

For every child  
Health, Education, Equality, Protection  
ADVANCE HUMANITY



# UNICEF HUMANITARIAN ACTION

# GUINEA

## IN 2008



CORE COUNTRY DATA	
Population under 18 (thousands)	4576
U5 mortality rate (2006)	161
Infant mortality rate (2006)	98
Maternal mortality ratio (2000-2006, reported)	980
Primary school enrolment ratio (2000-2006, net, male/female)	70/61
% U1 fully immunized (DPT3)	71
% population using improved drinking water sources (rural/urban)	35/78
Estimated no. of people (all ages) living with HIV, 2005 (thousands)	85
% U5 suffering moderate and severe underweight/stunting	26/35
Source: <i>The State of the World's Children 2008</i>	

The crisis that happened early this year contributed to worsen the already weak health facilities, mainly concerning emergency caring and malnutrition; affected most of the water and sanitation systems increasing the risks of outbreak of endemic diseases; paralysed schools and, lastly, caused a spread of violation of human rights, affecting mainly children and women. UNICEF's action will target around 1.2 million people, in particular children and women.

Summary of UNICEF financial needs for 2008	
Sector	US\$
Health and nutrition	2,028,514
Water, sanitation and hygiene	1,078,514
Child protection	500,000
HIV/AIDS	250,000
<b>Total*</b>	<b>3,857,028</b>

\*The total includes a maximum recovery rate of 7 per cent. The actual recovery rate on contributions will be calculated in accordance with UNICEF Executive Board Decision 2006/7 dated 9 June 2006.

### 1. CRITICAL ISSUES FOR CHILDREN

With a population of 9.8 million people, the Republic of Guinea ranks 160<sup>th</sup> out of 177 countries in the 2006 Human Development Index and is classified as a least developed country (LDC). Although Guinea's mineral wealth makes it potentially one of Africa's richest countries, its people are among the poorest in West Africa.

Guinea is facing one of the most difficult moments in its history. The political uncertainty caused by the rapidly failing health of President Lansana Conté, as well as the deteriorating living conditions, serious economic hardships and the growing open social discontent call for close monitoring and rapid intervention to salvage the country from degenerating into a humanitarian crisis. Basic services and the infrastructure, including roads, are in deplorable conditions in most parts of the country, particularly in the almost isolated Guinea Forest Region in the south-east. Poverty is dire with more than 53.6 per cent<sup>1</sup> of the population living below the poverty line and a high inflation rate at 39.1 per cent.<sup>2</sup>

In January and February 2007, Trade Union-led mass protests against the deteriorating living conditions and the ensuing confrontations between security forces and civilian protestors resulted in the death of 137 persons and 1,667 injured. Guinea was plunged into crises whose causes were multidimensional and have no clear end in sight. The events not only indicated the extreme fragility of the situation in Guinea. The street demonstrations eventually led to the nomination of a new prime minister and a new government of consensus made up of trained technicians whose mission is to revamp the economy and prepare credible elections.

The crisis that happened early 2007 throughout the country contributed to worsen the already weak health facilities, mainly concerning emergency caring and malnutrition; affected most of the water and sanitation systems increasing the risks of outbreak of endemic diseases; paralysed schools and, lastly, caused a spread of violation of human rights, affecting mainly children and women.

Guinea remains extremely fragile due to the fundamental unresolved political and socio-economic issues and problems with the military. The clamour for change and immediate results by the population is even more worrisome. The security situation remains unstable, with increased highway robbery, illegal small arms proliferation and drug trafficking, which are a potential for the destabilization of the Manor River subregion.

### 2. KEY ACTIONS AND ACHIEVEMENTS IN 2007

In close collaboration with local, national and international partners, UNICEF has continued to respond to the humanitarian needs of the affected Guinean population. It has mainly focused on the priority areas of health, nutrition, water, sanitation and hygiene, education and child protection.

In the area of health and nutrition, medical supplies and equipments have been distributed to 35 hospitals and health centres in Conakry and upcountry which received victims of the January/February crisis. Also, a follow-up mechanism on the emergency stock that will be prepositioned in the PCG's warehouse (*Pharmacie Centrale de Guinée*) was finalized. A distribution plan for emergency supplies (equipments and medicines – CERF funds) was agreed with the Ministry of Health. Nutritional support for improving caring was provided to eight therapeutic nutritional centres in Forest Guinea (Beyla, Sinko, Macenta, Kissidougou and N'Zérékoré) and three in Conakry. A distribution campaign of vitamin E and deworming routine immunization treatment to under-five children was carried forward during the *Mois de l'enfant guinéen* last June at national level, and will be done in December as well. To face the outbreak of cholera in the country, drugs, equipments, chlorine, to health centres throughout Guinea were provided since May 2007. Also, household water treatments were distributed in the affected areas (as of 26 October 2007, 7,620 cases are reported in the country since January). Lastly, operational costs have been allocated for interpersonal communication and mass media.

Following the February crisis, 13 bladders were installed in 6 densely populated neighbourhoods in Conakry to prevent cholera epidemic; Water trucking was implemented for about four months and terminated on 5 July 2007; 84,000 litres of water were distributed twice a day to an average of 2,600 people a day (80 per cent of which were women and children); treatment of water points was done with chlorine (1,229 in Guinée

<sup>1</sup> This figure is from the year 2005. At the time of writing, a new study was being carried out by UNDP in Guinea.

<sup>2</sup> As of December 2006.

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Forestière, 5,796 in Guinée Maritime, including Conakry) [CERF funds]; 53,430 people were trained on how to use the 'Sur Eau' water treatment product, through 1,781 interpersonal communication meetings; 34 forages were built. UNICEF provided the Ministry of Health with more than 6,000 kg of high-test hypochlorite (HTH) to disinfect houses of affected patients, as well as cholera-affected centres and water points; 5,000 new latrines were built for 30,000 beneficiaries (women and children), mainly in Kissidougou; 15 health workers were trained to follow the water quality in the cholera-endemic areas (CERF funds). A communication campaign to prevent cholera is ongoing all over the country through the National Radio and the so called 'radio rurales' (community radios). Messages consist in one-minute spots, mainly on hygiene and sanitation issues.

The protection unit supports activities aimed at providing care and psychosocial assistance to girls victims of sexual abuse during the January/February crisis in Conakry (in cooperation with the NGO AGUIAS). UNICEF also assisted 85 per cent of the 215 children in conflict with the law during the January/February crisis. A number of basic psychosocial trainings were provided to social workers and animators (285 people trained) in Conakry and upcountry in cooperation with Christian Children's Fund (CCF). A total of 150 children and youth were reintegrated in primary schools; 50 youth aged 14-22 years benefited from socio-economic reintegration and 75 victims of gender-based violence were provided with psychosocial care.

In the area of HIV/AIDS, the coordination of HIV/AIDS-related activities was strengthened as well as assistance to health structures to provide voluntary counselling and testing (VCT), prevention of mother-to-child transmission of HIV (PMTCT) services and care for persons living with HIV/AIDS and for survivors of sexual violence. A protocol for caring and supporting victims of gender-based violence, including medical care, psychosocial support and legal assistance has been developed and validated by the Government of Guinea with support from partners.

### 3. PLANNED HUMANITARIAN ACTION FOR 2008

#### **Coordination and partnership**

An inter-agency contingency plan has been updated recently with contributions from all agencies, including UNICEF. The Humanitarian reform process started in July 2007. UNICEF is sector lead for water, sanitation and hygiene, education, nutrition and child protection.

#### **Regular programme**

The UNICEF Guinea Cooperation Programme 2007-2011 focuses on child survival, girls' education, child protection and child growth and development. The programme is tailored to provide assistance and protection to all people affected by humanitarian crises. UNICEF projects in Forest and Upper Guinea benefit from the UNICEF Zonal Offices in Kissidougou and N'Zérékoré.

#### **Health and nutrition (US\$ 2,028,514)**

Some 932,000 displaced persons, host communities and impoverished persons in Forest Guinea, as well as 10,000 children throughout the country, will benefit from the following key activities:

- Improve rapid response to potential epidemics, such as cholera, measles, malaria, including the capacity at decentralized level;
- Organize regional- and district- level epidemic outbreak management services; provide essential drugs, basic medical kits and vaccines for district health facilities; disinfect and protect water sources; provide rehabilitation care for severely malnourished children;
- Help decrease case fatality rate with availability of essential drugs, vaccines and medical material in health centres and hospitals to care for epidemic case management and its nutritional consequences in children; disinfect water sources;
- Support the implementation of national policies and guidelines for the management of acute malnutrition and the implementation of a training strategy for facility-based and community-based care providers;
- Ensure an uninterrupted pipeline of therapeutic and supplementary foods with World Food Programme (WFP) micronutrient supplements and essential drugs, as well as anthropometric, monitoring and counselling tools for the management of acute malnutrition;

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- Support national capacity to analyse nutrition and child survival surveys and data; strengthen information and early warning mechanisms; improve programme monitoring and evaluation systems; disseminate findings and information about the nutrition situation of children and their mothers for timely action and effective communication;
- Infant and young child feeding: protect, promote and support early initiation of exclusive breastfeeding, exclusive breastfeeding in the first six months of life, and age-appropriate complementary foods and feeding practices from 6 to 24 months;
- Nutrition and child survival commodities: ensure vitamin A supplementation, deworming, measles vaccination, and insecticide-treated nets for all under-five children;
- Health and hygiene: ensure the prevention and control of diarrhoeal diseases through the intense promotion of handwashing with soap and oral rehydration therapy with zinc supplements;
- Prevent low birthweight (maternal anaemia control).

### Water, sanitation and hygiene (US\$ 1,078,514)

Some 975,000 displaced persons, focusing particularly on children and women, will be reached through the following key activities:

- Construct/rehabilitate wells and adequate sanitary facilities in 50 schools;
- Construct/rehabilitate 300 wells and boreholes and install handpumps to provide safe drinking water to some 105,000 individuals in permanent and return areas.
- Procure 'Sur Eau' for household water treatment;
- Support the costs related to the volunteer who will conduct household water treatment and household disinfection;
- Organize information education and communication (IEC) media and interpersonal communication campaigns to promote safe drinking water, basic hygiene and sanitation.

### Child protection (US\$ 500,000)

- Target some 120 children associated with armed groups as well as those at risk of recruitment to prevent all form of physical and psychological violence; reinforce early identification and intervention and provide support services; accelerate family tracing and durable solutions process for separated and unaccompanied children;
- Provide legal clinic services, psychosocial support and access to basic services (shelter, food, education and health) to survivors of sexual abuse and exploitation.

### HIV/AIDS (US\$ 250,000)

Some 10,000 children and women will be reached through the following key activities:

- Strengthen and expand the use of prevention of mother-to-child transmission (PMTCT) services and provide preventive care for identified HIV+ pregnant women and their infant and for sexual violence survivors;
- Strengthen the coordination of HIV/AIDS activities and support health structures to provide voluntary counselling and testing, and care for persons living with HIV/AIDS and for sexual violence survivors.