

CHILD-FRIENDLY REGIONAL PROFILE

Region Four (4)

Demerara-Mahaica



Ministry of Communities
Building cohesive, empowered and
sustainable communities

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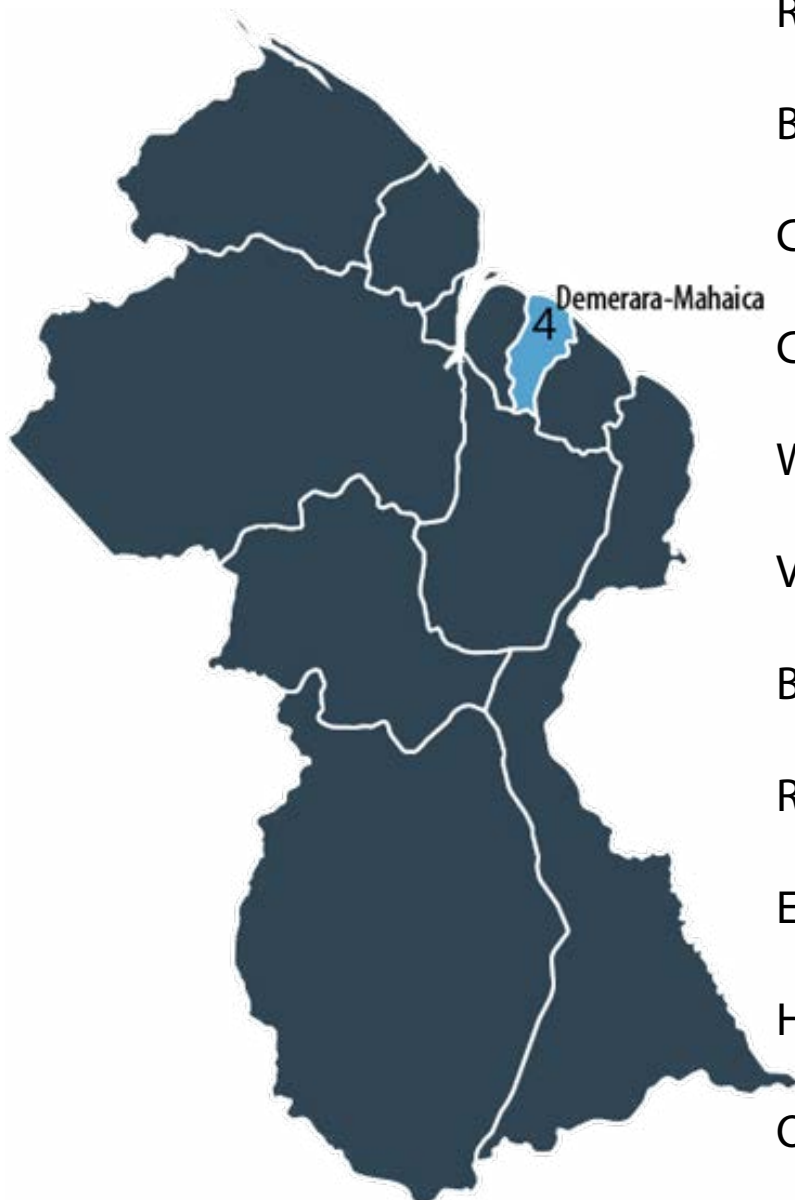
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There is no better investment in this world than investment in children.
— President David Granger, August 21, 2017

Region 4

Demerara-Mahaica

The Demerara-Mahaica Region extends east of the Demerara River to the Western Bank of the Mahaica River and is predominantly Low Coastal Plain, with a small portion of the Hilly Sand and Clay Region further inland. The Indigenous mission of St Cuthbert is on the Hilly Sand Clay belt of Region 4. Many resorts are on the banks of creeks along the Soesdyke Linden Highway.

The population is concentrated along the coastland, particularly in Georgetown, the capital city, which has a population of 118,363. The population of Region 4 is 311,563. Guyana's administrative and commercial activities are concentrated in this Region, especially in and around Georgetown, the main port.

There is one sugar estate, Enmore, owned and controlled by the Guyana Sugar Corporation (GUYSUCO). Some residents of this region work on coconut estates and many people have their own kitchen gardens. Cattle are reared in small amounts for beef and dairy purposes. Rice is grown mainly in the Cane Grove area.



Location of Region 4 (Demerara-Mahaica)

Background

Context

The Government of the Cooperative Republic of Guyana and the United Nations Children Fund (UNICEF) are committed to the wellbeing and development of Guyanese children.

The Government at the national and sub-national levels is committed to achieving the Sustainable Development Goals (SDG). UNICEF is the custodian or co-custodian of 10 of the SDG indicators (stunting, wasting/overweight, skilled attendance at birth, under five mortality, neonatal mortality, early childhood development, early marriage, FGM/C, child discipline and sexual violence against children).

This commitment is demonstrated by their support for the generation and dissemination of evidence to inform the development of plans, policies, projects, and programmes to address equity gaps in areas of survival, lifelong learning, protection and participation of children.

Need for Developmental Data

Building sustainable communities is part of the Ministry of Communities' mandate. An essential component of sustainable communities is being child-friendly. This effort to develop child friendly regional data profiles is a repackaging of existing data, from empirical sources, in a way that is specific to a region, and can be used by decision makers, to the fullest extent possible, for the realisation of child rights. It can also assist in supporting the achievement of the SDGs.

Disaggregated data on social indicators are an essential component of evidence informed policies, plans, projects and programmes. It enables actors to effectively monitor progress toward the realisation of national and international goals and commitments and helps to measure whether these goals have been achieved and to what extent. Data supports national and sub-national governance structures to focus their interventions on the most deprived thereby reducing inequities and identify capacity deprivations for corresponding capacity building initiatives.

This child friendly regional profile compiled by the Government of Guyana through its Ministry of Communities, in collaboration with UNICEF, provides current information for all actors.

Methodology

The process of developing this profile was participatory and involved varied stakeholders. Using the Multiple Cluster Indicators Survey (MICS) 2014 and other national surveys, consultations were carried out with the Regional Administration and other stakeholders to present the findings, seek consensus and validate the processes. The data presented and the profile prepared represent a commitment by the Regional Administration and stakeholders to sustainable community development in a child friendly way. The profile indicates areas of achievements and areas of deprivations, some of which are the lowest in the country. Undoubtedly the Regional Administration, national government, local actors and international development partners will work to address the issues the data unfolds.

Child Development

Fig. 1.1: Early Childhood Development Indexⁱ



Fig. 1.2: Attendance to Early Childhood Programmeⁱⁱ



Fig. 1.3: Availability of Playthingsⁱⁱⁱ



Fig. 1.4: Father's Support for Learning^{iv}

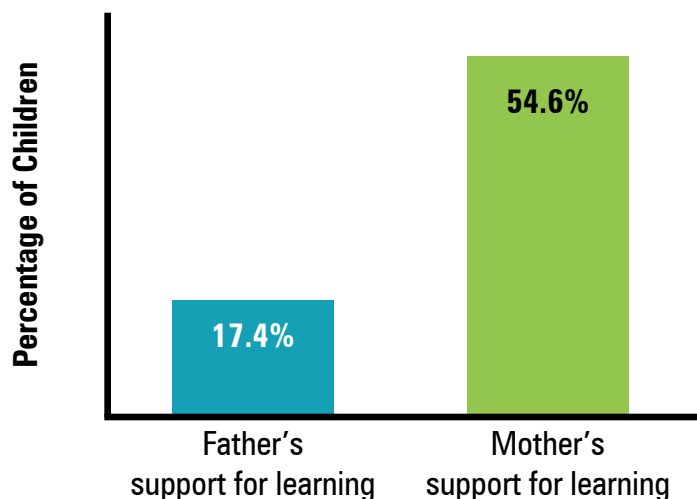


Fig. 1.5: Availability of Children's Books^v



Achievements / Areas for Attention

88.8 percent of the children of the region are developmentally on track.

65.1 percent of children age 36-59 months attend an early childhood education programme.

68.6 percent of the region's children had things for playing.

Father's support for learning is low at 17.4 percent and may indicate matrifocal households.

Mother's support for learning is higher at 54.8 percent but also needs improvement.

There is a 54.1 percent availability of children's books, which is higher than the national average but needs improvement. This indicator is linked to higher levels of literacy and numeracy and higher performances in school.

Child Protection

Fig. 2.1: Birth Registration^{vi}



Fig. 2.2: Violent Discipline^{viii}



Fig. 2.3: Child Labour^{ix}

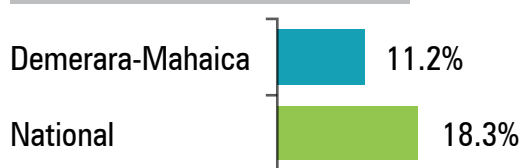
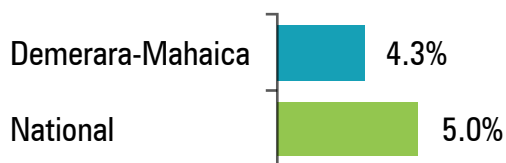


Fig. 2.4: Child Marriage Before Age 15 [Female]^x



Achievements /Areas for Attention

90 percent Birth Registration in the region is slightly higher than the national average of 88.7 percent. Efforts should be made to realise 100 percent since this is the most populous region and therefore will represent the largest numbers of un-registered children.

Violent discipline of children is high at 71.1 percent and presents an area for work for development actors.

Child Labour is at 11.2 percent which is slightly better than the national average, but being the most populous region, represents the largest number of child labourers.

4.3 percent of females in this region get married before age 15. Though below the national average of 5 percent, this needs some intervention as it may represent the largest group in the country.

Water and Sanitation

Fig. 3.1: Use of Improved Drinking Sources^{xi}



Fig. 3.2: Use of Improved Sanitation^{xii}



Fig. 3.3: Place for Hand-washing^{xiii}



Fig. 3.4: Availability of Soap or Other Cleaning Detergents^{xiv}



Fig. 3.5: Water Treatment^{xv}



Achievements /Areas for Attention

98.1 percent of the residents of this region use clean and improved drinking water sources.

89.5 percent use improved forms of sanitation. Improved sanitation is linked with improved overall health and disease control.

79.9 percent of the population had a place for hand washing. Hand washing reduces the spread of infectious diseases among children.

The availability of soap and or other cleaning detergents in this region stands at 74.4 percent. The availability of soap and other cleaning detergents also reduces the spread of diseases.

Only 11.8 percent of the population in the region had access to treated water. This figure is less than the national average, which is itself low. It should be cause for concern since this is the most populous region.

Vaccinations

Fig. 4.1: Polio Immunisation Coverage^{xvi}



Fig. 4.2: Diphtheria, Pertussis and Tetanus (DPT) Immunisation Coverage (Pentavalent)^{xvii}



Fig. 4.3: Tuberculosis Immunisation Coverage^{xviii}



Fig. 4.4: Measles Immunisation Coverage^{xix}

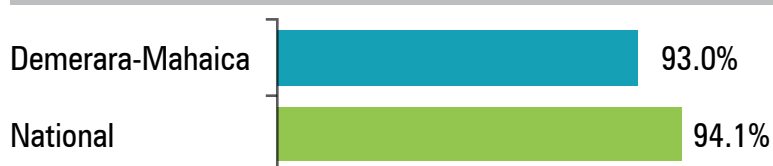


Fig. 4.5: Yellow Fever Immunisation Coverage^{xx}



Achievements /Areas for Attention

Childhood immunisation for Polio and DPT and measles is at 93 percent and 92 percent respectively. All efforts should be made to achieve the goal of 100 percent.

93 percent of the population of this region is immunised against Tuberculosis.

Measles Immunisation is 93 percent, 1.1 percent below the national average.

Yellow fever immunisation is 92 percent which is more than 20 percent above the national average of 71.5 percent.

Breastfeeding

Fig. 5.1: Child Breastfeeding^{xxi}



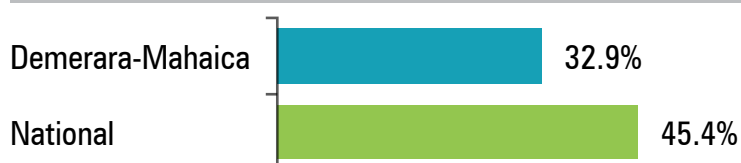
Fig. 5.2: Early Initiation of Breastfeeding^{xxii}



Fig. 5.3: Exclusive Breastfeeding Under Six Months^{xxiii}



Fig. 5.4: Age-appropriate Breastfeeding^{xxiv}



Achievements /Areas for Attention

87.2 percent of the population of infants in the region were breastfed at least once, indicating a heightened sense of awareness among mothers about the importance of breast milk and postnatal nutrition for healthy children, although this figure can be raised to 100.

Only 42.6 of the population have early initiation of breastfeeding. This is an area in need of intervention.

Exclusive breastfeeding is a mere 10 percent and lower than the national average of 16.7 percent. The goal is 100 percent exclusive breastfeeding under six months. Efforts should be targeted on increasing this indicator since it has an impact on the future health of children. Age-appropriate breastfeeding is also low at 32.9 percent.

Reproductive Health

Fig. 6.1: Antenatal Care Coverage^{xxv}



Fig. 6.2: Postnatal Health Check for New-born^{xxvi}



Fig. 6.3: Early Child Bearing^{xxvii}



Fig. 6.4: Contraceptives Prevalence Rate^{xxviii}



Achievements /Areas for Attention

The indicators show the region is on track with its reproductive health capacities in both its prenatal and postnatal care of children. Antenatal care coverage is higher than the national average of 87.9 percent. Postnatal health check for new-born is 97.4 percent.

Early child bearing figures at 13.7 percent requires attention. Early child bearing impedes educational attainment of girls and is also linked negatively to several other socio-economic factors.

The contraceptive prevalence rate is 33.1 percent. This ought to be an area of focus for reproductive health care providers. Contraceptive use and family planning is tied to many positive outcomes for women, children, family and community.

Education

Fig. 7.1: School Readiness^{xxix}



Fig. 7.2: Transition Rates to Secondary School^{xxx}

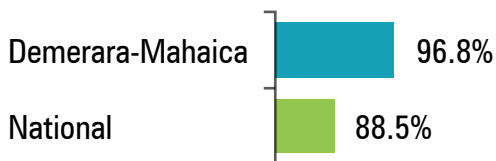


Fig. 7.3: Net Intake in Primary Education^{xxxi}

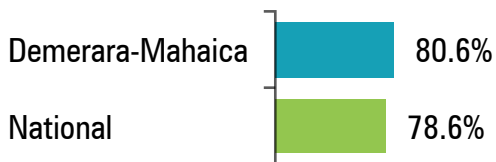
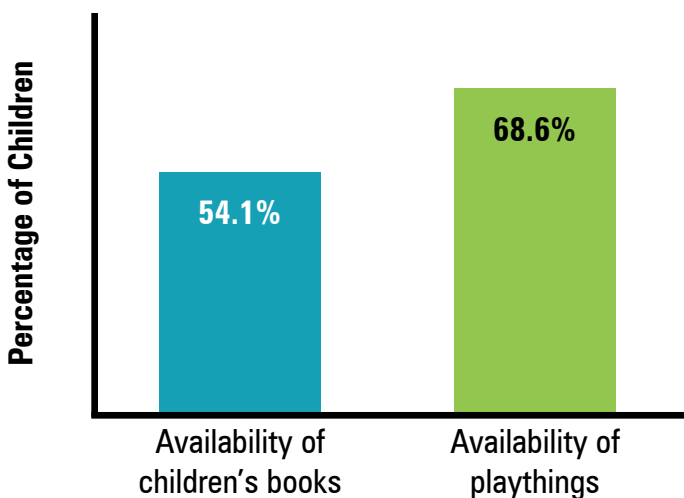


Fig. 7.4: Availability of Learning Resources^{xxxii}



Achievements / Areas for Attention

The indicators of education observed in the region represent a figure of 74.8 percent, indicating that the region is on track in meeting the exclusive goal of 100 percent. This is one of the driving forces behind the relatively high levels of school readiness 90.4 percent and primary school completion rates 100 percent, as well as secondary school transition rates in the region.

Transition rates to secondary schools is also high at 96.8 percent.

Net intake in primary education at 80.6 percent is in need of some interventions to ensure increase towards 100 percent.

The availability of learning materials and resources needed for a successful and fulfilling school life can be increased.

Health

Fig. 8.1: Smoking Before Age 15 [Male]^{xxxiii}

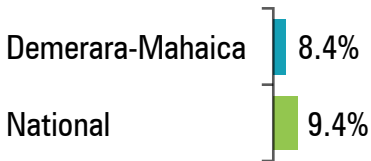


Fig. 8.2: Neonatal Mortality Rate^{xxxiv}

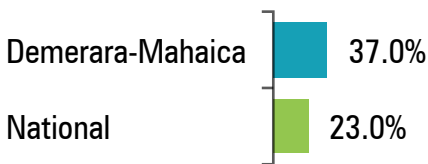


Fig. 8.3: Use of Alcohol [Male]^{xxxv}



Fig. 8.4: Use of Tobacco^{xxxvi}



Achievements /Areas for Attention

/ Smoking before age 15 for males is below the national average but should still warrant some attention.

/ Neonatal mortality rate in this region is extremely high, even are higher than the national averages of 23 percent, This requires immediate attention.

/ The high incidence rate of alcohol use among the males in the area 66.6 percent is a cause of concern as it can lead to unwanted social consequences among the communities. Alcohol use is linked to domestic violence against women and children including rape and incest.

/ 19.5 percent of males use tobacco, which is marginally below the national average but should be of concern.

Other

Fig. 9.1: Use of Internet^{xxxvii}

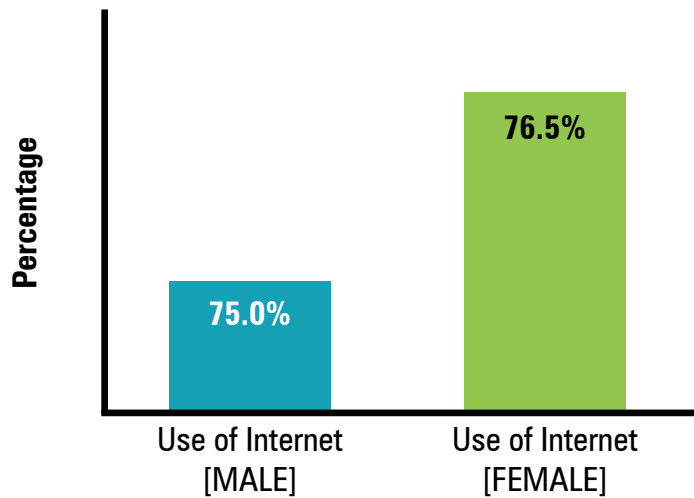
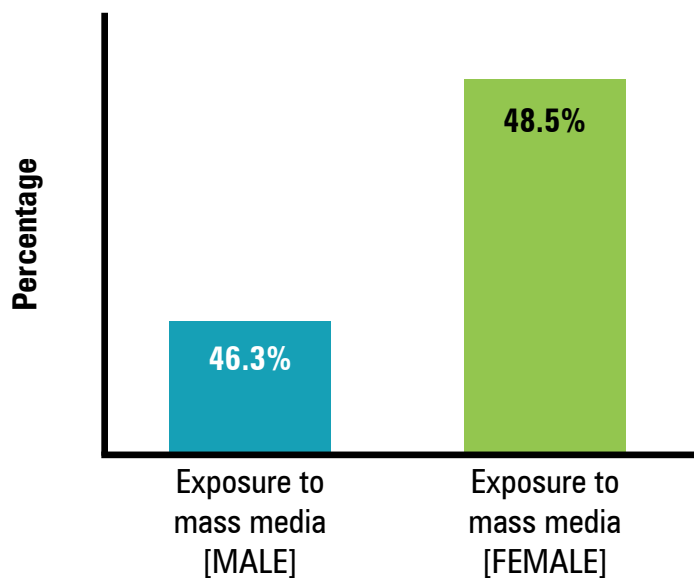


Fig. 9.2: Exposure to Mass Media^{xxxix}



Achievements /Areas for Attention

Internet use in the region is at 75 percent. This augers well for several developmental factors as internet usage is linked to education, public and other information access including health and community development. Mentally, the general sense of communal well-being among its residents is highlighted by the relatively high levels of happiness which is 95.1 percent among both genders.

Exposure to mass media is low for both genders. This has implications for several factors as many behavioural campaigns and the relaying of essential public information from general citizenship education to disaster and emergency messages is done via mass media.

Conclusions

This child-friendly profile represents an important first step in the presentation of regional aggregated indicators of women and children.

It can be an important addition to the resources on the achievement of national goals and policies.

It is hoped that the resource will be used by all actors and other stakeholders in the achievement of a more child-friendly society.

As this is a first step, the Ministry of Communities welcomes your feedback and response to the document. Feedback will allow us to improve future editions.

Annex

- i. Number of children age 36-59 months who are developmentally on track in at least three of the following four domains: literacy-numeracy, physical, social-emotional, and learning. The total number of children aged 36-59 months.
- ii. Number of children age 36-59 months who are attending an early childhood education programme. Total number of children aged 36-59 months.
- iii. Number of children under age 5 who play with two or more types of playthings. Total number of children aged 5.
- iv. Number of children age 36-59 months whose biological father and mother has engaged in four or more activities to promote learning and school readiness in the last 3 days. The total number of children aged 36-59 months.
- v. Number of children under age 5 who have three or more children's books. Total number of children under age 5.
- vi. Number of children under age 5 whose births are reported registered. Total number of children under age 5.
- vii. Number of women age 15-49 years who were first married or in union before age 15. Total number of women age 15-49 years.
- viii. Number of children age 1-14 years who experienced psychological aggression or physical punishment during the last one month. Total number of children aged 1-14 years.
- ix. Number of children age 5-17 years who are involved in child labour Total number of children age 5-17 years.
- x. Number of women age 15-49 years who were first married or in union before age 15. Total number of women aged 15-49.
- xi. Number of household members using improved sources of drinking water. Total number of household members.
- xii. Number of household members using improved sanitation facilities which are not shared. Total number of household members.
- xiii. Number of households with a specific place for hand washing where water and soap or other cleansing agents are present. Total number of households.
- xiv. Number of households with soap or other cleansing agents. Total number of households.
- xv. Number of household members in households using unimproved drinking water who use an appropriate treatment method. Total number of household members in households using unimproved drinking water sources.
- xvi. Number of children age 12-23 months who received the third dose of OPV vaccine (OPV3) by their first birthday. Total number of children aged 12-23 months.
- xvii. Number of children age 12-23 months who received the third dose of DPT vaccine (DPT3) by their first birthday. Total number of children aged 12-23 months.
- xviii. Number of children age 12-23 months who received BCG vaccine by their first birthday. Total number of children aged 12-23 months.
- xix. Number of children age 24-35 months who received measles vaccine by their second birthday. Total number of children aged 24-35 months.
- xx. Number of children age 24-35 months who received yellow fever vaccine by their second birthday. Total number of children aged 24-35 months.
- xxi. Number of women with a live birth in the last 2 years who breastfed their last live-born child at any time. Total number of women with a live birth in the last 2 years.
- xxii. Number of women with a live birth in the last 2 years who put their last newborn to the breast within one hour of birth. Total number of women with a live birth in the last 2 years.
- xxiii. Number of infants under 6 months of age who are exclusively breastfed Total number of infants under 6 months of age.
- xxiv. Number of children age 0-23 months appropriately fed during the previous day. Total number of children age 0-23 months.
- xxv. Number of women age 15-49 years with a live birth in the last 2 years who were attended during their last pregnancy that led to a live birth

(a) at least once by skilled health personnel and

(b) at least four times by any provider. Total number of women age 15-49 years with a live birth in the last 2 years.

xxvi. Number of last live births in the last 2 years who received a health check while in facility or at home following delivery, or a post-natal care visit within 2 days after delivery. Total number of last live births in the last 2 years.

xxvii. Number of women age 20-24 years who had at least one live birth before age 18. Total number of women age 20-24 years.

xxviii. Number of women age 15-49 years currently married or in union who are using (or whose partner is using) a (modern or traditional) contraceptive method. Total number of women age 15-49 years who are currently married or in union.

xxix. Number of children in first grade of primary school who attended pre-school during the previous school year. Total number of children attending the first grade of primary school.

xxx. Number of children attending the last grade of primary school during the previous school year who are in the first grade of secondary school during the current school year. Total number of children attending the last grade of primary school during the previous school year.

xxxi. Number of children of school-entry age who enter the first grade of primary school. Total number of children of school entry age.

xxxii. Number of children under age 5 who play with two or more types of playthings and books. Total number of children aged 5.

xxxiii. Number of men age 15-49 years who smoked a whole cigarette before age 15. Total number of men aged 15-49

xxxiv. Probability of dying within the first month of life.

xxxv. Number of men age 15-49 years who had at least one alcoholic drink at any time during the last one month. Total number of men aged 15-49 years.

xxxvi. Number of women and men age 15-49 years who smoked cigarettes, or used smoked or smokeless tobacco products at any time during the last one month. Total number of men and women aged 15-49 years.

xxxvii. Number of young men and women age 15-24 who used the internet during the last 12 months. Total number of men and women aged 15-24 years.

xxxviii. Number of women and men age 15-24 years who are very or somewhat satisfied with their life, overall. Total number of men and women aged 15-24 years.

xxxix. Number of women and men age 15-49 years who, at least once a week, read a newspaper or magazine, listen to the radio, and watch television. Total number of men and women aged 15-49 years.

Notes
