare and Development Partners should sign the IHP+ multi-partner country compact in line with the principles to support the national health strategy and improve development cooperation in health.

Recommendations by the consultant team:

1. The Ministry of Health in collaboration with Development Partners should ensure that the health sector development budget include contributions of individual development partners.
2. It is recommended for the government to work closely with the Development Partners to strengthen and harmonize the countries' PFM and procurement systems and put in place mechanisms to ensure that they are used.
3. It is recommended for the Ministry of Health to develop institutional mechanism to coordinate the engagement of different CSOs and ensure their meaningful representation and participation in health policy processes.

Annex 1: list of participating DPs

Nr	List of DPs active in the health sector	DPs invited to participate in 5 th IHP+ Monitoring Round (please add an X if the DP was invited to participate)	DPs that participated (please add an X if the DP participated)
1	The United Nations Development Programme (UNDP)	The United Nations Development Programme (UNDP)	
2	The United Nations Population Fund (UNFPA)	The United Nations Population Fund (UNFPA)	
3	The United Nations Children's Fund (UNICEF)	The United Nations Children's Fund (UNICEF)	X
4	The World Bank (WB)	The World Bank (WB)	
5	The Joint United Nations Programme on HIV and AIDS (UNAIDS)	The Joint United Nations Programme on HIV and AIDS (UNAIDS)	
6	The World Health Organization (WHO)	The World Health Organization (WHO)	X
7	The Global Alliance for Vaccines and Immunization (GAVI)	The Global Alliance for Vaccines and Immunization (GAVI)	X
8	The Global Fund To Fight AIDS, TB And Malaria (GFATM)	The Global Fund To Fight AIDS, TB And Malaria (GFATM)	X

** Please add more lines if necessary*

Annex 2: list of participating CSOs

Nr	List of CSOs active in the health sector	CSO participated in online survey (please add an X if the CSO participated)	CSO participated in focus group discussion (please add an X if the CSO participated)
1	WEC International – The Gambia PO Box 86, Banjul, The Gambia,	Future In Our Hands Kotu South PO Box 352 Serre kunda Kanifing Municipal Council The Gambia, Tel no: +220 4460360/ Email: office@fioh.org	X
2	ActionAid International The Gambia (AAITG) MDI Road, Kanifing South PMB 450, Serre kunda PO Box 725 Banjul The Gambia	CIAM - Public Health Research & Development Centre Plot 17, Kanifing Institutional Layout Kanifing, The Gambia Telephone: (220) 439 45 92 / 439 46 24 Fax: (220) 439 44 84 P O Box 2723 Sere kunda, The Gambia momodou.cham@ciam.gm	X
3	Association for Intervention, Cooperation & Development (AICOS) Banjul area Head office 1 Bolong Road Serre kunda PO Box 1016, Banjul Kanifing Municipality, The Gambia, Tel no: +220 4497247	Health Promotion and Development Organisation (HePDO) 151 Mosque Road, Serre Kunda, The Gambia. Tel: +220 4378568 Email: info@hepdogm.org omcsay@gmail.com	<u>X</u>
4	Arbeiter-Samariter Bund (ASB) Musu Kebba Drammeh Street Dippa Kunda / Serre kunda The Gambia P.M.B. 171 Banjul	Nova Scotia Gambia Association (NSGA) PO Box 706 Serre kunda GTUCCU Building Teachers' House, Kanifing South Kanifing Municipality, The Gambia, West Africa Tel no: +220 4399336 Email: info@novascotiagambia.ca	X
5	Degoo HIV/AIDS Support Organisation (DHASO) - Grassroots Healthcare NGO group 6 Tandakokoto Street	Catholic Relief Services (CRS) 40 Atlantic Road Fajara M Section, Bakau	X

	<p>Old Jeshwang Kanifing Municipality The Gambia Tel no: +220 4394468/ 913536 Email: degoolen@hotmail.com</p>	<p>PO Box 568, Banjul Kanifing Municipality, KSMD The Gambia. Tel: +220 4498001/</p>	
6	<p>Foundation for Research on Women's Health, Productivity & the Environment (BAFROW) 156 Mosque Road Serre kunda P.O. 2854 Serre kunda Tel: 3737485/3733411/9925639 Email: info@bafrow.gm Website: www.bafrow.gm</p>	<p>ActionAid International The Gambia (AAITG) MDI Road, Kanifing South PMB 450, Serre kunda PO Box 725 Banjul The Gambia</p>	
7	<p>Catholic Relief Services (CRS) 40 Atlantic Road Fajara M Section, Bakau PO Box 568, Banjul Kanifing Municipality, KSMD The Gambia. Tel: +220 4498001/</p>	<p>Gambia Food & Nutrition Association (GAFNA) GAFNA House Bakau Head office Kombo Coastal Road PO Box 111, Banjul Kanifing Municipality, KSMD The Gambia, Tel no: +220 4496745 Email: gafna@qanet.gm</p>	
8	<p>Gambia Food & Nutrition Association (GAFNA) GAFNA House Bakau Head office Kombo Coastal Road PO Box 111, Banjul Kanifing Municipality, KSMD The Gambia, Tel no: +220 4496745 Email: gafna@qanet.gm</p>	<p>Gambia Red Cross Society (GRCS) 53 Mamadi Manjang Highway Kanifing Municipality, P.O. Box 472 Banjul The Gambia. Tel no: +220 4396989 Email: redcrossgam@yahoo.com fatou.gaye@redcross.gm Website: www.redcross.gm</p>	
9	<p>Gambia Family Planning Association (GFPA) PO Box 325 Banjul Kanifing Industrial Estate Kanifing Municipal Council The Gambia, West Africa Tel no: +220 4391945 Email: gfpa@ganet.gm</p>	<p>Hands On Care Medical Centre PO Box 5179, Brikama Kombo Central District West Coast Region The Gambia Tel no: +220 4483372 Email: hocgambia@gmail.com</p>	
10	<p>ChildFund The Gambia Post Office Road Kanifing North, Greater Banjul The Gambia.</p>	<p>Sheikh Zayed Eye Care Centre (SZRECC) Banjul area, Kanifing Layout PO Box 650, Banjul The Gambia, West Africa</p>	

	Tel no: +220 4370624/ 4391450 Email: cfcgambia@gamtel.gm	Tel no: +220 4378608 Email: szrecc@gamtel.gm	
11	Gambia Red Cross Society (GRCS) 53 Mamadi Manjang Highway Kanifing Municipality, P.O. Box 472 Banjul The Gambia. Tel no: +220 4396989 Email: redcrossgam@yahoo.com fatou.gaye@redcross.gm Website: www.redcross.gm	Sightsavers International Website: www.sightsavers.org Fajara M Section PO Box 950 Banjul Kanifing Municipality, The Gambia, West Africa Tel no: +220 4399177 Email: bjooof@sightsavers.org	
12	Hands On Care Medical Centre PO Box 5179, Brikama Kombo Central District West Coast Region The Gambia Tel no: +220 4483372 Email: hocgambia@gmail.com	Agency for The Development of Women and Children Kerewan North Bank Region PO Box 828 Banjul The Gambia, Tel: +220 5720106 Email: msjoof2014@yahoo.com	
13	Concern Universal (CU) Ousman Dan Fodio Street Fajara M Section PO Box 2164, Serre kunda Kanifing Municipality, The Gambia, West Africa Tel no: +220 4495716/ 4494473 Email: patricia.wall@concern-universal.org	Trust Agency For Rural Development (TARUD) Gunjur Village Kombo South, Western Coast Region The Gambia, West Africa	
14	GAMCOTRAP Plot no.41 Kanifing Institutional Area P.O Box 2990 Serre kunda The Gambia Tel: 4399569/ Fax: 4399568 Email: info@gamoctrap.gm lsatou2000@hotmail.com	Sharab Medical Centre Website: sharabclinic.com Kombo Coastal Road kanifing Layout, Kanifing Municipality The Gambia, West Africa Tel no: +220 3300100 Email: info@sharabclinic.com	
15	Jammeh Foundation for Peace Hospital (JFPH) Bundung, 93 Kombo Sillah Drive Churchill's Town Serre kunda PO Box 1494, Banjul The Gambia Telephone number: +220 4377330	SOS Mother and Child Clinic Hermann Gmeiner Drive Way, Bakoteh, PMB 28 GPO, Banjul Tel: +220/4/46 08 36 e-mail: sos-no@sosgambia.org	

	Email: jfpfoundation@ganet.gm		
16	<p>Adventist Development & Relief Agency ADRA – Gambia 17 Kanifing Industrial Area Behind T.K. Motors Kanifing Municipal Council Mailing Address: Private Mail Bag # 212 Serre kunda Tel: +220 7681853 Email: pd.adragambia@gmail.com</p>	<p>Gambia Family Planning Association (GFPA) PO Box 325 Banjul Kanifing Industrial Estate Kanifing Municipal Council The Gambia, West Africa Tel no: +220 4391945 Email: gfp@ganet.gm</p>	
17	<p>Kutejumbulu 2BAB Foundation Jinack Island Jinack Kayateh Niimi National Park North Bank Region The Gambia. Tel no: +31 651617181 Email: info@2BaB.org</p>	<p>Arbeiter-Samariter Bund (ASB) Musu Kebba Drammeh Street Dippa Kunda / Serre kunda The Gambia P.M.B. 171 Banjul</p>	
18	<p>Sheikh Zayed Eye Care Centre (SZRECC) Banjul area, Kanifing Layout PO Box 650, Banjul The Gambia, West Africa Tel no: +220 4378608 Email: szrecc@gamtel.gm</p>	<p>Concern Universal (CU) Ousman Dan Fodio Street Fajara M Section PO Box 2164, Serre kunda Kanifing Municipality, The Gambia, West Africa Tel no: +220 4495716/ Email: patricia.wall@concern-universal.org Website: www.concern-universal.org</p>	
19	<p>Future In Our Hands Kotu South PO Box 352 Serre kunda Kanifing Municipal Council The Gambia, Tel no: +220 4460360/ 4460363 Email: office@fioh.org</p>	<p>Adventist Development & Relief Agency ADRA – Gambia 17 Kanifing Industrial Area Behind T.K. Motors Kanifing Municipal Council Mailing Address: Private Mail Bag # 212 Serre kunda Tel: +220 7681853 Email: pd.adragambia@gmail.com</p>	
20	<p>CIAM - Public Health Research & Development Centre Plot 17, Kanifing Institutional Layout Kanifing, The Gambia Telephone: (220) 439 45 92 / 439 46 24 Fax: (220) 439 44 84 P O Box 2723</p>	<p>African Network For Information And Action Against Drugs P.O. Box 480, Banjul Kerewan North Bank Region Raidgambia86@hotmail.com The Gambia, West Africa</p>	

	<p>Sere kunda, The Gambia momodou.cham@ciam.gm</p>	<p>Tel no: +220 9903492/ 5720162/ 7003762 Fax: 5720112 Email: raidgambia86@hotmail.com raidgambia86@yahoo.com</p>	
21	<p>SOS Mother and Child Clinic Hermann Gmeiner Drive Way, Bakoteh, PMB 28 GPO, Banjul Tel: +220/4/46 08 36 e-mail: sos-no@sosgambia.org</p>		
22	<p>Sightsavers International Website: www.sightsavers.org Fajara M Section PO Box 950 Banjul Kanifing Municipality, The Gambia, West Africa Tel no: +220 4399177 Email: bjooof@sightsavers.org</p>		
23	<p>West African Network For Peacebuilding (WANEP) Bakau New Town Road Kanifing Municipality The Gambia West Africa Tel no: +220 4498263 Email: wanegambia@yahoo.co.uk Website: www.wanepgambia.org</p>		
24	<p>Sharab Medical Centre Website: sharabclinic.com Kombo Coastal Road kanifing Layout, Kanifing Municipality The Gambia, West Africa Tel no: +220 3300100 Email: info@sharabclinic.com</p>		
25	<p>Society for Women & Aids in Africa (SWAAGAM) 49 Garba Jahumpa Road Bakau New Town PO Box 273 Banjul Kanifing Municipality, The Gambia, West Africa Tel no: +220 4498093 Email: office@wasserbettwelt.com</p>		
26	<p>Health Promotion and Development Organisation (HePDO) 151 Mosque Road, Serre Kunda, The Gambia. Tel: +220 4378568</p>		

	Email: info@hepdogm.org omcsay@gmail.com		
27	Nova Scotia Gambia Association (NSGA) PO Box 706 Serre kunda GTUCCU Building Teachers' House, Kanifing South Kanifing Municipality, The Gambia, West Africa Tel no: +220 4399336 Email: info@novascotiagambia.ca		
28	African Network For Information And Action Against Drugs P.O. Box 480, Banjul Kerewan North Bank Region Raidgambia86@hotmail.com The Gambia, West Africa Tel no: +220 9903492/ Email: raidgambia86@hotmail.com		
29	Worldview The Gambia 49 Garba Jahumpa Road Bakau Newtown The Gambia Tel: (220) 4496990/ 4496666/ 9921441 talaso46@yahoo.com Email: worldview@gamtel.gm/ worldview-gambia@yahoo.com		
30	Agency for The Development of Women and Children Kerewan North Bank Region PO Box 828 Banjul The Gambia, Tel: +220 5720106 Email: msjoof2014@yahoo.com		
31	Trust Agency For Rural Development (TARUD) Gunjur Village Kombo South, Western Coast Region The Gambia, West Africa		
32	Methodist Mission Agricultural Programme (MMAP) Nyambai, Sanyang Road Brikama PO Box 288, Banjul West Coast Region The Gambia, Tel no: +220 4484853/		
33	Association of Farmers, Educators and		

	<p>Traders (AFET) Brikama Town AFET Gambia Head office Kombo Central PO Box 237 Serre kunda PO Box 5195 Brikama West Coast Region The Gambia, Tel no: +220 4483202 Email: mfayinkeh@yahoo.com</p>		
34	<p>Stay Green Foundation Head office Essau, North Bank Region The Gambia West Africa Tel no: +220 9946991/ 7748234 Email: staygreenthegambia@gmail.com</p>		
35	<p>Wulli and Sandu Development Association (WASDA) Kerewan Badala Village Jah Kunda Wuli West District Upper River Region (URR) The Gambia West Africa Tel no: +220 5671189</p>		

** Please add more lines if necessary*

8 Annex 3: list of participating private sector organisations

Nr	List of private sector active in the health sector (as per the definition in the PS tool)	Private sector organisation participated in focus group discussion (please add an X if participated)
1	Gambia Association of Public Health Officers (GAPHO) c/o Sightsavers International Fajara The Gambia Tel: +220 3993045 Email: bjooof@sightsavers.org	X
2	Gambia Medical and Dental Association (GMDA) Brusubi Highway, Tranquil, West Coast Region P O BOX 1950 Banjul, The Gambia Tel: 7444800 / 3211907 Email: info@gmda.gm	X
3	Pharmaceutical Society of The Gambia C/o Banjul pharmacy Banjul The Gambia Tel: 9904 777 Email: jimmyolucoker52@gmail.com	X
4	National Association of Gambian Nurses and Midwives (NAGaNM) c/o Gambia Nurses and Midwives Council 30 A Mam Berry Njie Street, Banjul The Gambia Serre Kunda, PMB 266 The Gambia Tel: +220 794 0920/ 993 1605 Email: marongkil@yahoo.com camaraonas@gmail.com	

* Please add more lines if necessary