Paraguay

Update on the context and situation of children

Paraguay has an estimated population of 7.3 million, with 35% being children and adolescents (0–17 years). The urban population (63%) is nearly twice the rural population (37%). The proportion of children and adolescents is also higher in urban areas, by 6% compared with rural areas. Projections indicate the number of people living in urban areas will continue increasing.

For the second consecutive year, the impacts of the COVID-19 pandemic were a national priority. The vaccination campaign has been crucial to lifting lockdowns and reopening the economy but has faced significant constraints in terms of resources, logistical capacity for storage and distribution, effective follow-up, and strategic communication to reach the population. According to the Ministry of Health, vaccination coverage is low at the time of writing, with 47%, 41% and 9% of the population having had their first, second and third dose, respectively.

GDP growth for 2021 was better than had been predicted due to an improved economic performance. By the second trimester of 2021, the level of employment was 72% nationwide, compared with 66.7% in the same period in 2020. The unemployment rate in 2020, though, increased from 7.6% to 8.6%.

The national unemployment rate for women is 11.2%, rising to 12.3% in urban areas, whereas for men it is 6.6% nationwide and 8.4% in urban areas. Overall, 10.2% of the urban population is unemployed, contrasted with 5.6% of the rural population.

The proportion of people living in poverty has risen from 24% in 2019 to 27% in 2020. Rural poverty continues to be higher than urban poverty (34% compared with 23%). According to the National Statistics Institute (INE), child poverty increased from 33% to 36% between 2019 and 2020.

National cash transfer programmes – including Pytyvo (support in Guarani language), for people who lost their employment due to the pandemic – prevented 184,000 people from falling under the abject poverty line (2.5 percentage points more than the 2020 rate). Pytyvo alone prevented the increase in the total monetary poverty rate by 1.3 percentage points.

The government prioritized investment in the health and economic sectors. Public investment in children represented 4.7% of GDP in 2020, up marginally on 2019. The inter-annual variation in the distribution of spending across sectors has been mixed. In education and health, there has been a positive variation of 11.4% and 7.8%, respectively, against 2019. Public financing of social protection and water, sanitation, and hygiene (WASH) has been significantly impacted, dropping by 11% and 85%, respectively, in 2019.

The maternal mortality rate per 100,000 decreased from 162 in 2000 to 68 in 2019, and neonatal mortality fell from 10.9 to 8.4 per 1,000. According to the Ministry of Health (MoH), COVID-19 complications caused 62% of maternal deaths in the first semester of 2021. In 2020, underweight in children under 5 years is 5.3%, while wasting affects 5.6%, and stunting affects 12.7%, with higher incidence on male children and rural areas. On the other hand, 15% of children are overweight and obesity impacts 7.2% of children. It is worth noting that obesity rates are higher among male children and children living in urban areas. Only half of new-borns began breastfeeding within the first hour after birth, and only 31% of children under 6 months received exclusive breastfeeding. Birth registration continues being a challenge: there were estimated to be 144,000 births, but only three quarters registered by the MoH. By 2020, 19% of children under 1 year of age were not registered at birth, and this rate is significantly higher for indigenous populations, reaching 42%.

In 2019, around 88% of households had access to improved water sources through network providers, and 80%, to safe drinking water. Some 82% had improved sanitation infrastructure, but only 15% had access to sanitary sewer systems and 7.5% had access to effluent treatment systems. WASH deficits impact peri-urban and rural marginalized settings more severely, as they do poor and underserved populations, dispersed communities, precarious settlements and indigenous populations.

In 2021, out of 1,546,022 students nationwide, 46% benefited by face-to-face classes, while the rest attended distance education through web platforms, radio, and hybrid classes. Vaccination of
adolescents (12 to 17 years) reached 23.3% out of 405,620. The highest out-of-school rates corresponded to 5-year-old children (20%) and adolescents (15 to 17 years) (17%). In 2021, 243,000 adolescents (13–17 years) were out of school, and 47,000 children (7–15 years) did not enrol back into school, which corresponds to the global 5% school dropout rate year on year. Out of more than 212,000 out-of-school adolescents (15–19 years), 47% reported that the main reason why they did not attend school was economic. The illiteracy rate in Paraguay is 1.4%, with higher incidence in rural areas (1.9%) than urban areas (1.4%). According to the Ministry of Education (MoE), 58% of children were enrolled in preschool in 2021, a slight drop on the 60% in the previous year. The net enrolment rate was 75% in primary school, 60% in middle school and only 54% in upper secondary school.

Data from the Ministry of Children and Adolescents (MINNA) and the Public Ministry indicate there were over 10,600 cases of violence against children in 2020, a quarter of which were cases of sexual abuse. In the first semester of 2021, almost 1,500 reported cases were linked to sexual violence, an incidence rate of 59 per 100,000 children and adolescents. According to data from the helpline Fono Ayuda 147, there were almost 7,400 calls for first interventions and over 7,600 for follow-up. Suicide rates among children, adolescents, and young people groups (10 to 24 years) represent 41% of the total number of suicide cases (500) in 2020. According to the U-Report poll on mental health, How do we feel? carried out by UNICEF in Paraguay, 72% of adolescents and young people reported feelings of sadness, loneliness, depression, frustration, and stress in the last year; and 55% of respondents indicated that mental health was a concern for them.

### Major contributions and drivers of results

UNICEF supported the completion of the national early childhood development (ECD) plan (2021–2030), which guides strategic prioritization of national and subnational ECD actions, and contributed to key policymaking processes, accomplishing the strategic inclusion of cross-cutting themes in the educational policy reform, such as early childhood education, disability and intercultural education. The country office led an ECD stakeholder mapping process, developed participatory guidelines for public consultations, and completed the systematization of consultations.

Advocating for stakeholders’ meaningful participation, with a strong emphasis on ECD, indigenous populations and people with disabilities informed the design of inclusive policy indicators and strengthened the lifecycle perspective in education. Nineteen indigenous groups voiced their views and technical considerations via the National Indigenous Education Council.

UNICEF had a determinant role in advancing the implementation of the social protection system (VAMOS) in coordination with the implementation of the ECD national strategy Kunu’u (nurture). A needs assessment for the implementation of Kunu’u was carried out and ECD territorial teams and multisectoral social protection boards were established to continue the consolidation of multisectoral service delivery platforms for Kunu’u and VAMOS. Strengthened local coordination and management led to better coverage and access to ECD, adolescents, women and maternal services (including distribution of maternal kits), reaching 3,770 people overall and 853 pregnant women. Increased interoperability between health services and the civil registry resulted in 425 birth registrations. To facilitate monitoring, UNICEF supported the validation of the system’s integrated record of institutions.

The organization completed the design of the social protection system’s medium-term communication strategy and the first stage of implementation, reaching and engaging the staff of key government institutions. This seeks to increase awareness and gain support from key national and local actors to facilitate nationwide roll-out of VAMOS.

In line with the national plan to reduce maternal, foetal, and neonatal mortality, and with the child- and mother-friendly healthcare services initiative (ISSANM), UNICEF support led to the improvement of neonatal services in six priority districts, reaching 40,000 new-borns. ISSANM implementation saw the provision of standardized training sets, and the capacity improved in 58 family healthcare units and 10 hospitals to promote and support breastfeeding, the kangaroo care technique (skin-to-skin contact).
and obstetrical and new-born critical care (with seven hospitals receiving neonatal care equipment). UNICEF-led training activities that reached 1,900 healthcare professionals, including administrative and other key staff.

Community engagement for the prevention of overweight and obesity in children and adolescents was promoted in 20 schools in two districts, and communities, family health units and hospitals in four priority districts. Around 113 teachers and 150 community leaders increased their skills to promote physical activity and healthy diets, and 709 families were reached. The experience will be systematized and scale-up in 2022. To articulate efforts between the educational community and municipalities, schools were connected to local healthcare services to monitor children’s nutritional conditions. UNICEF ensured the supply of anthropometric equipment and the training of 115 healthcare professionals and established the first two clinical offices to address the management of childhood and adolescent obesity.

Interventions in education strengthened the Ministry of Education’s (MoE) methodological capacity to address the educational transition of children from home to school through the implementation and monitoring of a math early learning educational toolkit (audio materials, student workbooks and teacher guides) in 504 schools nationwide, reaching over 11,600 children. The toolkit, initially designed to support at-home education amid the pandemic, has been incorporated in regular education programs as a tool to support learning in emergency and development contexts.

UNICEF supported local capacities to create enabling environments for early learning and literacy through the Love for Reading programme. Reading kits and early learning tools to establish foundational skills for reading – plus training for the implementation – were provided to 173 teachers and school staff, 140 community volunteers, and 640 families. The programme has an interdisciplinary and inclusive approach, including recommendations for its implementation with children with disabilities. With local capacities increased to replicate the programme, seven municipalities developed approved reading promotions plans.

UNICEF directed efforts against educational exclusion. It worked closely with civil society organizations (CSOs) to enhance their capacities to include this aspect in their education interventions. This led to the creation of 24 community-based learning spaces (after-school learning support) for continuity of learning and to strengthen core competencies in maths and literacy. These spaces, which have reached 1,370 children and adolescents, also promoted critical thinking and conflict resolution skills. During 2021, UNICEF hired the OOSCI coordinator and formed a technical committee with the MoE’s main offices, including the Vice minister of Education, to design and implement the national OOSCI report.

UNICEF stepped up efforts to continue strengthening the child protection system at national and subnational levels. To guide service delivery and quality improvement, it led an assessment of 94 child protection services. This led to action plans and methodological tools developed to address the challenges identified in 51 of the services evaluated. UNICEF supported the development of tools and resources to strengthen key actors of the child protection system’s capacities on violence prevention and response interventions. The organization helped to develop a care manual for children and adolescents, which was implemented with the relevant ministry, municipal and departmental children’s and adolescent’s councils, CSOs, youth groups and with communities more widely. It includes three guides: the municipal child and adolescent protection guide, a guide to promote child and adolescent participation, and one to establish municipal and departmental child and adolescent councils. A ministerial resolution has and officially approved the guides, enabling the scale-up of their implementation in other municipalities. Likewise, a protection toolkit was designed and implemented with municipal councils for children and adolescents, CSOs and 426 adolescents to increase their knowledge and capacities on violence prevention and response.

To address children’s and adolescents’ rights violations with emphasis on emergency contexts, UNICEF developed a municipal intervention guide. This has contributed to improving the efficacy of local interventions and processes. Finally, UNICEF helped to strengthen the capacities of families to provide adequate care and prevent violence. This included creating support guides and delivering them in 81 parenting training workshops to 787 parents. After the intervention, 80% of parents and
UNICEF increased its advocacy efforts to promote the Alternative Care Law, Act 6646/20, and has supported the development of the first national alternative care programme, which represents a major contribution to fulfilling children’s right to family-based care. The main stakeholders of the children’s protection system – such as key staff from the Alternative Care Direction and Adoption Centre, the Public Ministry, the Supreme Court of Justice and other civil society actors – increased their knowledge of the alternative care law and its effective application. UNICEF also helped to develop a capacity-building plan for staff at children’s and adolescents’ justice courts. UNICEF’s collaboration with academia and CSOs has also contributed to building the capacities of key staff of the child protection system and promoted research-based proposals for innovative system-enhancing alternatives. The second cohort on the diploma course on child protection policies, delivered by the Latin American Faculty of Social Sciences (FLACSO) and the Coordinator for the Rights of Children and Adolescents (CDIA), had 70 participants from local child protection institutions, and the VAMOS and Kunu’u programmes. Research and evidence-based debate on child protection issues increased, as did the review and analysis of child policies. A compilation of research papers addressing persisting challenges will be published in 2022. To further support the capacity-building efforts of the MINNA, a training centre on child and adolescent protection has also been developed. UNICEF led the design of its training curriculum, and staff from the ministry were trained to implement distance education modules. UNICEF led systematic engagement with subnational governments to strengthen local governance capacities to develop child-sensitive plans. A total of eight municipal and four departmental governments developed child-responsive plans. UNICEF carried out a diagnosis of protection services in the priority territories, plus a diagnosis of the child protection system in the Chaco region to inform the planning process. Moreover, UNICEF helped to develop planning manuals and facilitated the participation of 676 local government, community and adolescent organizations’ representatives. The organization advanced advocacy for child-responsive governance systems, by promoting greater commitment of municipal governments on children’s rights in the context of the municipal elections. UNICEF supported three consultation workshops with children’s and adolescents’ groups to identify their concerns which were presented in live municipal electoral debates broadcast in social media and by local radio, influencing candidates to make 10 commitments to lead actions to fulfil these rights. In the WASH sector, UNICEF contributed to generating key evidence for departmental and municipal planning, and to strengthen governance and monitoring mechanisms. Technical assistance provided to DAPSAN (National Direction of Water and Sanitation) and other national and subnational WASH sector institutions improved information management, intersectoral coordination and communication. An analysis of WASH sector risks and bottlenecks (WASH Bat) with a climate change perspective provided significant input to guide sector plans and coordinated interventions to address urgent bottlenecks. Additionally, a WASH dashboard was developed to standardize common criteria for service provider categorization, including variables and indicators. Jointly with key stakeholders, UNICEF strengthened WASH subnational governance through the development of a WASH toolkit to support sustainable service management. The organization strengthened community engagement and youth participation mechanisms, developing a volunteer programme called Jere with seven universities. A network of 480 volunteers led transforming actions in their communities to improve the well-being of children and adolescents, reaching 2576 people. Volunteers were trained on and developed social projects to prevent violence against children and adolescents using the UNICEF’s Upshift methodology for social innovation. UNICEF mobilized almost 1,600 volunteers to support education interventions, which included the Love for Reading programme, safe-return-to-school operation, learning support spaces, risk communication and vaccination campaigns. UNICEF provided technical assistance to the Ministry of Children and Adolescents (MINNA) and the municipal councils to include the perspective of adolescents in the development of a l guide to promote adolescent participation in vulnerable settings. The U-report tool was consolidated as an empowerment platform to address the safe return to schools, adolescent mental health, municipal
UNICEF supported the government’s COVID-19 response with a focus on vaccination, reducing learning losses and ensuring a safe return to school. In a major contribution, UNICEF firstly supported the COVAX mechanism led by WHO, and subsequently directly increased the Ministry of Health’s technical capacity for the distribution, storage and maintenance of COVID-19 vaccines, providing logistical support to purchase almost 610,000 syringes and 12,500 boxes to dispose injection materials; and cold-chain equipment (and training) for vaccine storage and distribution, which included 169 refrigerators (out of which seven are powered with solar energy in remote areas) and 10 temperature remote monitoring equipment. Over a million people were benefited. This contribution supports the regular National Immunization Program for other vaccines.

UNICEF supported the MoE’s capacities for a safe return to schools. The organization provided technical assistance to develop and implement evidence-based safety protocols, and WASH conditions were surveyed in 6,200 schools nationwide. More than 1,300 schools, reaching over 340,000 children and adolescents, increased their capacities to operate under safety protocols, and 13 schools improved WASH facilities. UNICEF reviewed WASH actions supporting a safe return to school, which were integrated into a regional comparative study on the implementation of such policies. Another study led by UNICEF, on behaviour and the levels of coronavirus infection in a group of schools, showed that teachers’ seroprevalence rate was 97%, while for students it was 31%.

UNICEF used evidence-based communication campaigns to support the COVID-19 response. It increased its media presence to disseminate safety guidelines and promote school enrolment procedures. The organization supported the MoE to develop content for radio, social media and television, with the radio spot reaching 2.2 million people. Safety protocols made 4.7 million impressions on Facebook and direct clicks to the MoE digital enrolment forms approached 22,000. The country office implemented the campaign, “I vaccinate for your well-being”, reaching 1.6 million people via TV and while 3.9 million people via Facebook. UNICEF is also currently supporting a study of perceptions about the COVID-19 vaccine to inform future communication campaigns. The risk communication and community engagement group also implemented evidence-based interventions. It communicated COVID-19 prevention measures, vaccination information, and
adolescent mental health information, leading to over 26.7 million Facebook impressions. Communities’ awareness, engagement and resiliency were strengthened, and access to handwashing facilities and hygiene supplies increased with the Resilient Communities project. Evidence-based information on COVID-19 in vulnerable urban territories reached almost 340,000 people. More than 62,000 people in territories intervened were vaccinated. Accountability to affected populations actions have been implemented across programs. Collecting information on community perception around COVID-19, violence and other themes as well as processes that involved dialogue, participation and data dissemination to high-risk communities allowed to establish a two-way communication mechanism to receive feedback from communities and to respond to their needs and account for the outcomes of the interventions. It has also made possible to gather CSOs’ feedback to provide the necessary assistance to maximize impact and/or implement mitigation actions that are most beneficial to the communities.
UN Collaboration and Other Partnerships

UNICEF strategically collaborated with the Ministries of Education, Health, and Children and Adolescents, and worked with DAPSAN, SENASA (the National Environmental Sanitation Service), CAPA (Paraguayan Chamber of Water), WASH local boards, municipal and departmental government officials of the child protection system. Other government counterparts included the UTGS (the Technical Social Cabinet), the UGPR (the Management Unit of the Presidency), the Ministry of Justice, the binational entity ITAIPU, the National Secretariat of Persons with Disabilities, and the Office of the First Lady.

UNICEF supported the National Strategy for Statistical Development (ENDE) by advocating for SDGs’ measurement indicators in areas related to children and adolescents. UNICEF assisted the National Poverty Committee for the measurement of multidimensional poverty and advocated for the implementation of the MICS Survey in 2023.

UNICEF continued to collaborate with the International Labour Organization (ILO) and the European Union (EU) for the implementation of VAMOS. Multilateral dialogue with ILO and EU led to joint advocacy efforts with leading institutions involved (e.g., the Technical Unit of the Social Cabinet) to address lack of high-level political agreements for a coordinated implementation of VAMOS.

The European Commission’s Humanitarian Aid and Civil Protection department (DG ECHO) contributed to actions in the Paraguayan Chaco to strengthen communities’ resiliency and COVID-19 response, improve access to health services, and enhance water and sanitation conditions. Partnerships with CSOs such as the Red Cross, TECHO, Habitat for Humanity, Ogasu and Mingará enabled safe-return-to-schools’ operations. Other implementing partners have included the Adventist Development and Relief Agency and the Centre for Information and Resources for Development, for healthy communities and breastfeeding promotion; Fundación Alda for the Love for Reading programme; Dequení, FortaleSer and Enfoque Niñez for violence prevention; CDIA, FLACSO, and Plan International, for the diploma course. Additionally, the Centre for Environmental and Social Studies (CEAMSO) helped to develop the child protection training centre, and to implement WASH interventions.

The Education Inter-Agency Working Group led by UNICEF has contributed to the safe-return-to-school operations. This group has the participation of the Pan American Health Organization, the World Bank, the United Nations Educational, Scientific and Cultural Organization, the United Nations Office for Project Services, the United Nations Development Programme, the Food and Agriculture Organization of the United Nations, the United Nations Population Fund, and the Resident Coordinator Office. UNICEF collaborated with the United Nations Inter-Agency Communication Group on themes such as climate change and SDGs. Additionally, the Stockholm International Water Institute (SIWI) provided facilitated the WASH Bat and risk analysis. Key business sector partnerships (Tigo, Banco Vision, Kimberly Clark, Focus Media, Nutrihuevos) contributed to several programmatic results.

Finally, collaboration with the Parliamentary Front for Children and Adolescents included the preparation and launch of the first online national repository about children’s rights and helped advocacy for ECD investment. The National Network of Childhood and Adolescence (REDNNA), the National Union of Student Centers in Paraguay (UNEPPY), the Scouts of Paraguay, the WASH observatory, and volunteers were all important partners in implementing and replicating successful community-based and youth engagement interventions.

Lessons Learned and Innovations

In the second consecutive year of the COVID-19 pandemic, and to respond to the increasing need for intersectoral cooperation to maximize impacts for children and communities in the most vulnerable settings, UNICEF made progress in consolidating its intersectoral territorial strategy. One of the main challenges implementing a close follow-up of territorial activities. We identified the need to define coordinated milestones across sectors and interventions to articulate an efficient territorial support and more impact. Establishing internal programme coordination teams as well as interagency BOS
implementation around specific themes of the cooperation has proven to be an effective and innovative mechanism contributing to a more comprehensive approach to implementing articulated programmatic actions. An example is coordinating teams supporting the implementation of VAMOS and Kunu’u in the same territories, to avoid duplication. Overall, these efforts have improved synergy between programme areas to implement the Country Programme Document and to continue strengthening internal coordination.

A comprehensive, multilevel intervention approach, especially for the areas of ECD, child protection and health – one that considers capacity-building at the level of families, communities and institutions – led to more sustainable impacts in changing behaviours. Likewise, an emphasis on engaging institutional and community stakeholders, including volunteers, with knowledge of the territories has helped to promote community empowerment and to consolidate participation mechanisms and governance locally. Additionally, expanding or replicating interventions across different sector platforms has given evidence to the efficacy of delivering violence prevention interventions in combination with education. Examples of this include the use of the protection toolkit in learning support spaces in urban settlements in Asunción and Central and delivering COVID-19 prevention measures through WASH interventions.

Municipal clusters were central intersectoral platforms for UNICEF’s territorial strategy. They enabled the exchange of capacities and knowledge among local actors. The first effort to survey proxy indicators of local investment in children identified a relationship between these and municipal institutional capacities. UNICEF will create a methodology in 2022 to further survey local investment in children, to shed light on the role of local governments and promote local results-based management.

At the policy level in education, the use of participatory methodological tools has been a significant means of advocating and advancing the inclusion of generally underserved populations. Theme areas that were not substantially included before, such as ECD, disability, and intercultural education, were reflected in the main thematic lines of policy. This represents an opportunity to continue the advocacy and the technical assistance to the Ministry of Education to ensure a participatory process in the subsequent policymaking stages, as well as to reach the children who are furthest behind.

Online and remote learning tools such as the Moodle platform supported by UNICEF and used by the Ministry of Education have contributed to transferring technical capacity-building materials and content to the ministry, as was the case of the Love for Reading strategy. This facilitated the replicability of the programme through teacher training courses already established. Online platforms also proved useful in reaching and training volunteers. A mixed or hybrid approach has proven viable for ongoing outreach to participants.

UNICEF and implementing partners implemented the KoBo Toolbox to strengthen monitoring and making timely adjustments to interventions. This has allowed real-time data gathering and the monitoring of the implementation of protocols and guidelines for a safe return to school. The tool provided instant feedback to inform responses or any mitigation actions and aid two-way communication with school communities, reinforcing their engagement. Use of the tool will continue in 2022 across different sectors and partners.

Another important tool developed with UNICEF’s support has been a roadmap mobile app which seeks to facilitate interaction between users and service providers of the VAMOS social protection system which will be fully implemented in 2022.

A developmental approach to understanding the particular cognitive, behavioural and social characteristics of adolescence is not yet fully incorporated in the programmes of the Ministry of Children and Adolescents. Although child protection programmes and services are aimed at both children and adolescent populations, there is a lack of specific tools and training to work with adolescents in particular. UNICEF seeks to open new pathways to introduce a comprehensive adolescent development perspective. In addition to gaining better understanding of the need to strengthen institutional technical capacities to work with adolescents and generate specific data around the issues they face, an important lesson learned has been realizing that there are adult preconceptions around working with adolescents that hinder their meaningful participation. Adolescents are also increasingly demanding to participate in the decision-making processes that affect them. The U-report
tool and the Jere program have been an innovative way to enable participatory environments and platforms for young people, with the potential for scale-up.

Supporting the participation of adolescents and youth organizations in the development of methodological tools, such as the protection toolkit as well as through the youth engagement platforms developed by the country office, has also proven to be a successful approach that contributes to the appropriation of the methodology by the beneficiaries. In addition, the participatory preparation of the National Voluntary Report constituted good practice, demonstrating UNICEF’s key role in ensuring and strengthening children’s and youth’s perspectives in it. This effort has been recognized by inclusion in the 2021 compilation of case studies of UNICEF Country Offices and National Committees.

Finally, changes of authorities and local government administrations amid the municipal elections affected decision-making processes regarding governments’ interest in implementing the child-friendly municipalities initiative. An important lesson was learned from making quick adjustments in response to a changing political context – to prioritize focused capacity-building actions aimed at municipalities that have already demonstrated interest in this initiative. Adolescent participation mechanisms were also crucial to support the initiative’s inclusion in the local electoral agenda and achieve formal commitment from municipal governments, as well as commitments from electoral candidates to fulfil children’s and adolescents’ rights. This represents an opportunity to strengthen accountability mechanisms and guides future advocacy aims and assistance to establish measurable objectives for children and adolescents.