GUINEA-BISSAU

Capital
Bissau

Ethnic Groups
Balanta 30%, Fulani 30%, Manjaco 14%, Mandinga 13%, Papel 7%, unspecified smaller ethnic groups 6%

Languages
Portuguese-based Creole, Portuguese (official; largely used as a second or third language), Pular (a Fula language), Mandingo

Religions
Muslim 46.1%, folk religions 30.6%, Christian 18.9%, other or unaffiliated 4.4%

Population
Total: 2.1 million
Median age: 18 years
Population growth rate: 2.54%
Urban: 45.5%
Rural 54.5%

Fertility
Birth rate: 36.25 births/1,000 population
Total fertility rate: 4.65 children born/woman
Sex ratio of population: 0.96 male(s)/female

Mortality
Death rate: 7.32 deaths/1,000 population
Life expectancy at birth: 64.1 years
Maternal mortality rate: 667 deaths/100,000 live births
Infant mortality rate: 47.69 deaths/1,000 live births
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Migration
Net migration rate: -3.54 migrants/1,000 population

Health
Current health expenditure: 8.4% of GDP
Physician density: 0.2 physicians/1,000 population
Adult obesity: 9.5%
Alcohol consumption per capita: 3.21 liters of pure alcohol

Education
Education expenditures: 2.7% of GDP
Literacy: 59.9%

Population Distribution
approximately one-fifth of the population lives in the capital city of Bissau along the Atlantic coast; the remainder is distributed among the eight other, mainly rural, regions.

Demographic Profile
Guinea-Bissau’s young and growing population is sustained by high fertility; approximately 60% of the population is under the age of 25 as of 2020. Its large reproductive-age population and total fertility rate of more than 4 children per woman offsets the country’s high infant and maternal mortality rates. The latter is among the world’s highest because of the prevalence of early childbearing, a lack of birth spacing, the high percentage of births outside of health care facilities, and a shortage of medicines and supplies.

Guinea-Bissau’s history of political instability, a civil war, and several coups (the latest in 2012) have resulted in a fragile state with a weak economy, high unemployment, rampant corruption, widespread poverty, and thriving drug and child trafficking. With the country lacking educational infrastructure, school funding and materials, and qualified teachers, and with the cultural emphasis placed on religious education, parents frequently send boys to study in residential Koranic schools (daaras) in Senegal and The Gambia. They often are extremely deprived and are forced into street begging or agricultural work by marabouts (Muslim religious teachers), who enrich themselves at the expense of the children. Boys who leave their marabouts often end up on the streets of Dakar or other large Senegalese towns and are vulnerable to even worse abuse.