Guinea-Bissau

Update on the context and situation of children

2022 in Guinea Bissau was marked by a continuity of precarity for children and their families owing to the impacts of internal and external shocks. Some opportunities seized by national authorities, nevertheless, provide a glimmer of hope for increased investments for the well-being of children. President Umaro Sissoco Embaló of Guinea Bissau was elected by the Heads of State and Government of the Economic Community of West African States (ECOWAS) as its chairman. In addition to exercising influence over its mandate and functioning, the position offers much needed visibility for Guinea Bissau on the regional and world stage. Increased external attention, augurs well for a country that traditionally receives limited ODA, largely due to instability and governance deficits. Several heads of State and Government visited Guinea Bissau with offers of support and investment possibilities. The attempted coup d'état of February 2022 followed several months of internal socio-political tensions that played alongside upheavals in the region in neighboring Guinea, Mali and Burkina Faso, with fears of the same in Guinea Bissau. With the deployment of the ECOWAS stabilization force, stability has been maintained. Tensions, nonetheless, continued throughout the year between political parties, which contributed to the dissolution of the national assembly in May. Cases of human rights violations and intimidation were noted, frequently involving opposition party leaders, journalists, and civil society actors. Concerns over the application of the rule of law and the need to sustain peacebuilding efforts persist. The national assembly was dissolved in May, inhibiting the passage into law of several proposals, including the Child Protection Code. Consequently, children remain deprived of needed protection measures, including access to decentralized services, case management, adoption regulation and from gender-based violence. Legislative elections announced for December 2022, following the dissolution of the national assembly were moved to June 2023. Changes in government followed, resulting in delays and challenges in taking forward some commitments. Guinea-Bissau's economy recovered somewhat from the COVID-19 pandemic, given strong cashew production in 2021, with growth reaching 3.5 percent in 2022 (World Economic Outlook 2022). High debt servicing and limited fiscal space constrict social spending which amounts to just 26% of the national budget. Allocations to health (9.5%) and education 14% are principally in support of the wage bill. Efforts were deployed during the year to rein in the wage bill, with the finalization of the census of civil servants and control over irregular hiring. A Staff-Monitored Program (SMP) with the IMF, initiated in July 2021 that supported stabilization of the economy, improvements to competitiveness, and governance, concluded with a final satisfactory review in November 2022. The success of the SMP allowed the government and the IMF to undertake Article 4 consultations for an Extended Credit Facility (ECF) which was approved in January 2023 for US\$38.4 million. The ECF promises increased efficiencies in public finance management, including for the social sector, and child-related disbursements, whilst providing confidence for further budget support. The global spillover from the war in Ukraine and its adverse impacts on the supply chain for essential goods, food and fuel prices, placed additional burdens on vulnerable households, compounding hardships from COVID-19. As inflation rose to 7% and household purchasing power diminished, children and women were particularly affected by dietary restrictions, notably in Bafatá, Gabu, Tombali and Quinara regions. The government intervened periodically to control price increases to protect the most vulnerable. A measles outbreak with 214 confirmed cases and 12 fatalities in 2022 compounded the 2021 polio outbreak. Efforts nonetheless supported a reversal of the decline in DPT3 coverage which had fallen from 74% to 71% between 2020 to 2021 and rose to 78% in 2022. Whilst child mortality reduced from 89 deaths per 1,000 live births to 51 per 1,000 live births between 2014 and 2019, anecdotal evidence in 2022 suggests the decline may have been reversed due to the weakening primary health care provision, given the focus on COVID-19 response, health worker strikes, frequent stock-outs of essential medicines, governance



limitations and inadequate investments, particularly at community level. Only 61 percent of births were attended by skilled health personnel (doctor, nurse, midwife, or auxiliary midwife), though increasing from 42 percent in 2021. Road conditions, which are generally poor, were further degraded by intense rains, hindering access to remote villages. Accountability for COVID-19 was brought under the Ministry of Health following the dissolution of the High Commission for COVID-19 which had responsibility over strategic direction for the response. The shift holds greater possibilities of integration with routine vaccination. Two planned COVID-19 vaccination campaigns intended to raise the national coverage, particularly for health workers, the elderly and those living with comorbidities failed to happen due to strikes by health workers. A solution has since been found which will allow the conduct of the campaigns in early 2023, with the view to increasing the national coverage beyond 50 percent from the current 25 percent of fully vaccinated persons and 38 percent having received one dose, in the entire population. In the 2022-2023 school year, two separate strikes covering a total of 10 days at the start of the school year, declared by two teachers' unions over salary demands and contractual rights, continue to compromise learning for students. Already significantly low as indicated by MICS6 2019 data where only 12% of children aged 7-14 years have basic reading skills and 7% demonstrate numeracy skills, education outcomes, continue to suffer from learning loss worsened by school closures. Further, inadequate state investment has eroded confidence in the public education system resulting in a noticeable move towards private structures as parents and caregivers seek schools guaranteed to function during the school year, particularly in Bissau and other urban areas. Guinea Bissau prepared and submitted its first Voluntary National Report[1], with the support of the United Nations, underscoring the acute need for adequate conditions to accelerate achievement of the SDGs. Should the present trajectory of stability, macroeconomic, institutional reforms and external assistance continue, it bodes well for the realisation of child rights.[1] Guinea-Bissau VNR Consultations Report on the SDGs Implementation-March 2023

Major contributions and drivers of results

With the launch in March of a new programme of cooperation between Guinea Bissau and UNICEF for 2022-2026, a renewed momentum has been created to accelerate the achievement of results for children within the horizon of the sustainable development goals (SDGs) and in alignment with national priorities and the UN Sustainable Development Cooperation Framework (UNSDCF). The new cooperation programme emphasizes prioritization and systems strengthening towards the acceleration and sustainability of tangible results. In this regard, partnerships, capacity building and risk management strategies were emphasized during the year and facilitated progress on planned results.

Drawing from the 2022-2023 rolling workplans, the 2022 annual management plan prioritized 5 areas, notably i) immunization, access to education, birth registration and elimination of open defecation, in alignment with the regional key results for children (KRCs), ii) building on the momentum of the initial cash transfer assistance to design a strategy for the social protection system in Guinea Bissau; iii) enhancing Implementing Partner capacities in effective management and utilization of resources for children; iv) pursuing work process and work environment improvements for enhanced efficiencies and staff well-being, and v) improving the visibility of UNICEF operations in Guinea Bissau. An all-office engagement strategy to increase **immunization** bore fruit in 2022. Immunization coverage had declined markedly contributing to a measles outbreak in 2022. The measles outbreak and polio cases identified in 2021 were decisively addressed with significant efforts in immunization, notably campaigns and periodic intensification activities. Through heightened advocacy, the procurement of vaccines and in-country logistics, strong investments in social and behaviour change communication, capacity development, and technical assistance, UNICEF contributed massively to raising DPT3 (three doses for children aged 0-11 months) vaccination coverage, from 71 percent in 2021 to 78 percent in 2022. Significantly, the strategy to prioritize vaccination in urban areas lead to increases in DPT3 coverage from 60 to 69 percent for Bissau, 70 to

86 percent for Gabu and 46 to 73 percent for Bafata. The response to the vaccine-derived polio outbreak and the well-organized campaigns galvanised the Ministry of Health and its staff at all levels. The two rounds of polio vaccination campaigns, particularly the second, produced high-quality results which were validated by independent monitoring and Lot Quality Assurance Sampling (LQAS) with 99.6 percent of children receiving the nOPV2 vaccine nation-wide. A 90 percent coverage was reached for the first time in the capital, Bissau, which historically presents significant challenges in vaccination uptake and delivery. The visit of the Global Lead Coordinator for COVID-19 Vaccine Country-Readiness and Delivery to Guinea-Bissau, drew commitment from national authorities and development partners following organised meetings with high-level government officials, media interactions and field visits, which placed the need for improvements to COVID vaccinations on the national agenda. UNICEF contributed to raising COVID-19 fully vaccinated coverage to 25 percent for the entire population through risk communication and community engagement (RCCE) strategies. vaccine delivery and in-country logistics, upgrading of the cold-chain, continued advocacy and strengthened partnerships. The participation of community leaders and communicators in RCCE is positively shifting COVID-19 vaccine coverage. COVID-19 outreach posts reached over 58,000 people and proved to be an effective way to spread COVID sensitization messaging, focusing on the importance of vaccination. Vaccine stock-outs, at the start of the year, of Bacille Calmette Guerin (BCG), Oral polio vaccine (bOPV) and tetanus vaccine were addressed upon advocacy by UNICEF, following which the World Bank agreed to procure the necessary quantities of vaccines, including the government's co-financing portion for new vaccines supported by GAVI. Health professionals engaged more readily in campaigns to address the polio outbreak and the COVID-19 pandemic, rather than on routine activities. In spite of periods of health worker strikes and boycott of activities demanding the payment of overdue incentives and the dismissal of a large number of technicians assigned to health structures, important strides were made on child health. After three consecutive years without the requisite supplementation, two rounds of Vitamin A campaigns were conducted with deworming for 244,445 children out of 319 445 (76%) fully reached. UNICEF supported 4 rounds of the Malaria Seasonal Chemoprevention campaign in 4 health regions, namely: Bafatá, Gabu, Tombali and Bolama reaching 112,559 children aged 3-59 months, using radios spots, leaders' appeals and radio programs. Nevertheless, only 23 percent of pregnant women who tested HIV positive were under antiretroviral treatment. Approximately 20,936 people were reached with Community Led Total Sanitation interventions in 104 communities which are ready to be declared **Open Defecation** Free. Supported communities constructed 191 basic latrines through a UNICEF facilitated sanitation marketing initiative. One thousand and fifty-seven (1,057) latrines were improved, serving 7,399 people in the targeted communities. This fell short of the expected target due to difficulties in establishing partnership agreements with qualified CSOs. Viable Implementing Partners have now been identified, trained and equipped to accelerate implementation. Despite delays partnering with radio stations due to government efforts to regulate media operating licenses for the sector, agreements with 17 radio stations were renewed and enabled promotion for the adoption of positive behaviors on exclusive breastfeeding, regular handwashing and completion of routine vaccination. The use of mosquito nets, birth registration, enrollment and retention in schools was promoted, through the production and dissemination of visual and audio materials, public declarations of influencers, focus group discussions, capacity building of community mobilizers and young advocates and regular briefing of medias and communicators. Quality social and behaviour change **communication** (SBCC) interventions are mobilising important change agents in supporting the demand and uptake of services in addition to changes to targeted behaviours. To address systemic bottlenecks in the provision of child and maternal health services, UNICEF, in 2022 supported the Ministry of Health to convene health sector actors and key stakeholders to undertake an in-depth assessment and prioritization exercise on primary health care. These consultations assessed the function of: i) immunization; ii) disease control and preparation for emergencies; iii) reproductive maternal, newborn, child and adolescent health; and iv) the enabling environment for primary health care. The culmination of this process will be a national Primary Health Care Forum in February 2023, which will catalyze efforts to revitalize health care and kick-start the implementation of critical actions for 2023, and beyond. In alignment with the annual priority and key result for children to

improve access to education. UNICEF used its convening power to provide leadership and technical assistance to the Ministry of National Education (MEN) to undertake national consultations to draft the National Commitment to Transform Education in Guinea-Bissau. The National Commitment was presented by His Excellency President Umaro Sissoco Embaló to the UN General Assembly in September. UNICEF continues to work with the Government of Guinea-Bissau to fulfill the promises outlined in the declaration and encourages it to sign-on to key global commitments to transform education that were endorsed at the summit. Through UNICEF's continued partnership with the National Network of Pre-Schools, 19,339 children (10,034 girls) in 546 public and private preschools benefited from improved access and quality. UNICEF also worked with MEN and technical partners, Fundação Calouste Gulbenkian (FCG) and the University of Minho to design the preschool curriculum guidelines for 5-year-old-children. To support the roll out of the new curriculum and to address the need for more data to understand the current level of quality of ECE services, UNICEF adapted the Brief Early Childhood Quality Inventory (BEQI) tool to Guinea-Bissau. BEQI, which measures the quality of early learning environments, will be piloted in a sample of 10-20 schools in early 2023 and scaled up to more preschools by the end of the year. To address the negative effects of learning loss brought on by the COVID-19 pandemic, UNICEF provided technical and financial support to operationalize teacher learning networks. The networks facilitate peer learning and joint planning. In the 2021-2022 and 2022-2023 school years, 5,947 (2,333 female) teachers (approximately 50% of all primary school teachers in the country) from 182 networks participated in three rounds of professional development sessions. In conjunction with these efforts, UNICEF supported 2,560 children (1,240 female) to participate in two weeks of accelerated catch-up learning before the start of the academic year. UNICEF contributed significantly to the completion of the National Inclusive Education Strategy for Guinea-Bissau 2022-2028, which has been sent for approval in 2023. The strategy is a major achievement as it provides a clear framework and operational plan to ensure that children with disability in the country exercise their right to education. Through the Child Protection programme, UNICEF in 2022 contributed to improving incident reporting, tested case management of gender-based violence in schools, strengthened birth registration data management and sector coordination. The "one-stop model" integrating birth registration services within the health sector was agreed by the Ministry of Justice, and a clear roadmap to digitalize birth registrations services by end 2023 established. UNICEF supported the Ministry of Justice integrate birth registration into a mobile community justice outreach initiative. Capacity and working conditions of the social service workforce and child protection partners were strengthened, resulting in 674 vulnerable children accessing child protection services. To support the operational effectiveness of the national child protection case management system, UNICEF assistance strengthened the capacity of the social service workforce. The National Association of Social Assistants (AGAS) was admitted into the International Federation of Social Workers, reflecting increased capacity of the social service workforce; south-south cooperation, and expanding partnerships. Capacity building sessions to discuss the professional framework within government institutions, and guidance to overcome sector challenges resulted in a strong partnership with the government, including an agreement on the importance to develop a clear job description for social assistants working in the social areas. With the view to advancing KRC 7 on birth registration, UNICEF accelerated implementation of the national civil registration and vital statistics strategy and action plan. 44,777 children were registered, including 17,375 in health facilities. Five additional health facilities opened birth registration services, bringing the total to 37. Approximately, 35% of newborns received birth certificates. UNICEF jointly implemented the "Mobile Justice" initiative with UNDP and MOJ and reached 1,831 children aged 0-7 (out of 2,000 targeted). This initiative is increasing access to justice, decentralizing information and justice services to very remote areas, particularly for the most vulnerable groups. UNICEF's technical assistance to the MoJ enabled the establishment of a coordination mechanism among development partners, who reviewed the roadmap and key priorities to test and scale up the digitalization of BR. This helped advance complementarity between national and international partners interventions towards digitalization of the Civil Registration and Vital Statistics (CRVS) systems. Progress towards the elimination of female genital mutilation (FGM) was attained through social mobilization and empowering girls and women. In collaboration with UNFPA, surveillance

mechanisms were reinforced in 42 communities to prevent gender-based violence. Increased knowledge and skills on how to eliminate FGM, child marriage and other forms of gender violence was obtained by 35.667 people (18.895 women, including 7.066 adolescent girls). The FGM national strategy and action plan were reviewed, a new community work strategy was validated, and a communication and social mobilization plan elaborated to increase social mobilization. In 2022 UNICEF initiated efforts with the Ministry of Women, Family and Social Solidarity towards the establishment of a shock-responsive social protection system to mitigate extreme poverty, promote social inclusion and improve well-being for the most vulnerable children and their families. UNICEF partnered with the World Food Program (WFP) and the UN Population Fund (UNFPA) to establish the governance framework and begin consultations with key stakeholders to serve as building blocks for the social protection system with catalytic support from the SDG fund. Young UNICEF and the SBCC team led the successful organization of the first edition of a youth consultation towards achieving the KRCs adopted by the Country Office, with 108 participants from 47 youth organizations. An action plan was developed by the young people and committee was created to lead implementation of the action plan for KRC acceleration using advocacy, social mobilization and evidence-generation. Advocacy and communication activities, including some led by children and adolescents, allowed UNICEF to leverage its brand and reputation to mobilize partners and resources around the promotion of children's rights and enhance the visibility of UNICEF-supported programmes. Commemoration of special days spotlighted the status of specific child rights. UNICEF empowered children with opportunities for themselves to raise attention on their rights. 142 radio programmes and news articles were prepared and disseminated by children and adolescents. A radio was organized by young reporters, who interviewed children with disabilities, UNICEF and partners. The commemoration of the World Children's Day showcased UNICEF-supported programmes and advocated for greater investments in services for children. A social media campaign and a video spot with a famous national football player and children with disabilities drew attention to the right to play and participate for all children. On operational matters, the office received combined allocations of core and other resources amounting to \$16,925,399 in 2022 compared to \$8,615,176 in 2021, indicating a 51% increase owing to considerable resource mobilisation efforts. Nonetheless, given the scale of needs, mobilisation of financial and technical resources remains a priority to raise the quality of programme delivery and reach. A new Country Office Management Plan was developed outlining the staffing structure to support the 2022-2026 country programme, with efficiency measures, directed at strengthening staff capacities and deploying UNVs and interns to support programme delivery. A transition plan supported onboarding of newly recruited staff, reconfiguration of office space and activities that maintained the morale and cohesiveness of the team. In spite of the cancellation of the audit planned by the Office of Investigations and Internal Audit (OIAI) for 2022, the **peer review exercise** conducted in preparation, with the regional Office. on all office operations and programme processes provided the basis for continuous improvements to workflows across the Office. As such, standard operating procedures and TORs were revised in the areas of Governance and Systems, Human Resources, Finance & Administration, Information Communication and Technology (ICT), application of the Harmonized Approach to Cash Transfers (HACT), Supply and Logistics, and Security. Strong collaboration with partner agencies and the government enabled significant strides in strategic procurement, supply chain management, and innovations for the benefit of children. As such, a range of products, services, and logistics interventions for the country office and for partners attained a value of \$8,273,933 of items procured and delivered to support results for children. UNICEF's procurement services were effectively leveraged by partners to address stock-outs on essential drugs and COVID-19 vaccine delivery. The Office addressed the high-risk area of cash transfers to implementing partners with capacity**building sessions** and 100% implementation of the assurance plan. To mitigate risks related to transferring significant amounts of funds to the Ministry of Health. two LTAs were established that supported cash transfers to community health workers through mobile money with MTN and Orange telephone companies. The country office followed efficient and transparent recruitment practices, ensure effective onboarding and regular communication on entitlements, learning opportunities and changes to procedures, and performance discussions, contributing the creation of a conducive work

environment, a cohesive team, and staff empowerment.

UN Collaboration and Other Partnerships

In 2022, partnership with the World Bank enabled UNICEF support the delivery of quality maternal and child health services to communities. Further, the World Bank partnered with UNICEF Procurement Services to purchase essential medicines and vaccines for the Ministry of Health. In partnership with the Global Fund, UNICEF supported the government cover gaps in malaria prevention. Partnership with the private sector through a Memorandum of Understanding with two pediatric private clinics (Casa Emanuel and Renato Grandi) is supporting immunization.

UNICEF plays an active role in the health partners group with UN Agencies, the World Bank, European Union, GAVI and BMGF, and led consultations towards a comprehensive revitalization of primary health care, given systemic weaknesses in the provision of quality services. UN Agencies will be key to supporting follow-through of identified actions in the context of the UNSDCF.

UNICEF partnered with UNESCO and other UN agencies to implement the joint UN roadmap for the education sector. The roadmap, developed by the UN and MEN in late 2021, fully aligns with the UNSDCF and outlines activities to strengthen the education sector. UNICEF provided technical and logistical support to a mission by UNESCO International Bureau of Education (IBE-UNESCO) to undertake a feasibility study on teaching in Kriolo and other national languages. UNICEF also worked closely with UNESCO in the development of the draft National Teacher Policy currently underway. This will strengthen the policy framework supporting the management and professional development of teachers, a significant constraint in the education sector.

Partnerships with international and national partners is strengthening children's access to birth registration and child protection services. At the UN level, main partners include OHCHR, UNDP, UNFPA, UNECA, WHO and the Peace Building fund, with whom UNICEF worked to strengthen coordination on civil registration, to promote child and women's rights, and to strengthen the capacities of Child Protection stakeholders to ensure preventative and protective services for children.

UNICEF engaged in joint resource mobilization with UN agencies for digitalizing health and education services to accelerate achievement of the SDGs. Resource mobilization to strengthen social service workforce delivery, especially in the health sector, resulted in joint work with WHO to implement a Peace Building Project on health governance, which will also enhance the capacity of social assistants to address MHPSS and improve case management.

The partnership with UNFPA under the joint FGM programme (JP) was strengthened. Both agencies developed a set of contextualized documents for the new phase IV of the JP and to consolidate and implement interventions with partners.

SDG funds are supporting strong collaboration with WFP, UNFPA, RCO, UNDP, FAO and the World Bank and IMF towards the construction of a shock-responsive social protection system. Further, partnership with UNDP is supporting improvements to public finance management and youth empowerment.

UNICEF chairs the UNSDCF Outcome group on Human Development and facilitated synergies and coherence in support to primary health care, education and social protection, in particular. As chair of the inter-agency Operations Management Team, UNICEF advanced efficiency initiatives, particularly in HACT and ICT.

Lessons Learned and Innovations

While working on strengthening the leadership and coordination capacities of the Ministry of Health, partnerships with national and international NGOs have proven critical. The resumption of partnerships agreements with international NGO partners improved the implementation of community health activities. These NGOs undertake third user monitoring for UNICEF to ensure the appropriate use of funds transferred to the MoH. They also contribute to capacity building at regional level on resource management.

Risk management strategies are systematically applied to ensure continuity in service provision and to improve national accountability. In 2022, an important risk management strategy was the use of mobile money payments sent directly to health workers. This strategy significantly reduced administrative bottlenecks and inefficiencies; for example, a COVID-19 vaccination campaign using Mobile Money transfers facilitated the payment of approximately \$US927,582 in stipends to vaccinators. This action addressed the difficulties of liquidating expenditures by implementing partners and delays in funds transfer to targeted recipients.

The effort to fully integrating COVID-19 into routine immunization needs to continue. The COVID-19 pandemic, as well as the polio and measles outbreaks became opportunities for strengthening health care delivery, particularly on immunisation. As complicated as integration of several activities were, it was still worth the effort of integrating Vitamin A supplementation and deworming into the first polio campaign. Direct staff participation in the polio campaign, provided a renewed sense of purpose, particularly for those whose functions often keep them in the office.

This year, WASH programming leveraged immunization activities, particularly cold chain strengthening, to enable mobilization for the adoption of safe sanitation and hygiene practices with the view to eliminating open defecation. Similarly, the Immunization program will also benefit from the WASH expertise in data collection and the use of real-time monitoring tools, notably with mWater to improve vaccine stock management. This innovation allows for community mobilization to achieve ODF status and is concurrently promoting vaccination in hard-to-reach communities and facilitating knowledge transfer to vaccination managers both at the local and central levels.

An important constraint identified by MEN and key education partners is the lack of a comprehensive, clear, and transparent planning and budgeting process for the education sector. National directorates do not have the funds necessary to buy materials and/or implement activities that are crucial for the effective functioning of the system. For example, teacher and student attendance logs are not included in annual budgets, nor are data collections forms. As a result, MEN requires donors to purchase these items on an *ad hoc* basis, which has a negative effect on both access and quality. In 2023 UNICEF must work with counterparts from the Ministry of Finance and the Ministry of Economy and Planning to improve budgeting and planning at MEN to ensure key operational needs are fully funded.

South-south, regional, and continental cooperation to achieve SDG 16.9 (legal identity for all) is a trigger for change. The participation of the Guinea-Bissau delegation in the 6th Ministerial conference of the African Union for Civil Registration and Vital Statistics raised awareness and strengthened the capacities of the multi-sectoral team (Minister of Justice and Human Rights, Ministry of Health and Ministry of Planning/statistical department). The learning experience and exchange of challenges and best practices in the interoperability with the health sector and the digitalization of the CRVS system motivated the Guinea-Bissau team. In 2022, the Government became more aware of the best practices in similar contexts as and has demonstrated interest to accelerate full interoperability between civil registration and health sectors, including testing and scaling-up digital solutions. The Ministry of Justice is discussing strategies with the Ministry of Health for stronger collaboration and high-level decisions to implement innovative approaches in this area.

UNICEF is providing technical support to expand the use of mWater to monitor WASH interventions in communities, schools and health centers, the use of RapidPro to collect data on birth registration in registration centers installed in health facilities, as well as the use of Kobocollect to collect data and monitor the results of interventions in health centers at national level. Technical support enabled capacity building of users, determination and definition of indicators to be selected, analysis of data collected, and reporting.

In a context where routine management information systems remain weak, strategies to strengthen public sector data collection, quality assurance and use through periodic reviews at the subnational level, as is the case with the community health programme must be updated and institutionalized for different UNICEF supported programme components. The deployment of UNICEF consultants improved collection of gender and age disaggregated data in all regions for immunization and community health services. The approach can be expanded with partner support.

Partnerships with traditional power structures, in the context of RCCE during health emergency campaigns significantly contributed to reducing fear, stigma, and misinformation, improving turnout and uptake. During the Polio campaign, most partner radios were shut down by the Ministry of Social Communication for regularization of their status, and SBC unit resorted to traditional power structures as an alternative platform and communication channel to disseminate information nationwide, which proved to be an effective mechanism for community mobilization, with positive results.

The collaboration with Young UNICEF for the organization of the Youth Mobilization Meeting has allowed space for innovative thinking. It brought the teams to reflect on social mobilization strategies and allowed UNICEF Guinea-Bissau to acquire a new strategic partner in young people. The office will leverage the power of youth in mobilizing communities to accelerate Key Results for Children in Guinea Bissau. The country office needs to mobilize resources for the expansion of digital engagement tools and the introduction of platforms such as U-Report, including dedicated human resources. The office still needs to develop/acquire appropriate tools to collect data on the direct effect of SBC interventions on behavior change and programme results.