Every year, Guinea experiences such recurring disease outbreaks as measles, polio, Ebola, Lassa fever, Marburg virus and now the coronavirus disease 2019 (COVID-19), all compounded by a weak essential service delivery system, political instability and the risk of a spillover of the Sahel crisis. In 2023, nearly 4.7 million people, including 4 million children, will need humanitarian assistance.

UNICEF aims to provide a timely, coordinated and multisectoral humanitarian response by ensuring the continuity of quality essential services for children. UNICEF centres its strategy on supporting affected and at-risk populations, promoting community resilience with a triple nexus approach and strengthening gender equity and accountability to affected populations.

In 2023, UNICEF requires US$16.1 million to strengthen its preparedness for potential shocks in Guinea and to provide multisectoral assistance to vulnerable children and women affected by recurrent humanitarian crises, with a particular focus on the nutrition, health and child protection sectors.

**KEY PLANNED TARGETS**

- **735,610** children vaccinated against measles
- **51,000** children with severe wasting admitted for treatment
- **150,000** women and children accessing gender-based violence mitigation, prevention, response
- **120,000** children accessing formal or non-formal education, including early learning

**IN NEED**

- **4.7 million** people
- **4 million** children

**TO BE REACHED**

- **3.5 million** people
- **3 million** children

**FUNDING REQUIREMENTS**

- **US$ 16.1 million**
HUMANITARIAN SITUATION AND NEEDS

Humanitarian needs in Guinea occur against the backdrop of a fragile political situation, weak essential social services delivery and a high risk of spillover of the central Sahel conflict, amplified by the porous borders Guinea shares with Mali.

Limited capacities of the health system, including community-based surveillance, early warning systems and adequate care, contribute to the recurrent resurgence of epidemics such as measles, meningitis, yellow fever, Ebola, Lassa fever and Marburg virus.\(^\text{10}\)

The adequacy of WASH services in health facilities, schools and communities is another challenge to curbing outbreaks: 36 per cent of households lack access to basic water services, while 70 per cent lack access to basic sanitation. Only 64 per cent of schools have access to sanitation.\(^\text{11}\) An increase in flash flooding has further exacerbated needs and resulted in the destruction of more than 300 water points and nearly 400 latrines in Kankan Region alone, affecting nearly 30,000 people.\(^\text{12}\)

In 2023, more than 2.7 million children under 5 years of age will require polio vaccination, while 735,610 will need measles vaccinations, following the underutilization of health services during the COVID-19 pandemic and the 2021 Ebola outbreak.\(^\text{13}\)

The global acute malnutrition rate in Guinea is 9 per cent, while severe wasting stands at 4.1 per cent countrywide, indicating an emergency situation. The stunting rate is 30.3 per cent among children under 5 years of age. Anaemia is present in 75 per cent of children aged 6-59 months and in 46 per cent of women aged 15-49 years, in part due to poor dietary practices. Only 33 per cent of infants under 6 months of age are exclusively breastfed.\(^\text{14}\)

An estimated 1.6 million children of primary and secondary school age are out of school, mainly due to social norms, the socioeconomic situation of parents and the limited educational offerings. In addition, more than 4 million children are at risk of dropping out of school if there is further epidemic resurgence.\(^\text{15}\)

Two million people in Guinea are at risk of experiencing violence, including sexual violence. The risks are exacerbated by harmful social practices and the increased cost of living, which has been further exacerbated by the conflict in Ukraine. This situation leads children and adolescents to leave their families to embark on migratory routes or to work in very difficult and degrading conditions, particularly for girls.

In 2023, 4.7 million people, including 4 million children, will need humanitarian assistance.

SECTOR NEEDS

- **2.7 million** children in need of immunization services\(^\text{16}\)
- **1.2 million** people in need of nutrition assistance\(^\text{17}\)
- **2 million** people in need of GBV services\(^\text{18}\)
- **1.7 million** children in need of education support\(^\text{19}\)
- **1.7 million** people in need of social protection services\(^\text{20}\)

STORY FROM THE FIELD

Parents play an important role in the fight against malnutrition. In Conakry, in the artisanal fishing port of Temenetaye, UNICEF trained female fishmongers and fish smokers on techniques to identify children who are wasted using the mid-upper-arm circumference (MUAC) measuring tape. “With the use of MUAC, we can know if our child is properly nourished. The picture box also helps us to know how to eat properly when we are pregnant. We now know which foods are healthy and we have learned to combine them and especially to pay attention to hygiene,” says a participant.

Read more about this story here

A woman is being trained in techniques to identify children who are wasted using a mid-upper-arm circumference measuring tape, in Temenetaye artisanal fishing port, Conakry, Guinea.
HUMANITARIAN STRATEGY

In 2023, UNICEF will seek to reach about 3.5 million people in Guinea (including 3 million children) with humanitarian assistance. UNICEF’s humanitarian strategy will support the continuity of essential services and access to social protection and enhance community engagement, surveillance and emergency preparedness and response. To mitigate the risk of conflict spillover from the central Sahel, UNICEF will take a community-based approach to humanitarian action. This means strengthening the capacities of community-based organizations and early warning systems and working through community networks to reinforce resilience. People’s vulnerability will be lowered by strengthening the capacities of state structures and other local actors in border areas to deliver safe, equitable and inclusive basic services.

To respond to the multiple epidemic threats in Guinea, UNICEF will support the continuity of health and immunization services through community-based surveillance, vaccination and procurement of essential medicines and critical pharmaceutical supplies. To prevent epidemics, UNICEF will also provide support to the Expanded Programme on Immunization of the Ministry of Health and Public Hygiene.

UNICEF will draw on its strong field presence and pre-positioned emergency supplies to ensure the timely response to disease outbreaks, natural disasters and conflict, in line with the Core Commitments for Children in Humanitarian Action, using a humanitarian-development nexus approach.

To address the immediate nutrition needs of children, UNICEF will focus on early detection through community health workers and adequate care for children with severe wasting through operational support to health centres and community platforms. To reduce malnutrition in the longer term, UNICEF’s response aims to increase the proportion of infants aged 0-5 months who are exclusively breastfed to 50 per cent by 2025 and the proportion of children aged 6-23 months who are receiving the minimum dietary diversity to 25 per cent. To achieve this, UNICEF will apply a multisectoral approach using health, food and social protection platforms.

In education, UNICEF will focus on supporting access to education and to continuity of learning in safe environments by facilitating access to learning materials and providing WASH services and hygiene supplies in schools and early learning centres. Building on good practices and lessons learned, UNICEF will also strengthen distance and digital learning approaches.

Children require protection from violence, abuse and exploitation as they face recurring disease outbreaks, social unrest and the impact of the increased cost of living. UNICEF will strengthen delivery of child protection services to children and families. Prevention of sexual exploitation and victims’ assistance will be a key part of this appeal.

UNICEF will provide technical and financial support to strengthen national social protection systems and make them shock-responsive. UNICEF will focus on emergency cash transfers to the poorest households and link emergency cash programming with the national unified social register.

This appeal is aligned with the revised Core Commitments for Children in Humanitarian Action, which are based on global standards and norms for humanitarian action.

2023 PROGRAMME TARGETS

- **Health**
  - 735,610 children vaccinated against measles
  - 2,724,480 children vaccinated against polio

- **Nutrition**
  - 51,000 children 6-59 months with severe wasting admitted for treatment
  - 964,000 children 6-59 months receiving Vitamin A supplementation

- **Child protection, GBVIE and PSEA**
  - 75,000 children, adolescents and caregivers accessing community-based mental health and psychosocial support
  - 150,000 women, girls and boys accessing gender-based violence risk mitigation, prevention and/or response interventions
  - 500,000 people with safe and accessible channels to report sexual exploitation and abuse by personnel who provide assistance to affected populations

- **Education**
  - 120,000 children accessing formal or non-formal education, including early learning
  - 84,000 children receiving individual learning materials
  - 2,000 schools implementing safe school protocols (infection prevention and control)

- **Water, sanitation and hygiene**
  - 50,000 people accessing a sufficient quantity and quality of water for drinking and domestic needs
  - 20,000 children using safe and appropriate WASH facilities and hygiene services in learning facilities and safe spaces
  - 50,000 people reached with critical WASH supplies

- **Social protection**
  - 5,000 households reached with UNICEF-funded humanitarian cash transfers

- **Cross-sectoral (HCT, SBC, RCCE and AAP)**
  - 12,000 people who participate in engagement actions
FUNDING REQUIREMENTS IN 2023

UNICEF is requesting US$16.1 million in Guinea in 2023 to save lives; alleviate the suffering of children, adolescents and women; meet heightened emergency preparedness and response requirements; and invest in building resilience. Through this appeal, UNICEF will contribute to the prevention of shocks (disease outbreaks, conflicts and political instability) and to making essential services and systems more resilient to them.

The number of people and children to be reached - and consequently the related financial requirements - has decreased compared with the previous appeal, because in 2022 the main focus was prevention and response to the COVID-19 pandemic, and this work now been integrated into regular risk-informed development programming.

Funds are required to reach vulnerable people, including children with disabilities, with an integrated multisectoral package of services including health, nutrition, education, protection and water, sanitation and hygiene (WASH).

This funding will also cover preparedness of communities to reduce vulnerabilities, strengthening their capacity to monitor, predict and respond to events that may cause crises. This will protect lives and livelihoods, increasing resilience and minimizing the impact of potential shocks.

UNICEF remains the organization of last resort for the most deprived and vulnerable children in Guinea and is committed to intervening where other partners cannot, including as provider of last resort. Without adequate funding, UNICEF will be unable to reach affected children with vital life-saving support.

### Sector 2023 requirements (US$)

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<th>Sector</th>
<th>2023 requirements (US$)</th>
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| Health | 3,592,000 
| Nutrition | 4,596,000 |
| Child protection, GBViE and PSEA | 3,375,000 |
| Education | 1,200,000 |
| Water, sanitation and hygiene | 1,820,000 |
| Social protection | 1,029,000 |
| Cross-sectoral (HCT, SBC, RCCE and AAP) | 500,000 |
| **Total** | **16,112,000** |

*This includes costs from other sectors/interventions: Social protection (6.4%), Cross-sectoral (HCT, SBC, RCCE and AAP) (3.1%).

Who to contact for further information:

**Pierre Ngom**
Representative, Guinea
T +224 625 00 00 23
pngom@unicef.org

**Manuel Fontaine**
Director, Office of Emergency Programmes (EMOPS)
T +1 212 326 7163
mfontaine@unicef.org

**June Kunugi**
Director, Public Partnerships Division (PPD)
T +1 212 326 7118
jkunugi@unicef.org
ENDENOTES

1. COVID-19 remains a Public Health Emergency of International Concern as declared by the World Health Organization in January 2020. On 1 July 2022, UNICEF deactivated its Level 3 Sustained Phase for the global COVID-19 pandemic response. All activities related to COVID-19 pandemic response, including programme targets and funding requirements, have been shifted into regular development programming and operations. While UNICEF’s Level 3 emergency response phase of the COVID-19 pandemic was deactivated, the organization is continuing to respond to the COVID-19 pandemic and its impact on children, their families and their communities and on the social systems they rely on.

2. UNICEF activated its Corporate Emergency Level 2 Scale-up Procedure for Guinea for the following period: 18 July 2022 to 18 January 2023. UNICEF Emergency Procedures are activated to ensure a timely and effective response to all crises. The emergency procedures provide a tailored package of mandatory actions and simplifications required for all offices responding to Level 3, Level 2 and Level 1 humanitarian situations.

3. COVID-19-related activities have been integrated into regular programming and operations, which explains the decrease in number of people and children in need of humanitarian assistance.

4. Because Guinea's country programme does not have inter-agency assessments and planning documents (e.g., a Humanitarian Needs Overview or Humanitarian Response Plan), the people in need estimates were made by UNICEF on the basis of the National Institute of Statistics Population and Housing Census 2014 and National Institute of Statistics projections for 2023.

5. UNICEF is committed to needs-based targeting, which means covering the unmet needs of children; and will serve as the provider of last resort where it has cluster coordination responsibilities.

6. Because Guinea’s country programme does not have inter-agency assessments and planning documents (e.g., Humanitarian Needs Overview and Humanitarian Response Plan), the people in need estimates were made by UNICEF on the basis of the National Institute of Statistics Population and Housing Census 2014 and National Institute of Statistics projections for the year 2023.

7. The proportion of children in need out of the total number of people in need is based on the UNICEF intervention mainly focusing on prevention of polio and measles epidemics, which target children.

8. The total people to be reached is estimated based on an aggregation of programme targets using the total number of children aged 0-59 months targeted for polio vaccination (2,724,480); the children aged 5-17 years targeted for protection (255,000); and an additional 482,738 people. This total includes 52 per cent women/girls and 1 per cent people with disabilities.

9. The total children to be reached was estimated based on an aggregation of programme targets using the total number of children aged 0-59 months targeted for polio vaccination (2,724,480), the children aged 5-17 years targeted for protection (255,000). This total includes 30 per cent girls and 1 per cent people with disabilities.

10. The last Ebola epidemic was from February to June 2021, while the last Marburg virus outbreak was in August to September 2021.


14. Demographic and Health Survey (DHS) 2018.


16. DHIS2/District Vaccination Data Management Tool 2022 (children aged 9-14 years) and EPI 2022 (children aged 9-59 months).

17. DHS 2018.


21. UNICEF is committed to empowering local responders in humanitarian crises in a variety of ways. The revised Core Commitments made investing in strengthening the capacities of local actors in the humanitarian response a mandatory benchmark for UNICEF action. A more localized response will improve humanitarian action and is fundamental to achieving better accountability to affected populations.

22. Major decreases in targets in 2023 compared with 2022 are due to the fact that last year UNICEF focused on COVID-19 prevention interventions.

23. This is the number of children who may be affected by crisis and may need to access formal or non-formal education.

24. The breakdown for health requirements is as follows: polio - US$1,525,709; measles - US$1,029,854; infection prevention and control - $1,036,900.

25. Indicator 1 (# children aged 6-59 months with severe wasting admitted for treatment): US$3,832,500 (51,100 beneficiaries x US$75); indicator 2 (# children aged 6-59 months receiving vitamin A supplementation every six months): US$771,200 (964,000 beneficiaries x US$2.4). This amount (US$771,200) represents only the amount that should be paid by UNICEF for three regions. Other regions will be supported by HKI and Nutrition International. The total target for nutrition is 964,000. The 51,100 children aged 6-59 months who are treated for severe wasting are included in the total number of 964,000 children aged 6-59 months to avoid double counting.

26. This includes specialized programming addressing gender-based violence in emergencies within the financial ask for child protection, which is US$948,000; the total amount for prevention of sexual exploitation and abuse is US$2.4 million.