Background Paper on Social Issues

Introduction

1. Guinea-Bissau ranks 175 out of the 177 countries on the UNDP Human Development Index for 2007. Average life expectancy is 45 years at birth. Indeed, the 2006 National Poverty Reduction Strategy (DENARP) acknowledges that Guinea-Bissau will not achieve the MDGs by 2015 without significant policy change and intensification of planned activities.

2. The government realizes that social sector development is the key to breaking the inter-generational cycle of poverty and providing hope to the most vulnerable: children and youth, mothers, the disabled, veterans of war and the elderly. Accordingly, the government has given priority to those interventions in the DENARP which favor social sector development, such as vulnerable groups and strengthening the country’s human capital.

3. Social problems stem from the fragile budgetary situation of the government – which, since the end of the civil conflict, has been relying on external aid to cover the most basic public expenditures. Improving the delivery of social services to the population on a sustainable basis depends upon the strengthening of State institutions, in a process that is closely related to the reactivation of the economy and the creation of jobs. In this regard, addressing the mounting social challenges in the country would greatly contribute to the stabilization and the consolidation of peace in the long-term.

Trends and analysis of social development

4. Two out of every three Bissau-Guineans live in absolute poverty (less than US$ 2 a day). Over 21% live on a dollar a day or less.

5. Illiteracy, with a rate standing at 71.4% (as at 2006), particularly among women aged 15 to 24 years, is an impediment to economic and social development. Little progress has been made in providing universal education or promoting gender equality in access to education. Primary school enrolment was only 53.6% in 2005-2006 (54.4% for boys, 52.8% for girls). Almost three quarters of school-aged children (72% in 2006) are not part of the educational system. Only 60% of teachers have adequate training.

6. Infant and maternal mortality rates in Guinea-Bissau are very high. One child in 5 does not reach their fifth birthday. Vaccine-preventable diseases, malaria, diarrhea and pneumonia cause two thirds of childhood deaths. The maternal mortality rate is approximately 1,300 deaths per one hundred thousand live births; most of them are related to preventable complications occurring at the time of delivery. In 2004, only 6.1% of births were attended by a trained health professional. In addition, access to prenatal medical services has fallen from 41.3% in 2002 to 23.9% in 2004. Most Bissau-Guineans lack access to potable water, sanitation and access to decent housing.

7. These problems are the result of weaknesses in the primary health-care system: an under-funded health sector, lack of qualified human resources and limited access of the population to a minimum package of life-saving interventions and essential medicines.

8. Young people are the hardest hit by poverty (80% of the poor are between 15 and 35 years of age). Consequently, youth have often been at the centre of political and military struggles in the country and in the sub region. In rural areas, poor prospects for paid work, and the low salaries paid to...
agricultural laborers have triggered an exodus of youth from the country-side and encouraged clandestine emigration. With a large part of the youth population deprived of basic education, skills, work and perspectives, within a context characterized by political instability, there is the risk that the youth continue being targets for recruitment by criminal gangs, drugs traffickers, militias, human traffickers, among others.

**Government efforts**

9. The Government, through targeted reforms outlined in the DENARP, plans to develop the country’s human capital, to accelerate progress on achieving the MDGs by improving health and education services and to include vulnerable populations in the country’s economic and social development.

   Improving the education system

10. Strategies for improving access include: (i) promoting universal education by constructing, repairing and maintaining educational facilities, in particular classrooms; (ii) establishing school canteens; and (iii) promoting the education of young girls. Strategies for improving quality include: (i) training teachers, inspectors and coordinators; (ii) strengthening the capacity of institutions that train teachers; and (iii) improving the quality, production and distribution of textbooks, teacher-training manuals and other educational materials.

11. Strategies for improving equality include: (i) social mobilization and community awareness campaigns to change attitudes and behaviors currently hampering the education of girls and young women; (ii) ensuring that children with minor disabilities have equal access to education with dignity; (iii) promoting mechanisms to reduce the burden of the women’s work, especially in rural areas; and (iv) creating early-childhood centers for the elimination of illiteracy.

   Improving the health system

12. The government is producing a 5-year National Strategic Plan for Health Development as part of the DENARP. Its key components include: (i) implementing the Human Resources Development Plan for the health sector; (ii) implementing of a minimum package of interventions for reducing maternal and child mortality; (iii) strengthening primary health care through the reactivation of community participation in the management of health services; (iv) ensuring a sustainable supply of affordable, high-quality essential medicines; and (v) improving the National Public Health Laboratory.

   Promotion of professional training and employment for youth

13. Creating decent and productive jobs for Guinea-Bissau’s urban and rural youth will be necessary for reducing poverty, attaining the MDGs and consolidating peace. Strategies for promoting professional training include: (i) revising professional training policies; (ii) diversifying professional training sectors in line with local and national development priorities and promoting gender equality in training opportunities; (iii) expanding the network of professional community training centers based on the need for short-term training for young people and adults; (iv) providing youth with information about their options for professional training; (v) strengthening national institutions responsible for youth and professional training; and (vi) prioritizing certain areas for youth professional training.
14. Programs which support income-generating activities will target trained youth. Full participation of all vulnerable groups in economic and social activities will require access to microcredit funds. It will be necessary to strengthen institutions that provide and coordinate microcredit in support of income generating activities for vulnerable populations.

Addressing the problems of the vulnerable groups

15. The vulnerable groups are deprived of the basic needs of everyday life because of lack of income, or because of specific social or physical conditions. Such vulnerable groups include children, women, the disabled (in particular victims of land mines and AEE), the youth, war veterans and the elderly.

16. Policies for improving the living conditions of vulnerable groups include: (i) increasing access to social services like health and education, and (ii) developing programs to help vulnerable people to generate income, including microcredit and community development.

Partners’ support

17. Guinea-Bissau is supported by bilateral/multilateral partners in all previously mentioned areas. During the November 2006 Roundtable in Geneva, many partners committed their support to the Government in implementing the DENARP. Other programs will be concluded with other bilateral/multilateral development partners. The government will ensure that these various programmes are executed for the well-being of the population.

Potential contribution for peace consolidation

18. Guinea-Bissau’s government must be able to provide better education, better health and meet the population’s expectations for a better life. These are basic human rights needs. Sustained peace consolidation depends on overcoming extreme poverty. The poor depend on the provision of adequate education and health services for their livelihoods. Without livelihoods there can be no peace. Education and health are therefore economic assets which are crucial to peace consolidation. The PBC can contribute to peace consolidation in Guinea-Bissau through the mobilization of resources and international support necessary to address the challenges of human development, which is vital for attaining peace and stability, through sustained investments in the health and education, as well as the youth employment sectors.

Conclusions

19. To reduce poverty and consolidate peace, Guinea-Bissau will need more financial and technical support for social sector development. Given the country’s current financial difficulties, most of this support will come from development partners who are currently the largest providers of most public investment. The implementation of DENARP will cost 227.2 billion CFA francs (US$546,909 million). Implementing pillar III (Increase in access to social services and basic infrastructures) and pillar VI (Improvement of the living conditions of vulnerable groups) will cost 75.347 billion francs CFA (US$181,373 million) (33.1% of total) and 16.457 billion francs CFA (US$39,615 million) (7.2%) respectively. The fulfilling of DENARP will contribute to strengthening the government’s institutions and therefore set the conditions for the country to tread its own path towards economic and social recovery.