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for every child



Maternal, Newborn, Child & Adolescent Health

Maternal mortality ratio	667 per 100,000 live births. ¹
Neonatal mortality rate	22 per 1,000 live births.
Under-five mortality rate	51 per 1,000 live births.
Births assisted by skilled health personnel	61%
DPT3 coverage	78% ²
Early initiation of breastfeeding	46.3%
Exclusive breastfeeding up to 6 months	46.3%
People aged 15-49 years living with HIV	3%

Guinea-Bissau has one of the world's highest child mortality rates and maternal mortality ratios

The death of a child in the first 28 days accounts for 43 per cent of child deaths under the age of 5 years.

Guinea-Bissau failed to achieve the Millennium Development Goal (MDG) for the MMR (300) and, at the current pace, the country is unlikely to attain the Sustainable Development Goal (SDG) for MMR (70) by 2030.

The maternal mortality ratio (MMR) of 667 per 100,000 live birth³ is above the average MMR for low-income countries at 496 per 100,000.



³UN Maternal Mortality Estimation Inter-Agency Group, (UN/MMEIG, 201

An Opportunity

Every child in Guinea-Bissau has the right to survive and thrive throughout his or her life. Now there is a real opportunity to work towards this goal, building on the progress made in recent years.

The main progress:

A National Primary Health Care Forum provides new impetus

A diverse and wide group of stakeholders participated in a National Primary Health Care Forum in Bissau, 6-8 February 2023, pledging to improve access, coverage and quality of care at community and district levels in all regions. The Forum culminated with a call to action under the following pillars: an environment conducive to primary healthcare and universal health coverage; the supply chain of essential medicines, vaccines and supplies; human resources for the effective delivery of healthcare; community engagement; and sustainable financing of primary healthcare. Given the scale of needs in the provision of primary health care, government on its own will not be able to make the urgent changes needed in a short timeframe, and to the required quality. Rather, reforms in primary health care require strong and effective engagement by all key stakeholders.

Every Newborn Action Plan to reduce newborn deaths

The Guinean-Bissau Every Newborn Action Plan (ENAP) has been adopted and aims to improve the availability and quality of maternal and neonatal care with a focus on reducing 1,000 newborn deaths per year in the country.

Immunization covered by public funds

In 2022, the Government disbursed more than US\$ 190 000 to pay for routine vaccines, which is the first time in years that these costs were covered by public funds.

Community health workers play an increasingly important role in reducing mortality rates

The Government's target is to have 3,481 trained community health workers throughout the country. Each pair of community health workers (preferably one male and one female) is responsible for 100 families. The community health workers' main task is to promote 16 key healthy family practices to prevent childhood diseases, such as exclusive breastfeeding for up to six months, young child nutrition, handwashing with soap or ash and the use of insecticidal-treated mosquito nets. The community health workers also provide basic and essential treatment for pneumonia, diarrhoea and malaria. In addition, they provide care to newborns in the community and promote birth registration, as well as contribute to community surveillance of potential epidemics, such as the Ebola crisis in the region.

¹ UN Maternal Mortality Estimation Inter-Agency Group, (UN/MMEIG, 2019).

² Latest in data 2022.

Challenges

Most maternal and child deaths in Guinea-Bissau are preventable or treatable

Ongoing challenges:

Need for more investment

After the armed conflict of 1998/1999 and the 2012 coup, most donors withdrew their investment, which had a huge impact on healthcare particularly in rural communities, where around 55 per cent of the population live. In 2022 the government's allocation to health and nutrition was only 9 per cent.

Inadequate health coverage

Today, there is just one primary health centre for every 10,000 people and 66 per cent of the population have to walk more than one hour to reach the nearest health centre.⁵ The lack of transport and poor roads means that access to healthcare, particularly during the four-month rainy season (May- November), is difficult, and sometimes impossible.

Lack of health personnel in rural areas

The number of healthcare workers is well below the World Health Organization (WHO) recommendation of 23 health staff per 10,000 people for minimum quality care.⁶ Certain regions, such as the central region of Bafatá and the north-central region of Oio, are particularly poorly served with only around five primary health staff per 10,000 people.⁷ Health workers are concentrated in urban areas, mainly the capital city of Bissau. The few health workers in rural areas rotate frequently usually due to poor working and living conditions. In 2022, health worker strikes further limited people's access to healthcare, including outreach immunization interventions.

Stock-outs of essential medicines

Stock-outs of essential medicines are frequent.

Sexual and reproductive health rights

Women's access to sexual and reproductive health is limited. For example, HIV prevalence in Guinea-Bissau is one of the highest in the region. Preventing mother-to-child transmission (PMTCT) of HIV remains a major challenge. Only 23 per cent of pregnant women who tested HIV positive were under antiretroviral treatment.





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UNICEF in Action

Examples of activities:

Through the Guinean-Bissau Every Newborn Action Plan (ENAP), UNICEF supports the Ministry of Health to improve the availability and quality of maternal and neonatal care. This support includes technical assistance, institutional capacity building through training, provision of medical equipment and materials, and regular formative supervision of health facilities.

UNICEF with WHO, the United Nations Population Fund (UNFPA) and the United Nations Development Programme (UNDP) support the national efforts to integrate the prevention of mother-to-child transmission of HIV and early infant diagnosis (EID) into routine maternal and child health services.

UNICEF supports the strengthening of the national immunization programme, including the introduction of new vaccines that respond to public health needs. To boost the low levels of vaccination, UNICEF has supported vaccination campaigns with positive outcomes. Diphtheria, pertussis and tetanus (DPT3) vaccine coverage for children aged 0-11 months rose from 71 per cent in 2021 to 78 per cent in 2022. Priority has been given to urban areas; for example, in Bafatá coverage rose from 46 per cent to 73 per cent. In 2022, a 90 per cent coverage of polio vaccine was reached for the first time in the capital, Bissau, where historically vaccination uptake and delivery had been low.

UNICEF supports the COVID-19 vaccination programme and the integration of COVID-19 vaccinations into routine immunization.

UNICEF provides technical and financial assistance and supports the coordination of the community health programme through monthly coordination meetings at regional level and quarterly reviews with all stakeholders at national and decentralized levels. UNICEF also assists with the 21-day initial training of community health workers, supports the provision of drugs, especially for pneumonia and simple cases of diarrhoea, and provides bicycles, flip charts and other material.

UNICEF has supported the Government to develop key policy documents for the community health programme, namely:

1. The National Development Plan of the Health Sector (PNDS II 2008/2017 and PNDS III 2018- 2022) which includes the Community Health Programme;
2. The Community Health Policy;
3. The Community Health Directives;
4. The Operational Plan for Scaling up High Impact Interventions to Reduce Maternal, Neonatal and Infant Mortality (POPEN 2010- 2015);
5. The Strategic Plan for Integrated Case Management in the Community (2016-2020);
6. The development of the new 2021 to 2025 Community Health Strategic Plan.

Funding Gaps

We need your support to reach every mother and child in Guinea-Bissau with healthcare!

Every Newborn Action Plan to reduce newborn deaths

UNICEF urgently needs US\$ 4,500,000 over the next three years for ENAP. This includes 5 per cent for technical support (consultants are needed), 6 per cent staff costs and Guinea-Bissau's statutory 9 per cent cross- sectoral costs.

Examples of activities that need funding:

- I. Updating and costing of Every Newborn Action Plan (ENAP);
- II. Elaborating national clinical and management guidelines by health service delivery platform for ENAP and preventing avoidable maternal death and disability (AMDD);
- III. Providing data collection and analysis support for emergency obstetric and newborn care including tools for maternal and perinatal death surveillance and response (MPDSR) system strengthening at the PHC and regional levels;
- IV. Training of community health workers and health technicians on maternal and newborn mortality prevention, quality basic emergency maternal and newborn care, and referrals;

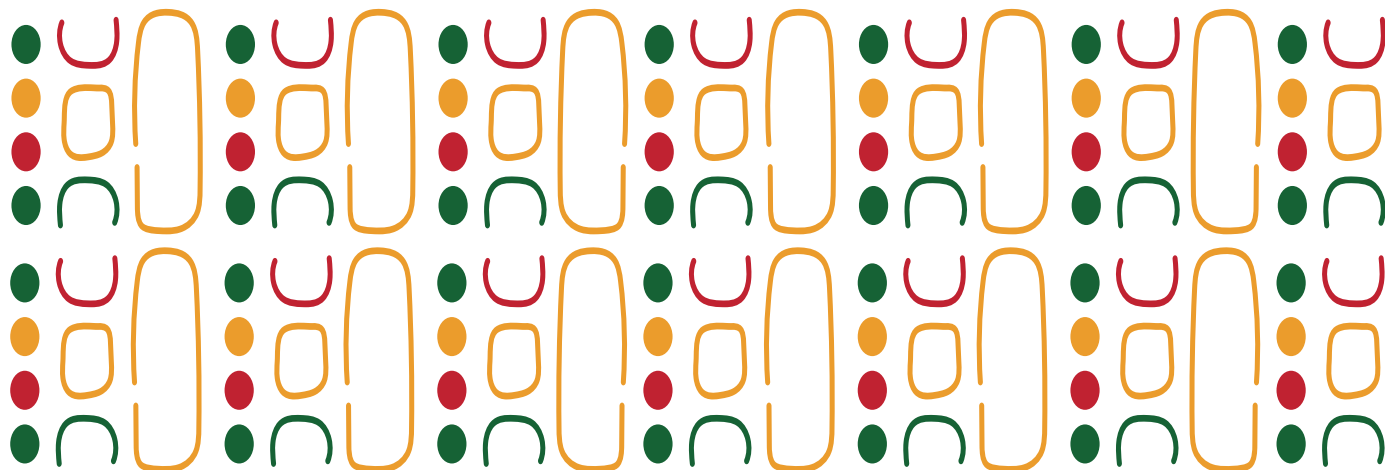
- V. Procuring medicines, materials, equipment, and logistics for maternal and newborn health and nutrition for community health workers, basic health facilities and referral hospitals (including replenishments for clean delivery kits);
- VI. Supporting the rehabilitation of primary healthcare-level maternities and the expansion of newborn resuscitation corners;
- VII. Supporting expansion of newborn intensive care units (NICUs) at regional hospital levels;
- VIII. Elaborating social and behaviour change and monitoring and evaluation tools for maternal and newborn health community engagement;
- IX. Training hospital-level health technicians on quality NICU care and follow ups;
- X. Expanding Kangaroo Mother Care (KMC) at hospital and introducing community-based KMC.

Sexual and Reproductive Health/ HIV

Examples of activities that need funding:

UNICEF needs US\$ 8,000,000 over the next three years. This includes 5 per cent for technical support (consultants are needed), 6 per cent staff cost and Guinea-Bissau's statutory 9 per cent cross-sectoral costs.

- I. Strengthening the guidelines and tools for the integration of PMTCT and Early Infant Diagnosis with routine maternal, newborn, child and adolescent health (MNCAH) services;
- II. Training health workers on PMTCT, EID, HIV paediatric care and HIV prevention among adolescents and youth;
- III. Training teachers, parent/teacher associations, and youth groups on HIV prevention and available HIV care services;
- IV. Procuring materials and equipment for HIV services;
- V. Supporting supervision of CHWs and health technicians in Health Areas for HIV;
- VI. Strengthening of national and regional HIV programme governance and management competencies and supporting quarterly planning/coordination and reviews meetings;
- VII. Printing tools for monitoring and evaluation and social and behaviour change of HIV at community and health facility levels.



⁵ 2018 National Health Development Plan (PNDS)

⁶ Ibid. ⁷ Sitan 2019

Community Health

UNICEF needs US\$ 3,000,000 for community health over the next three years. This includes 5 per cent for technical support (consultants are needed), 6 per cent staff cost and Guinea-Bissau's statutory 9 per cent cross-sectoral costs.



Examples of activities that need funding:

- I. Procuring medicines, materials and equipment for the community health workers (CHWs);
- II. Inducting and upgrading the training of CHWs to increase access to child survival and development care and promoting essential family health care practices at community level;
- III. Supporting supervision of community health workers and health areas for primary health care;
- IV. Reinforcing community-based surveillance systems.

Risks

While the situation is much more conducive to investment than a decade ago, there are still possibilities of social unrest, political instability, strikes in the social services, epidemic outbreaks and environmental hazards, particularly induced by climate change. The islands are extremely vulnerable to flooding. UNICEF monitors these risks and has in place mitigation strategies, which include reinforcing the capacities of government partners and private sectors in emergency preparedness and resilience.

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