



Intercepted Migrants - Photo: WCR Red Cross Branch

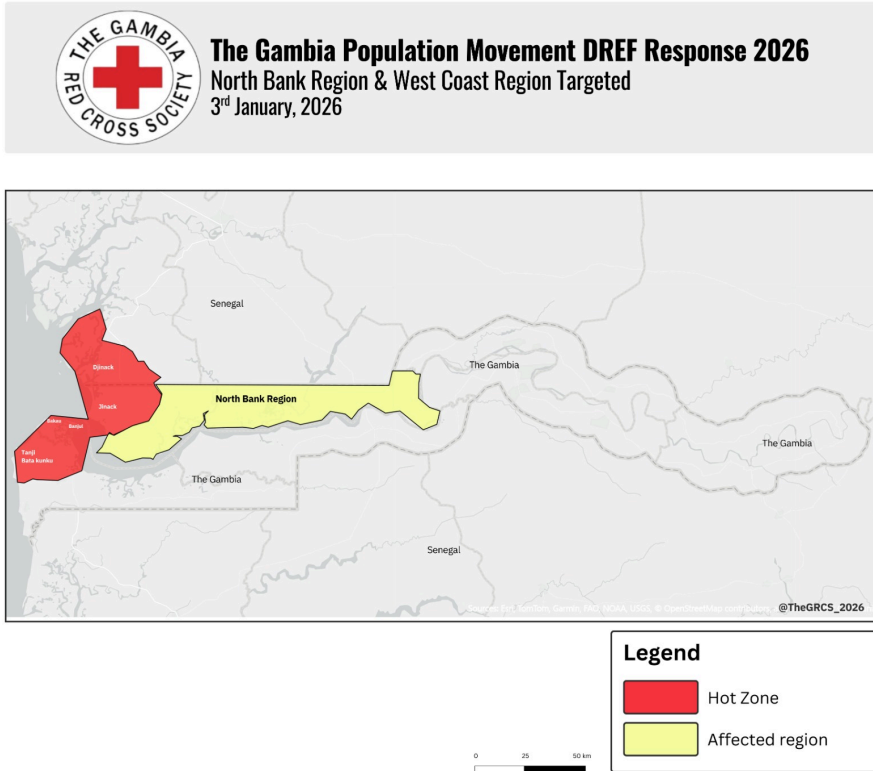
Appeal: MDRGM017	Hazard: Population Movement	Country: Gambia, Republic of The	Type of DREF: Response
Crisis Category: Yellow	Event Onset: Slow	DREF Allocation: CHF 235,260	
Glide Number: -	People Affected: 1,745 people	People Targeted: 2,000 people	
Operation Start Date: 08-01-2026	Operation Timeframe: 4 months	Operation End Date: 31-05-2026	DREF Published: 20-01-2026

Targeted Regions: **Western, North Bank**

Description of the Event

Date when the trigger was met

05-01-2026



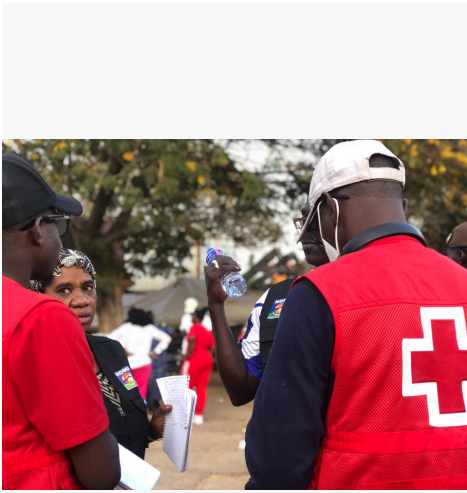
Affected Areas of Migrant Boat Accident and Interceptions

What happened, where and when?

Between 31 December 2025 and 6 January 2026, a series of maritime incidents and interceptions linked to sea migration from Jinack, The Gambia, unfolded along the Gambian and Senegalese coasts.

On 1 January 2026, the Ministry of Defence issued a press release confirming the first maritime incident after a boat landed in distress in Canary over the night of 31 December 2025 with more than 235 people reported to have been on board. From the rescue effort for the people reported to have been on board, 44 are confirmed deaths, more than 100 people missing, and 114 survivors rescued, some requiring hospitalization. In the days that followed, authorities recovered additional bodies and intercepted hundreds of migrants attempting onward travel to Europe from coastal areas including Jinack, Tanji, Lamin, Barra, Banjul, and Bakindik. By 5 January, cumulative interceptions brought the number of affected migrants to 1,217 people, and on 6 January, a further 528 migrants were intercepted and transferred to Tanji Reception Centre, many after prolonged periods at sea and in poor health. These latest arrivals increased the total number of affected people to approximately 1,745 migrants, originating from multiple West African countries. Throughout the period, the Gambia Red Cross Society, in coordination with national authorities, Navy force and local fishermen have been providing lifesaving assistance, health care, and psychosocial support while monitoring continued risks of further movement/departures.

Authorities continue to report multiple attempted departures and interceptions from coastal communities, particularly around Jinack, all intended for the Canary Islands. There is a heightened alert level considering that previous similar alert has already materialised. For instance, the alert of two departures received on 1 January 2026 from the security forces. These trends indicate that numbers may continue to rise in the coming days, requiring sustained humanitarian support for affected migrants, their families, and host communities.



GRCS Discussing with National Disaster Management Agency Team on Next Steps



GRCS Food Delivery to Migrants



GRCS, NDMA, Police and Navy Recovering Dead Bodies from the Offshore-Sea



Dead Bodies Recovered Jinack Waters in North Bank Region

Scope and Scale

The series of maritime incidents and interceptions of migrants unfolded along the Gambian and Senegalese coasts have led to a total of 1745 arrivals in The Gambia since 31 December 2025. New departures alerts continue but the distress landfall of the boats have been deadly incidents in a very short time. The incidents reported being as follows:

- On Wednesday, 31 December 2025, the first boat a boat that reportedly departed from Jinack village, The Gambia, carrying an estimated 235–250 people bound for the Canary Islands, was reported in distress shortly after midnight. The vessel subsequently capsized along the coastline between The Gambia and Senegal on 1 January 2026. Of the approximately 235 people on board, 114 were rescued, including 43 who were hospitalized at the Edward Francis Small Teaching Hospital (EFSTH) in Banjul. Senegalese authorities confirmed the rescue of 14 people in their waters and the recovery of 16 bodies.
- By 4 January 2026, over 300 migrants, including women, children, and youth, were present in Jinack (Kajata and Niji), 45 in Kanuma, 55 in Mbankan, 75 in Bakindik, and 103 in Barra/Essau, many attempting to continue onward movement to Europe. On the night of 4 January, authorities intercepted 70 migrants in the Lamin mangroves, 107 near Batokunku (Tanji), and 26 in waters off Banjul shortly after departure. On 5 January 2026, the Gambia Immigration Department reported the interception of 62 additional migrants in Tanji preparing to depart by boat. At this stage, the total number of affected people reached 1,217 individuals, representing approximately 243 households.
- Between 1 and 5 January 2026, an additional 28 bodies were recovered offshore around Jinack, Banjul, and Bakau (Kanifing Municipality). As of this period, a total of over 44 fatalities, including a two-year-old child, had been confirmed by Gambian and Senegalese authorities. More than 100 people remain missing, while joint search-and-rescue operations by both countries continue. During the same period, and as of 2 January 2026, an additional 50 migrants were intercepted in Tanji, where they received humanitarian assistance from The Gambia Red Cross Society (GRCS) and government partners, including the Gambia Immigration Department and the National Disaster Management Agency.
- On 6 January 2026, a further 528 migrants were intercepted: 43 in Barra, 26 in Bijilo/Senegambia, 200 in Banjul, and 259 in Bakindik

Koto. These individuals were transferred to the Tanji Reception Centre, located on the South Bank of The Gambia. The 259 migrants intercepted in Bakindik Koto (North Bank Region) were transferred overnight to Barra after spending nearly two weeks at sea, without assured access to food, water, or dignity items. Due to their condition—marked by injuries, dislocations, skin infections, dehydration, and psychological trauma—the GRCS provided immediate food, basic healthcare, and first aid, while severe cases were referred to Essau District Hospital for further treatment.

These incidents have been one of the deadliest ones in a very short period of time. The various incidents have been concentrated in Jinack and surrounding villages, located in North Bank Region. On the 1745 migrants that were reported to have been on the boat at last, 44+ have perished during the journey based on the bodies recovered by both The Gambia and Senegal authorities, include a 2 years old child; 1,617 have been intercepted migrants (1,217 up to 5 January + 528 on 6 January) and more than 100 are still missing. These figures include those moved to Tanji Reception Centre. Survivors are physically and mentally exhausted. Feedback collected from them indicates that they have come through a long journey. At least 259 migrants indicated they have spent nearly 2 weeks at sea before interception in Bakindik Koto and required food, first aid, and referrals.

Many survivors face physical injuries, exhaustion, loss of personal belongings, and acute psychological distress. Families of the dead and missing experience grief, anxiety, and trauma, compounded by limited information, with no livelihood and high distress after their losses. In fishing and coastal communities such as Jinack, where migration is often a coping strategy against poverty and unemployment, the loss of young and economically active individuals further weakens household resilience and future livelihood prospects.

The incident has also generated urgent and ongoing needs for search and rescue, dead body management, medical care, and psychosocial support, with survivors arriving physically and mentally exhausted after long journeys, including at least 259 migrants who spent nearly two weeks at sea and required immediate assistance. The impact extends beyond the migrants to already vulnerable coastal and urban host communities in The Gambia, where high poverty, limited livelihoods, and existing migration pressures are straining health, reception, and social services.

The group observed among the migrant include some that are highly vulnerable to the situation. Such as young children (including very young children), the elderly, women, and persons with disabilities or chronic illnesses, all facing heightened protection, health, psychosocial, and socioeconomic vulnerabilities.

Since the first incident, The Gambia Red Cross Society has been working closely with national authorities to provide humanitarian assistance to affected migrants, but the scale of this event extends beyond the immediate capacity of National Society.

Although the scale of the response remains relatively limited at this stage and Government institutions and other actors are engaged, the decision to launch the DREF is justified by the sudden-onset nature of the incident, the high level of current needs to cover in a short period, and the potential for rapid escalation. In addition, ongoing search and rescue operations, cross-border complexities with Senegal, and credible reports of interceptions by government security agencies and possible further boat departures increase the risk of additional humanitarian needs emerging. The DREF will enable The Gambia Red Cross Society to act swiftly, fill critical gaps, and maintain readiness to scale up, ensuring timely life-saving assistance, livelihood, protection, and dignity for affected migrants and communities while complementing the efforts of government and other partners.

Source Name	Source Link
1. GRTS TV - PRESIDENT BARROWS' STATEMENT ON THE MIGRATION BOAT ACCIDENT 02-01-2026	https://www.facebook.com/share/v/18ETZ8kGv7/
2. Ministry of Defence - The Gambia	https://www.facebook.com/share/p/1C2u6AkZSQ/
3. The Gambia Red Cross Society	https://www.facebook.com/share/v/1GEBgy4wDQ/
4. QTV	https://www.facebook.com/share/p/16xf5oEngw/
5. The Fatu Network	https://www.facebook.com/share/p/181K7efghz/
6. QTV	https://www.youtube.com/live/oHAtRqiY-8g?si=kd8gQ4OMa1R0oJya
7. Gambia Immigration Department	https://www.facebook.com/share/v/14St76WtRYm/
8. The Alkamba Times	https://www.facebook.com/share/p/17i6E4Ct9A/
9. The Point Newspaper	https://share.google/QNKf7CYOYEpy9ys6c



Previous Operations

Has a similar event affected the same area(s) in the last 3 years?	Yes
Did it affect the same population group?	No
Did the National Society respond?	-
Did the National Society request funding form DREF for that event(s)	-
If yes, please specify which operation	-

If you have answered yes to all questions above, justify why the use of DREF for a recurrent event, or how this event should not be considered recurrent:

-

Lessons learned:

The Gambia Red Cross Society is using the past experience and lessons learnt to improve in this operation. For example, Previous migration and disaster-related responses have shown that delayed or fragmented coordination can lead to duplication of efforts and unmet needs. In the current operation, this lesson is being applied by early engagement with NDMA, the Navy, health authorities, immigration services, and Movement partners, as well as proactive information-sharing with the Senegalese Red Cross to address the cross-border dimension of the incident.

Past operations demonstrated that psychological trauma among survivors and families often exceeds initial estimates and can be overlooked if not prioritised early. As a result, MHPSS has been integrated as a core component of the response from the beginning, with trained personnel deployed to reception centres and affected communities and plans for continued psychosocial follow-up.

Experience from earlier maritime and migration incidents highlighted the importance of rapid communication between affected persons and their families. This lesson is being applied through the early activation of RFL services, including phone call support and coordination with regional counterparts, to reduce uncertainty and emotional distress.

Previous responses showed that reliance solely on ad hoc procurement can delay assistance. In this operation, pre-positioned relief items and existing logistics arrangements were immediately utilized, with replenishment planned to maintain readiness for potential additional incidents.

Lessons from past emergencies emphasized the risk of burnout and secondary trauma among responders. This has informed the current approach through volunteer rotation, safety briefings, use of PPE, and access to psychosocial support and debriefings for staff and volunteers.

Earlier operations underscored that lack of clear communication can increase frustration and mistrust. Accordingly, community engagement and transparent communication are being prioritised to manage expectations, counter rumors, and strengthen acceptance of the Red Cross response by deploying GRCS Teams to the affected communities and Reception Centres.

The current operation is better positioned to reduce operational risks, improve coordination, enhance protection and dignity, and deliver a more effective and humane response to those affected people.

Did you complete the Child Safeguarding Risk Analysis in previous operations, what was risk level?	Yes
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Current National Society Actions

Start date of National Society actions

01-01-2026



Shelter, Housing And Settlements	<p>The Gambia Red Cross Society provided 100 mattresses and 2 tents to the Government Tanji Reception Centre managed by The Gambia Immigration Department.</p> <p>The Gambia Red Cross Society Humanitarian Service Point (HSP) in North Bank Region is also activated to provide humanitarian services to affected migrants and their families including the host communities. The humanitarian services provided to migrants above are mainly through the HSP (e.g. shelter, food, PSS, Health Care). There is also a referral service to other partners for support beyond the NS capacity for safeguarding, health care and other thematic.</p>
Livelihoods And Basic Needs	<p>Food and refreshment are being provided to more than 250 migrants at the Tanji Reception Centre since their arrival.</p>
Health	<p>GRCS is providing MHPSS, Health care through the GRCS GPlus Ambulance Services. first aid services, body bags and PPEs to the Volunteers and Government Operational Team e.g. Gambia Navy.</p> <p>100 MPHSS and 30 Information Sessions were held with the affected migrants.</p> <p>PSS sessions with GRCS Staff and volunteers ongoing.</p>
Water, Sanitation And Hygiene	<p>The NS provided Hygiene and dignity kits to 154 intercepted migrants including those affected in the incident.</p> <p>Water and Retrenchments are also provided to over 200 affected people.</p>
Protection, Gender And Inclusion	<p>Protection issues are being address as there are children, girls and pregnant women affected. the support given includes:</p> <p>34 set of clothing 50 Blankets, 24 sets of Hygiene kits, 72 Towels, 101 PSS services, information and counseling session 101, 29 shoes, 39 referral case to the Hospital. 125 pack of Hot meals for 3 Squar meals, and Temporal shelter and PSS for 182 migrants. 30 packets of sanitary pads, PSS services for migrant's families in Essau and Jinak,</p> <p>23 successful RFL Calls were made by the affected Migrants.</p>
Migration And Displacement	<p>More 750 migrants are currently displaced at the government reception centre for humanitarian assistants, and this includes both nationals of The Gambia, Mali, Guinea Conatary, Ivory Coast, Senegal.</p> <p>The Gambia Red Cross Society deployed the following capacities to support the operations:</p> <ol style="list-style-type: none"> 1. The GRCS has two technical specialists in Migration and Displacement, Restoring of Family Link Officer, Operations Management team with thematic volunteer capacity at central and regional levels, thus an internal capacity to respond to the needs of those rescued and families affected by the tragedies. 2. Highly trained MHPSS personnel: the GRCS can provide psychosocial support and counseling to the families, and as well raise awareness of the risks and dangers relating to similar migration. 3. Disaster preparedness and response: the DM capacity and systems is being capitalized on to scale up response and plan ahead for future reoccurrences.
Community Engagement And Accountability	<p>The volunteers and staff are currently deployed to North Bank Region and West Coast Region to engage with the migrants and communities on the work of the Red Cross, Community Partnership, Risks involved in Migration and Humanitarians Services they can access.</p>
Coordination	<p>There is no coordination meeting established yet as at now. While the Government leads on this responsibility to ensure meaningful coordination amongst partners, the GRCS will continue to rely on its auxiliary to engage in operational response to the needs of those rescued and the affected families, while conducting humanitarian diplomacy and advocacy with the authorities, to ensure safety, dignity and protection for all people on</p>



	<p>the move.</p> <p>Communication has been established with Migration and Displacement counterparts in Senegalese Red Cross, and they have initiated actions to support the SARs.</p>
Assessment	75 staff and volunteers are in the operations conducting assessments to determine the needs on the ground, those missing, injured, dead and the next actions required.
National Society EOC	The GRCS Emergency Operation Centre is activated and coordinating data collection and analysis for informed decision-making.
Other	Coordination efforts with partners.

IFRC Network Actions Related To The Current Event

Secretariat	The IFRC currently support in the coordination efforts and potential development of a DREF response to the situation.
Participating National Societies	Currently based on the supplies of Dead Body Bags, the remaining 9 bags are deployed for use by the search and rescue team.

ICRC Actions Related To The Current Event

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Other Actors Actions Related To The Current Event

Government has requested international assistance	No
National authorities	<p>From the onset, the Ministry of Defence confirmed that a joint rescue effort of the Navy and local fishermen started following the landed in distress in Canary over the night of 31 December 2025. GRCS has also been active in that support.</p> <p>The affected people have been transferred to The Gambia Immigration Department (GID) reception centre in Tanji where the provision of assistance will continue. There is an ongoing effort by relevant authorities in The Gambia and Senegal to get more information about the fate of the missing persons. There is no coordination meeting established yet as at now. While the Government leads on this responsibility to ensure meaningful coordination amongst partners, the GRCS will continue to rely on its auxiliary to engage in operational response to the needs of those rescued and the affected families, while conducting humanitarian diplomacy and advocacy with the authorities, to ensure safety, dignity and protection for all people on the move.</p> <p>The NDMA is fully involved and is leading the coordination of the response.</p> <p>The Gambia Navy has been leading the coding, and search and rescue with support from local fishermen.</p> <p>The GID is providing immigration screening and assessment to ascertain nationalities and the provision of transportation to and the management of the reception centre.</p> <p>MoH is providing ambulances including health referrals and management of health-related cases.</p>



UN or other actors

IOM provide 94 sets of essential items/materials (T-shirt, Shortbread biscuit, blanket, slippers and trouser) for the affected migrants at the Tanji Reception Centre of Government.

Are there major coordination mechanism in place?

The National Disaster Management Agency has called for Coordination Meetings for the overall operations and there is a National Migration Coordination Mechanism Chaired by the Ministry of Foreign Affairs.

Needs (Gaps) Identified



Shelter Housing And Settlements

The migrant boat incident has created urgent and short-term shelter needs for intercepted and rescued migrants, as well as pressure on existing reception facilities. Survivors arrived with no personal belongings and required safe, dignified, and weather-appropriate temporary shelter to recover from physical exhaustion and trauma. Current reception centres are experiencing overcrowding, with limited sleeping space and inadequate bedding, increasing risks to health, protection, and wellbeing.

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Reception sites, especially in Tanji are experiencing pressure on shelter/NFI capacity (overcrowding, bedding, essential items), and this may worsen if new interceptions occur. The possibility of additional interceptions is high, which could rapidly overwhelm available shelter capacity. Immediate support is therefore required to expand temporary shelter solutions, improve sleeping conditions, and ensure minimum humanitarian shelter standards are met, while maintaining flexibility to scale up or relocate shelter support as the situation evolves.



Livelihoods And Basic Needs

Food and basic needs support remains largely short-term and may not meet sustained needs for migrants in Tanji and affected families/host communities in North Bank coastal areas. Shops and food is accessible in surrounding areas of the reception centers but resources to buy is the main gaps.

These individuals have arrived with nothing and exhausted by the travel. The need for immediate food ready to eat and water is the lifesaving need upon arrival. They have also used their limited income to pay for boats to Europe, the human, social, and emotional impacts are profound and long-lasting. Many migrants were economically active individuals whose departure represented a coping strategy for unemployment and poverty; their death, disappearance, or interception has left families without expected financial support and facing immediate economic distress. These survivors have therefore lost all personal assets and lack access to income-generating opportunities while in reception centres, limiting their ability to meet basic needs such as food, hygiene items, communication, and transport. These boat incidents represent a sudden loss of income and livelihoods for the survivors, families of the dead and missing, and affected host community households.

While ready-to-eat food must be urgently provided in the days immediately following arrival, a more dignified and sustainable way for migrants to access food and other essential needs requires a flexible mechanism. Although movement from reception centres is restricted, migrants can access nearby shops and food facilities, making cash assistance appropriate to meet diverse and evolving needs. Cash support will complement initial in-kind assistance by enabling households to cover priority basic needs, access essential services, reduce negative coping strategies, and stabilize livelihoods in the immediate aftermath of the incident, alongside existing government support.

The impact goes beyond the migrants but also affect the coastal communities of the North Bank Region, particularly Jinack and surrounding villages, as well as in urban areas such as Banjul, Kanifing Municipality and the West Coast Region. The first impact is on the use of available host families' resources as some have been providing support to the migrants. Also, in areas such as Banjul, Kanifing Municipality and the West Coast Region, where survivors are hospitalized or hosted in reception centres, services are strain by the migration given that they are often departure points to Europe for Others. There is a pressure on different services and this wave of arrival with the high deadly incidence and number of physical and mental impact will affect the local services and impact the host communities' activities. These communities are already at high poverty levels, limited livelihood opportunities, exposure to coastal



hazards, and long-standing migration pressures, which increase the likelihood of risky sea crossings. The situation is putting further strain as they support affected families and accommodate survivors.



Health

The migrant boat incident has generated significant and immediate health needs among survivors and affected communities. But also, in terms of management of the dead body.

Many rescued migrants arrived with injuries, dehydration, exhaustion, and exposure-related conditions following prolonged time at sea, requiring urgent medical attention, first aid, and referral to health facilities. Overcrowded reception centres and temporary shelters increase the risk of communicable diseases, while limited access to hygiene facilities further compounds health vulnerabilities. Health needs include ongoing first aid and referrals for injuries/exposure-related conditions.

The incident has resulted in significant need for rescue, research and dead body management needs that are still ongoing with the support of The Gambia local actors. The research and dead body management continue, supported by Local authorities and Navy. However, with the high amount of death and the missing people, continued dignified management of the dead in coastal/offshore areas (Jinack-Banjul-Bakau) requires adequate PPE/body bags, strict SOP adherence, and responder rotation/duty of care to prevent fatigue and secondary trauma.

In addition, the severe psychological impact of the incident has led to acute mental health and psychosocial needs, including shock, grief, anxiety, and trauma among survivors and families of the dead and missing. Continued health support is therefore required to strengthen emergency medical care, referrals, disease prevention measures, and integrated MHPSS services for both the affected communities and the response team, ensuring timely access to quality health care and safeguarding the physical and mental wellbeing of all affected groups.



Water, Sanitation And Hygiene

WASH services are strained at reception and host locations, with limited hygiene items and sanitation concerns reported in some areas, increasing public health risks. The incident has placed additional pressure on WASH facilities at reception centres and temporary accommodation sites hosting intercepted and rescued migrants.

Many survivors arrived without personal hygiene items and have limited means to maintain basic hygiene and dignity. Inadequate access to safe water, functional latrines, bathing facilities, and handwashing points can negatively affect health outcomes, particularly for women, children, and injured or sick individuals. In addition, based on Branch observation, there is a reported open Defecation highly witnessed in the host communities in North Bank Region, which could escalate on a bigger Sanitation issues as the situation evolve with newcomers. Immediate WASH support is therefore required to reinforce water availability, improve sanitation facilities, and provide hygiene items and hygiene promotion, ensuring safe, dignified, and healthy living conditions in line with minimum humanitarian standards.

Despite rapid lifesaving support by The GRCS and authorities, significant needs remain partially unmet across the reception/hosting points and impacted coastal communities. Especially on a sustained access to water and maintaining adequate hygiene practice to mitigate health risks.



Protection, Gender And Inclusion

The groups most severely affected include the following demographics:

- Migrants and people on the move, who face life-threatening risks at sea, limited access to protection and services, and legal and social vulnerabilities.
- Young adults, who make up the majority of those attempting sea migration and are often the primary income earners for their families.
- Women and children, particularly those who have lost spouses, parents, pregnant, or caregivers, increasing protection risks and psychosocial needs.
- Children, including very young children, who are especially vulnerable to trauma, loss of caregivers, and long-term psychological effects.
- Elderly persons, who may depend on missing or deceased family members for care and support.



- People with disabilities or chronic illnesses, whose needs may be overlooked during emergency response and who face additional barriers to accessing assistance.

Despite the generic group exposed to this situation, there are still limited data on the gender, group affected and specific Protection issues/risks. However, with the situation of their arrival and the current shelter solution, there is always an elevated Protection risk for the women, children and pregnant women that are part of the migrants but also in the host communities.

There is also observed a language barrier for non-Gambian migrants that may reduce access to information and services.

Many affected individuals are experiencing acute distress, uncertainty, and fear, compounded by loss of relatives, lack of information, and, for some migrants, lack of legal status. Families seek information on the fate and whereabouts of loved ones. The growing number of missing individuals (100+) has made the RFL an essential need. The demand for RFL remains high as families seek reliable updates and tracing support. The effort in that regards are hindered by the data limitation. Information on rescued/intercepted/missing/deceased persons remains fluid, limiting accurate targeting, referrals and planning, and cross-border updates from Senegal are still incomplete. While NDMA leads, structured multi-agency coordination and service mapping are not yet fully functional, affecting harmonized coverage and referral pathways (especially for protection/RFL/MHPSS).



Migration And Displacement

The Maritime migration route through or from Gambia is not new. But the current incident has been particularly deadly and rapid in a short period of time. The crisis is also characterized by sudden-onset mortality and trauma, repeated attempted departures, and a rapidly evolving caseload across multiple coastal and urban sites (Jinack, Tanji, Lamin, Batokunku, Barra, Banjul, Bakindik, Bijilo/Senegambia), increasing pressure on reception capacity, health services, and humanitarian resources. With expected additional departures, the situation is concerning.

The affected population includes Gambians and multiple West African nationalities (Senegal, Guinea Conakry, Burkina Faso, Côte d'Ivoire, Sierra Leone, Mali, Guinea-Bissau, Nigeria), indicating a mixed-migration context with varying legal and protection needs. Many are onward moving toward the Canary Islands/Europe, and interceptions show continued intent to depart, suggesting the situation may escalate through new waves. 259 migrants spent nearly 2 weeks at sea before interception. In Bakindik Koto and others migrant journey remains unconfirmed. However, there have been multiple interception sites: Jinack, Tanji, Lamin, Batokunku, Barra, Banjul, Bakindik, Bijilo/Senegambia. At the moment, the main reception/hosting is GID Tanji Reception Centre (Tanji) – primary reception/temporary hosting for intercepted/rescued migrants. The Gambia RC Humanitarian Service Point (HSP) in North Bank Region support hub for humanitarian services, referrals and community engagement.

Most affected coastal communities / key incident & interception areas

- Jinack area (incl. Kajata and Niji) and surrounding coastal communities in North Bank Region.
- Barra/Essau, Kanuma, Mbankan, Bakindik (hosting/affected communities and movement points).
- Coastal/offshore areas around Banjul and Bakau (Kanifing Municipality) where bodies were reportedly recovered.
- Additional interception points: Batokunku (near Tanji), Tanji, and Lamin mangroves.

More demographics data are yet to be confirmed. Based on the migration route, the state of arrival of the individuals or during interception there are Immediate lifesaving and basic assistance and services are needed. Include:

- Immediate lifesaving, especially for health services and assistance upon reception: first aids, psychological first aid, access to health care.
- A safe reception with clear information and access to shelter remains an important way to manage the arrivals and support the transferred groups. Limiting frictions and protection concerns.
- Access to basic needs such as Food, water, and essential relief at interception points, reception centres, and transfer routes (especially for those arriving after days/weeks at sea).
- NFIs/dignity: clothing, blankets, hygiene items, and basic dignity materials due to total loss of belongings and exposure.
- The family link restoration seems to be needed. Although the people remained to be registered and more data available, there are various groups and ages, include some children that were reported to be in the boats.

Beyond the migrant reception issue, this is also a community shock for the concerned communities of departures but also arrivals. The majority of interception concentrated in Jinack and surrounding villages in the North Bank Region, where many families have lost relatives or remain in prolonged uncertainty of their situation. Urban areas (Banjul, Kanifing, West Coast) and reception sites face secondary pressure through hospitalization, hosting, and transit support.

The scale and dispersion across coastal/urban sites are stretching local response capacity; arrivals are increasing faster than resources. Cross-border complexity with Senegal requires coordination on search-and-rescue information, recovered bodies, survivor pathways, and family notification processes. GRCS is supporting with authorities, but sustained needs require surge-capable coordination, standardized reception procedures, and a clear division of roles among state and humanitarian actors.





Community Engagement And Accountability

The incident has highlighted the critical need for strong community engagement and accountability mechanisms to address fear, grief, and uncertainty among affected migrants, families, and host communities. Misinformation, rumours, and unmet expectations can quickly undermine trust in the response if communities are not adequately informed and heard. Survivors and families of the dead and missing require clear, timely, and culturally appropriate information on available assistance, tracing processes, and referral pathways. At the same time, affected communities need safe and accessible channels to express concerns, provide feedback, and lodge complaints. Strengthening CEA is therefore essential to ensure the response is people-centred, transparent, and responsive, improve acceptance of humanitarian actions, and adapt assistance based on community feedback and evolving needs.

Any identified gaps/limitations in the assessment

While immediate lifesaving assistance has been provided, several needs remain partially addressed, particularly in first aid and services, mental health and psychosocial support (MHPSS) due to the scale of trauma among survivors and families of the dead and missing. Longer-term shelter solutions, sustained food support, and WASH services at reception centres and host communities, especially if displacement is prolonged.

The response is also constrained by the following limitations:

- Lack of sufficient information regarding the incident, the exact number involved, missing, death, and their whereabouts, thus making it difficult to address all the needs and plan for an appropriate response require further assessment and reinforcement. This limits the ongoing Restoring Family Links (RFL) and protection analysis and efforts.
- Shortages of specialized supplies, including MHPSS materials, PPE for prolonged body handling activities.
- Gaps in Human resource capacity, especially trained MHPSS personnel and interpreters, is limited relative to the magnitude of needs.
- Operational constraints include incomplete and evolving information on the number and whereabouts of other affected persons, which complicates planning and targeting. The coastal and cross-border nature of the incident further increases complexity. Overall, limited logistics capacity and specialized HR such as MHPSS/interpretation/IM may constrain coverage and quality if the situation escalates. As it stands, NS is still able to manage the situation, but further escalation will need adequate scale-up.
- There are gaps in coordination, particularly regarding cross-border information sharing with Senegal on search and rescue outcomes, missing persons, and the repatriation of human remains. The absence of a fully established multi-agency coordination platform at the early stage of the response has limited comprehensive needs mapping and synchronized service delivery.

Overall, these gaps underline the need for continued assessments, strengthened coordination, and adaptative intervention.

Operational Strategy

Overall objective of the operation

The overall objective of this DREF operation is to ensure the immediate survival needs and safeguard the dignity of at least 5,000 people (including affected migrants, their families and host communities) following the Jinack coast boat capsizing and related interceptions in North Bank Region, West Coast Region, Banjul, and Kanifing Municipality.

GRCS, through a 4-months intervention, plans to achieve this by ensuring timely access to safe emergency shelter, essential food and non-food items, multi-purpose cash assistance, clean water and sanitation, health and first aid services, mental health and psychosocial support, protection and restoring family links, and safe and dignified management of the dead, while strengthening coordination with national and cross-border actors to support effective search and rescue and reduce risks linked to irregular migration.

Operation strategy rationale

The operation strategy for this DREF intervention is designed to provide a rapid, coordinated, and protection-centred humanitarian response to the migrant boat capsizing incident off the Jinack coast and those intercepted in other locations, while remaining flexible to scale up considering evolving needs, ongoing search and rescue (SAR) operations, and potential future incidents.

In response, to the identified needs and gaps, the operation prioritises direct humanitarian assistance, strengthened coordination with authorities and Movement partners, deployment of specialized MHPSS and RFL services, and logistical support to ensure continuity and quality of assistance. Most urgent needs addressed by the operation

The operation focuses on:

- Immediate lifesaving support for rescued migrants, including food, shelter, basic health care, first aid, and non-food items.



- In the joint effort for rescue and research, GRCS support safe, dignified handling and management of deceased persons in line with humanitarian standards.
- Support the provision of multi-purpose cash to ensure continuity of access to basic needs and food beyond the immediate distribution of ready to eat meals and kits. Given that migrants can access nearby markets despite movement restrictions, cash enables them to meet priority needs in a flexible and dignified manner, aligned with individual household circumstances. By complementing in-kind assistance and government support, cash assistance helps reduce negative coping strategies, supports access to basic services, and contributes to short-term livelihood stabilization in the immediate aftermath of the incident. Value set at CHF 58 (5,500 GMD) for estimated 1 month as average expected time at the center before longer-term solution or assistance is set. Value could be adjusted for migrant that are as individuals
- Provide mental health and psychosocial support for survivors and families of those who are dead or missing, to mitigate acute trauma and longer-term psychological harm.
- Continue the health prevention by ensuring access to basic wash items and raising awareness among the communities (host and migrants), reducing further harm.
- Support the restoring of family links through phone call services and coordination with regional counterparts.
- Support to coordination and information management to enable an effective, timely response.

These priorities are based on the high mortality risk, severe psychological impact, and protection concerns associated with irregular migration incidents at sea. Survivors face immediate physical and emotional vulnerabilities, while families and communities are experiencing profound distress due to deaths and missing relatives. Prioritising MHPSS, RFL, Cash Assistance, Health, Feeding, Protection, and dignified management of the dead reflects the scale of trauma and uncertainty, while continued support to SAR-related coordination responds to the fluid and cross-border nature of the emergency.

The approach focuses more on community-based relief distribution, deployment of trained volunteers and technical specialists, use of established reception centres, and close collaboration with government institutions leverage GRCS's comparative advantages and existing systems. These actions are expected to achieve timely delivery of assistance, reduce suffering, enhance protection and dignity, and ensure that survivors and affected families receive holistic support. Integrating MHPSS, Protection and RFL into the early phase of the response is critical to addressing invisible but severe humanitarian impacts and preventing longer-term harm.

Several contextual factors shaped the operation strategy, including:

- Ongoing SAR efforts and the uncertainty surrounding missing persons.
- The cross-border dimension of the incident involving Senegalese waters.
- Recurrent reports of potential new boat departures, increasing the risk of additional emergencies.
- Limited resources and logistical capacity amid high humanitarian needs.
- GRCS's auxiliary role and its strong relationships with national authorities and Movement partners.

These factors necessitated a strategy that is adaptive, coordination-focused, and scalable, ensuring readiness to respond to new developments while addressing immediate humanitarian priorities with speed, dignity, and effectiveness.

As migration is a long-standing humanitarian concern in The Gambia, the DREF intervention will prioritise strong coordination with the local authorities and other key actors to ensure effective management of the situation and a clear transition beyond GRCS capacity and DREF resources. The exit strategy will focus on a planned and gradual shift from emergency assistance to the management of longer-term and sustained needs, with GRCS strengthening engagement with local partners and the IFRC Secretariat to ensure continuity of critical services. Following the DREF operation, ongoing needs related to migration, protection, community engagement, and psychosocial support will be progressively absorbed into the GRCS four-year EU-funded Migration Project, while the Government of The Gambia, with support from humanitarian, development, and bilateral partners, will assume full leadership of reception centre management, reintegration, asylum, and voluntary return processes, ensuring a smooth handover, no service gaps, and reinforcement of national systems and the auxiliary role of GRCS.

Targeting Strategy

[Targeting Strategy Supporting Document](#)

Who will be targeted through this operation?

This operation will primarily target the 1617 intercepted migrants and the people directly affected by the migrant boat capsizing incident off the Jinack coast, their families. In addition, the intervention will also support some host families with a focus on the most vulnerable groups impacted by the emergency that have engaged resources to support the migrants. The targeted groups include:

1. Survivors of the boat accident, including those hosted at the GID reception centre in Tanji and those receiving medical care at health facilities.
2. Families of intercepted/rescued migrants, the deceased and missing persons, particularly those in Jinack and other affected coastal communities in the North Bank Region, West Coast Region, Banjul and Kanifing Municipality.



3. Migrants on the move, including undocumented migrants affected by the incident who face heightened protection, health, and psychosocial risks.
4. Affected host communities, especially those experiencing collective trauma due to loss of relatives and repeated migration-related tragedies. This group will represent less than 30% of the target and essentially for the cash and awareness raising.

Special consideration is given to the following vulnerable groups:

- Women and girls, who may face heightened protection risks and specific health and dignity needs.
- Children, including unaccompanied or separated children, who are particularly vulnerable to trauma, exploitation, and long-term psychological harm.
- Injured, sick, and hospitalized survivors, who require urgent and continued medical and psychosocial support.
- Families experiencing compounded vulnerability, such as those with multiple missing or deceased relatives or limited economic means.
- Those experiencing severe psychological distress

The operation will apply the principles of humanity, impartiality, and neutrality, ensuring assistance is provided solely on the basis of need, without discrimination.

Targeting will be carried out through:

- Close coordination with government authorities managing reception centres and health facilities.
- Registration and verification of affected persons using available data while respecting data protection and confidentiality.
- Community engagement and feedback mechanisms to identify unreported needs and vulnerable households.
- Deployment of trained volunteers and technical staff, including MHPSS, Protection, and RFL specialists, to ensure sensitive and appropriate identification of vulnerable individuals.

Through this approach, the operation aims to ensure that those most affected and least able to cope; particularly migrants and families living with loss and uncertainty receive timely, dignified, and life-saving humanitarian assistance.

Explain the selection criteria for the targeted population

The logic behind this targeting strategy is to prioritise severity of need and potential for further harm. Individuals and families most affected by the incident and least able to cope without assistance are targeted first to prevent further loss of life, livelihood, reduce suffering, and protect dignity. The selection criteria also reflect the evolving and uncertain nature of the emergency, allowing flexibility to include newly identified affected persons as search and rescue efforts continue and more information becomes available. The targeted groups are explained by the following justification:

- **Direct impact of the incident:** Priority is given to individuals who were directly affected by the boat accident, including survivors, injured persons, and those who lost personal belongings or means of subsistence because of the incident. These individuals face immediate life-threatening, health, and protection risks and therefore require urgent humanitarian support. Migrants are specifically prioritised because the highest vulnerable population, often with limited access to services, protection mechanisms, and social support systems. Their irregular status, language barriers, and fear of authorities can further exacerbate exclusion and distress, making targeted humanitarian assistance essential to ensure safety, dignity, and access to basic services.
- **Families of deceased and missing persons:** Households with confirmed deaths or missing relatives are targeted due to their acute psychosocial distress, uncertainty, and need for restoring family links, counselling, and support related to basic needs and the safe and dignified management of the dead.
- **Level of vulnerability and risk:** Within the affected population, individuals demonstrating higher levels of vulnerability are prioritised. This includes people with injuries or medical conditions, those experiencing severe psychological trauma, and individuals with limited coping mechanisms or social support.
- **Migration and protection-related vulnerabilities:** Migrants, particularly those in irregular situations, are specifically targeted due to their heightened exposure to protection risks, limited access to services, fear of stigma or detention, and barriers to information and assistance. Their vulnerability is further increased by language, cultural, and legal challenges.



Total Targeted Population

Women	166	Rural	50%
Girls (under 18)	22	Urban	50%
Men	993	People with disabilities (estimated)	5%
Boys (under 18)	36		
Total targeted population	2,000		

Risk and Security Considerations (including "management")

Does your National Society have anti-fraud and corruption policy?	Yes
Does your National Society have prevention of sexual exploitation and abuse policy?	Yes
Does your National Society have child protection/child safeguarding policy?	Yes
Does your National Society have whistleblower protection policy?	Yes
Does your National Society have anti-sexual harassment policy?	Yes

Please analyse and indicate potential risks for this operation, its root causes and mitigation actions.

Risk	Mitigation action
<ul style="list-style-type: none"> - Incomplete or rapidly changing information (Operational Risk): Ongoing search and rescue operations, cross-border nature of the incident, limited real-time data sharing, and experience of information gaps in maritime migration incidents. - Delays in response, inaccurate targeting, duplication or exclusion of affected persons, and reduced effectiveness of assistance. 	<ul style="list-style-type: none"> - Conduct continuous rapid needs assessments. - Maintain regular information updates with NDMA, Navy, health facilities and Senegalese Red Cross. - Apply flexible planning with periodic reviews. - Use branch volunteers for community-based information gathering.
<ul style="list-style-type: none"> - Safety and security hazards to staff and volunteers (Safety & Security Risk): Hazardous coastal terrain, rough sea conditions, emotionally charged environments, and risk of responder fatigue and secondary trauma noted in previous operations. - Injury, illness or burnout of personnel and safety of volunteers especially closing late in the night for operations, will reduce operational capacity, and disruption of activities. 	<ul style="list-style-type: none"> - Enforce GRCS and IFRC safety protocols, ensure use of PPE and existing SOPs for body handling, apply volunteer rotation and rest periods. - Allocate a vehicle to transport volunteers and staff. - Provide MHPSS support for responders, and control movements including avoidance of unnecessary night travel.
Weak coordination, particularly cross-border (Coordination Risk): Early-stage absence of structured multi-agency coordination and complexities linked to cross-border SAR and information sharing with Senegal, as seen in previous incidents.	<ul style="list-style-type: none"> - Engage actively in NDMA-led coordination mechanisms. - Maintain regular communication with Senegalese Red Cross and IFRC counterparts, assign clear internal focal points within GRCS. - Ensure timely situation reporting and information sharing.
Insufficient financial, logistical, and human resources (Resource & Financial Risk): High and prolonged MHPSS and RFL needs, limited	<ul style="list-style-type: none"> - Activate DREF funding, prioritise life-saving and high-impact interventions, utilize local procurement to reduce delays and



pre-positioned stocks, logistics constraints, and similar capacity challenges faced in previous GRCS emergency responses.	costs' - Prepare contingency plans for scale-up and additional resource mobilization.
- Community frustration and reputational risk (Social & Reputational Risk): High levels of grief and uncertainty, delays in information on missing persons, and unmet expectations, as experienced in past migration-related emergencies. - Reduced community acceptance, tension toward responders, and reputational damage to GRCS.	Ensure transparent and culturally appropriate communication, strengthen community engagement and feedback mechanisms, clearly communicate roles and limitations, and reinforce GRCS neutrality, auxiliary role, and humanitarian mandate.
Risk of additional boat departures, incidents and interceptions.	- GRCS will maintain standby volunteer teams, essential relief stocks, flexible budgeting within the DREF. - Continuous monitoring and review of risks and mitigation measures.

Please indicate any security and safety concerns for this operation:

The operation will be implemented in a low to moderate risk environment, with no active conflict but several safety and security concerns linked to the coastal setting and the sensitive migration context. Key risks include coastal and maritime hazards, unsafe terrain, road safety during field movements, and health risks such as exposure to communicable diseases and psychological stress for staff and volunteers. High levels of grief and trauma among affected communities may also lead to emotional tension at communities, reception centres and coastal sites.

To mitigate these risks, GRCS will apply strict safety and security protocols, ensure the use of appropriate PPE, coordinate closely with authorities, manage staff movements carefully, and provide psychosocial support and duty-of-care measures for responders. Clear communication and community engagement will be prioritised to reduce tension and ensure the safety and wellbeing of personnel, volunteers, and target population throughout the operation.

Has the child safeguarding risk analysis assessment been completed?	Yes
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Planned Intervention



Shelter Housing And Settlements

Budget: CHF 26,734

Targeted Persons: 1,617

Indicators

Title	Target
# of displaced or intercepted migrants provided with safe temporary shelter using the procured tents.	1,617
Reduction in the number of people sleeping without adequate shelter at reception centres	70
% of reduction on the overcrowding in the shelter facilities at the reception centres	50
% of migrants reporting improved sense of safety and privacy in temporary shelter due to adequate sleeping space	70
# of mattress covered under this DREF	1,200



Priority Actions

- Procure 1617 blankets for migrants during interventions/response.
- Procure 1200 single mattresses for response during interceptions ease limited overcrowding in bedding needs. Remaining mat covered from other sources of funding.



Multi Purpose Cash

Budget: CHF 23,746

Targeted Persons: 323

Indicators

Title	Target
# of HHs registered for the Cash Assistance	343
# of intercepted and rescued migrants, family members of dead and missing migrants, and host communities' households that receive Cash Assistance	1,617
# of trained on staff and volunteers on CVA targeting, beneficiary registration, data collection and protection, and cash delivery standards.	50
# of PDM Conducted after the Cash and other Interventions	1
# of people that express satisfaction on the cash assistance meeting their basic needs	100
# of hh recipients satisfied with timeliness and adequacy of cash assistance.	323

Priority Actions

- Registration of Beneficiary Migrants and Host Communities for Cash Assistance
- Cash Assistance to 1617 intercepted and rescued migrants, family members of dead and missing migrants, and host communities' households. Averaging 323 households' migrants, and host households.
- Train 50 staff and volunteers on CVA targeting, beneficiary registration, data collection and protection, and cash delivery standards.
- Conduct PDM on the response.



Health

Budget: CHF 18,500

Targeted Persons: 1,617

Indicators

Title	Target
# of staff and volunteers on health promotion and disease prevention.	100
# of mosquito nets procured and distributed to the Reception Centres and HSPs.	2,500
# of mosquito repellents procured and distributed to the Reception Centres and HSPs for the migrants.	2,500
# of people reached through awareness sessions on mental health, PSS and wellbeing.	1,617

# of people reached through health promotion and disease prevention education.	1,617
# of mental cases and other serious trauma cases referred for professional services.	-
# of months for the provision of First Aid and Ambulance Mobile Clinic services	3
# of body bags procured for response	200
# PSS services provided to volunteers and staff	-
# of deceased persons managed according to safe and dignified standards.	-
# of targeted individuals reporting reduced psychological distress after MHPSS sessions.	-

Priority Actions

- Trained 100 staff and volunteers on health promotion and disease prevention.
- Procure 1,617 mosquito nets for response at the Reception Centres and HSPs.
- Procure and Distribute 1,617 mosquito repellents to Reception Centres and HSPs for the migrants.
- Conduct awareness sessions on mental health, PSS and wellbeing to the migrants, their families and host community members.
- Conduct health promotion and disease prevention education targeting malaria, hygiene, respiratory illnesses, flus, vector borne diseases etc reaching 1,617 migrants, their families and host community members.
- Refer severe mental health cases to health facilities and other professionals.
- Identify persons with psychosocial distress related to separation and missing relatives for referral and further professional management.
- Provide First Aid and Ambulance Mobile Clinic services to migrants, their families and host community members for a period of 3 months.
- Procurement of 200 body bags for response in managing the dead bodies of capsized boats.
- Provision of PSS Services to volunteers and staff.



Water, Sanitation And Hygiene

Budget: CHF 28,988

Targeted Persons: 1,617

Indicators

Title	Target
# of staff and volunteers trained on sanitation and hygiene promotion, key WASH and disease prevention messages.	100
# of hygiene kits/essential needs set procured and distributed	1,000
# of detergents procured, replenished, and distributed at the Reception Centres and HSPs.	2,500
# of people reached through sanitation and hygiene promotion sessions.	1,617
# Number Dead Body Bags procured for replenishment and response	200
% of targeted population with access to safe drinking water at reception centres (minimum Sphere standard: 15L/person/day).	100
% of targeted population with access to functional handwashing facilities and hygiene items.	70

% reduction in reported open defecation in host communities	70
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Priority Actions

- Train 100 staff and volunteers on sanitation and hygiene promotion, key WASH and disease prevention messages.
- Procure, Replenish and Distribute 16170 hygiene kits/essential needs (soap, towel, toothpaste, toothbrush, body oil, body wash net, sanitary pads, pants, washing buckets, slippers shoes).
- Procure and distribute 2,500 detergents for the Reception Centres and HSPs.
- Conduct sanitation and hygiene promotion sessions reaching 1,617 migrants, their families and host community members.
- Procurement of 200 Dead Body Bags for Replenishment and the continuity of body management in the search and Rescue Response.



Protection, Gender And Inclusion

Budget: CHF 5,820

Targeted Persons: 1,617

Indicators

Title	Target
# of staff and volunteers trained on PSEA, PGI principles, safeguarding, code of conduct and protection services and mainstreaming in the operations.	100
% of beneficiaries at least meeting 1 vulnerability targeting criteria	100
# of people reached with protection information (PGI, PSEA and RFL).	1,500
# of staff and volunteers trained on RFL to detect signs of family separation, RFL Calls provisions and tracing services for missing family members.	100
# of tracing services, Salamats and RC Messages recorded.	-
# of RFL Calls Made by Migrants	600
# of Dignity kits distributed to affected migrants	200
# of babies and pregnant women given special care and nutritional food aid	-
# of migrants and families reporting improved access to protection information and services	-
	-

Priority Actions

- Train 100 volunteers on PGI principles, safeguarding, code of conduct and protection services and mainstreaming in the operations.
- Ensure Inclusion targeting criteria that can prioritise women, PWDs, elderly, sick/injured, children, girls, migrants, and the pregnant.
- Referral survivors of SEA, GBV and child protection cases through referral pathways
- Development and distribution of protection information (PGI, PSEA and RFL) in the communities and reception centres during outreach sessions reaching 1,617 people.
- Train 100 staff and volunteers on RFL to detect signs of family separation, RFL Calls provisions and tracing services for missing family members.
- Conduct tracing services and monitor outcomes including Salamats and RC Messages.
- Provide RFL Calls for 600 migrants
- Provide 200 set Dignity kits to affected migrants.
- Provide Nutritious food to children and pregnant women.
- Provide special needs support to PWDs.





Migration And Displacement

Budget: CHF 68,837

Targeted Persons: 1,617

Indicators

Title	Target
# of staff and volunteers trained on Migration and Displacement approaches, standards, risk associated with migrations and Humanitarians services for migrants.	100
# of Gambia Immigration and other security forces trained on PSS, Migration and Displacements Standards and Guidelines.	50
# of Migrants that received dry rations	1,617
# of migrants that received 3 square meals for at the reception centres and HSPs	1,617
% of migrants at reception centres receiving 3 meals/day and essential NFIs within 72 hours of arrival	100
# of migrants reporting improved knowledge of migration risks and available humanitarian services.	-

Priority Actions

- Training of 100 staff and volunteers on Migration and Displacement approaches, standards, risk associated with migrations and Humanitarians services for migrants.
- Training of 50 Gambia Immigration and other security forces on PSS, Migration and Displacements Standards and Guidelines.
- Provision of Dry Rations for 1617 migrants.
- Provision of 3 square meals for 1617 migrants for a period of 3 days.
- Production of information materials on migration and displacement.
- Community Sessions on Risk associated Migration and Displacement and access to humanitarian Services.



Community Engagement And Accountability

Budget: CHF 4,237

Targeted Persons: 1,617

Indicators

Title	Target
# of volunteers and staff trained on CEA principles, complaint and feedback collection.	100
# of feedback mechanisms set up	5
% of feedback received that is responded to within agreed timeframe.	100
% of beneficiaries reporting satisfaction with communication and engagement.	100
# of community members aware of available assistance and complaint mechanisms.	-



Priority Actions

- Train 100 volunteers and staff on CEA principles, complaint and feedback collection.
- Conduct community consultations in all affected communities including the host communities.
- Work with community members and local authorities and leaders on issues related to Red Cross Mandate, ongoing interventions, migration and displacement.
- Set up 5 feedback mechanisms (HSP, help desks, FGD, radio, individual feedback collection, social media).
- Debriefings and response to community complaints and feedback with the relevant programmes and operations staff.
- Develop and distribute IEC materials on all the thematic areas such as Health, CVA, WASH, Protection, RFL services, Migration and Displacement.



Coordination And Partnerships

Budget: CHF 531

Targeted Persons: 50

Indicators

Title	Target
# of National Coordination Meetings held	5
# of National Coordination Meetings supported	3

Priority Actions

- Support 3 National Coordination Meetings for the response.
- Attend at least 5 National Coordination Meetings.
- Ensure regular communication and information update with Government and local actors



Secretariat Services

Budget: CHF 16,265

Targeted Persons: 1,617

Indicators

Title	Target
# of technical support missions or inputs provided by IFRC Team	3
# surge deployed to support operations for one month	-

Priority Actions

- Provide technical support in Migration and Displacement, PMER, logistics, finance, Health, WASH, CVA, CEA, PGI and NSD.
- Facilitate Movement coordination meetings and alignment with PNS, ICRC, and UN partners
- Monitor implementation and facilitate regular updates and reporting
- IFRC Surge Field Coordinator for Migration and Displacement for 1 to 2 months.



National Society Strengthening

Budget: CHF 41,568



Targeted Persons: 1,617

Indicators

Title	Target
# of HQ Staff, Branch staff and volunteers trained on DREF intervention Approaches and other thematic sectors.	100
# of PDM Conducted after the Cash and other Interventions	1
Volunteers Insured	100
# of Lessons Learnt Workshop Conducted	1
# of Lessons Learnt Workshop Conducted	1

Priority Actions

- Provide training for HQ Staff, Branch staff and volunteers on DREF intervention Approaches and other thematic sectors.
- Conduct Post-Distribution Monitoring (PDM) to assess usage, satisfaction, and feedback
- Provide visibility materials, volunteer insurance, and safety kits to enhance safe access, security, volunteer and staff welfare.
- Conduct Lessons Learned Workshop.
- Communication Cost.
- Ensure Volunteer duty of care, welfare and compensation since early deployments.
- Salary support for core personnel mobilised in the intervention.

About Support Services

How many staff and volunteers will be involved in this operation. Briefly describe their role.

The operation will be implemented by a combined team of approximately 25 GRCS staff members and 75 trained volunteers drawn from headquarters and affected branches in the North Bank, West Coast Region, Kanifing Municipality, and Banjul. The number may be adjusted depending on the evolution of needs and operational demands.

GRCS staff will provide overall coordination, technical oversight, liaison with authorities and partners, logistics management, reporting, and supervision of Migration and Displacement, MHPSS, Protection, Basic Needs, and Restoring Family Links activities. Volunteers will support frontline service delivery, including assessment, registrations, relief distribution, cash assistant, health, Sanitation, first aid, psychosocial support, protection, RFL services, community engagement, and support to safe and dignified management of the dead under supervision.

The operation will involve and be overseen by the Secretary General, Director of Programmes and Operations, supported by the Disaster Risk and Crisis Manager, Migration and Displacement Coordinator, Acting Health Manager, PMER Officer, PGI Officer, Director of Finance and Administration, First Aid Officer, Migration Officer, RFL Officer, Communications Officer, Food Security and Livelihood Coordinator, Youth and Volunteer Management Officer, Logistics Officer, and other support staff. At field level, Branch Officers, Regional Migration Protection Officers, and volunteer team leaders will supervise daily activities and ensure coordination, safety, and accountability.

Does your volunteer team reflect the gender, age, and cultural diversity of the people you're helping? What gaps exist in your volunteer team's gender, age, or cultural diversity, and how are you addressing them to ensure inclusive and appropriate support?

The GRCS volunteer team largely reflects the gender, age, and cultural context of the affected communities, as volunteers are drawn from local branches and understand community norms, languages, and sensitivities. The team includes both male and female volunteers as well as youth and adults, enabling appropriate support for women, families, and vulnerable groups, particularly in MHPSS, RFL,



Protection, Health, Sanitation, and community engagement.

Some gaps exist, including a limited number of female volunteers in technical roles and language barriers when supporting non-Gambian migrants who speaks French only. These gaps are being addressed through the deployment of additional female volunteers, use of trained MHPSS staff, coordination for interpretation support, and continuous briefings on protection, gender, and inclusion (PGI). This ensures the response remains inclusive, culturally appropriate, and effective.

If there is procurement, will it be done by National Society or IFRC?

Procurement will mainly involve local suppliers, enabling rapid response, cost efficiency, and support to local markets. Items to be procured include food items, non-food items (NFIs), hygiene and dignity kits, PPE, logistics services, and operational support materials. International procurement is not anticipated at this stage, unless specific items are unavailable locally.

Procurement will be undertaken both for immediate distribution to affected populations and for replenishment of GRCS pre-positioned stocks that have already been utilized during the initial response phase.

For items intended for distribution, accelerated procurement procedures will be applied due to the emergency nature of the operation. Where competitive tendering is required, it is expected to take 5–10 days, depending on the value and availability of items, while ensuring transparency and value for money.

Cash and Voucher Assistance is planned under this operation. Financial Service Provider (FSP) will be engaged at this stage. There is already an FSP for the National Society and others are being assess for inclusion.

How will this operation be monitored?

The GRCS Monitoring of the Operation will be through:

- **Regular Reporting:** The operation will implement systematic reporting mechanisms, including weekly and monthly narrative and financial reports from field teams.
- **Field Visits and Supervision:** Routine field visits by the operation management team and partners will be conducted to verify activities on the ground and provide support.
- **Data Collection Tools:** Use of digital data collection tools (e.g., mobile apps, dashboards) to gather real-time data on activities, beneficiary reach, and resource utilization.
- **Monitoring & Evaluation (M&E) Framework:** The operation will have clear indicators aligned with objectives and outcomes.
- **Information Management System:** A centralized system (such as an online dashboard or management information system) will be used to compile data, visualize progress, and flag issues early. This will be done through our EOC and IM Team.
- **Community Feedback Mechanisms:** Beneficiary feedback channels (feedback and complaint collections, focus groups, etc) will be used to ensure the operation is responsive and accountable.
- **Monitoring Team:** The PMER Officer, Migration and Displacement, EOC and IM team within the operation will coordinate data collection, analysis, and reporting.
- **Role of Field Staff:** Field staff will be responsible for collecting data, reporting on activities, ensuring implantation of activities and identifying challenges.
- **Coordination with Partners:** Regular coordination meetings with partners and stakeholders to review progress and make necessary adjustments.
- **Reporting Lines:** Progress reports will be submitted to the Operation Manager and relevant IFRC or National Society coordinators.
- **Activity-Based Indicators:** Number of beneficiaries reached, quantity of relief items distributed, number of awareness sessions conducted, etc will be captured.
- **Outcome Indicators:** Improvement in beneficiary wellbeing, reduction in disease incidence, community resilience measures, etc.
- **Milestones:** Timely achievement of planned activities at pre-defined checkpoints (e.g., monthly targets, phase completions).
- **Quality Indicators:** Beneficiary satisfaction levels, compliance with standards and protocols.

IFRC Actions:

- **Scheduled Monitoring Visits:** IFRC technical staff and regional coordinators will conduct periodic monitoring visits to assess progress, validate reports, and provide technical support.
- **Deployment:** Visits will be planned based on operational phases and critical milestones, with coordination from the operation management to maximize field presence.
- **Remote Monitoring:** In addition to physical visits, remote monitoring through virtual meetings, data reviews, and communication with field teams will complement on-site monitoring.
- **Post-Visit Reporting:** After visits, IFRC teams will produce monitoring reports highlighting observations, recommendations, and follow-up actions.



Please briefly explain the National Societies communication strategy for this operation

The National Society Communication Strategy for this Operation will focus on:

Internal Communication Management:

- The National Society will establish clear communication protocols to ensure timely information flow among operational teams, management, and volunteers. Flexible channels will also be used to ensure timely information flow and quick update to volunteers on daily priorities and safety information.
- Regular coordination meetings (virtual or in-person) and internal updates via emails, WhatsApp groups, SitReps, and an internal communication platform will be maintained.

External Communication Management:

- The National Society will maintain active engagement with partners, government authorities, donors, and other stakeholders through regular briefings, reports, and joint coordination meetings.
- Public communication will be conducted via official press releases, social media updates, and community outreach to ensure proper diffusion of NS actions and visibility
- Communication materials will be adapted to the cultural context to reach diverse audiences.

Communication with primary stakeholder, the communities

The CEA strategies and activities will ensure transparent and effective communication with approaches such as direct discussions, community meetings, door-to-door visits, and the use of feedback and complaints mechanisms to maintain two-way communication. Information will be shared regularly in accessible formats and NS will seek translation facilitation to reach all represented countries in their main official languages of their countries.

The IFRC will support the National Society by providing technical guidance, communication tools, and IFRC website and platforms to amplify key messages and visibility of the operation. IFRC Communication Officers will also assist with content development, media engagement, social media management, and transfer of capacity to the National Society's communication team.



Budget Overview



DREF OPERATION

MDRGM017 - The Gambia Red Cross Society (The Gambia) Population Movement 2026

Operating Budget

Planned Operations	176,862
Shelter and Basic Household Items	26,734
Livelihoods	0
Multi-purpose Cash	23,746
Health	18,500
Water, Sanitation & Hygiene	28,988
Protection, Gender and Inclusion	5,819
Education	0
Migration	68,837
Risk Reduction, Climate Adaptation and Recovery	0
Community Engagement and Accountability	4,237
Environmental Sustainability	0
Enabling Approaches	58,398
Coordination and Partnerships	565
Secretariat Services	16,265
National Society Strengthening	41,568
TOTAL BUDGET	235,260

all amounts in Swiss Francs (CHF)



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For further information, specifically related to this operation please contact:

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