COUNTRY DEVELOPMENT COOPERATION STRATEGY (CDCS)

December 22, 2020 - December 21, 2025
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   a- Journey to Self-Reliance Country Roadmap
I. Executive Summary

USAID’s goal under the 2020-2025 CDCS is: More participatory governance for a healthier, more prosperous Guinea. Two Development Objectives will support the goal: Development Objective 1 - Increased Capacity and Commitment of the Local Health System for Better Health Outcomes and Development Objective 2 - Democratic and Economic Governance Strengthened. The Mission will shift from a focus on supporting central government institutions to engaging with committed government, private sector, and civil society actors at the local level to advance health, governance, and economic opportunities. The Mission expects this grassroots approach to bolster democratic governance across development sectors by building norms of citizen participation in decisions that affect their lives with institutions closest to them.

The objective of the United States in Guinea is to bolster the development of a stable and democratic Guinea as a security, economic, and political partner in West Africa. Consistent with the National Security Strategy and the State-USAID Joint Regional Strategy, the U.S. Government seeks to achieve the following four goals through the Integrated Country Strategy for Guinea: 1) Advance Mutual Peace and Security Interests, 2) Encourage Mutually Beneficial Trade and Investment Between the U.S. and Guinea, 3) Transform Guinean Health Systems to Accelerate Reductions in Mortality, and 4) Strengthen Democracy, Human Rights, and Good Governance. USAID will directly contribute toward the third and fourth goals with the 2020-2025 CDCS.

The Mission arrived at its strategic choices by reviewing recent evaluations and lessons learned from implementation, consulting with USAID headquarters and local stakeholders, and analyzing an array of U.S. Government strategies and assessments. The Country Roadmap for Guinea reveals low levels of commitment and capacity for most categories, far below the average scores for low and middle income countries. The Mission closely analyzed the data comprising the Child Health score and noted weaknesses in the governance of the health system in the country. Key indicators of women’s health access have improved, but financing remains a barrier for many gender-sensitive services, and there is no coordinated approach to gender-based violence. The low Open and Accountable Governance and Government Capacity scores indicate governance challenges and opportunities for USAID support, while the higher Civil Society Capacity score suggests a pathway to stimulate demand for accountability, thus complementing investments in governance support. Similarly, the Mission noted a recent increase in the Business Environment score and recognizes an opportunity to seize on the government’s increasing commitment to private sector development. However, women’s incomes lag significantly behind those of men.

The Country Roadmap confirms the Mission’s analysis that Guinea is in its early stages of the Journey to Self-Reliance and the key issue is governance across sectors. The Mission will address that issue by helping the country stimulate better governance.
organically by supporting citizen participation in local institutions. Struggling with the legacies of colonialism, authoritarianism, socialism, over-centralization, and regional instability, Guinea is in the process of developing the stabilizing governance institutions and democratic norms needed to manage citizen demands and a market-based economy. Its ten-year-old democracy has come under strain due to contested elections in 2020, but Guineans still enjoy considerably more freedoms than ten years ago. The Mission will leverage the commitment on the part of many actors within the country to continue strengthening democratic governance.

The Mission will approach governance strengthening from a local, grassroots perspective, with limited engagement at the central government level, which will be mostly geared towards supporting decentralization. Future health programming will therefore strive for depth of engagement at the local level, empowering local health sector actors, with strategic engagement at the central government level that is essential for reinforcing local capacities. The Mission’s long-term plan in the democracy and governance sector will be a pivot toward increasing support to the government’s decentralization reforms, while maintaining election support and consensus building activities at the central level.

Cognizant that any improvements in governance cannot be sustained without an underlying environment of security and economic opportunity, the Mission will invest in conflict mitigation activities and help build a friendly ecosystem for entrepreneurs in targeted localities. In partnership with the Bureau for Conflict Prevention and Stabilization, the Mission will expand existing conflict mitigation activities to additional areas of the country prone to inter-ethnic tensions and violence, continuing its successful emphasis on engaging women and youth as agents of peace in troubled communities. Recognizing the foundational role that stable electricity supply plays in expanding economic opportunities, the Mission will continue its engagement with Power Africa under the West Africa Energy Program to expand the supply of reliable energy in Guinea and create partnerships with private sector actors. In addition, the Mission will work to economically empower women and youth through small, experimental activities focused primarily on agriculture.

**Mandatory Policy Considerations**

The 2020 Trafficking in Persons Report downgraded Guinea from Tier 2 to the Tier 2 Watchlist. The 2020 Report asserted that women and children are most vulnerable to trafficking and that forced labor is present in agriculture, mining, and other sectors. The Report indicates that a lack of economic opportunities is one reason for children’s vulnerability to trafficking. While the Mission does not have stand-alone counter-Trafficking in Persons (C-TIP) programming and does not receive funds through the TIP earmark, the Mission will contribute to C-TIP efforts most visibly under Development

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1 https://www.state.gov/reports/2020-trafficking-in-persons-report/guinea/
Objective 2, IR 2.3: Sustainable economic opportunities increased. Two sub-IRs under this IR have strong C-TIP elements in their focus on expanding economic opportunities to women and youth in particular. Both sub-IRs under IR 2.2: Conflict Management and Mitigation Capacities Improved also contain strong echoes of C-TIP approaches with a focus on building stability in conflict-affected areas of the country, with an emphasis on youth and women serving as peace-builders. Other sub-IRs with C-TIP elements include Sub-IR(s) 2.3.3 Availability of reliable and affordable electricity increased, Sub-IR 2.1.1 Local government responsiveness to citizen needs strengthened, and Sub-IR 2.1.2 Civil society and independent media strengthened.

The State Department’s 2019 Report on International Religious Freedom notes that under Guinean law, the country is secular, prohibits religious discrimination, and provides for the right of individuals to choose and profess their religion, and the U.S. Commission on International Religious Freedom does not include Guinea on its lists of concern. This confirms the Mission’s analysis that religious tolerance is well established and respected in Guinea.

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2 https://www.state.gov/reports/2019-report-on-international-religious-freedom/guinea/
### Goal: More participatory governance for a healthier, more prosperous Guinea

#### DO 1: Increased capacity and commitment of the local health system for better health outcomes

**IR 1.1 Provision of quality MCH, FP/RH, and malaria services assured**
- **Sub-IR 1.1.1** Decentralized human resources are managed effectively
- **Sub-IR 1.1.2** Health facilities have the appropriate commodities, infrastructure and equipment
- **Sub-IR 1.1.3** People-centered preventive, curative, and rehabilitation services offered

**IR 1.2 Health-enhancing social norms established**
- **Sub-IR 1.2.1** Targeted population knowledge, attitudes and practice concerning key health behaviors increased
- **Sub-IR 1.2.2** Targeted health care providers and managers provide unbiased services according to established protocols
- **Sub-IR 1.2.3** Effective social and behavior change communication strategies implemented
- **Sub-IR 1.2.4** Target population(s) measurably increase health-enhancing behaviors

**IR 1.3 Democratic norms and processes strengthened**
- **Sub-IR 1.3.1** Local government responsiveness to citizen health needs strengthened
- **Sub-IR 1.3.2** Civil society and independent media strengthened
- **Sub-IR 1.3.3** Targeted national-level institutions strengthened
- **Sub-IR 1.3.4** Consensus building promoted among key political stakeholders

**IR 1.4 Cross-cutting: Use of strategic information for decision-making increased**
- **Sub-IR 1.4.1** Regional, prefectural, health facility, and health committees collect and analyze routine health information
- **Sub-IR 1.4.2** Access to routine health system information increased for non-health sector actors
- **Sub-IR 1.4.3** Operability of key information systems assured in targeted health facilities.
- **Sub-IR 1.4.4** Infectious diseases surveillance systems strengthened

#### DO 2: Democratic and economic governance strengthened

**IR 2.1 Democratic norms and processes strengthened**
- **Sub-IR 2.1.1.** Local government responsiveness to citizen needs strengthened
- **Sub-IR 2.1.2** Civil society and independent media strengthened
- **Sub-IR 2.1.3** Targeted national-level institutions strengthened
- **Sub-IR 2.1.4** Consensus building increased among key political stakeholders

**IR 2.2 Conflict management and mitigation improved**
- **Sub-IR 2.2.1** Peace-building capacities strengthened
- **Sub-IR 2.2.2** Youth and women’s networks increase their knowledge and application of conflict management techniques.

**IR 2.3 Sustainable economic opportunities increased**
- **Sub-IR 2.3.1** Local actors strengthened in their ability to promote economic development
- **Sub-IR 2.3.2** Youth and women’s entrepreneurship increased
- **Sub-IR 2.3.3** Availability of reliable and affordable electricity increased
II. Country Context

Guinea is a multi-ethnic country in West Africa with a population of approximately 13 million people. After achieving independence from France in 1958, and weathering the abrupt withdrawal of the French authorities who had been administering the colony, the country was governed by authoritarian leaders who aligned themselves with the Soviet Union and China, prioritized ideology over economic development, and stifled political expression. This period of socialist rule was succeeded by a corrupt regime that mismanaged the transition to a market economy. Guinea underwent two coups and saw its first democratic transition in 2010 with the election of Professor Alpha Condé.

The next presidential election took place in 2015 as scheduled, and President Condé was re-elected to a second term. The legislative election scheduled for 2018, however, did not take place until March 2020. In addition to the recurring disagreements between the ruling and opposition parties, the vote in March 2020 was complicated by the ruling party’s decision to couple the legislative election with a referendum asking voters to approve a new constitution that would allow President Condé to pursue a third term. The opposition parties mobilized against the referendum with numerous protests over 2019 and early 2020, which featured deadly clashes between protesters and security forces.

After multiple postponements, the legislative election and the constitutional referendum took place on March 22, 2020. Boycotted by most opposition parties, the election produced a supermajority for the ruling party in the National Assembly and delivered a yes vote for the Constitutional amendment, paving the way for a third term for the President. The Presidential election took place on October 18, 2020, with President Condé declared the winner. Opposition leaders contested the official results and alleged fraud.

Despite the intrinsic complexities of Guinean politics, the local elections of February 2018 plus ongoing progress to implement decentralization reforms create windows of opportunity for the Mission’s support for democratic reforms. Inter-party accords achieved during 2017-2018 (supported by USAID and other U.S. Government consensus building activities) enabled the ruling and opposition parties to agree on amendments to the electoral code, allowing largely peaceful local elections to take place throughout Guinea in February 2018. Although disputes arose over the results in about six percent of the 342 localities, these conflicts were eventually resolved, and local councillors were seated by early 2019.

During a special consultative assembly in February 2019, the Government of Guinea committed to devolve more training support, revenues, and authorities to local
governments, including local development and capital investment planning. In coordination with the Ministry for the Administration of Territory and Decentralization, USAID and the United National Development Programme launched training programs for newly elected councillors to develop their skills in budget formation, financial management, development planning, responsiveness to constituent needs, and carrying out their mandates as spelled out by the Code of Local Collectivities. In addition to U.S. Government support, the World Bank, the French Development Agency, and the International Fund for Agricultural Development made significant multi-year funding commitments for decentralized development in Guinea.

Guinea ranked 174th out of 189 in the 2019 Human Development Index with indicators such as a life expectancy of 61 years, nine years of expected schooling, a literacy rate of 32 percent, a maternal mortality rate of 679 per 100,000 live births, access to electricity at 34 percent of the population (nine percent of rural households), and 23 percent access to improved sanitation. The estimated gross national income per capita is $2,211, with a wide gender gap: $1,878 for women and $2,569 for men. Over 60 percent of Guineans are engaged in agriculture, but the sector is not well developed and the majority of effort is directed toward subsistence agriculture. A significant challenge to Guinea’s development is the exceptionally weak infrastructure throughout the country. Transport by road is dangerous and unreliable, further undermining the capacity of the agricultural sector to be competitive. Connectivity to electricity is low, and telecommunications infrastructure remains weak.

The Ministry of Health’s National Health Development Plan, 2015-2024, characterizes Guinea’s health system as weak and poorly performing. High morbidity and mortality levels are driven by weak coverage and low quality of essential health services, inefficient and inequitable provision of these services, and inadequate equipment and infrastructure.

Health system strengthening efforts since the end of the 2014-2016 Ebola Virus outbreak have yielded tenuous gains. The high variability in the quality and availability of health services provided at facilities underscore persistent fundamental health system governance challenges related to human and material resources management, resource mobilization, transparent decision-making, and fiscal transparency. The vaccination rates for children under five years of age fell by 13 percent between 2012 and 2018, demonstrating systems challenges at all levels, including planning and operational difficulties at the health facility level and deficits in oversight and accountability at the national program level. The 2018 Demographic and Health Survey shows that 53 percent of women used maternity services at their local health facilities as compared to 40 percent in the 2012 Survey. However, 47 percent of women still

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5 ibid
deliver at home, and 60 percent of women surveyed identified financial barriers as the main reason that they do not seek care at a health facility. The stagnant unmet need (32 percent) for modern family planning information and services reflects challenges in health care provider behaviors as well as entrenched socio-cultural norms.

This information is confirmed by the USAID/Guinea Gender Analysis, which also shows that informal payment schemes in health care limit access to health services, with a disproportionate impact on women and adolescent girls. There is a lack of female medical personnel, in particular doctors and health center managers, as well as female decision makers at the highest levels of the health sector, which affects health outcomes for women and girls. Gender-sensitive services and infrastructure are virtually nonexistent, and the attitudes of health care providers and managers impede access to gender-sensitive services. In addition, the Guinean health system lacks coordinated gender-based violence response services, and providers lack capacity in the clinical management of this issue. Rates of child marriage are among the worst in the world, with 47 percent of girls married before the age of 18.

Despite these serious challenges, the country is exceptionally rich in mineral resources, with abundant amounts of high-quality bauxite (which is mostly processed abroad into aluminum), gold, diamonds, manganese, zinc, cobalt, nickel, and uranium. Guinea also has extensive water resources; the country is the source of several major rivers, with a high hydropower potential that the current government is working to harness with hydroelectric dams. The Mission recognizes that hydropower development may cause disruption to the rich biodiversity in those areas where dams are constructed.

The Government of Guinea operates under a five-year National Social and Economic Development Plan, which runs through 2020. The Plan is divided into pillars: Pillar I: Promotion of good governance in the service of sustainable development, Pillar II: Sustainable, inclusive economic transformation, Pillar III: Inclusive human capital development, and Pillar IV: Sustainable management of natural capital. The Mission’s focus on health, governance, and economic growth broadly align with these pillars. The next iteration of the government’s Plan is under discussion; however, the COVID-19 pandemic shifted attention away from the Plan and affected its timeline. Nevertheless, the Mission and the U.S. Embassy participated in the thematic groups under the government’s Plan and will continue to participate in shaping the new Plan.

The government is attempting to improve the infrastructure of the country, financing those investments with export receipts and loans. For example, the government launched the national fiber optic data backbone in September 2020, which began

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6 https://drive.google.com/drive/folders/1e9pUSbw-5Q-3YKWS4r37ZB0Z0YuadReM
7 https://www.girlsnotbrides.org/where-does-it-happen/atlas/
8 USAID/Guinea 118/119 Tropical Forest and Biodiversity Analysis
construction in 2012. The government also has several road projects including the rehabilitation of a national road and roads within the capital city.

The government is increasingly turning to the mining sector to finance the country’s development. The Government’s revision of its mining code in 2011 included a provision that entitles the Government to a 15 percent stake in bauxite and gold mining revenues. The government has also begun publicly disclosing mining contracts. According to the Natural Resource Governance Institute, tax receipts from the mining sector increased by 46 percent between 2016 and 2017 to $505 million, representing a third of total government revenue. As a result of the updated mining code and recent decentralization reforms, subnational governments received about $55 million of mining revenues in 2019 for local development. However, there is a perception that funds derived from the export of natural resources are not managed transparently and have not yet had a visible impact on the wellbeing of the population. While the government has taken important steps to regulate the mining industry and learn from the errors of other resource-dependent countries, ensuring transparency and responsible use of mining resources requires strengthening governance such as institutionalized oversight and decision making processes.

**Country Roadmap**

The Roadmap reveals low levels of commitment and capacity for most categories, far below the average scores for low and middle income countries. The relatively high scores in the Inclusive Development category do not reflect the full reality in Guinea. For example, the above average Social Group Equality score appears to capture the legacy of socialism practiced after independence, when the population was limited to similarly low socioeconomic levels, rather than any active policy to limit economic inequality. While the Economic Gender Gap score, which measures economic participation, is remarkably high, it fails to reflect the serious gender gaps in educational and political empowerment, as well as earning gaps between men and women. It also fails to capture the inequitable division of labor between men and women in regards to traditional gender roles and the time burden that imposes on women.

While the Roadmap only includes one measure of health, the Mission analyzed the data comprising the Child Health score and noted continuing weaknesses in the health system. Health status is codependent on the country’s political and economic environment - without one, the other cannot be sustainable. The Mission will therefore work to address the root causes of poor health system performance, particularly at the decentralized level. This will result in a reinforced social contract between the Guinean government and the population whereby the system demonstrates an increased capacity and commitment to provide quality health care services. Local system actors’ technical and managerial capacities will improve, along with their commitment to

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implementing democratic decision-making and resource management practices that underpin a well-functioning, resilient health system.

Low scores in Open and Accountable Governance and marginally higher scores in Government Capacity indicate a need for programming focused on stimulating grassroots demand for better governance. The Mission will shift from a focus on central institutions to engaging with committed government and private sector actors at the local level to advance better local governance, including health and economic governance. The Mission also will capitalize on the relatively higher Civil Society Capacity score to further strengthen civil society organizations and media capabilities and stimulate more demand for accountability. Similarly, the Mission recognizes an increase in the Business Environment score and notes an opportunity to seize on the government’s increasing commitment to private sector development with targeted technical support in order to stimulate inclusive growth at the local level.
III. Strategic Approach

The objective of the United States in Guinea is to bolster the development of a stable and democratic Guinea as a security, economic, and political partner in West Africa. To reach this objective, the U.S. Government seeks to achieve the following four goals through the Integrated Country Strategy for Guinea: 1) Advance Mutual Peace and Security Interests, 2) Encourage Mutually Beneficial Trade and Investment Between the U.S. and Guinea, 3) Transform Guinean Health Systems to Accelerate Reductions in Mortality, and 4) Strengthen Democracy, Human Rights, and Good Governance. USAID will work toward the third and fourth goals under this CDCS. USAID’s interagency partners include the Centers for Disease Control and Prevention, particularly on malaria and infectious diseases, Peace Corps in support of health activities, and the Economic Section in support of the Embassy’s Deal Team.

The Mission will work toward a goal of: More participatory governance for a healthier, more prosperous Guinea. The Mission will continue efforts in health, governance, and economic growth based on an analysis of the Country Roadmap; the country context; implementation experience; the Gender, Biodiversity, and Youth assessments; the Government of Guinea’s Development Plan; and guidance from USAID headquarters. The Mission will also require all offices and staff to ensure robust gender integration across the program cycle. USAID enjoys a considerable competitive advantage in these sectors, building on decades of global experience and achievements to date in Guinea.

Struggling with the legacies of colonialism, centralized authoritarianism, a poorly managed shift from a socialist to a market economy, as well as significant regional instability caused by recent civil wars in neighboring countries, Guinea has not finished developing the stabilizing governance institutions or the associated norms needed to manage competing citizen demands and a growing economy. The lack of mature institutions and democratic norms indicate that weak governance is the central problem that the Mission has the expertise to help the country address.

Informed by implementation experience and evaluation findings, the Mission will redefine its approach to governance by focusing on a local, grassroots perspective, with limited engagement at the central government level, which will be mostly geared towards supporting decentralization. Through an evaluation of its flagship health activity, the Mission learned that attempting to address governance issues in the health sector at both local and central levels did not allow for the depth of support that is required in the operating context in Guinea. Future health programming will therefore strive for depth at the local level, with strategic engagement at the central government level that is essential for reinforcing local capacities. For example, USAID will support local health actors’ ability to collect and analyze local health data using existing systems that USAID and other donors previously supported at the central level in order to reinforce those protocols closest to the people the health sector serves. Beyond improving tools for
local health planning, empowering these health actors will shift accountability for action to local levels rather than relying on action from the central level.

The Mission will address gender specific gaps in the health sector. For example, USAID will advocate for recruitment of health personnel at decentralized levels, as top-down recruitment is not conducive to the retention of women providers, especially in rural areas. The Mission will also support the institutionalization of training on the clinical management of gender-based violence for all health care professionals. USAID will further train peer educators in gender, communication, and negotiation skills and promote strategies for male engagement to reduce gender-based inequities in health.

The Mission’s long-term plan is to gradually pivot toward increasing support to local governments while maintaining election support and consensus building activities at the central level. The Mission will continue working with targeted institutions at the central level, such as the Ministries of Energy, Health, and Territorial Administration and Decentralization, and will remain open to working with promising reform agents that may emerge in the future.

The Mission will align with the Government of Guinea’s decentralization reforms, part of which includes an ambitious plan to allocate 15 percent of mining revenues to local governments to finance local development plans. The Mission recognizes that mining has major potential to destroy ecosystems that communities rely on; the Mission will keep an eye out for opportunities to address these issues to the extent possible. The success of the Ministry of Health’s recently launched Community Health Strategy rests on the transparent operations of the decentralization mechanism, which would pay for a nationwide cadre of community health workers. The Mission will assist the Government in implementing this critical reform with a fiscal transparency activity that will build norms of shared responsibility for public funds among various levels of government and citizen groups. The Mission sees decentralization as an excellent entry point for support to local institutions in fulfilling their roles to plan, finance, and implement solutions to the country’s development with increased responsibility for local issues.

The Mission recognizes the vital role that civil society organizations and media play in shaping public discourse on development issues. The Mission will deepen and broaden existing support to civil society and media to build awareness and advocacy for better governance at local levels. While civil society and media support are part of the existing democracy and governance portfolio, future programming will amplify health and economic topics at the local level. Special attention will be made to the role of civil society organizations in encouraging inclusion, responsiveness, and accountability in the use of health sector resources and the provision of services. The Mission will also target media groups to help professionalize reporting so that it is grounded in facts and can provide accurate reporting. This renewed attention to civil society and media is expected to draw citizens into participating in local issues as well as building a norm of citizen participation in local development and governance.
The Mission does not receive a bilateral allocation for economic growth, but Guinea is a partner country under the West Africa Energy Program that seeks to expand the supply of reliable energy. The energy team will continue working with the Ministry of Energy to provide technical assistance to increase energy supply and create partnerships with private sector actors. The economic growth team will also pursue strategic funding opportunities with USAID headquarters to increase economic opportunities for Guineans, with a particular emphasis on economically empowering women and youth.

In addition to the refinements noted above, the Mission will also incorporate elements of the Journey to Self-Reliance into its approach, as described below.

Redefining the Relationship

The Mission’s approach is to support institutions and private sector actors at decentralized levels, in order to strengthen the demand for democratic norms and processes, and thus, improve governance. Approaching governance from a grassroots level increases the potential for meaningful impact by drawing citizens into decision making processes that affect their lives. By strategically pivoting to the local level, USAID can help this process by exploring appropriate incentive structures to recognize champion districts and local government actors with additional support in line with performance-based incentives, like equipment support for health facilities, for example. This use of incentives will be a central component of USAID/Guinea’s work to redefine the relationship with local governments.

Engaging civil society and media organizations to inform the population about local development and assist in advocacy at the grassroots level will build habits for citizen participation in local issues, which will further develop and expand over time. Supporting organizations that give voice to women will help put them at the forefront of identifying problems and experimenting with innovative solutions related to gender-responsive governance. Promoting coalitions working on gender-based violence in support of a multi-sectoral, coordinated response will likewise empower citizens to experiment with locally-sourced solutions. Empowering private sector actors, such as farmer groups, to create opportunities for local economic development in equilibrium with local contexts will further build a sense of agency and pressure for local institutions to support local development. USAID’s role in this process is to provide incentives directly, through the selection of promising districts for collaboration, and to support the efforts of citizens to push for accountability, creating the enabling environment for citizen-responsive governance.

Financing Self-Reliance

Financing Self-Reliance is a challenge for developing countries that are in early stages of economic development. While mining resources provide an opportunity to fund a country’s transition into more advanced stages, global experience indicates that those resources have often been channeled toward narrow interests and exacerbated
divisions within societies rather than building broad prosperity. The Mission will implement activities to bring transparency into mining revenues earmarked for local development. A major focus of health activities will be in assisting the Ministry of Health to roll out its Community Health Worker Strategy, the success of which depends on transparent management of mining revenues which the Ministry seeks to use to pay for a nationwide cadre of community health workers. Similarly, increased information sharing among local health system actors, including mayors, civil society, the private sector, and the media will encourage more transparent decision-making in the use of mining revenues as well as other local government funds, targeting them towards local development priorities. In collaboration with the democracy and economic growth teams, who will manage fiscal transparency activities, health resources could be used to broaden capacity building efforts with local councils in budget planning, fiscal oversight, policy planning, and program management.

**Private Sector Engagement**

The Mission will engage private sector actors throughout its portfolio, including helping local private sector groups find opportunities for economic advancement. The economic growth team bases its programming on the needs and opportunities identified in its interactions with private sector and civil society actors, and will support the entire Mission to apply such a locally responsive and adaptive approach across its portfolio.

Geographically, where possible, health activities will be paired with democracy and economic growth activities to build on inherent cross-sector opportunities. The Mission will identify specifics of the geographic focus during activity designs, taking into account the presence of reform-minded local partners in targeted districts and the geographic reach of other donors. The health team will benefit from the expertise of the economic growth team to engage with the private sector and to spur entrepreneurial endeavors, especially among women and youth to address health sector challenges. In addition to seeking financial resources, health sector engagement will identify potential private sector partners where they have a comparative advantage, such as service delivery, commodities, logistics management, or the provision of water or electricity to local health centers. Other entrepreneurial opportunities may exist in waste management and sanitation for health centers or Internet network connectivity and electricity to enable the collection of health data. The Mission is currently conducting a private sector assessment within the health sector to identify strategic opportunities for investment.

**IV. Results Framework**

**Goal Statement and Narrative**

The Mission will work toward a goal of: More participatory governance for a healthier, more prosperous Guinea. After analyzing the Country Roadmap for
Guinea, the Mission recommends continuing efforts in the health, governance, and economic growth sectors, while utilizing the concept of Redefining the Relationship to adjust the focus to a local context. Based on implementation experience, the Mission is shifting from a focus on central institutions to engaging with committed government, private sector, and civil society actors at the local level to advance health, governance and economic opportunities. This grassroots approach will bolster democratic governance across development sectors by building norms of citizen participation in decisions that affect their lives with institutions closest to them.

Development Objective Results Statements and Narratives

Development Objective 1 - Increased Capacity and Commitment of the Local Health System for Better Health Outcomes

The Mission recognizes that a population overburdened by poor health cannot effectively engage in the economy or in democratic processes to propel the country along the Journey to Self-Reliance. It also recognizes that sustainable improvements in health outcomes do not materialize in a health sector vacuum. USAID/Guinea will focus and concentrate its comparative advantage at decentralized levels to support a more participatory approach within the health sector.

Current implementation and past program evaluations demonstrate a recurring theme - that while USAID support is critical in assuring the availability and quality of health care services, the sustainability of these investments after the program ends would be difficult. Several reasons underlie this finding. The first is related to the Guinean operating context. A generalized lack of commitment or real accountability of the local health systems actors to the populations they serve results in mismanaged health sector resources. After the enormous investments made by the U.S. Government and other donors in health facility incinerators during the Ebola Virus outbreak, no regional hospital currently has a functioning incinerator for want of maintenance and replacement parts. The second reason is related to USAID’s programming approach. In the previous strategy, USAID opted for breadth rather than depth of programming. The flagship health program attempted to work at both the national and sub-national levels, but a recent evaluation noted that this approach undercut the impact of the program because interventions were spread too thinly.

In addition, gender-sensitive services and infrastructure are virtually nonexistent. Informal (and in some instances formal) payment schemes associated with health care limit women and men’s access to health services, with a disproportionate impact on women and adolescent girls. Furthermore, insufficient female medical personnel, in particular doctors and health center management, affects women’s use of health services. Guided by this understanding, the Mission will engage a variety of stakeholders within the local health system who are critical to ensuring the provision of quality services; reinforcing positive social norms; using and transmitting health
information for decision-making; and governing the use of human and financial resources destined for the sector, through Financing Self-Reliance.

The array of actors engaged will include locally elected officials, community leaders (including religious leaders), civil society, local media, and private sector actors, among others. The interactions among the various stakeholders within the system, defined as more participatory governance, will engender greater trust by communities in the health system, and provide enhanced opportunities for private sector engagement in key areas, in particular supply chain strengthening. In addition, as outlined under the strategic approach, USAID intends to integrate more gender- and youth-focused interventions into its health portfolio. To best engage local health systems in identifying and mitigating gender- and youth-specific health needs and gaps, the Mission will undertake secondary analyses of selected key findings to better inform future programming approaches to effectively engage women in health governance and improve the health system’s implementation of gender and youth strategies.

The four identified IRs will address a system-wide approach to improving supply-side, demand-side, and cross-cutting enabling factors that influence persistent poor health outcomes, with a focus on local health institutions.

Development Hypothesis: IF the supply-side and demand-side challenges to the provision and use of quality services as well as the operating environment challenges related to the democratic management of health sector resources and health information are mitigated, THEN the local health system will demonstrate increased capacity and commitment to better health outcomes.

The Mission’s approach supports the Ministry of Health’s National Health Development Plan, 2015-2024 as well as the Government of Guinea’s ambitious National Policy on Decentralization and Local Development, which establishes a domestic resource mobilization framework to allocate 15 percent of mining revenues to local governments to finance local development plans, including health care. This national policy, an important contribution to Financing Self-Reliance, recognizes that improved commitment and capacity of the local health system will drive Guinea’s progress.

Guinea’s health sector relies heavily on external donor funding. USAID’s activities complement other donor investments to prevent child and maternal deaths and to combat infectious diseases. USAID and the Global Fund ensure nationwide coverage for malaria care, treatment, and prevention in close collaboration with the National Malaria Control Program and the Ministry of Health. USAID and Global Fund also support the nationwide implementation and management of the District Health Information System 2. USAID’s activities leverage resources from the U.S. Centers for Disease Control, the World Bank, the European Union, and the German Technical Agency through the Global Financing Facility in support of reproductive, maternal, neonatal and child health and nutrition goals. Similarly, USAID provides funds through Gavi, the Vaccine Alliance; UNICEF; and the United Nations Population Fund. USAID
USAID works with the United Nations Population Fund to coordinate the quantification and procurement of family planning commodities and capacity strengthening of the National Pharmacy. Programming under this strategy will address gender-based violence in the health sector by promoting coalitions of donors and relevant organizations in support of a multi-sectoral response to gender-based violence.

USAID is an active member of the Global Fund Country Coordination Mechanism and chair of the Health Management Information System Working Group, leading efforts to engage the Government in a dialogue on health management information systems. In response to COVID-19, USAID and the United Nations Population Fund coordinate donor discussions on the support needed by the Guinean government to preserve continuity of care. Through the Global Health Security Agenda, USAID coordinates with donors, the World Bank, and the U.S. Centers for Disease Control and Prevention to manage the outbreak response.

COVID-19

To date, the COVID-19 outbreak in Guinea continues in the capital Conakry. The mortality is less than two percent and the current infection rates are under five percent. Poor data collection and testing outside of the capital may mask a growing outbreak in the interior of the country. Health services have not seen significant disruptions and the planning and implementation of mass vaccination campaigns continue. The recent planned polio campaign was postponed due to post-electoral violence, however. The trajectory of the COVID-19 outbreak in Guinea depends largely on the evolution of the global pandemic. The impact of COVID-19 on the Guinean health system is most clearly seen in the lack of data reported on other infectious diseases. The data collection workforce is limited, and many have been reoriented to compiling COVID-19 data. As with the Ebola Virus outbreak before, the COVID outbreak lays bare key human resource challenges, particularly in health data collection.

The critical assumptions that underpin this DO include the following:

- The Government of Guinea remains committed to its decentralization and community health strategies;
- Current donor funding levels for Guinea’s health sector do not decrease;
- USAID/Guinea will identify effective incentives to strengthen the accountability of local health system actors;
- USAID/Guinea’s implementing partners will identify positive change agents at the district, facility, and community levels who can serve as models in other regions;
- The local health system will continue to function at a sufficient level to allow for the delivery of health services and the engagement of USAID;
The COVID-19 outbreak in Guinea will not dramatically reduce the use and delivery of routine health services, regular childhood vaccination campaigns, or mosquito bednet distribution campaigns;

The COVID-19 outbreak will not disrupt the procurement of essential medicines;

USAID/Guinea’s Health Office has also identified the following possible risks:

- There will be an increased probability of outbreaks of other infectious diseases due to COVID-19 disruptions to health services as experienced during the 2014-2016 Ebola outbreak; the Mission will also monitor potential gender-based impacts of COVID;
- A prolongation of the COVID-19 pandemic will increase economic hardships for the Guinean people, which could also result in the misappropriation of health resources;
- If Guinea were downgraded to Tier 3 in a future TIP Report, U.S. assistance could potentially be jeopardized.

Intermediate Results

IR1.1 Provision of quality MCH, FP/RH, and malaria services ensured (supply-side):

The Mission will consolidate its service delivery support through malaria, maternal and child health, and family planning resources in targeted health care facilities (hospitals, health centers, health posts) and at the community level. The support will improve human resources management; ensure the availability of health commodities, equipment, and infrastructure; and promote people-centered service delivery.

In terms of human resources management, the approach will build on various quality improvement approaches implemented in Guinea, including the Standards Based Management and Recognition approach to incentivize a new management framework and working culture among healthcare service providers and managers. A recurring challenge in human resources management is the uneven distribution of staff, especially between rural and urban areas, and frequent reassignments which keep health facilities in a perpetual shortage of trained personnel. This uneven distribution also has gender implications, translating into a significant gender imbalance between men and women. The Mission’s Gender Analysis showed that women are under-represented among the higher cadre of health care professionals, such as doctors and health facility managers. The Mission will not engage in direct recruitment efforts, but will seek to influence local decision-making on how to advocate for and deploy existing or newly recruited personnel (particularly female health care personnel), including community health workers (this is a key linkage with IR1.3 in terms of local government responsiveness to health needs and consensus building among political stakeholders).
Key partners will be the health care facility, district, and regional managers. The Mission will continue to partner with the Ministry of Health to provide technical assistance and training for national/international policies and treatment guidelines in the targeted zones. For pre-service training, the approach would include targeted support to nurse/midwifery schools to continue building this workforce.

In terms of material resources (equipment, infrastructure, and commodities), the approach will involve advocacy at the central level for increased Private Sector Engagement and Financing Self-Reliance. To date, host-government investment is negligible for essential health commodities like insecticide-treated bednets, vaccines, and family planning commodities. Previous efforts though health and democracy and governance programming resulted in an increase in the national health budget. The Mission may continue this successful collaboration by interacting with the National Assembly to appropriate funds for health sector commodities, infrastructure, and equipment. USAID will identify opportunities to work with the private sector where they have a comparative advantage that would benefit the health sector, such as in logistics management or the provision of water or electricity. The approach will also tap into overlooked community resources, such as local civil society associations and the Guinean diaspora to support local development and to create entrepreneurial opportunities in the area of waste management or sanitation.

The quality of health care services is not only defined by inputs but also by how the services are delivered. Operational evidence and the mission's Youth and Gender Analyses reflect that health services do not take youth or gender considerations into account. The Youth Analysis highlighted the need for more youth-oriented services, specifically sexual and reproductive health services. Young women reported stigma and mistreatment by health care professionals as discouraging factors when seeking health care services. Given the fact that the median age of the Guinean population is eighteen years, health programming must take on a youth orientation to effectively address the needs of most Guineans. The nexus of these two concerns play out in the delivery of family planning services, where a lack of privacy and non-adherence to protocols by health providers discourage women and youth from adopting family planning methods. The mission will incentivize adherence to quality standards while also (as a part of IR1.2) reinforcing provider knowledge and implementing initiatives such as community recognition to influence provider behaviors and social norms to reduce barriers to accessing health care. USAID will promote gender-sensitive and youth-friendly services either through direct programming or in collaboration with other key stakeholders such as the United Nations Population Fund.

Climate change will exacerbate some of the existing health challenges in Guinea, by affecting the availability of electricity, increasing flooding frequency, and possibly expanding mosquito habitats. However, several standard practices in USAID health programs already integrate responses to climatic challenges. Cold chains are set up to mitigate intermittent power outages, and support is provided to communities to manage
childhood diarrhea, as well as to distribute bed nets as an effective response to malaria transmission regardless of how rainfall patterns affect mosquito populations. In this sense much of the “core” of current interventions will not drastically change in response to climate change, but rather adjustments will occur as needed.

IR1.2 Health-enhancing social norms established (demand-side):

Health outcomes are predicated on what individuals do, which is in turn influenced by the social and cultural context. Health care provider attitudes exert tremendous influence on whether a client adheres to medical advice. USAID will support Guinea-specific, health-enhancing social and cultural norms that empower individuals, local leaders, and community groups to become change agents by increasing understanding of major health risks, supporting individuals to act on this knowledge, and addressing culturally biased implementation of standard medical practice.

USAID will support social and behavior change on health topics to inform and encourage action. The mission will continue to work with influential faith and traditional leaders to promote health messages (e.g. the need to sleep under insecticide treated bed nets) and engage youth as change agents in healthy behaviors by creating youth platforms to discuss issues relevant to them. This could be an opportunity, especially for young women, to build life skills such as public speaking and to create a norm of youth engagement in public issues. The partnership with the Peace Corps will continue to offer opportunities for grassroots engagement with youth. Where the mission lacks information, resources will be used to conduct research to identify the drivers of these behaviors and to better target interventions. Often health-enabling behavior change also has positive impacts on the natural environment, such as promoting the use of bed nets for malaria prevention instead of fencing or fishing; where this is the case, community health workers will be made aware of the overlaps in messaging.

The Mission will work with Guinea’s robust civil society organizations and the media to bring awareness to the social norms that hinder progress on health indicators. For example, although female genital mutilation/cutting is illegal in Guinea since 1965, the 2018 Demographic and Health Survey indicates that an estimated 98 percent of Guinean females have undergone this unhealthy procedure. More research is needed to understand why over 50 years of interventions have not deterred this practice. The Mission’s Gender Analysis highlights a vibrant civil society community that can be engaged to address this. The Mission will investigate new ways to influence social norms away from these detrimental practices with women, youth, local leaders, and other interested private sector actors. USAID’s approach will promote strategies for male engagement (e.g. gender-equitable masculinities) to reduce the perception that advancements by women equate to a loss of power for men.

USAID will address the causes that underpin biased and unprofessional provider behaviors by creating norms of accountability of healthcare workers to their clients that
favor adherence to established medical protocols. This could be done by creating a system of incentives/disincentives for identified behaviors linked to personal performance.

**IR1.3 Democratic Norms and Processes Strengthened (enabling environment):**

USAID/Guinea has a long history of cross sector collaboration between health and democracy and governance programming, and the Mission recognizes that a healthy and self-reliant country is built on strong democratic norms. The Mission’s health activities under this shared IR with DO 2 will continue to strengthen democratic norms by supporting inclusive decision-making, information sharing, and resource management. The Mission will strengthen local government responsiveness to citizen health needs; strengthen civil society and independent media engagement in health issues; provide targeted support to key national institutions; and contribute to consensus building among political stakeholders within the health sector. The Mission will also seek out opportunities to effectively engage women in health governance and improve the health system’s implementation of gender and youth strategies.

At its core, responsiveness of the local health system is the ability to ensure that health resources managed locally meet the needs of the population. In close collaboration with the democracy and governance team, health activities will broaden capacity building efforts with local councils and other bodies in budget planning, fiscal oversight, policy planning, and program management. Where resources are lacking, the Mission, through its own programming or in collaboration with other donors, civil society, or private sector partners, would develop plans to help fill those resource gaps by unblocking bottlenecks in government funding or identifying alternative financing options.

A major focus will be in assisting the Ministry of Health to roll out its Community Health Worker Strategy which depends on transparent management of mining revenues that the Ministry seeks to use to pay for a nationwide cadre of community health workers. Community health workers are the cornerstone of USAID and other donor health programs, thus the degree to which the financial management systems are functioning will determine the effectiveness of donor investments and the Government’s strategy. This work will support the Public Financial Management focus area within Financing Self-Reliance, a pillar of the Journey to Self-Reliance.

The Mission will engage Guinea’s robust civil society and independent media to encourage government and healthcare provider accountability. Citizen oversight mechanisms can be established to work with health facilities and local officials to address challenges within the health facilities. By working with local councils, locally elected officials, civil society members, and the media, quality improvement approaches can be used to identify performance measures by which facility officials can be held accountable to communities. It can also be used as an incentive to attract more
resources to champion districts, to purchase additional equipment and commodities, or even to make infrastructural improvements that would enhance services.

USAID will continue to support key central MOH offices, directorates, and programs that have a direct bearing on operations at the decentralized levels with targeted technical assistance for organizational strengthening, policy/strategy development, or operations. The main central level institutions include: the National Malaria Control Program, the Immunization Program, the National Pharmacy, the Office of Studies and Development within the Ministry of Health, the Community Health and Traditional Medicine Directorate, the Family Health and Nutrition Directorate, the National Health Security Agency, and the National Assembly Health Commission.

**IR1.4 Use of Strategic Information for Decision-Making increased (enabling environment):**

Relevant, timely, and complete health data bolster the decisions made in each of the above-mentioned IRs. USAID will support the collection and analysis of data by health sector actors, increase the availability of data for non-health sector actors, and continue to improve the overall disease surveillance systems.

USAID will support healthcare managers, monitoring and evaluation personnel, and others to internalize collection and analysis processes using existing systems. This represents a key component of health facility management (IR1.1) and a norm/behavior to be cultivated within health facilities (IR1.2). USAID, the U.S. Centers for Disease Control and Prevention, and other donors have invested heavily in the establishment of the District Health Information System throughout Guinea as well as an electronic health commodities logistics management system. USAID will continue to support the operations of these systems at the local level, working potentially with the private sector to improve the interoperability of different platforms and to supply needed internet network connectivity, electricity, and tools to enable this work.

It is not sufficient for only health sector actors to have access to this information. Actors external to the sector like civil society, media, and locally elected officials like mayors need access to data, such as the number of new malaria cases, maternal deaths, and gender gaps in health service access in order to better understand how poor health indicators affect local development landscapes and to plan local development accordingly. The Mission will work to incentivize a narrowing of knowledge gaps at the local level by supporting health data transparency.

Finally, Guinea’s experience during the Ebola Virus outbreak and the COVID-19 pandemic underscore the need to strengthen surveillance systems to provide timely data on a routine basis and during a disease outbreak. The Mission will continue to train human and animal health professionals in data collection and analysis, using the national District Health Information System platform. The Mission will also continue to strengthen existing and/or establish new community sentinel surveillance sites for key
human and zoonotic diseases of epidemic proportion including Ebola, Lassa fever, polio, measles, rabies, and malaria. One possible criterion to include in monitoring is how climate change and deforestation will affect the spread of disease.

Guinea has the appropriate policies in place to support advancement in each of the areas covered by the IRs, from the overarching National Social Development Plan to various policies and strategies (e.g. National Health Development Plan, National Malaria Control Strategy, National Reproductive, Maternal, Neonatal, Adolescent, and Child Health Strategy, and Community Health Worker Strategy). What remains to be done is the effective implementation of these policies. The approaches outlined in each IR seek to create a coalition of support around the implementation of each of the relevant national strategies/policies. The approach demonstrates that efforts from the central government downwards to the decentralized level, as well as efforts from the grassroots upwards toward the central level are required in order to make sustainable improvements to the commitment and capacity exhibited by local health system actors in Guinea. To be successful, the Mission will use approaches to redefine key relationships: those between health service providers and managers and the population they serve as well as those between locally elected officials and their constituents. This new approach requires an intentional focus on incentivizing positive behavior, and the Mission will need to learn more, especially through discussions with stakeholders, to identify meaningful incentive structures for the Guinean context.

**Development Objective 2 - Democratic and Economic Governance Strengthened**

Following a half century of centralized authoritarian rule, Guinea conducted several competitive free elections over the period of 2010-2018, concurrently empowering civil society and independent media. Guinea’s still young and emerging democracy has suffered setbacks since 2019, however. The main opposition parties boycotted the March 2020 legislative elections and constitutional referendum, alleging severe deficiencies in electoral system preparations and questioning the legal basis for the referendum. The government responded to protests with tough measures, resulting in clashes that took over 100 lives (estimates vary) as well as large-scale arrests of demonstrators during the twelve-month period since October 2019.

In the October 2020 presidential election, the main opposition leader did participate, first declaring victory and then alleging fraud when the Independent National Electoral Commission announced contrary results in favor of the incumbent, President Alpha Condé, and the Constitutional Court certified the result.

Despite signs of democratic backsliding, Guinean citizens in 2020 still enjoy an overall political context that empowers greater freedoms of civil society advocacy, political participation, free press, and democratic local governance as compared to the pre-2009 period. The new CDCS leverages these hard-won democratic achievements under an integrated strategy that progressively strengthens civil society, media, and democratic
local governance, helping to revive Guinea’s earlier decade of strong progress toward democratic principles and self-reliant political-economic development.

Strengthening democratic and economic governance depends on more than institutional support, however. The context around those institutions can influence the trajectory of reforms as well as the potential for sustainability of those reforms. Critical progress can be undone or blocked in communities preoccupied by insecurity or severe economic stress. Security and economic opportunities are therefore essential ingredients for sustainable improvements in governance; however, some communities in Guinea experience localized conflicts due to inter-ethnic tensions and most areas of the country suffer from a lack of economic opportunities. The Mission’s targeted conflict mitigation and innovative economic growth activities will foster a supportive security environment and economic opportunities that will underpin the Mission’s efforts in strengthening governance. Given the complementary effects of security and stable livelihoods, the Mission posits the following theory of change for DO 2:

Development Hypothesis: If civil society, media, the private sector, and citizens are empowered to advocate for their interests and hold government authorities accountable (demand side), the institutional capacities of targeted local and national government actors are strengthened (supply side), local conflicts are mitigated, and entrepreneurship is nurtured, then the resulting stabilizing ecosystem of responsive public services, increased safety, and economic opportunities will stimulate a positive feedback loop and increase further demand for responsive democratic and economic governance practices.

DO 1, particularly under IR 1.3, incorporates support for democratic governance in the public health sector, notably at the local level, pioneering models to be emulated by other localities and development sectors. Meanwhile, working in close cross-sector coordination with the Health Office, the two DO 2 offices - Democratic Governance and Economic Growth - will work in tandem to advance best practices for democratic governance via DO 2 not only in the economic sector, but also empowering targeted localities to more effectively marshal their available (non-USAID) funding sources to address other development sectors such as education, environmental protection, sanitation, and road repair, responding to local constituent preferences.

In coordination with IR1.3, activities under DO 2 will target localities that demonstrate sufficiently reform-minded political will to welcome engagement with civil society, independent local media, and informed citizen participation, facilitating inclusive constituent oversight of public services to assure accountable local governance. Prioritizing localities that demonstrate this openness to be held accountable is a central part of the Mission’s work to Redefine the Relationship. Given 342 election districts throughout the country, including a notable share where pluralistic multi-party local councils are working across ethno-partisan lines to constructively resolve local issues, DO 2’s grassroots approach can flexibly identify local windows of opportunity, where
support for democratic reforms and responsive governance can continue. With finite resources, even a small share of targeted localities should prove sufficient to promulgate tangible momentum toward democratic reforms. To augment impacts, the DO 1 and DO 2 teams will coordinate the selection of targeted localities.

The Mission recognizes that continued democratic progress will require women’s participation and leadership in order to render truly citizen-responsive institutions. The recent Gender Analysis confirms great interest among Guinean women to actively engage decision-making structures, but gender norms and time constraints related to unequal distribution of household and child rearing responsibilities pose significant barriers. The Mission will continue its successful collaboration with women leaders in civil society, the media and elected offices, exploring locality-specific approaches to promote women’s equal participation, including support for gender based budgeting in the context of decentralization.

Democracy and development require adequate public safety, political consensus, and system stability to thrive. Hence, sub-IR 2.1.4. gives priority attention to promoting political consensus, while IR 2.2 focuses on conflict management and mitigation. Conflict management and mitigation activities can include conflict early warning systems, peace-building forums, young peace ambassadors, conflict sensitive media reporting and messaging, and other approaches, with an overarching theme of including a cross-sector of local society in building solutions, including women, youth, professionals, and traditional leaders. These activities serve to peacefully resolve local conflicts so that local governments working constructively with constituent citizens and civil society can focus attention on accelerating development. In sum, stable environments are conducive for economic growth and democratic development.

Under IR 2.3, the Mission recognizes that in Guinea’s context of precarious livelihoods, any gains made in better governance, citizen oversight, and conflict mitigation will be fleeting if people do not have access to economic opportunities that provide dignified livelihoods. Much as the Mission’s health approach has evolved with the understanding that governance is a unifying thread necessary for effective health systems, better governance also relies on the bedrock of a sound economy that provides people with the sustenance to exercise their rights and duties as citizens.

The Mission will therefore focus on supporting the private and public actors that create the environment for entrepreneurship to thrive and the actors that provide electricity for businesses and the population. The Mission will be guided by principles of engagement with private sector actors as well as engagement with local and national authorities (both public and private) that can hinder or promote sound economic growth outcomes, particularly as they relate to women and youth. This Private Sector Engagement will also support Financing Self-Reliance efforts to improve the enabling environment for private investment. The Mission will employ a facilitative approach, seeking not to replace relevant actors in a system, but rather to support relationships between these
actors in order to catalyze positive outcomes. This facilitative approach implies working in a few strategic points, always with a light touch, in order to empower local actors to overcome the barriers they encounter in promoting economic growth, generally, as well as entrepreneurship and energy supply, specifically.

The declared host country government priorities are well aligned with this DO. Indeed, Pillar I of the current national development plan calls for “Promotion of good governance in the service of sustainable development.” The 2018 local elections and the seating of newly elected local councillors in 2019 represented important steps forward for decentralization reforms as well as a window of opportunity to support democratic progress at the grassroots levels. DO 2 support for democratic and economic governance aligns strongly with other key international donors, such as the United Nations Development Programme, the European Union, the Open Society Initiative for West Africa and the diplomatic community, including the Embassies of France, Belgium, Germany, Japan, and the Economic Community of West African States. The Mission coordinates with these international actors in two working groups, on elections and governance respectively, and will seek to leverage those relationships in future programming, particularly in decentralization.

Financing Self-Reliance activities will build fiscal transparency by training local officials on budget formation, procurement, and financial management; strengthening civil society capacities for fiscal oversight; and improving media reporting on public finances.

The critical assumptions that underpin this DO include the following:

- The political situation at the national level allows for democratic and decentralization reforms to continue in localities while allowing space for free expression by civil society and the independent media.
- The twin economic impacts of COVID-19 and slowed global trade will prove moderate, allowing at least some economic growth in Guinea.

USAID/Guinea’s Democratic Governance and Economic Growth Teams have also identified the following possible risk:

- If Guinea were downgraded to Tier 3 in a future TIP Report, U.S. assistance could potentially be jeopardized.

**Intermediate Results**

**IR 2.1 Democratic Norms and Processes Strengthened:**

The Mission perceives opportunities to build democratic demand at the local government level, where elected officials have shown a pragmatic approach to solving problems and working across ethnic groups. The Mission is particularly encouraged by implementation experience that demonstrates the cooperative approach of women
leaders and will leverage that experience in future programming. The Mission plans to couple its engagement with local officials together with civil society organizations and media groups that can drive advocacy initiatives and disseminate accurate information to citizens and local officials. Resulting improvements in local governance could include locally driven and gender-responsive initiatives for economic growth or agricultural support projects, improved local enabling environments for economic growth (supporting IR 2.3), improved local governance in the health sector (IR1.3), and strengthened capacity for climate risk mitigation and natural resource management.

While this shift to the local level will be an element of the Mission’s efforts to Redefine the Relationship, the Mission will continue limited and targeted engagement with the central government in the area of political consensus building, for example, with potential reform-minded actors. This targeted engagement will build in incentives to ensure that this partnership is not "business as usual", but instead supports reform through the selection of committed actors and by building accountability into the process. The Mission will also support fiscal transparency initiatives at both the central and decentralized levels, which will bolster Guinea’s potential for Financing Self-Reliance.

Going forward, USAID will provide advanced training and technical support to local council women and other female and male leaders serving in local governments for such skill sets as gender-balanced budgeting, budget formation and execution, responsiveness to constituent needs, and oversight of local public services. The Mission will concurrently continue working with national level political parties to promote women’s inclusion as party candidates, elected officials, and political activists.

**IR 2.2 Conflict Management and Mitigation Capacities Improved:**

The Mission remains committed to conflict mitigation programming to calm inter-ethnic and inter-communal tensions in areas of the country prone to violence, such as Conakry, Upper Guinea, the Forest Region, and Labe. The increased stability, both locally and nationally, that results from these programs will foster an enabling environment for democratic governance. It is possible that trends of climate change and deforestation exacerbate existing conflicts in different local contexts; this will be one factor in determining where to focus interventions geographically.

Political consensus building under sub-IR 2.1.4 will remain a particularly high priority activity addressing central or national level partisan conflicts. However, the Mission’s locally-focused conflict mitigation activities under IR 2.2 may expand to new geographic areas where inter-communal conflict has continued to surface in the recent past, including during the March and October 2020 national-level elections. The focus of this area of programming is on empowering women as brokers of peace and placing youth in the role of catalysts for peace, while engaging other influential community members, such as religious and traditional leaders. Raising the profile of women, youth, and other
community leaders helps Redefine the Relationship by making it clear that USAID will identify and support committed, reform-oriented leaders at all levels, including those who have been traditionally overlooked or marginalized.

**IR 2.3 Sustainable economic opportunities increased:**

In support of Private Sector Engagement and Financing Self-Reliance, the Mission will focus on engagement with the private sector, government, and civil society to stimulate an ecosystem that will allow start-ups to flourish and allow existing enterprises to expand. This engagement will generate domestic revenue to augment local government budgets, while providing a layer of public support to the county’s evolving democratic reforms. Such work on empowering local actors to promote economic growth is related to and buttresses work in democracy and governance.

In alignment with the Guinean government’s National Economic and Social Development Plan, the Mission will work with youth and women through a set of entrepreneurial activities that will focus primarily on the agricultural business sector and conservation-based livelihoods. The Government’s goal is to increase agricultural productivity through greater private sector involvement in food production. The Mission’s ultimate goal is to identify ways for young entrepreneurs to become the engines of self-sustaining economic development that will improve food security and environmental conservation, while addressing the barriers that they encounter, whether access to credit or other issues. From past programming, the Mission has learned that agricultural entrepreneurship is an effective way to work with a limited number of direct beneficiaries whose work then improves livelihoods for a large number of farmers. The Youth and Gender Analyses will inform how the Mission nuances its approach to fostering entrepreneurship and addressing obstacles. Specifically, these analyses identify the lack of financing for businesses as a problem that affects youth and women particularly acutely. A suite of Local Works activities with small, local implementing partners, and managed by a coalition of local actors, will focus on the lack of access to finance for entrepreneurs. Another activity under the Women’s Global Development and Prosperity Initiative will improve the capabilities of women produce buyers to run their business effectively and to interface with other actors in the food logistics chain.

Because the Mission’s programs will not reach the majority of beneficiaries in need of small business assistance, it makes sense to target all interventions at youth and women, and thus incrementally improve the systemic inequality between older men and everyone else. In the upcoming activity designs, the Mission will co-create with youth representatives and women’s groups so that activities will respond to their priorities.

The Mission will work with local actors in targeted communities to strengthen their capacity to promote economic development. The Mission will focus on increasing cooperation among local producers grouped into cooperatives and strengthen linkages among agricultural actors (including local governments that set the prevailing framework for agricultural development in an area) in promising value chains, such as cashew. The
Mission will also work toward creating a more efficient local market system by generating opportunities for smallholders and employment for youth and women at various stages along the value chain. The Mission will work closely with potential beneficiaries in designing activities to ensure that all interventions are structured to fit the local context and provide appropriate incentives. Climate change projections and biodiversity impacts will inform Mission assistance to local stakeholders, from ensuring that supported business startups will not cause undue environmental damage, to advising banks to evaluate potential borrowers with an eye to how projected climate scenarios will impact the viability of their projects.

Mission activities will support the country’s economic growth, accelerate its agricultural transformation, improve job skills of youth and women for greater self-employment, reinforce weaknesses in governance, and increase resilience to shocks such as COVID-19. Past economic growth programming has focused on the corridor linking Faranah, Mamou, and Kindia, as well as the spur from Mamou to Labe. The Mission does not have a strict attachment to this geographical focus, but rather will seize opportunities as they arise, and try to “crowd in” future activities to support areas with existing programming.

With energy being a major driver of economic growth, Power Africa has included Guinea in a large regional strategy that seeks to expand the supply of and access to affordable and reliable energy, in line with broadly-accepted social, transparency, and environmental standards. This strategy will have a multi-layer effect on development outcomes: the immediate output of improved electrical generation and distribution will drive economic growth, agricultural processing, security, and better household health. Simultaneously the governance improvements necessary to achieve a better electrical grid are a broadly-applicable example of how to make all government units more transparent and accountable. The Mission will continue providing technical assistance to the Ministry of Energy and other government agencies, helping the government to decide how best to take advantage of energy infrastructure support offered by different donors, private companies, and state-run enterprises. When possible, the Mission will seize opportunities to support renewable energy generation and distribution, as well as cleaner fuels, as a way to improve energy access for Guineans while mitigating climate change effects. Projected climate impacts like reduced rainfall or rising seas will inform the technical assistance and advice offered by the Mission to energy sector stakeholders.

V. Monitoring, Evaluation, and Learning

The complexity of the 2020-2025 CDCS calls for an advanced monitoring, evaluation, and learning (MEL) strategy that will play a key role in activity development, management, and adaptation, as well as operational decision-making. Investments in
MEL must provide decision makers with information that improves the effectiveness of activities as they unfold and provide a retrospective assessment. The Mission’s new approach focused on decentralization necessitates measuring how activities with local governments, media, civil society, and small-scale private sector actors contribute to building democratic norms and to what extent a grassroots programming approach works in a country at Guinea’s development level. The Mission will investigate what catalyzes and discourages commitment of local health care actors and what they need to sustain progress in governing the localized health sector. The Mission will study which private sector actors are available to strengthen health systems and how they can be engaged. The Mission may also invest in studies that compare attitudes or citizen participation rates in local issues in USAID-supported localities. The health and democracy teams will work together to articulate appropriate indicators on the shared governance IR (1.3 and 2.1) and determine strategies for capturing feedback loops for adaptation, as well as lessons learned, which will be outlined in the Performance Management Plan. The Mission will design an evaluation agenda and continue its practice of sharing knowledge with local stakeholders, particularly the Guinean government, to ensure that others can benefit from USAID’s growing knowledge base.

The Mission will pay particular attention to measuring the added value of economic growth activities, especially assessing the opportunities and challenges of working with small, local groups in light of the New Partnerships Initiative. The Mission will ensure that all monitoring and evaluation systems assess impacts on gender and youth and ensure that all person-level indicators will be disaggregated and gender-sensitive indicators will be incorporated in the PMP and activity-level MEL products. The Mission will also implement recommendations of the Gender Analysis to improve gender-sensitive MEL practices, such as requiring implementing partner quarterly and annual reports to systematically review gender and inclusion progress; identify challenges, lessons learned, and adaptations; and integrate activity-level gender and inclusion action plans into partner work plans and Activity Monitoring, Evaluation, and Learning Plans.

The Performance Management Plan will provide the framework for organizing the Mission’s efforts and will include indicators to track progress towards achieving CDCS results, inform the Learning Agenda, and monitor the operating context and assumptions. USAID/Guinea will continue using an excel-based tool developed at the Mission for collecting and storing performance information. Monitoring activities will include joint site visits and periodic feedback from USAID program participants.

Finally, USAID/Guinea will adopt a learning approach by not only integrating evaluations and placing a strong emphasis on project and activity monitoring, but also on an expanded focus on Mission learning priorities and systematically collecting data that
informs those learning needs. The Mission will integrate learning questions developed under this strategy into new activity designs and continue its current practice of joint site visits with program and technical teams, and potentially, government stakeholders. The Mission will also seek a continuous feedback loop via quarterly meetings with implementing partners to review quarterly reports and note any needed course corrections.

VI. Annex
   a. Journey to Self-Reliance Country Roadmap
GUINEA
JOURNEY TO SELF-RELIANCE: FY 2021 COUNTRY ROADMAP

GUINEA'S Score: 0-1, least to most advanced globally

Legend:
- 0-1 Score
- Guinea's Score
- Other Low- and Middle-Income Countries' Scores
- Average Score for Low- and Middle-Income Countries

Committed

Open and Accountable Governance
- Liberal Democracy: 0.18
- Open Government: 0.21

Inclusive Development
- Social Group Equality: 0.67
- Economic Gender Gap: 0.34

Economic Policy
- Business & Investment Environment: 0.37
- Trade Freedom: 0.37
- Environmental Policy: 0.33

Risk of External Debt Distress
- Low
- Moderate
- High
- In Debt Distress

Government Capacity
- Government Effectiveness: 0.32
- Tax System Effectiveness: 0.24
- Safety & Security: 0.54

Civil Society Capacity
- Civil Society & Media Effectiveness: 0.75

Citizen Capacity
- Poverty Rate ($5/Day): 0.07
- Education Quality: 0.21
- Child Health: 0.32

Capacity of the Economy
- GDP Per Capita (PPP): 0.24
- Information & Communication Technology (ICT) Adoption: 0.21
- Export Sophistication: 0.26
**COMMITMENT**

**OPEN AND ACCOUNTABLE GOVERNANCE**
- Liberal Democracy: 0.14, 0.22, 0.23, 0.23, 0.21, 0.23, 0.18
- Open Government: 0.24, 0.21

**INCLUSIVE DEVELOPMENT**
- Social Group Equality: 0.81, 0.81, 0.82, 0.77, 0.70, 0.67
- Economic Gender Gap: 0.64, 0.65, 0.76, 0.86, 0.87, 0.84

**ECONOMIC POLICY**
- Business & Investment Environment: 0.18, 0.20, 0.22, 0.17, 0.35, 0.37
- Trade Freedom: 0.39, 0.42, 0.37
- Environmental Policy: 0.44, 0.33, 0.44, 0.33

**CAPACITY**

**GOVERNMENT CAPACITY**
- Government Effectiveness: 0.28, 0.26, 0.28, 0.31, 0.31, 0.32
- Tax System Effectiveness: 0.32, 0.32, 0.33, 0.34, 0.34
- Safety & Security: 0.55, 0.56, 0.60, 0.60, 0.61, 0.64

**CIVIL SOCIETY CAPACITY**
- Civil Society & Media Effectiveness: 0.79, 0.79, 0.78, 0.79, 0.78, 0.75

**CITIZEN CAPACITY**
- Poverty Rate ($5/Day): Trend data unavailable
- Education Quality: Trend data unavailable
- Child Health: Trend data unavailable

**CAPACITY OF THE ECONOMY**
- GDP Per Capita (PPP): 0.19, 0.20, 0.20, 0.21, 0.22, 0.24
- Information & Communication Technology (ICT) Adoption: 0.11, 0.11, 0.21
- Export Sophistication: 0.29, 0.29, 0.29, 0.20, 0.23, 0.26

**LEGEND**
- Guinea’s Most Recent Score 0-1, least to most advanced globally
- Guinea’s Prior Year Scores 0-1, least to most advanced globally
- Average Score for Low- and Middle-Income Countries

**METHODOLOGICAL NOTES**
FY 2021 Country Roadmap results (darker shaded points) and prior year results (lighter shaded points) are normalized in the same manner to ensure comparability. In some instances, USAID has taken several additional measures to maximize comparability of results across time, including adjusting source reporting year to actual year of measurement and removing historical data that are no longer comparable due to methodological revisions. For more detail, please see the USAID J2SR Country Roadmap Methodology Guide.
**SELF-RELIANCE ROADMAPS**
**INDICATOR DEFINITIONS AND SOURCES**

The FY 2021 Country Roadmaps draw on the latest data available as of July 1, 2020, with latest results typically covering the 2019 or 2018 period. All source data are derived from third-party institutions. All indicators are weighted equally in the calculation of the overall Commitment and Capacity scores. Map boundary representations are not necessarily authoritative.

For more information on definitions and sources, please visit selfreliance.usaid.gov.

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### COMMITMENT

**OPEN AND ACCOUNTABLE GOVERNANCE**

- **Liberal Democracy**: Measures freedom of expression, freedom of association, suffrage, elections, rule of law, judicial constraints on the executive branch, and legislative constraints on the executive branch. Source: Varieties of Democracy (V-Dem).

- **Open Government**: Measures the degree to which a government shares information, empowers people with tools to hold the government accountable, and fosters citizen participation in public policy deliberations. Sub-factors include: publicized laws and government data, right to information, civic participation, and complaint mechanisms. Source: World Justice Project, Rule of Law Index.

**INCLUSIVE DEVELOPMENT**

- **Social Group Equality**: Measures political equality with respect to civil liberties protections across social groups as defined by ethnicity, religion, caste, race, language, and region. Source: Varieties of Democracy (V-Dem), Social Group Equality in Respect for Civil Liberties.

- **Economic Gender Gap**: Index comprising five components: (1) wage equality between women and men for similar work; (2) the ratio of female estimated earned income to male income; (3) the ratio of female labor force participation to male participation; (4) the ratio of female legislators, senior officials, and managers to male counterparts; and (5) the ratio of female professional and technical workers to male counterparts. Source: World Economic Forum, Global Gender Gap Report, Economic Participation and Opportunity Sub-Index.

**ECONOMIC POLICY**

- **Business & Investment Environment**: A composite measure gauging the conduciveness of a country’s (1) enterprise conditions—the degree to which market, entrepreneurial, tax, labor, and other regulations enable businesses to start, compete, and expand—and (2) investment environment—the extent to which investments are protected adequately through the existence of property rights, investor protections, and contract enforcement, as well as the availability of domestic and international capital. Source: Legatum Institute, Prosperity Index.

- **Trade Freedom**: Measures a country’s openness to international trade based on average tariff rates and non-tariff barriers to trade. Source: Heritage Foundation, Index of Economic Freedom.

**RISK OF EXTERNAL DEBT DISTRESS**

Rates a country’s risk of public sector debt distress on a four-tier scale: “low risk”, “moderate risk”, “high risk”, and “in debt distress”. Ratings are based on countries’ debt and market structures, fiscal and macroeconomic outlook, and institutional capacity to manage debt burden. Ratings help guide the borrowing decisions of lower-income countries to meet development needs while reducing the chances of excessive debt build-up. Ratings are shown for 66 lower-income countries for which the IMF prepares risk ratings and are not scored components of Commitment or Capacity. Source: International Monetary Fund, Debt Sustainability Analysis for Low-Income Countries.

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### CAPACITY

**GOVERNMENT CAPACITY**

- **Government Effectiveness**: Measures the quality of public services, the quality of the civil service and its independence from political pressure, the quality of policy formulation and implementation, and the credibility of the government’s commitment to its stated policies. Source: World Bank, Worldwide Governance Indicators.

- **Tax System Effectiveness**: Ratio between a country’s actual tax collection and the estimated level of tax revenue that a country could achieve, given its macroeconomic, demographic, and institutional features. Source: USAID, Collecting Taxes Database, Tax Effort Indicator.

- **Safety & Security**: Measures the degree to which individuals and communities are free from war and civil conflict, terrorism, politically related terror and violence, violent crime, and property crime. Source: Legatum Institute, Prosperity Index.

**CIVIL SOCIETY CAPACITY**

- **Civil Society & Media Effectiveness**: Measures the range of actions and mechanisms that citizens, civil society organizations, and an independent media can use to hold a government accountable. The mechanisms include using informal tools such as social mobilization and investigative journalism. Source: Varieties of Democracy (V-Dem), Diagonal Accountability Index.

**CITIZEN CAPACITY**

- **Poverty Rate ($5/Day)**: Measures the percent of the population living under $5/day in purchasing power parity (PPP) terms. Source: World Bank, PovCalNet.

- **Education Quality**: Gauges both the quality of education—using harmonized scores across major international student achievement testing—and the quantity of schooling received—using age-specific enrollment rates—to evaluate the relative performance of educational systems worldwide. Source: World Bank, Human Capital Index, Learning-Adjusted Years of Schooling Indicator.

- **Child Health**: A composite measure that aggregates child mortality, access to at least basic water sources, and access to at least basic sanitation facilities. Source: Columbia University Center for International Earth Science Information Network (CIESIN).

**CAPABILITY OF THE ECONOMY**

- **GDP Per Capita (PPP)**: Measures the flow of resources available to households, firms, and government to finance development as the country’s total Gross Domestic Product (PPP) divided by the country’s population. Source: World Bank, World Development Indicators.

- **Information & Communication Technology (ICT) Adoption**: Index comprising: (1) mobile-cellular telephone subscriptions; (2) mobile-broadband subscriptions; (3) fixed-broadband Internet subscriptions; (4) fiber Internet subscriptions; and (5) Internet users. Source: World Economic Forum (WEF), Global Competitiveness Index.

- **Export Sophistication**: Measures the diversity and ubiquity of a country’s exported goods and services, and key markers that can help gauge economic sophistication and resilience. Source: Center for International Development at Harvard University, Economic Complexity Index.