



**The UN COVID-19 Response and Recovery Multi-Partner Trust Fund
(UN COVID-19 MPTF)**

Proposal Template

Proposal Title: **Enabling Guinea Bissau to timely respond and stop COVID-19 transmission**

Amount: US\$500,000

I. Immediate Socio-Economic Response to COVID19

Short Context – include hyperlinks to relevant reference material and analysis that frames the solution context firmly in the specific situation of the country in question. [1,000 word limit]

The COVID-19 pandemic is having an impact that reaches beyond health outcomes for the population in Guinea Bissau. Households in situation of vulnerabilities are already highly at risk to contracting COVID-19, due to the number of people per household, poor health and nutrition status, making social distancing and quarantine challenging. Certain marginalized groups such as irregular migrants or migrants' returnees in situations of vulnerabilities are also at particular risk during the pandemic—Most of them relying on the informal economy that is now hindered by the current restrictions due to the state of emergency. Furthermore many foreign nationals are more likely to be in overcrowded households or employed in short-term, or precarious work with limited provision for sick leave, including the gig economy jobs, though formal data is patchy.¹ Other migrants, in both regular and irregular status, may have limited access to public health services, or fear accessing such services due to possible stigmatization. [The majority of women are also involved in economic activities of the informal sector in Guinea Bissau and have particular socio-cultural responsibilities in providing care when family members are sick thus they are particularly exposed to the epidemic and suffer from the socio-economic impact of the current movements and working limitations imposed by the State of emergency declared the 27th of March 2020. Many Bissau Guinean women works as subsistence farmers or in food production and supply chains in precarious conditions and are facing severe socio-economic impact from the crisis. Women are also particularly represented in the health sectors thus being at the frontline of the response to the COVID 19 response.](#)

Moreover, given the country's dependence on importation of foreign products for food security and reliance on markets for subsistence and commercial activity, the control measure threatens to pose significant socioeconomic consequences—particularly for migrants and vulnerable groups. Thus, it is important to integrate protection and mitigation of socioeconomic impacts in the national response. [Particularly worrisome is the fact that the country is already prone to gender-based violence \(UNWOMEN, 2015\) and the lockdown period with the negative socio-economic impact households are phasing may exacerbate nefast](#)

¹ Meghan Benton and Liam Patuzzi, Zipline or trap? How the gig economy may affect immigrant integration, IOM Migration Data Portal, 18 March 2019, <https://migrationdataportal.org/blog/zipline-trap-gig-economy-integration>

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practices such as violence against women. Given the vulnerabilities of the country including political instability, lack of resources, poor hygiene across the country, and an extremely weak capacity to respond, technical and financial resources will be needed to improve COVID-19 preparedness and response as a matter of urgency.

II. Solutions proposed

Please provide a summary of the proposal. [1,000 word limit]

Given the current political situation, engaging in a WHO-coordinated response together with IOM, constitutes an opportunity for maximizing efforts and ensuring effective response to COVID 19, to limit the spread of virus and mitigate human suffering. The current intervention will enhance national authorities capacities to lead a response that integrates a gender analysis, and is responsive to evolving needs. WHO and IOM seek to consolidate existing efforts to meet the objectives of the Global Health Security Agenda (GHSA) and address the COVID-19 emergency including: creating essential protocols in collaboration with the MoH, providing capacity development to key actors (rapid response teams, community leaders, medical staff and NGO partners) including on gender sensitive approaches to respond to the epidemic, assuring that the 15 designated and Official PoEs and other key locations are adequately equipped also taking into consideration gender sensitive isolation sites, and developing local capacity.

In order to respond to this pandemic, the COVID-19 Global Strategic Preparedness and Response Plan² has emphasized the importance of agencies of the United Nations to urgently contribute to preparedness and response efforts. In Guinea Bissau, WHO and IOM are uniquely positioned to play a critical role in supporting the response to this global pandemic in collaboration with partners.

The current initiative aims to contribute to the overall objective of the National COVID-19 contingency Plan to control further transmission and mitigate the overall impact of the outbreak, with particular attention to vulnerable groups including migrants, children and women in a situation of vulnerability. An inclusive, gender and child sensitive approach will be promoted supporting national authorities and involving communities in the prevention and response and taking into consideration dynamics related to population mobility.

The current project seeks to improve prevention, detection, and response efforts in Guinea-Bissau including at borders, especially strengthening disease surveillance systems and public health gender sensitive security measures. This project will improve national capacity to respond to the pandemic, rapidly detect and transparently report potential cases, and employ an effective gender sensitive response strategy to limit the spread of virus, mitigate human suffering, and reduce the loss of human life, targeting the strengthening of Health surveillance, alert, case management and referral mechanisms.

Overall Objective/Impact: Supporting Guinea-Bissau's health system in effectively respond to the emergency of COVID 19.

Specific objectives/Outcomes:

OUTCOME 1: Enhanced national authorities' capacities to effectively implement the National Contingency Plan

² <https://www.who.int/publications-detail/strategic-preparedness-and-response-plan-for-the-new-coronavirus>

Output 1.1.: Strengthened national capacities to detect, isolate, manage and refer suspected cases of COVID-19.

Key activities:

- Capacity development of Health Human Resources ([women and men](#)) including at the Points of Entry (PoE)
- Provision of protective equipment and hygiene supply in Health Structures
- Provision of national protocols for testing and treatment.

Output 1.2: Improved laboratory capacities and provision of supplies needed to assure proper infection control.

Key activities:

- Strengthening National Laboratory capacity (management, equipment and consumables)
- Strengthening of the routing of samples from clinics to the national laboratory
- Training for human resources for health [on sample collection, packaging, analysis and transportation](#)
- Support the transportation of samples from the PoE to the National Laboratory

Output 1.3 : Strengthened clinical [gender sensitive](#) management of severe cases of COVID-19 patients

Key activities:

- Provision of protective equipment and hygiene supply in Health Structures
- Provision of national protocols for testing and treatment.
- Refurbishment and equipment of infrastructures for isolation and treatment
- Raising the technical base of the reference hospital (resuscitation equipment)
- Provision and distribution of drugs for treatment

Output 1.4 : Strengthened surveillance capacities and collection of real-time and reliable data in the country, including at points of entry

- Support to active surveillance including health screening, referral and data collection at all PoEs, including but not limited to: land points of entry in Gabu (Fulamori, Buruntuma, Pirada), Bubaque (Porto de Bubaque), Cacheu (Djegue, Djedie 2, Djibanar), Tombali (Cuntabane, Sanconha, Cacine), Bafata (Cambadju), Oio (Dungal, Tendinto); maritime ports in Bissau (Cais Pindjiguitim); and international airport Osvaldo Viera International airport in Bissau.
- Support assessments of existing structures/resources and identification of necessary equipment to adequately respond [also taking into account gender and child sensitivity](#).
- Develop and disseminate specific Standard Operating Procedure (SOPs) for all Guinea-Bissau designated and official PoEs in collaboration with counterparts for detection, notification, isolation, management and referral including development of circulation and manuals, procedures and tools;
- Mobilize and coordinate with partners to ensure the provision of needed PPE and supplies for screening.

- Support establishment of temporary isolation spaces taking into account a gender and child sensitive approach at all land POE and the port of Bubaque to better prevent and control spread of virus/infection. Isolation spaces are temporary spaces where suspected cases are isolated until a more thorough medical examination can be undertaken \
- Conduct capacity building of authorities at POE on active case identification and management; and preventive measures to increase the understanding of staff on how to limit exposure and disease spread. a.
- b.
- d.—Capacity development of government counterparts and key partners on how to use data gathering tools and provide necessary follow-up to ensure quality control.

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WHO may be assigned the role of General Technical Coordination in light of its international mandate and capacity. Specific attention should be paid to the needs of women who are on the frontline of this pandemic and who face disproportional social, physical and economic risks.

A technical commission composed by WHO, PHEOC, and COVID focal points of partners will be created in order to establish the priorities of the Contingency Plan in relation to the emergency on the fight against COVID 19. It is very important to prioritize key activities, including the equipment necessary to strengthen case management and the laboratory in order to already place emergency orders. A high-level “watchdog committee” will be set up to regularly support and supervise the process. Attention should also be paid to the significant impact the COVID-19 pandemic has on violence against women, and measures to respond to this. The use of ICT will be encouraged to channel communications and collect data.

OUTCOME2: Urgent medical ~~and~~ assistance for COVID-19 related needs of local population addressed.

Activities related to Outcome 1 — ~~National Contingency Plan implemented effectively, based on priorities defined by WHO.~~

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Output 2.1: National authorities, and Civil Society Organizations (CSOs) are effectively sharing key messages related to COVID-19 among vulnerable populations.

Key activities:

- Awareness raising campaigns on COVID-19 risks prevention
- Develop information campaigns and materials on gender-based violence or domestic violence within COVID-19 safety measures and make it accessible to women (radios, social media, hotlines)
- Awareness raising campaign against social stigma due to the sickness
- Dissemination of information materials providing guidance and basic information about referral system for treatment, taking into account gender roles in caretaking when targeting groups
- Set up of surveillance tools with existing community-based networks, local governments, local medias, and other actors;

Output 2.2: Enhanced information of all the population, especially the most vulnerable on fundamental health human rights in the COVID 19 pandemic

Key activities:

- Guidance and support for accessing testing services
- Supply of psychological support to population, taking into account the context of a rise in domestic abuse
- Protection measures for people against social stigma due to the sickness.
- Support to the dialogue between workers and employers to establish rules guaranteeing healthy work conditions and continuous monitoring of safe working conditions and health human rights .
- Provide rapid response to urgent medical or other COVID-related needs through Health and/or Social sector NGOs.

The foreseen activities are aligned with the National Contingency Plan and are complementary to the latter.

All activities will be committed based on the contingency plan and after a prior review by the PHEOC, WHO and IOM.

III. What is the specific need/problem the intervention seeks to address?

Summarize the problem. Apply a gender lens to the analysis and description of the problem. [1,500 word limit]

Located in West Africa, Guinea-Bissau is one of the worlds' lowest ranking countries in the world in terms of poverty, governance and development; it ranks extremely poorly in the human development index: in 2019 Guinea-Bissau's HDI value for 2018 is 0.461— which puts the country in the low human development category—positioning it at 178 out of 189 countries. The country is also characterized by a very unstable political situation with poor infrastructures. The public health system of the country is extremely weak and fragmented. Access to healthcare is severely limited due to a lack of facilities, resources and qualified staff. Efforts to carry out core public health functions are constrained by political disruptions, loss of human resources, and lack of enough external aid. Many gaps in basic health services persist in addition to obstacles to access (cost, transport, knowledge). Due to barriers in access, most

wait many days until the condition is severe before seeking treatment in health centers or hospitals. Many seek traditional healers and remedies first. Finally, it is important to note that studies of health seeking behaviors in country show stark gender disparities in access to treatment.

Guinea Bissau is particularly vulnerable to transmission of COVID-19 given the high levels of population movements (particularly with the onset of the cashew nut collection season) and the social and family structure of households, aggregating between 7 to 9 people in the same house weak health infrastructure, and health seeking behaviors. Urban areas are particularly vulnerable given high population density and crowded markets (most households rely on these markets for their daily meals). The epidemiological profile compounds these vulnerabilities. There is great potential for complications linked comorbidities for illnesses including malaria, HIV, and acute respiratory infections (ARIs). Gender inequalities are deeply rooted in the Bissau Guinean society and are now exacerbated by the pandemic. Women in situation of vulnerability due to limited access to formal jobs, information and health care are now suffering severe impact of the socio-economic slowdown. Additionally, socio-cultural norms place on women the burden of the care of children, elder and sick family members thus exposing them to extra working hours and to the pandemic itself. Gender based violence is also already widespread in the country and the current epidemic is exposing even further women to GBV while support services for victims of violence are very few and fragile in the country. Thus, gender and child sensitive approaches need to be put in place at every step during the planning and implementation of the COVID 19 response. Moreover, women are at the frontline of the COVID 19 response in Guinea Bissau as many of them are employed as nurses, doctors and para medical staff.

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In line with the Contingency Plan COVID-19 of Guinea Bissau government, this funding request calls for a new action aimed at supporting the implementation of the National Contingency Plan. Guinea-Bissau has a profoundly weak health system that is further worsened by recurrent political crises. The country Contingency Plan elaborated by the Public Health Emergency Operations Centre (PHEOC) is aimed at strengthening preparedness, alertness and response capacities, with a budget of about US\$14 million. WHO, as the lead partner for the health sector, coordinates and harmonizes support at the partner level. Notwithstanding these efforts, the country is by no means ready to cope with the spread of the COVID-19 epidemic, neither in terms of prevention nor of adequate clinical care of the cases and yet fifty-two (52) cases have already been recorded to date. To depict the current alarming situation, in Guinea-Bissau, there are virtually no mechanical ventilators, there is limited testing capacity (less than ~~205~~²⁰00 test have been carried out so far), continuous supply of oxygen is not ensured and the main hospital in the country - Simaõ Mendes National Hospital - is in a dire state. Indeed, Guinea-Bissau is among the group of African countries least prepared to face COVID-19 according to the WHO Readiness status by country, thus calling for a rapid, substantial and effective response to prevent a health and humanitarian catastrophe. The enduring political crisis in the country, enhanced with the self-proclamation of Sissoko Embaló as President on 27 February and the appointment of a new government, has led to an even more difficult scenario. On 27th 8 March 2020, the Government of Guinea Bissau declared a state of emergency.

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For confirmation of COVID-19 cases, the National Public Health Laboratory of Guinea Bissau can now provide those services. However, Institute Pasteur Dakar (IPD), WHO's referral laboratory is available for further support. Technical expertise for the diagnosis of COVID-19 is available at the National Laboratory of Guinea Bissau. WHO has been able to provide reagents and VTM swabs whilst West African Health Organisation (OOAS) provided a testing kit through Institute Pasteur Dakar. Standard SOPs are in place for the collection, packaging and transport of samples. The planning of training for laboratory technicians in the sentinel surveillance network and the reference hospital on sampling techniques is underway. However, especially in the event of a diffuse spread of the epidemic, the capacities of the national laboratory will be exceeded and the establishment of a network of public health laboratories at regional level is the best alternative for ensuring rapid confirmation of diseases with potential epidemic including COVID-19, with WHO's technical support. Focus is on decentralizing the laboratory capacities to the regional levels given the nature of COVID-19 that has resulted in a lockdown. As such, transporting specimens to

the National Public Health Laboratory from the regions is not feasible in this context. Additionally, the already available 14 GeneXperts in the country need to be utilized for better and timely testing

With regards to patient care, the reference centre for the treatment of cases is already identified in Bissau but need an urgent rehabilitation to comply with the minimum requirement to the isolation of patient with respiratory disease. However, due to the evolving political crisis, nothing is done yet to do prepare the isolation/treatment services. At this stage we have to develop urgently a plan B. WHO provisional guidelines are shared. Inputs, drugs and Personal Protective Equipment (PPE) are positioned at the reference centre, including in the regional health clinics. Upgrading them and equipping them are major challenges. Health personnel have received basic technical guidance on IPC treatment and precautions. Formal training is ongoing for case management and IPC. In the event of a widespread spread of the epidemic, human resources will not be enough to provide care for the sick at hospital and community levels

Risks and Assumptions

Risks	Risk level (H/M/L)	Mitigating measures
Political instability and non-recognition of the “de facto” government will delay supplies provision and implementation of preventive measures	High	<ul style="list-style-type: none"> Strengthen capacity of technical level partners at local regional and national level Strengthen collaboration with P5 Work with NGOs and women’s organisations to complement the national strategy
Social unrest due to food shortage and difficulties to carry out productive activities	High	<ul style="list-style-type: none"> Provide measures for vulnerable population (food provision, unconditional cash transfer to individuals) to most affected population Target male and female dominated sectors and include informal sector and other precarious forms of employment, through employment and income supporting activities
The huge pressure in the international market will create difficulties in acquiring equipment, drugs, etc.	High	<ul style="list-style-type: none"> Use the supply systems of the United Nations System or specialized organizations Mobilize all channels, including faith-based institutions, and MS governments. Provide as much as possible locally made materials (masks, protective clothes, bleach, soap, etc.)
COVID-19 is perceived as a “white people problem” and social distancing is not seen as an effective measure	Medium	<ul style="list-style-type: none"> Awareness raising, information campaign, dissemination of findings, especially making use of women’s networks
Misleading conducts within health structures	Medium	<ul style="list-style-type: none"> Control measures (traceability of medical supply), inspections, sanctions, training
The COVID-19 response will divert resources away from	High	<ul style="list-style-type: none"> Ensure continuity of the general health system through dialogue and

health services, including disease management, strengthen fever diagnostic and case management		<p>experience sharing in various fora.</p> <ul style="list-style-type: none"> • Contribute to pool additional covid-19 resources to limit the pressure on already limited resources
The COVID-19 response will divert resources away from health services essential to women, such as maternal and reproductive health services and services for victims of violence	High	<ul style="list-style-type: none"> • Ensure continued access to sexual and reproductive health services and maternal care through advocacy and innovative approaches • Sensitise health workers to the rise in victims of domestic abuse and the need to properly treat them during the pandemic
Assumptions		
The “de facto” government will effectively finance its National Contingency Plan thanks to the support channelled through the WHO, and will be willing to implement it during the crisis. Good coordination among all stakeholders and a strong control on operations to avoid corruption and misleading conducts in implementing the Contingency Plan.		

IV. How does this collaborative programme solve the challenge? Please describe your theory of change.

Describe programme approaches, methods, and theory of change, and explain why they are the appropriate response to the problem. State results and interim solution(s) you are proposing. Please highlight how the solution(s) is data driven; if it employs any innovative approaches; if it applies a [human rights-based approach](#)³ and how is it based on the principle of “build back better”. [1,500 word limit]

In coordination and partnership with relevant actors at global, regional and national levels, WHO and IOM are playing a key role in supporting to contribute to the overall objective of the improving capacity for the national and regional response to the COVID-19 pandemic in collaboration with the Ministry of Health. The current intervention will enhance WHO’s and IOM’s capacities to lead a response that is culturally appropriate, integrates a gender analysis, and is responsive to evolving needs. This will consolidate the existing efforts to meet the objectives of the Global Health Security Agenda ([SGHSA](#)) and address the COVID-19 emergency including: creating essential protocols in collaboration with the MoH, providing trainings to key actors (rapid response teams, community leaders, medical staff and NGO partners), assuring PoEs and other key locations are adequately equipped also taking into account gender sensitivity, and developing local capacity.

In order to respond to this pandemic, the COVID-19 Global Strategic Preparedness and Response Plan⁴ has emphasized the importance of agencies of the United Nations to urgently contribute to preparedness and response efforts. In Guinea Bissau, IOM is uniquely positioned to play a critical role in leading the response to this global pandemic in collaboration with partners given the agencies’ previous experience leading public health preparedness and expertise.

The current intervention aims to contribute to the overall objective of the COVID-19 Global Preparedness and Response Plan to control further transmission

³ Please refer to [OHCHR COVID19 Guidance](#)

⁴ <https://www.who.int/publications-detail/strategic-preparedness-and-response-plan-for-the-new-coronavirus>

and mitigate the overall impact of the outbreak, with particular attention to vulnerable groups.

All preparedness and prevention activities will promote an inclusive approach to involve communities with a particular attention in integrating the gender dimension in the response and take into consideration dynamics related to migration and displacement. There is a need to improve prevention, detection, and response efforts in Guinea-Bissau borders, especially strengthening disease surveillance systems and public health security measures at the points of entry, ensuring that gender sensitive information and isolation areas are available. This project will improve national capacity to respond to the pandemic, rapidly detect and transparently report potential cases, and employ an effective response strategy to limit the spread of virus, mitigate human suffering, and reduce the loss of human life efficiently responding to the current active cases with proper healthcare, targeting the strengthening of hHealth surveillance, alert, case management and referral mechanisms. The project will also address with awareness raising and with specific response cases of GBV that may occur during the pandemic.

The project has the overall objective to contribute to strengthen the MoH capacities to effectively respond to Public health emergencies with a gender coherent approach and mitigate the overall impact of epidemic outbreaks, with particular attention to vulnerable groups and gender equality. Multisectoral coordination mechanisms exist at central level with a PHEOC active at the national level in Bissau. All the other eight regions in the country having regional EOCs as well. EOC-led meetings at the national level are being held weekly. An inter-ministerial COVID-19 taskforce was created in February 2020 under the leadership of the “de facto” Prime Minister⁵.

The national COVID-19 contingency plan has been developed to serve as a guide for building the preparedness capacities necessary for resource mobilization and for implementing the various response interventions in the event of imported disease in Guinea Bissau. WHO, as the lead partner for the health sector, coordinates and harmonizes support at the partner level. Despite this coordination mechanism put in place, the functionality of the PHEOC at the central level is not yet optimal due to a lack of insufficient equipment and materials. Capacity building of staff members of the coordination unit and extension of the system to the operational level (regional) is more than necessary for better coordination. This will also be crucial to contribute to establishing an evidence-based strategy able to adapt covid-19 action to potentially evolving needs and increase our mitigation capacity to reduce risks and non-desired effects.

In the WHO response to the crisis, synergies are sought between this programme and OIM, who are working in alignment with WHO on strengthening surveillance systems at points of entry and addressing the needs of migrants in the country.

V. Documentation

Attach/provide hyperlinks to documents/analysis prepared at the UNCT level with government counterparts to assess the potential cumulative impacts of COVID-19. Please indicate if the UNCT has completed and posted the National Plan for Combating COVID-19 on the WHO partner portal. [1,500 word limit]

The UNCT Has completed and posted the UNCT contingency plan for COVID-19 at shown in the attached hyperlink . [file:///D:/Old%20laptop/coronavirus/Plan%20de%20Contingence%20COVID%2019_SNU_GNB_18h00%20\(200309\)_wfp.docx](file:///D:/Old%20laptop/coronavirus/Plan%20de%20Contingence%20COVID%2019_SNU_GNB_18h00%20(200309)_wfp.docx)

Following the assessment of the country's preparedness capacities, a certain number of gaps were highlighted according to the strategic axes. Mobilization of resources for the implementation of the contingency plan would meet the urgent needs below:

- re-activation of the regional PHEOCs (this has since been addressed by WHO)

⁵ P5 members agreed not to have contacts with the authorities of neither government and authorised WHO to formally take contact with the government at political level to obtain the mandate, a sine qua non condition for the EU and other parties to contribute with funds, which cannot be directed to the authorities.

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Field Code Changed

- Training and equipping of Rapid Response Teams
- Capacity building essential for bringing entry points up to standard
- Effective implementation of IDSR and nationwide electronic surveillance
- Establishment of the logistics necessary for quarantine
- Raising the technical base of the reference hospital (resuscitation equipment)
- Strengthening of the routing of samples from clinics to the national laboratory
- Capacity building in human resources with technical assistance from WHO and IOM

VI. Target population

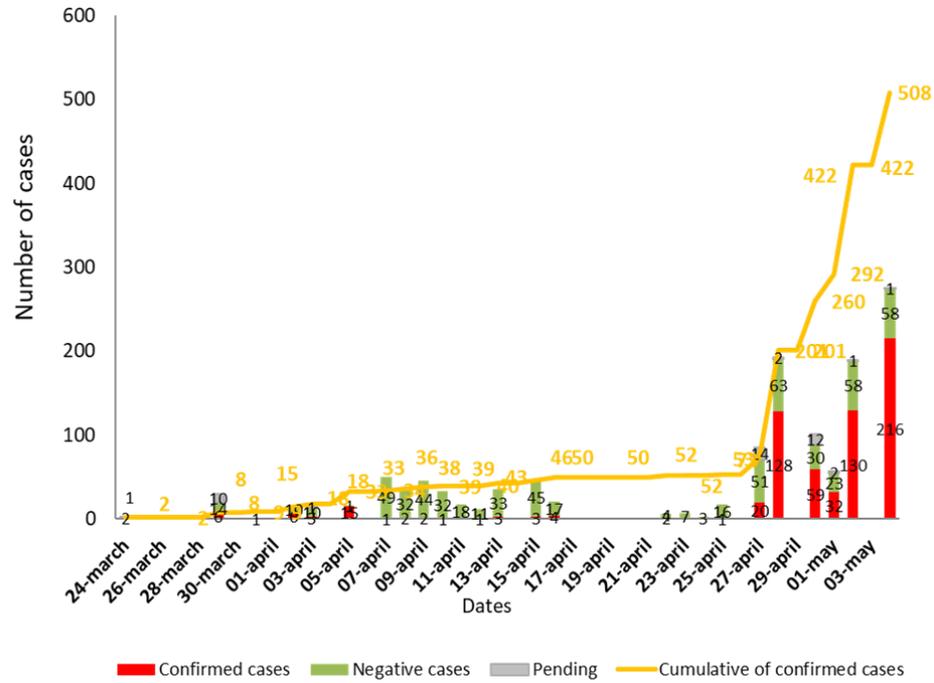
Describe and estimate the direct users of the solution and potential impact on beneficiaries. Be explicit on who has established the need (plans, national authorities, civil society, UN own analysis, or citizens). [1,500 word limit]

Guinea Bissau is particularly vulnerable to transmission of COVID-19 given the high levels of population movements (particularly with the onset of the cashew nut collection season) and the social and family structure of households, aggregating between 7 to 9 people in the same house weak health infrastructure, and health seeking behaviors. The target project beneficiaries will thus be the population currently affected by COVID 19 and the population most susceptible to the epidemic and to socio-economic vulnerabilities. The COVID-19 pandemic is having an impact that reaches beyond health outcomes for the population. Households in situation of vulnerabilities are already highly at risk to contracting COVID-19, due to the number of people per household, poor health and nutrition status, making social distancing and quarantine challenging. Certain marginalized groups such as irregular migrants or migrants' returnees in situations of vulnerabilities are also at particular risk during the pandemic. Most of them relying on the informal economy that is now hindered by the current restrictions due to the state of emergency. Furthermore many foreign nationals are more likely to be in overcrowded households or employed in short-term, or precarious work with limited provision for sick leave, including the gig economy jobs, though formal data is patchy.⁶ Other migrants, in both regular and irregular status, may have limited access to public health services, or fear accessing such services due to possible stigmatization. A particular attention will be given to a gender analysis while assessing vulnerabilities and key beneficiaries of the action will be women in vulnerable situation, victims of GBV and vulnerable children especially the one victims or potential victims of trafficking living in Koranic schools (assessment done by AMIC NGO).

Healthcare workers, border officers and officials of PoEs are other key target group. [Gender sensitivity will be applied at all steps in working with this specific target group.](#) Human resources for health are of particular concern given that they are the frontline responders in this whole COVID-19 response. Protection of health personnel, [women and men](#) is of paramount importance in this emergency particularly for Guinea Bissau given the limited human resource capacities and closing of points of entry making it challenging to bring in international expertise to support the country. As such, infection prevention and control is prioritized [using gender lens](#). Additionally, equipping of the isolation/ quarantine [taking into account gender and child sensitivity](#) and the treatment centres which have now been identified as three in Bissau (Simao Mendes National Hospital, Cumura Hospital and Bor Hospital) and one in each region is an urgent need given the continued increase in local transmission in the country. As such, all confirmed COVID-19 cases are among the targeted population of this project. This is necessitated by the fact that Guinea Bissau has continued to see an increase in local transmission of confirmed COVID-19 cases mainly due to the fact that confirmed cases continue to live with their families in the communities. There are [now 509 confirmed cases in Guinea Bissau with only 15 hospitalised, as](#)

⁶ Meghan Benton and Liam Patuzzi, Zipline or trap? How the gig economy may affect immigrant integration, IOM Migration Data Portal, 18 March 2019, <https://migrationdataportal.org/blog/zipline-trap-gig-economy-integration>

shown in the figure below; 3 hospitalised confirmed COVID-19 cases so far whilst the rest, 49 continue to pose a risk to the health of others in the communities. The Figure below shows the increase of confirmed COVID-19 cases in Guinea-Bissau:



All healthcare workers in the Intensive Care Unit (ICU) are now all infected with COVID-19 leaving the case management pillar with very limited technical experts.

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VII. Who will deliver this solution?

List what Recipient UN Organizations (RUNOs) and partners will implement this project and describe their capacities to do so. Include expertise, staff deployed, as well as oversight mechanisms that determine the monitoring and evaluation (M&E) arrangements and responsibilities. Use hyperlinks to relevant sites and the current portfolios of RUNOs so the text is short and to the point. [1,500 word limit]

WHO is a specialized agency of the United Nations for health-related issues and has been in operation in Guinea Bissau since 1974. WHO continues to be the public health leader in the country and has technical staff (epidemiologists, clinicians, infection prevention and control experts, risk communication experts, laboratory experts, coordination experts) who will spearhead the project totaling to 23 staff members and consultants. The Organization also has robust oversight mechanisms that make it possible for monitoring and evaluation to be conducted speedily as when needed through a e-platform in which the donors can have access to which is called the Global Service Management (GSM) system that has been applauded by various donors with which the Organization has been and continues to partner with. The Organization partners strongly with the Ministry of Health and the National Public Health Institute in the country given that the country is a member state of the WHO.

In Guinea Bissau, the IOM is uniquely positioned to play a critical role to support the response to this global pandemic in collaboration with partners given the agencies' previous experience leading public health preparedness and response.

In 2015, IOM implemented U.S Centers for Disease Control and Prevention (CDC) funded project aimed at building the capacities of six West African states, including Guinea Bissau, to better prevent, detect and respond to disease outbreaks and other health threats.

In the framework of this project, IOM Guinea Bissau supported the preparedness effort for the Ebola crisis, working closely with relevant national counterparts at various levels. IOM supported enhanced coordination (the emergency response inter-agency committee) and enhanced capacities of border agents and community health workers on preparedness and surveillance of epidemic diseases. The Institute of National Public Health (INASA) was also supported in terms of data collection and potential epidemic diseases control at PoE. Although all neighbouring countries were impacted by the epidemic, there were no cases reported in Guinea Bissau—in part thanks to this collaborative effort.

Currently, IOM remains a crucial partner of the Ministry of Health and key partners through prior experience working with mobile populations along the border and throughout the country. IOM was the first partner to work with POEs to improve IHR capacity, developing SOPs and training staff at land POEs and the international airport in Bissau in order to improve detection, notification and management of ill passengers at the POE. Currently, IOM is implementing a project that focuses on “Expanding efforts in Guinea Bissau to Protect and Improve Public Health in Response to the Global Health Security Agenda” playing a key role in developing data collection tools, enhanced capacities of key national actors at PoE and central level to respond to the global COVID-19 pandemic.

Cover Page

Contacts	<p>Resident Coordinator or Focal Point in his/her Office Name: Dr Mamadou Diallo Email: diallo76@un.org Position: Deputy Special Representative of the UN Secretary General. United Nations Resident Coordinator - DSRSG/RC Other Email: Telephone: Skype:</p>
Description	<p><i>[400 characters limit]</i></p> <p>Guinea-Bissau is one of the worlds' lowest ranking countries in the world in terms of poverty, governance and development; it ranks extremely poorly in the human development index: in 2019 Guinea-Bissau's HDI value for 2018 is 0.461— which puts the country in the low human development category—positioning it at 178 out of 189 countries. The country is also characterized by a very unstable political situation with poor infrastructures. The public health system of the country is extremely weak and fragmented. Access to healthcare is severely limited due to a lack of facilities, resources and qualified staff. Efforts to carry out core public health functions are constrained by political disruptions, loss of human resources, and lack of enough external aid. Many gaps in basic health services persist in addition to obstacles to access (cost, transport, knowledge). Due to barriers in access, most wait many days until the condition is severe before seeking treatment in health centers or hospitals. Finally, it is important to note that studies of health seeking behaviors in country show stark gender disparities in access to treatment.</p> <p>Guinea Bissau is particularly vulnerable to transmission of COVID-19 given the high levels of population movements (particularly with the onset of the cashew nut collection season) and the social and family structure of households, aggregating between 7 to 9 people in the same house weak health infrastructure, and health seeking behaviors. Urban areas are particularly vulnerable given high population density and crowded markets (most households rely on these markets for their daily meals). The epidemiological profile compounds these vulnerabilities. There is great potential for complications linked comorbidities for illnesses including malaria, HIV, and acute respiratory infections (ARIs). <u>Gender inequalities are deeply rooted in the Bissau Guinean society and are now exacerbated by the pandemic.</u> The current initiative aims to contribute to the overall objective of the National COVID-19 contingency Plan to control further transmission and mitigate the overall impact of the outbreak, with particular attention to vulnerable groups <u>including migrants, children and women in a situation of vulnerability.</u> An inclusive, gender and child sensitive approach will be promoted supporting national authorities and involving communities in the prevention and response and taking into consideration dynamics related to population mobility.</p>
Universal Markers	<p>Gender Marker: <i>(bold the selected; pls select one only)</i></p>

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	<p>a) Have gender equality and/or the empowerment of women and girls as the primary or principal objective.</p> <p>b) Make a significant contribution to gender equality and/or the empowerment of women and girls;</p> <p>c) Make a limited contribution or no contribution to gender equality and/or the empowerment of women and girls.</p>
Fund Specific Markers	<p>Human Rights Based Approach to COVID19 Response (<i>bold the selected</i>): Yes/No Considered OHCHR guidance in proposal development UN OHCHR COVID19 Guidance</p>
	<p>Fund Windows (<i>bold the selected; pls select one only</i>) Window 1: Enable Governments and Communities to Tackle the Emergency Window 2: Reduce Social Impact and Promote Economic Response</p>
Geographical Scope	<p>Regions: All the 8 regions in the country and the Autonomous Sector of Bissau Country: Guinea Bissau</p>
Recipient UN Organizations	<p>WHO Dr. Jean Marie KIPELA, WHO Representative, Guinea Bissau Email: kipelam@who.int</p> <p>Marjorie MUPANDARE, Emergencies Technical Officer, Email: mupandarem@who.int</p> <p>IOM Laura Amadori Head of Office IOM Guinea Bissau email lamadori@iom.int</p> <p>Sophie Nonnenmacher Regional Director a.i. West and Central Africa email snonnenmache@iom.int Riccardo Barbieri Senior Resource Manager Officer West and Central Africa email rbarbieri@iom.int Celso Lopes Administrative Assistant IOM Guinea Bissau clopes@iom.int</p>

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Implementing Partners	<u>VIDA, NADEL and ADPP</u>			
Programme and Project Cost	Budget	Agency	Amount	Comments
	Budget Requested	WHO	\$250,000	
		IOM	\$250,000	
	In-kind Contributions			
	Total		\$ 500,000	
Comments				
Programme Duration	Start Date: May 2020			
	Duration (In months): 12 months			
	End Date: April 2021			

Results Framework

INSTRUCTIONS: Each proposal will pick a window. As part of the proposal the agencies, funds and programme will develop an outcome, outcome indicators, outputs and output indicators that will contribute to the achievement of the selected proposal outcome.

Window 1: Proposal Outcome		Outcome Total Budget USD
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	1.1 Please develop a relevant outcome for the proposal				USD 300,000
	OUTCOME 1: Enhanced national authorities' capacities to effectively implement the National Contingency Plan				
		Baseline	Target	Means of verification	Responsible Org
Outcome Indicator [Max 2500 characters]	1.1a Improved good health and well being Add outcome indicator (it may be a relevant SDG indicator)	52 Confirmed COVID-19 cases in month	30 confirmed COVID-19 cases in a month	-Increased number of specimens collected and analysed by the laboratory -reduced local transmission	WHO
	1.1b Timely detection and response to COVID-19 Add outcome indicator (it may be a relevant SDG indicator)	72 hours	Less than 24 hours	Reduced time between collection of specimens and alert, and provision of laboratory confirmation/results	WHO
Proposal Outputs	Output 1.1.: Strengthened national capacities to detect, isolate, manage and refer suspected cases of COVID-19.				
	Output 1.2: Improved laboratory capacities and provision of supplies needed to assure proper infection control.				
	Output 1.3 Strengthened <u>gender sensitive</u> clinical management of severe cases of COVID-19 patients				

	Output 1.4 : Strengthened surveillance capacities and collection of real-time and reliable data in the country, including at points of entry				
Proposal Output Indicators	Output Indicator 1.1.1a # of SoPs developed for case detection, notification and surveillance	0	3 SoPs developed	Drafted SOPs	IOM WHO
	1.1.1.b Number of health personnel including allied workers trained - Number of female health workers, including trained allied workers - Number of male health workers, including trained allied workers	0	1500	Training reports Training modules	WHO
	1.1.1.c % of female and male trainees who demonstrate ability, via exercises or real life event, to respond appropriately to a public health event.	0	100% of trainees demonstrate ability, via exercises or real life event, to respond appropriately to a public health event	Training report	IOM WHO
	1.2.1a Add New Output Indicator #of supplies acquired to equip all PoEs	0	7 supplies (thermometer , hygiene items, masks, WASH items) for all	Number of supplies delivered	IOM

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			15 PoE		
	1.2.1b # of gender-sensitive temporary isolation areas available at PoEs and health centres and equipped with water and solar panel ""# of "" .	0	1 Isolation area for each PoE and 1 per health centre per region	Isolation centres set up and equipped	WHO, IOM
	1.3.1a % of female and male COVID-19 patients recovered	0	60% of all COVID-19 patients recovered	Laboratory confirmed negative results	WHO
	1.4.1 a #of SOPs in place for detect, isolation, initial management and referral of an ill passenger	0	4 SoPs developed	Drafted SOPs	WHO, IOM
	1.4.1b # of female and male PoE personal with enhance capacities to initially manage and refer ill cases	0	200 PoE personal trained	Reports of INASA/COES and PoE	IOM
	1.4.1c # of data gathering tools efficiently used at PoE and institutions involved in the epidemiologic response	0	All PoE (15) and relevant response institution use the data gathering tools 1 data gathering tool for each PoE (15)	Reports of INASA/COES and PoE	IOM
Proposal outcome	Outcome 2: Urgent medical and assistance COVID-19 related needs of local population addressed.	0	Ventilators and other clinical services set	Number of ICU beds with ventilators in the country	USD 200,000

			up in all regions		
Proposal Outcome Indicators					
	Output 2.1: National authorities, and Civil Society Organizations (CSOs) are effectively sharing key messages related to COVID-19 among vulnerable populations.	0	At least 1 coordination meeting health per month	Minutes Number of IA activities conducted	WHO, IOM
	Output 2.2: Enhanced availability of protective material to health staff and vulnerable population	0	2000 health personnel with adequate IPC materials	Availability of the IPC materials in all health centres	WHO
	Output 2.3: Enhanced information of all the population, especially the most vulnerable on fundamental health human rights in the COVID 19 pandemic	0	At least 3 programmes in community radios are being aired per week with COVID-19 information	Number of radio/TV spots aired in all the regions	WHO, IOM
Proposal Output Indicators	Output Indicator 2.1 a # of national authorities and CSOs <u>disaggregated by sex</u> with improved capacities to communicate key messages related to COVID-19	0	Training reports Pre and post-test during capacity development sessions	200 National authorities and Civil Society Organizations (CSOs) with enhanced capacities to communicate on COVID prevention 200 Community	WHO IOM

				leaders, traditional healers, religious leaders, local administrators and vulnerable migrants.	
	Output Indicator 2.1 b # of community leaders and local population disaggregated by sex actively involved in COVID 19 prevention and protection	0	Pre and post-questionnaire during awareness raising sessions	200 Community leaders, traditional healers, religious leaders, local administrators and vulnerable migrants.	IOM WHO
	Output indicator 2.2.a # of preventive supplies available for female and male migrants and population in situation of vulnerability	0	Activity report	500 COVID-19 preventive supplies to migrants and population in situation of vulnerability	IOM
	Output indicator 2.2.b # of households supported with hygiene supplies and other forms of direct assistance	0		200 households supported with hygiene items	IOM WHO

SDG Targets and Indicators

Please consult Annex: [SDG List](#)

Please select no more than three Goals and five SDG targets relevant to your programme.

(selections may be bolded)

Sustainable Development Goals (SDGs) [select max 3 goals]			
<input type="checkbox"/>	SDG 1 (No poverty)	<input type="checkbox"/>	SDG 9 (Industry, Innovation and Infrastructure)
<input type="checkbox"/>	SDG 2 (Zero hunger)	<input checked="" type="checkbox"/>	SDG 10 (Reduced Inequalities)
<input checked="" type="checkbox"/>	SDG 3 (Good health & well-being)	<input type="checkbox"/>	SDG 11 (Sustainable Cities & Communities)
<input type="checkbox"/>	SDG 4 (Quality education)	<input type="checkbox"/>	SDG 12 (Responsible Consumption & Production)
<input checked="" type="checkbox"/>	SDG 5 (Gender equality)	<input type="checkbox"/>	SDG 13 (Climate action)
<input type="checkbox"/>	SDG 6 (Clean water and sanitation)	<input type="checkbox"/>	SDG 14 (Life below water)
<input type="checkbox"/>	SDG 7 (Sustainable energy)	<input type="checkbox"/>	SDG 15 (Life on land)
<input type="checkbox"/>	SDG 8 (Decent work & Economic Growth)	<input type="checkbox"/>	SDG 16 (Peace, justice & strong institutions)
<input type="checkbox"/>	SDG 17 (Partnerships for the Goals)		
Relevant SDG Targets and Indicators [Depending on the selected SDG please indicate the relevant target and indicators.]			
Target	Indicator # and Description	Estimated % Budget allocated	
SDG3: Good health and well-being	3.d Strengthen the capacity of all countries, in particular developing countries, for early warning, risk reduction and management of national and global health risks	3050,000	
SDG3: Good health and well-being	3.b Support the research and development of vaccines and medicines for the communicable and non-communicable diseases that primarily affect developing countries, provide access to affordable essential medicines and vaccines, in accordance with the Doha Declaration on the TRIPS Agreement and Public Health, which affirms the right of developing countries to use to the full the provisions in the Agreement on Trade-Related Aspects of Intellectual Property Rights regarding flexibilities to protect public health, and, in particular, provide access to medicines for	150,000	

	all	
<u>SDG5</u>	<u>5.1 End all forms of discrimination against all women and girls everywhere</u>	<u>50000</u>

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Risk

What risks and challenges will complicate this solution, and how they will be managed and overcome?

(COVID19 has created an unprecedented and fast changing development context. Accepting this volatile situation, please identify up to three risk to the success of the proposal based on best available analysis to the UN) Please enter no more than 3.

Event	Categories Financial Operational Organizational Political (regulatory and/or strategic)	Level 3 – Very High 2 – Medium High 1 - Low	Likelihood 6 – Expected 5 – Highly Likely 4 – Likely 3 – Moderate 2 – Low Likelihood 1- Not Likely 0 – Not Applicable	Impact 5 – Extreme 4 – Major 3 – Moderate 2 – Minor 1 – Insignificant	Mitigating Measures (List the specific mitigation measures)	Risk Owner
Risk1 Political instability and non-recognition of the “de facto” government will delay supplies provision and implementation of preventive measures	Political (regulatory and/or strategic)	3 – Very High	4 – Likely	5 – Extreme	<ul style="list-style-type: none"> •Strengthen capacity of technical level partners at local regional and national level •Strengthen collaboration with P5 •Work with NGOs and women’s organisations to complement the national strategy 	Government
Risk 2 Social unrest due to food shortage and difficulties to carry out productive activities	Operational	3 – Very High	6 – Expected	5 – Extreme	<ul style="list-style-type: none"> •Provide measures for vulnerable population (food provision, unconditional cash transfer to individuals) to most affected population •Target male and female dominated sectors and include informal sector and other precarious forms of 	Government

					employment, through employment and income supporting activities		
COVID-19 is perceived as a “white people problem” and social distancing is not seen as an effective measure	Operational	2 – Medium High	4 – Likely	4 – Major	Awareness raising, information campaign, dissemination of findings, especially making use of women’s networks and community leaders	WHO, IOM	

Budget by UNDG Categories

***Up to Four Agencies**

Budget Lines	Fiscal Year	Description [OPTIONAL]	Agency WHO	Agency IOM	Agency 3	Agency 4	Total USD
1. Staff and other personnel	2020		100,000	50,000			
2. Supplies, Commodities, Materials	2020		30,000	30,000			
3. Equipment, Vehicles, and Furniture, incl. Depreciation	2020			25,000			
4. Contractual services	2020		20,000	24,000			
5. Travel	2020		11,000	9,645			
6. Transfers and Grants to Counterparts	2020		52,000	70,000			
7. General Operating and other Direct Costs	2020		10,645	15,000			
8. Joint evaluation	2021		10,000	10,000			
Sub Total Programme Costs			233,645	233,645			
8. Indirect Support Costs * 7%			16,355	16,355			
Total			250,000	250,000			

** The rate shall not exceed 7% of the total of categories 1-7, as specified in the COVID-19 Response MOU and should follow the rules and guidelines of each recipient organization. Note that Agency-incurred direct project implementation costs should be charged to the relevant budget line, in line with UNSDG guidance.*

Signatures

E-Signature/validation through the system or email from the RC confirming submission

WHO
Dr. Jean Marie KIPELA, WHO Representative, Guinea Bissau
Email: kipelam@who.int



IOM
Laura Amadori Head of Office IOM Guinea Bissau
E-mail: lamadori@iom.int



UNITED NATIONS RESIDENT COORDINATOR
Dr Mamadou Diallo
E-mail : djallo76@un.org

Approved (through email)

NOTIFICATION

WHO: Marjorie Mupandare: mupandarem@who.int

IOM: Celso Lopes: clobes@iomt.int

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Annex: SDG List

Target	Description
TARGET_1.1	1.1 By 2030, eradicate extreme poverty for all people everywhere, currently measured as people living on less than \$1.25 a day
TARGET_1.2	1.2 By 2030, reduce at least by half the proportion of men, women and children of all ages living in poverty in all its dimensions according to national definitions
TARGET_1.3	1.3 Implement nationally appropriate social protection systems and measures for all, including floors, and by 2030 achieve substantial coverage of the poor and the vulnerable
TARGET_1.4	1.4 By 2030, ensure that all men and women, in particular the poor and the vulnerable, have equal rights to economic resources, as well as access to basic services, ownership and control over land and other forms of property, inheritance, natural resources, appropriate new technology and financial services, including microfinance
TARGET_1.5	1.5 By 2030, build the resilience of the poor and those in vulnerable situations and reduce their exposure and vulnerability to climate-related extreme events and other economic, social and environmental shocks and disasters
TARGET_1.a	1.a Ensure significant mobilization of resources from a variety of sources, including through enhanced development cooperation, in order to provide adequate and predictable means for developing countries, in particular least developed countries, to implement programmes and policies to end poverty in all its dimensions
TARGET_1.b	1.b Create sound policy frameworks at the national, regional and international levels, based on pro-poor and gender-sensitive development strategies, to support accelerated investment in poverty eradication actions
TARGET_2.1	2.1 By 2030, end hunger and ensure access by all people, in particular the poor and people in vulnerable situations, including infants, to safe, nutritious and sufficient food all year round
TARGET_2.2	2.2 By 2030, end all forms of malnutrition, including achieving, by 2025, the internationally agreed targets on stunting and wasting in children under 5 years of age, and address the nutritional needs of adolescent girls, pregnant and lactating women and older persons
TARGET_2.3	2.3 By 2030, double the agricultural productivity and incomes of small-scale food producers, in particular women, indigenous peoples, family farmers, pastoralists and fishers, including through secure and equal access to land, other productive resources and inputs, knowledge, financial services, markets and opportunities for value addition and non-farm employment
TARGET_2.4	2.4 By 2030, ensure sustainable food production systems and implement resilient agricultural practices that increase productivity and production, that help maintain ecosystems, that strengthen capacity for adaptation to climate change, extreme weather, drought, flooding and other disasters and that progressively improve land and soil quality
TARGET_2.5	2.5 By 2020, maintain the genetic diversity of seeds, cultivated plants and farmed and domesticated animals and their related wild species, including through soundly managed and diversified seed and plant banks at the national, regional and international levels, and promote access to and fair and equitable sharing of benefits arising from the utilization of genetic resources and associated traditional knowledge, as internationally agreed
TARGET_2.a	2.a Increase investment, including through enhanced international cooperation, in rural infrastructure, agricultural research and extension services, technology development and plant and livestock gene banks in order to enhance agricultural productive capacity in developing countries, in particular least developed countries

Target	Description
TARGET_2.b	2.b Correct and prevent trade restrictions and distortions in world agricultural markets, including through the parallel elimination of all forms of agricultural export subsidies and all export measures with equivalent effect, in accordance with the mandate of the Doha Development Round
TARGET_2.c	2.c Adopt measures to ensure the proper functioning of food commodity markets and their derivatives and facilitate timely access to market information, including on food reserves, in order to help limit extreme food price volatility
TARGET_3.1	3.1 By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births
TARGET_3.2	3.2 By 2030, end preventable deaths of newborns and children under 5 years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live births and under-5 mortality to at least as low as 25 per 1,000 live births
TARGET_3.3	3.3 By 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases
TARGET_3.4	3.4 By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being
TARGET_3.5	3.5 Strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol
TARGET_3.6	3.6 By 2020, halve the number of global deaths and injuries from road traffic accidents
TARGET_3.7	3.7 By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes
TARGET_3.8	3.8 Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all
TARGET_3.9	3.9 By 2030, substantially reduce the number of deaths and illnesses from hazardous chemicals and air, water and soil pollution and contamination
TARGET_3.a	3.a Strengthen the implementation of the World Health Organization Framework Convention on Tobacco Control in all countries, as appropriate
TARGET_3.b	3.b Support the research and development of vaccines and medicines for the communicable and non-communicable diseases that primarily affect developing countries, provide access to affordable essential medicines and vaccines, in accordance with the Doha Declaration on the TRIPS Agreement and Public Health, which affirms the right of developing countries to use to the full the provisions in the Agreement on Trade-Related Aspects of Intellectual Property Rights regarding flexibilities to protect public health, and, in particular, provide access to medicines for all
TARGET_3.c	3.c Substantially increase health financing and the recruitment, development, training and retention of the health workforce in developing countries, especially in least developed countries and small island developing States
TARGET_3.d	3.d Strengthen the capacity of all countries, in particular developing countries, for early warning, risk reduction and management of national and global health risks
TARGET_4.1	4.1 By 2030, ensure that all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and effective learning outcomes

Target	Description
TARGET_4.2	4.2 By 2030, ensure that all girls and boys have access to quality early childhood development, care and pre-primary education so that they are ready for primary education
TARGET_4.3	4.3 By 2030, ensure equal access for all women and men to affordable and quality technical, vocational and tertiary education, including university
TARGET_4.4	4.4 By 2030, substantially increase the number of youth and adults who have relevant skills, including technical and vocational skills, for employment, decent jobs and entrepreneurship
TARGET_4.5	4.5 By 2030, eliminate gender disparities in education and ensure equal access to all levels of education and vocational training for the vulnerable, including persons with disabilities, indigenous peoples and children in vulnerable situations
TARGET_4.6	4.6 By 2030, ensure that all youth and a substantial proportion of adults, both men and women, achieve literacy and numeracy
TARGET_4.7	4.7 By 2030, ensure that all learners acquire the knowledge and skills needed to promote sustainable development, including, among others, through education for sustainable development and sustainable lifestyles, human rights, gender equality, promotion of a culture of peace and non-violence, global citizenship and appreciation of cultural diversity and of culture's contribution to sustainable development
TARGET_4.a	4.a Build and upgrade education facilities that are child, disability and gender sensitive and provide safe, non-violent, inclusive and effective learning environments for all
TARGET_4.b	4.b By 2020, substantially expand globally the number of scholarships available to developing countries, in particular least developed countries, small island developing States and African countries, for enrolment in higher education, including vocational training and information and communications technology, technical, engineering and scientific programmes, in developed countries and other developing countries
TARGET_4.c	4.c By 2030, substantially increase the supply of qualified teachers, including through international cooperation for teacher training in developing countries, especially least developed countries and small island developing States
TARGET_5.1	5.1 End all forms of discrimination against all women and girls everywhere
TARGET_5.2	5.2 Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation
TARGET_5.3	5.3 Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation
TARGET_5.4	5.4 Recognize and value unpaid care and domestic work through the provision of public services, infrastructure and social protection policies and the promotion of shared responsibility within the household and the family as nationally appropriate
TARGET_5.5	5.5 Ensure women's full and effective participation and equal opportunities for leadership at all levels of decision-making in political, economic and public life
TARGET_5.6	5.6 Ensure universal access to sexual and reproductive health and reproductive rights as agreed in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences
TARGET_5.a	5.a Undertake reforms to give women equal rights to economic resources, as well as access to ownership and control over land and other forms of property, financial services, inheritance and natural resources, in accordance with national laws

Target	Description
TARGET_5.b	5.b Enhance the use of enabling technology, in particular information and communications technology, to promote the empowerment of women
TARGET_5.c	5.c Adopt and strengthen sound policies and enforceable legislation for the promotion of gender equality and the empowerment of all women and girls at all levels
TARGET_6.1	6.1 By 2030, achieve universal and equitable access to safe and affordable drinking water for all
TARGET_6.2	6.2 By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations
TARGET_6.3	6.3 By 2030, improve water quality by reducing pollution, eliminating dumping and minimizing release of hazardous chemicals and materials, halving the proportion of untreated wastewater and substantially increasing recycling and safe reuse globally
TARGET_6.4	6.4 By 2030, substantially increase water-use efficiency across all sectors and ensure sustainable withdrawals and supply of freshwater to address water scarcity and substantially reduce the number of people suffering from water scarcity
TARGET_6.5	6.5 By 2030, implement integrated water resources management at all levels, including through transboundary cooperation as appropriate
TARGET_6.6	6.6 By 2020, protect and restore water-related ecosystems, including mountains, forests, wetlands, rivers, aquifers and lakes
TARGET_6.a	6.a By 2030, expand international cooperation and capacity-building support to developing countries in water- and sanitation-related activities and programmes, including water harvesting, desalination, water efficiency, wastewater treatment, recycling and reuse technologies
TARGET_6.b	6.b Support and strengthen the participation of local communities in improving water and sanitation management
TARGET_7.1	7.1 By 2030, ensure universal access to affordable, reliable and modern energy services
TARGET_7.2	7.2 By 2030, increase substantially the share of renewable energy in the global energy mix
TARGET_7.3	7.3 By 2030, double the global rate of improvement in energy efficiency
TARGET_7.a	7.a By 2030, enhance international cooperation to facilitate access to clean energy research and technology, including renewable energy, energy efficiency and advanced and cleaner fossil-fuel technology, and promote investment in energy infrastructure and clean energy technology
TARGET_7.b	7.b By 2030, expand infrastructure and upgrade technology for supplying modern and sustainable energy services for all in developing countries, in particular least developed countries, small island developing States and landlocked developing countries, in accordance with their respective programmes of support
TARGET_8.1	8.1 Sustain per capita economic growth in accordance with national circumstances and, in particular, at least 7 per cent gross domestic product growth per annum in the least developed countries
TARGET_8.10	8.10 Strengthen the capacity of domestic financial institutions to encourage and expand access to banking, insurance and financial services for all
TARGET_8.2	8.2 Achieve higher levels of economic productivity through diversification, technological upgrading and innovation, including through a focus on high-value added and labour-intensive sectors
TARGET_8.3	8.3 Promote development-oriented policies that support productive activities, decent job creation, entrepreneurship, creativity and

Target	Description
	innovation, and encourage the formalization and growth of micro-, small- and medium-sized enterprises, including through access to financial services
TARGET_8.4	8.4 Improve progressively, through 2030, global resource efficiency in consumption and production and endeavour to decouple economic growth from environmental degradation, in accordance with the 10-Year Framework of Programmes on Sustainable Consumption and Production, with developed countries taking the lead
TARGET_8.5	8.5 By 2030, achieve full and productive employment and decent work for all women and men, including for young people and persons with disabilities, and equal pay for work of equal value
TARGET_8.6	8.6 By 2020, substantially reduce the proportion of youth not in employment, education or training
TARGET_8.7	8.7 Take immediate and effective measures to eradicate forced labour, end modern slavery and human trafficking and secure the prohibition and elimination of the worst forms of child labour, including recruitment and use of child soldiers, and by 2025 end child labour in all its forms
TARGET_8.8	8.8 Protect labour rights and promote safe and secure working environments for all workers, including migrant workers, in particular women migrants, and those in precarious employment
TARGET_8.9	8.9 By 2030, devise and implement policies to promote sustainable tourism that creates jobs and promotes local culture and products
TARGET_8.a	8.a Increase Aid for Trade support for developing countries, in particular least developed countries, including through the Enhanced Integrated Framework for Trade-related Technical Assistance to Least Developed Countries
TARGET_8.b	8.b By 2020, develop and operationalize a global strategy for youth employment and implement the Global Jobs Pact of the International Labour Organization
TARGET_9.1	9.1 Develop quality, reliable, sustainable and resilient infrastructure, including regional and transborder infrastructure, to support economic development and human well-being, with a focus on affordable and equitable access for all
TARGET_9.2	9.2 Promote inclusive and sustainable industrialization and, by 2030, significantly raise industry's share of employment and gross domestic product, in line with national circumstances, and double its share in least developed countries
TARGET_9.3	9.3 Increase the access of small-scale industrial and other enterprises, in particular in developing countries, to financial services, including affordable credit, and their integration into value chains and markets
TARGET_9.4	9.4 By 2030, upgrade infrastructure and retrofit industries to make them sustainable, with increased resource-use efficiency and greater adoption of clean and environmentally sound technologies and industrial processes, with all countries taking action in accordance with their respective capabilities
TARGET_9.5	9.5 Enhance scientific research, upgrade the technological capabilities of industrial sectors in all countries, in particular developing countries, including, by 2030, encouraging innovation and substantially increasing the number of research and development workers per 1 million people and public and private research and development spending
TARGET_9.a	9.a Facilitate sustainable and resilient infrastructure development in developing countries through enhanced financial, technological and technical support to African countries, least developed countries, landlocked developing countries and small island developing States
TARGET_9.b	9.b Support domestic technology development, research and innovation in developing countries, including by ensuring a conducive policy environment for, inter alia, industrial diversification and value addition to commodities

Target	Description
TARGET_9.c	9.c Significantly increase access to information and communications technology and strive to provide universal and affordable access to the Internet in least developed countries by 2020
TARGET_10.1	10.1 By 2030, progressively achieve and sustain income growth of the bottom 40 per cent of the population at a rate higher than the national average
TARGET_10.2	10.2 By 2030, empower and promote the social, economic and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status
TARGET_10.3	10.3 Ensure equal opportunity and reduce inequalities of outcome, including by eliminating discriminatory laws, policies and practices and promoting appropriate legislation, policies and action in this regard
TARGET_10.4	10.4 Adopt policies, especially fiscal, wage and social protection policies, and progressively achieve greater equality
TARGET_10.5	10.5 Improve the regulation and monitoring of global financial markets and institutions and strengthen the implementation of such regulations
TARGET_10.6	10.6 Ensure enhanced representation and voice for developing countries in decision-making in global international economic and financial institutions in order to deliver more effective, credible, accountable and legitimate institutions
TARGET_10.7	10.7 Facilitate orderly, safe, regular and responsible migration and mobility of people, including through the implementation of planned and well-managed migration policies
TARGET_10.a	10.a Implement the principle of special and differential treatment for developing countries, in particular least developed countries, in accordance with World Trade Organization agreements
TARGET_10.b	10.b Encourage official development assistance and financial flows, including foreign direct investment, to States where the need is greatest, in particular least developed countries, African countries, small island developing States and landlocked developing countries, in accordance with their national plans and programmes
TARGET_10.c	10.c By 2030, reduce to less than 3 per cent the transaction costs of migrant remittances and eliminate remittance corridors with costs higher than 5 per cent
TARGET_11.1	11.1 By 2030, ensure access for all to adequate, safe and affordable housing and basic services and upgrade slums
TARGET_11.2	11.2 By 2030, provide access to safe, affordable, accessible and sustainable transport systems for all, improving road safety, notably by expanding public transport, with special attention to the needs of those in vulnerable situations, women, children, persons with disabilities and older persons
TARGET_11.3	11.3 By 2030, enhance inclusive and sustainable urbanization and capacity for participatory, integrated and sustainable human settlement planning and management in all countries
TARGET_11.4	11.4 Strengthen efforts to protect and safeguard the world's cultural and natural heritage
TARGET_11.5	11.5 By 2030, significantly reduce the number of deaths and the number of people affected and substantially decrease the direct economic losses relative to global gross domestic product caused by disasters, including water-related disasters, with a focus on protecting the poor and people in vulnerable situations
TARGET_11.6	11.6 By 2030, reduce the adverse per capita environmental impact of cities, including by paying special attention to air quality and

Target	Description
	municipal and other waste management
TARGET_11.7	11.7 By 2030, provide universal access to safe, inclusive and accessible, green and public spaces, in particular for women and children, older persons and persons with disabilities
TARGET_11.a	11.a Support positive economic, social and environmental links between urban, peri-urban and rural areas by strengthening national and regional development planning
TARGET_11.b	11.b By 2020, substantially increase the number of cities and human settlements adopting and implementing integrated policies and plans towards inclusion, resource efficiency, mitigation and adaptation to climate change, resilience to disasters, and develop and implement, in line with the Sendai Framework for Disaster Risk Reduction 2015–2030, holistic disaster risk management at all levels
TARGET_11.c	11.c Support least developed countries, including through financial and technical assistance, in building sustainable and resilient buildings utilizing local materials
TARGET_12.1	12.1 Implement the 10-Year Framework of Programmes on Sustainable Consumption and Production Patterns, all countries taking action, with developed countries taking the lead, taking into account the development and capabilities of developing countries
TARGET_12.2	12.2 By 2030, achieve the sustainable management and efficient use of natural resources
TARGET_12.3	12.3 By 2030, halve per capita global food waste at the retail and consumer levels and reduce food losses along production and supply chains, including post-harvest losses
TARGET_12.4	12.4 By 2020, achieve the environmentally sound management of chemicals and all wastes throughout their life cycle, in accordance with agreed international frameworks, and significantly reduce their release to air, water and soil in order to minimize their adverse impacts on human health and the environment
TARGET_12.5	12.5 By 2030, substantially reduce waste generation through prevention, reduction, recycling and reuse
TARGET_12.6	12.6 Encourage companies, especially large and transnational companies, to adopt sustainable practices and to integrate sustainability information into their reporting cycle
TARGET_12.7	12.7 Promote public procurement practices that are sustainable, in accordance with national policies and priorities
TARGET_12.8	12.8 By 2030, ensure that people everywhere have the relevant information and awareness for sustainable development and lifestyles in harmony with nature
TARGET_12.a	12.a Support developing countries to strengthen their scientific and technological capacity to move towards more sustainable patterns of consumption and production
TARGET_12.b	12.b Develop and implement tools to monitor sustainable development impacts for sustainable tourism that creates jobs and promotes local culture and products
TARGET_12.c	12.c Rationalize inefficient fossil-fuel subsidies that encourage wasteful consumption by removing market distortions, in accordance with national circumstances, including by restructuring taxation and phasing out those harmful subsidies, where they exist, to reflect their environmental impacts, taking fully into account the specific needs and conditions of developing countries and minimizing the possible adverse impacts on their development in a manner that protects the poor and the affected communities
TARGET_13.1	13.1 Strengthen resilience and adaptive capacity to climate-related hazards and natural disasters in all countries

Target	Description
TARGET_13.2	13.2 Integrate climate change measures into national policies, strategies and planning
TARGET_13.3	13.3 Improve education, awareness-raising and human and institutional capacity on climate change mitigation, adaptation, impact reduction and early warning
TARGET_13.a	13.a Implement the commitment undertaken by developed-country parties to the United Nations Framework Convention on Climate Change to a goal of mobilizing jointly \$100 billion annually by 2020 from all sources to address the needs of developing countries in the context of meaningful mitigation actions and transparency on implementation and fully operationalize the Green Climate Fund through its capitalization as soon as possible
TARGET_13.b	13.b Promote mechanisms for raising capacity for effective climate change-related planning and management in least developed countries and small island developing States, including focusing on women, youth and local and marginalized communities
TARGET_14.1	14.1 By 2025, prevent and significantly reduce marine pollution of all kinds, in particular from land-based activities, including marine debris and nutrient pollution
TARGET_14.2	14.2 By 2020, sustainably manage and protect marine and coastal ecosystems to avoid significant adverse impacts, including by strengthening their resilience, and take action for their restoration in order to achieve healthy and productive oceans
TARGET_14.3	14.3 Minimize and address the impacts of ocean acidification, including through enhanced scientific cooperation at all levels
TARGET_14.4	14.4 By 2020, effectively regulate harvesting and end overfishing, illegal, unreported and unregulated fishing and destructive fishing practices and implement science-based management plans, in order to restore fish stocks in the shortest time feasible, at least to levels that can produce maximum sustainable yield as determined by their biological characteristics
TARGET_14.5	14.5 By 2020, conserve at least 10 per cent of coastal and marine areas, consistent with national and international law and based on the best available scientific information
TARGET_14.6	14.6 By 2020, prohibit certain forms of fisheries subsidies which contribute to overcapacity and overfishing, eliminate subsidies that contribute to illegal, unreported and unregulated fishing and refrain from introducing new such subsidies, recognizing that appropriate and effective special and differential treatment for developing and least developed countries should be an integral part of the World Trade Organization fisheries subsidies negotiation ³
TARGET_14.7	14.7 By 2030, increase the economic benefits to small island developing States and least developed countries from the sustainable use of marine resources, including through sustainable management of fisheries, aquaculture and tourism
TARGET_14.a	14.a Increase scientific knowledge, develop research capacity and transfer marine technology, taking into account the Intergovernmental Oceanographic Commission Criteria and Guidelines on the Transfer of Marine Technology, in order to improve ocean health and to enhance the contribution of marine biodiversity to the development of developing countries, in particular small island developing States and least developed countries
TARGET_14.b	14.b Provide access for small-scale artisanal fishers to marine resources and markets
TARGET_14.c	14.c Enhance the conservation and sustainable use of oceans and their resources by implementing international law as reflected in the United Nations Convention on the Law of the Sea, which provides the legal framework for the conservation and sustainable use of oceans and their resources, as recalled in paragraph 158 of “The future we want”
TARGET_15.1	15.1 By 2020, ensure the conservation, restoration and sustainable use of terrestrial and inland freshwater ecosystems and their services,

Target	Description
	in particular forests, wetlands, mountains and drylands, in line with obligations under international agreements
TARGET_15.2	15.2 By 2020, promote the implementation of sustainable management of all types of forests, halt deforestation, restore degraded forests and substantially increase afforestation and reforestation globally
TARGET_15.3	15.3 By 2030, combat desertification, restore degraded land and soil, including land affected by desertification, drought and floods, and strive to achieve a land degradation-neutral world
TARGET_15.4	15.4 By 2030, ensure the conservation of mountain ecosystems, including their biodiversity, in order to enhance their capacity to provide benefits that are essential for sustainable development
TARGET_15.5	15.5 Take urgent and significant action to reduce the degradation of natural habitats, halt the loss of biodiversity and, by 2020, protect and prevent the extinction of threatened species
TARGET_15.6	15.6 Promote fair and equitable sharing of the benefits arising from the utilization of genetic resources and promote appropriate access to such resources, as internationally agreed
TARGET_15.7	15.7 Take urgent action to end poaching and trafficking of protected species of flora and fauna and address both demand and supply of illegal wildlife products
TARGET_15.8	15.8 By 2020, introduce measures to prevent the introduction and significantly reduce the impact of invasive alien species on land and water ecosystems and control or eradicate the priority species
TARGET_15.9	15.9 By 2020, integrate ecosystem and biodiversity values into national and local planning, development processes, poverty reduction strategies and accounts
TARGET_15.a	15.a Mobilize and significantly increase financial resources from all sources to conserve and sustainably use biodiversity and ecosystems
TARGET_15.b	15.b Mobilize significant resources from all sources and at all levels to finance sustainable forest management and provide adequate incentives to developing countries to advance such management, including for conservation and reforestation
TARGET_15.c	15.c Enhance global support for efforts to combat poaching and trafficking of protected species, including by increasing the capacity of local communities to pursue sustainable livelihood opportunities
TARGET_16.1	16.1 Significantly reduce all forms of violence and related death rates everywhere
TARGET_16.10	16.10 Ensure public access to information and protect fundamental freedoms, in accordance with national legislation and international agreements
TARGET_16.2	16.2 End abuse, exploitation, trafficking and all forms of violence against and torture of children
TARGET_16.3	16.3 Promote the rule of law at the national and international levels and ensure equal access to justice for all
TARGET_16.4	16.4 By 2030, significantly reduce illicit financial and arms flows, strengthen the recovery and return of stolen assets and combat all forms of organized crime
TARGET_16.5	16.5 Substantially reduce corruption and bribery in all their forms
TARGET_16.6	16.6 Develop effective, accountable and transparent institutions at all levels
TARGET_16.7	16.7 Ensure responsive, inclusive, participatory and representative decision-making at all levels
TARGET_16.8	16.8 Broaden and strengthen the participation of developing countries in the institutions of global governance

Target	Description
TARGET_16.9	16.9 By 2030, provide legal identity for all, including birth registration
TARGET_16.a	16.a Strengthen relevant national institutions, including through international cooperation, for building capacity at all levels, in particular in developing countries, to prevent violence and combat terrorism and crime
TARGET_16.b	16.b Promote and enforce non-discriminatory laws and policies for sustainable development
TARGET_17.1	17.1 Strengthen domestic resource mobilization, including through international support to developing countries, to improve domestic capacity for tax and other revenue collection
TARGET_17.10	17.10 Promote a universal, rules-based, open, non-discriminatory and equitable multilateral trading system under the World Trade Organization, including through the conclusion of negotiations under its Doha Development Agenda
TARGET_17.11	17.11 Significantly increase the exports of developing countries, in particular with a view to doubling the least developed countries' share of global exports by 2020
TARGET_17.12	17.12 Realize timely implementation of duty-free and quota-free market access on a lasting basis for all least developed countries, consistent with World Trade Organization decisions, including by ensuring that preferential rules of origin applicable to imports from least developed countries are transparent and simple, and contribute to facilitating market access
TARGET_17.13	17.13 Enhance global macroeconomic stability, including through policy coordination and policy coherence
TARGET_17.14	17.14 Enhance policy coherence for sustainable development
TARGET_17.15	17.15 Respect each country's policy space and leadership to establish and implement policies for poverty eradication and sustainable development
TARGET_17.16	17.16 Enhance the Global Partnership for Sustainable Development, complemented by multi-stakeholder partnerships that mobilize and share knowledge, expertise, technology and financial resources, to support the achievement of the Sustainable Development Goals in all countries, in particular developing countries
TARGET_17.17	17.17 Encourage and promote effective public, public-private and civil society partnerships, building on the experience and resourcing strategies of partnerships
TARGET_17.18	17.18 By 2020, enhance capacity-building support to developing countries, including for least developed countries and small island developing States, to increase significantly the availability of high-quality, timely and reliable data disaggregated by income, gender, age, race, ethnicity, migratory status, disability, geographic location and other characteristics relevant in national contexts
TARGET_17.19	17.19 By 2030, build on existing initiatives to develop measurements of progress on sustainable development that complement gross domestic product, and support statistical capacity-building in developing countries
TARGET_17.2	17.2 Developed countries to implement fully their official development assistance commitments, including the commitment by many developed countries to achieve the target of 0.7 per cent of gross national income for official development assistance (ODA/GNI) to developing countries and 0.15 to 0.20 per cent of ODA/GNI to least developed countries; ODA providers are encouraged to consider setting a target to provide at least 0.20 per cent of ODA/GNI to least developed countries
TARGET_17.3	17.3 Mobilize additional financial resources for developing countries from multiple sources
TARGET_17.4	17.4 Assist developing countries in attaining long-term debt sustainability through coordinated policies aimed at fostering debt financing,

Target	Description
	debt relief and debt restructuring, as appropriate, and address the external debt of highly indebted poor countries to reduce debt distress
TARGET_17.5	17.5 Adopt and implement investment promotion regimes for least developed countries
TARGET_17.6	17.6 Enhance North-South, South-South and triangular regional and international cooperation on and access to science, technology and innovation and enhance knowledge-sharing on mutually agreed terms, including through improved coordination among existing mechanisms, in particular at the United Nations level, and through a global technology facilitation mechanism
TARGET_17.7	17.7 Promote the development, transfer, dissemination and diffusion of environmentally sound technologies to developing countries on favourable terms, including on concessional and preferential terms, as mutually agreed
TARGET_17.8	17.8 Fully operationalize the technology bank and science, technology and innovation capacity-building mechanism for least developed countries by 2017 and enhance the use of enabling technology, in particular information and communications technology
TARGET_17.9	17.9 Enhance international support for implementing effective and targeted capacity-building in developing countries to support national plans to implement all the Sustainable Development Goals, including through North-South, South-South and triangular cooperation

