

UNICEF HUMANITARIAN ACTION BURUNDI IN 2009



Core Country Data	
Population under 18 (thousands)	4,383
U5 mortality rate	180
Infant mortality rate	108
Maternal mortality ratio (1980–1999)*	615
Primary school enrolment ratio**	72.4
Primary school enrolment ratio for girls**	71.1
% U1 fully immunized (DPT3)	74
% population using improved drinking-water sources	71
Estimated adult HIV prevalence rate (aged 15–49), 2007	2.0
% U5 suffering moderate and severe underweight/stunting	39/53

Sources: *The State of the World's Children 2009*; * Burundi Multiple Indicator Survey (MICS) 2003, ** National Statistics of the Ministry of Education and Scientific Research 2005/06

Burundi is facing several challenges related to the reintegration of returnees in 2009. An important component of the consolidation of peace in the country is the re-entry of an estimated 387,000 repatriated and vulnerable school-aged children, the psychosocial support to be provided to 3,000 expelled persons, repatriated and unaccompanied vulnerable children and children separated from armed groups. The reinforcement of nutritional services for all children under age five (estimated at 1.54 million) will also provide tangible results in the fight against acute malnutrition.

Summary of UNICEF Emergency Needs for 2009*	
Sector	US\$
Health and Nutrition	800,000
Water, Sanitation and Hygiene	3,644,800
Education	2,990,000
Child Protection	715,000
HIV/AIDS	450,000
Emergency Preparedness and Response	335,000
Total**	8,934,800

* Funds received against this appeal will be used to respond to both the immediate and medium-term needs of children and women as outlined above. If UNICEF should receive funds in excess of the medium-term funding requirements for this emergency, UNICEF will use those funds to support other underfunded emergencies.

** The total includes a maximum recovery rate of 7 per cent. The actual recovery rate on contributions will be calculated in accordance with UNICEF Executive Board Decision 2006/77 dated 9 June 2006.

1. CRITICAL ISSUES FOR CHILDREN AND WOMEN

Burundi is engaged in a peace process between the last armed group the Palipehutu-Forces nationales de libération (FNL) and the Government that is expected to provide a solution to persisting insecurity in some areas and general uncertainty about the future. Related factors such as the high prevalence of criminality, banditry, targeted murders and increase in sexual and gender-based violence in several provinces are not indicative of an early return to normality and security and pose serious challenges to social reconstruction. Conflicts over access to and ownership of land are an additional risk factor for the population. Finally, the regional and international high consumer food prices threaten the fragile socio-economical equilibrium, increase the vulnerability of the population and decrease their capacity to cope with natural disasters like droughts and floods.

Consequently, the lack of access of children and women to basic services will be further compounded. Since the beginning of the civil war in 1993, food insecurity has persisted and in 2007 the food deficit was estimated at 38 per cent, limiting the coverage of energy needs to only 75 per cent. The most vulnerable are the children aged 12–59 months who are at high risk of malnutrition (about 27 per cent of Burundian households have at least two children under age five). Young people and pregnant/lactating women are also vulnerable. Chronic malnutrition rose from 48.1 per cent in 1987 to 56.8 per cent in 2000 to decrease to 46 per cent in 2007. On the other hand, the average acute malnutrition rate dropped from 7.5 per cent in 2000 to 5.6 per cent in 2007, with some provinces peaking at 11.5 per cent (National Nutrition Survey, August 2007). Even if the average rate remains below the threshold rate (10 per cent) for acute malnutrition, levels in certain provinces do exceed that alert rate and Burundi does remain amongst the high-risk countries threatened by food insecurity and malnutrition. In addition, Burundi periodically faces waterborne epidemics, such as cholera and dysentery, affecting mainly children and women. Malaria is endemic in Burundi and constitutes the main cause of mortality and morbidity to both groups. It is at the origin of 50 per cent of consultations, 40 per cent of which to children under age five. Malaria is also responsible of nearly 50 per cent of deaths in children aged 1–59 months.

The total number of displaced, refugee and exiled Burundians is estimated at 1–1.2 million, about 16 per cent of the population during the war. The abandonment of the land greatly affected agricultural production and the repeated displacements have dismantled social networks. Burundi is now facing a massive repatriation of all refugees from the United Republic of Tanzania (those who fled to Tanzania in 1972 and those who fled in 1993). Between 2002 and September 2008, more than 450,000 persons had already been repatriated with the highest number (77,970) in 2008 alone. The reintegration of the 1972 refugees (210,000 in the United Republic of Tanzania of whom 45,000 expressed their willingness to return to Burundi) represents another challenge considering the disruption of family ties, the landless status of about 30 per cent of these refugees and the new languages children born in the United Republic of Tanzania would have to learn. These returns are also putting pressure on social services and infrastructures, such as education, water and land, and need to be addressed urgently to avoid social tensions and ensure early reintegration. As of 1 October 2008, 51,501 refugees from 1993 and 26,172 refugees from 1972 remained to be repatriated.

While 71 per cent of the entire population has access to improved drinking-water sources, only 41 per cent has access to adequate sanitation facilities. HIV/AIDS and tuberculosis now run rampant throughout the country. The seroprevalence is around 2 per cent, while access to testing centres in unsecured areas is limited.

2. KEY ACTIONS AND ACHIEVEMENTS IN 2008

UNICEF has continued to support the Government of Burundi in responding to the humanitarian needs of the affected population, especially by leading the coordination of assistance to Burundians expelled from the United Republic of Tanzania. UNICEF also intervenes in key sectors, such as health and nutrition, water, sanitation and hygiene (WASH), education and child protection, in close collaboration with PARES, the government agency for the reintegration of returnees, as well as local, national and international NGOs, such as the Norwegian Refugee Council (NRC), Healthnet TPO and the Burundi Society for Women against AIDS in Africa (SWAA).

In the specific case of the expelled Burundians, UNICEF provided assistance to 6,013 persons. In the area of health and nutrition, successful immunization campaigns have improved the vaccination coverage to 90 per cent. Deworming tablets were administered to 63.3 per cent of children aged 5–14 years and to 99.5 per cent of primary schoolchildren. A total of 51 prevention of mother-to-child transmission of HIV (PMTCT) centres were established in health centres (one per health centre) in 2008, adding up to a total of 104 out of 150 that had been planned to be operational by the end of 2008 as well

as 123 doctors trained in paediatric HIV care. UNICEF supported the Government's response to a cholera epidemic and also provided essential drugs for at least 45,000 consultations (for expelled Burundians and Congolese refugees). New community-based therapeutic care (CTC) centres have been opened, increasing the number of provinces benefiting from this programme from 5 to 11 (treating monthly 1,150 cases of severe acute malnutrition).

In the area of child protection, from January to August 2008, 580 survivors of sexual and gender-based violence (SGBV) received medical and psychosocial care in the five provinces where UNICEF is supporting SGBV rehabilitation centres. Some 56.2 per cent of the victims were minors. During the same period, UNICEF provided psychosocial assistance to 5,605 expelled children in four transit centres and in temporary settlements. In April 2008, 220 children associated with the dissident group of the Palipehutu-FNL were released and transferred to a transit centre in preparation for reintegration and family reunification through the services of the Executive Secretariat of the National Commission on Demobilization, Reinsertion and Reintegration, with UNICEF's technical and financial support. UNICEF also helped the Secretariat provide accommodation, feeding, and psychosocial and material assistance to these children during their two-month stay at Gitega Centre.

Under the HIV/AIDS programme, some 1,000 refugees and returnees benefited from voluntary counselling and testing (VCT) services in Gasorwe and Musasa camps (approximately 10 per cent of camps' population). In partnership with African Humanitarian Action (AHA), UNICEF provided the necessary equipment and rapid HIV tests for a new VCT site. UNICEF mobilized the adolescents and young people in the refugee and returnee camps of Musasa and Makamba providing life skills and HIV/AIDS education. Various information, education and communication (IEC) activities were carried out, such as the training of 60 young peer educators and the distribution of posters and leaflets.

Out of 48,000 expected to return in 2008, UNICEF provided basic school materials for 11,000 children repatriated from the United Republic of Tanzania, 2,089 expelled children and 40,117 displaced children in two conflict-torn provinces, and 350,000 children in three provinces severely affected by high food prices and the influx of returnees, in order to facilitate their reintegration into school and/or to ensure the continuity of learning. Out of 13,000 expected returnee children from the 1972 'Old Settlements', 1,000 benefited from the UNICEF-supported pilot course for accelerated French, Kirundi and life skills training. UNICEF is building seven child-friendly schools with early childhood development structures, aiming to provide educational, recreational and psychosocial services to more than 3,000 primary and 200 pre-primary schoolchildren.

During 2008, some 11,738 people gained access to safe water through the rehabilitation/construction of water sources and to improved sanitation through increased hygiene awareness and the distribution of hygiene kits. UNICEF also supported the Burundi Red Cross by contributing to the distribution of non-food item kits to 5,189 most vulnerable internally displaced households and to all 2,100 flood victims.

3. PLANNED HUMANITARIAN ACTION FOR 2009

Coordination and Partnership

UNICEF works within the integrated UN system coordinated by the UN Integrated Office in Burundi (BINUB), in collaboration with the Government, donors, the Burundi Red Cross, international and national NGOs and civil society. A cluster approach was established in September 2008. UNICEF is leading the water, sanitation and hygiene (WASH) and education cluster groups and co-leading the nutrition cluster. UNICEF is also coordinating the assistance to expelled Burundians, working closely with UNHCR and the World Food Programme (WFP) on the rehabilitation of refugees and expelled people, and with the Office for the Coordination of Humanitarian Affairs (OCHA) on the response to natural disasters. Regular meetings are held with members of the Tanzania Country Office to handle education and protection issues including joint cross-border missions to assess the situation of refugees on the Tanzanian side.

Linkages of HAR with the Regular Programme

Emergency preparedness and response is integrated into all programmes of the 2008 Country Programme Action Plan (CPAP). (2009 will be a bringing year for a new 2010–2014 Country Programme.) The CPAP is the outcome of joint collaboration between UNICEF counterparts, government ministries, UN agencies and other partners.

During 2009, UNICEF will endeavour to reinforce and develop national and local capacity for disaster preparedness and response management. The Country Programme will provide humanitarian support in the areas of health, nutrition, WASH, education, child protection and HIV to at least 1 million children and 94,000 pregnant women and to the host communities most affected by the return process.

Health and Nutrition (US\$ 800,000)

For 2009, the overall goal is to minimize the impact of high food prices on the health and nutritional status of children under age five and to ensure that pregnant women in affected areas are identified and provided with micronutrient supplementation. Some 200,000 returnees and host communities' most vulnerable and impoverished persons will benefit from the following key activities:

- Administer two doses of vitamin A twice a year to children aged 6–59 months and one dose of iron/folic acid to pregnant women in the pre-birth consultation; check 80 per cent of the batches of salt arriving in Bujumbura port for iodization levels;
- Train 600 nurses and 1,200 community health workers on vaccination; sustain cold-chain maintenance; and support health services to carry out vaccination activities;
- Establish 96 new prevention of mother-to-child transmission of HIV (PMTCT) services to increase the number to 200 (94,000 pregnant women and 7,520 children of HIV-positive mothers) as per the sectoral plan;
- Provide medical care to returnees, expelled persons and Congolese refugees;
- Support epidemics prevention (cholera, dysentery and meningitis) and provide medical care to 20,000 victims of epidemics and natural disasters;
- Coordinate interventions with other partners through the cluster approach (Ministry of Health, UNICEF, WHO, NGOs etc.);
- Set up the community-based therapeutic care (CTC) approach in the six remaining provinces to ensure a recovery rate of more than 75 per cent for acute malnutrition cases;
- Support the distribution of insecticide-treated mosquito nets (ITNs) to 402,000 pregnant women and 330,000 children under age one; ensure follow-up and evaluation of ITN utilization at household level;
- Provide technical support to the national nutritional surveillance system and nutrition surveys.

Water, Sanitation and Hygiene (US\$ 3,644,800)

For 2009, the overall goal is to provide adequate water and sanitation facilities and to ensure that children are educated in good hygiene practices in order to minimize the risk of waterborne/sanitation diseases in 10 provinces. Some 202,000 affected populations in the areas of return, focusing particularly on children and women, will be reached through the following key activities:

- Construct/rehabilitate water infrastructures and adequate sanitary facilities in 50 schools for 60,000 schoolchildren (28,000 girls and 32,000 boys);
- Construct/rehabilitate 200 water supply systems (springs or gravity-fed systems) in permanent settlements and areas of return;
- Organize and train water users' committees for the maintenance of water infrastructures;
- Construct 6,500 family latrines and ensure that at least 80 per cent of the targeted households have access to family latrines, with a maximum of five households per latrine;
- Promote hygiene so that all 202,000 persons in the areas of return practise good hygiene behaviours (latrine use/handwashing/drinking water/epidemics);
- Train health ministry staff, communal water authority (RCE) members and communities for their better involvement in the fight against epidemics (cholera, bloody diarrhoea etc.);
- Coordinate WASH humanitarian partners (national and international NGOs, local authorities and others) through the establishment of appropriate WASH coordination mechanisms.

Education (US\$ 2,990,000)

For 2009, the overall goal is to increase equitable access to basic education of the most vulnerable as well as returnee children. A total of 387,000 vulnerable children and 2,000 teachers in four target provinces most affected by the influx of returnees will benefit from the following key activities:

- Supply basic scholastic materials, including notebooks, pencils and erasers, for at least 20,000 repatriated and expelled school-aged children in transit centres and temporary settlements out of 48,000 children expected to return in 2008, and to 375,000 primary schoolchildren in four target provinces;
- Procure and distribute educational play materials and provide recreational spaces for 2,000 preschool children of vulnerable families;
- Train early childhood development (ECD) cadres and provide parental education in four target provinces;
- Train 2,000 primary schoolteachers and administrators, with particular emphasis on psychosocial support and child-centred teaching methods in four target provinces;
- Support the construction of 30 temporary classroom structures and 10 permanent schools, each with six classrooms and teachers' homes to accommodate 4,500 primary schoolchildren.

Child Protection (US\$ 715,000)

For 2009, the overall goal is to assist and reunite with their families separated and unaccompanied children; strengthen the provision of materials and psychosocial support to expelled, repatriated and unaccompanied vulnerable children as well as to reintegrated children previously associated with armed groups; and assist survivors of gender-based violence through the following key activities:

- Support the identification, documentation, tracing, care (including psychosocial assistance) and reunification of an estimated 300 unaccompanied and separated children;
- Provide material and psychosocial assistance and respond to the basic needs of around 500 accompanied most vulnerable children affected by emergency situations and about 2,200 unaccompanied and separated children in difficult circumstances;
- Provide technical and material assistance for the running of child-friendly spaces in three transit camps for expellees and the implementation of recreational, educational and sensitization activities promoting children's rights and preventing gender-based violence;
- Provide psychosocial assistance to 320 separated children (including 100 children still associated with armed groups in October 2008) and to 2,200 repatriated and expelled children, reintegrated in 2008 in their communities through community-based interventions;
- Sensitize and reinforce the capacities of some 50 psychosocial assistants and implementing partners' key personnel in psychosocial response to vulnerable children in emergency situations;
- Provide integrated and global medical, psychosocial and legal assistance to approximately 100 survivors of gender-based violence in emergency situations;
- Provide continued support for the implementation of decentralized monitoring and reporting system on grave child rights' violations as per Security Council Resolution 1612.

HIV/AIDS (US\$ 450,000)

For 2009, the overall goal is to reach an estimated 10,000 children/adolescents through the following key activities:

- Provide quality voluntary HIV counselling and testing in Garsowe (Muyinga), Musasa (Ngozi) and Gihinga (Mwaro) refugee camps;
- Broadcast a radio serial in Kirundi, French and Swahili addressing subjects such as sexually transmitted diseases (STDs), HIV/AIDS prevention, stigma and discrimination, voluntary counselling and testing (VCT) as well as HIV-related topics, in all refugee camps;
- Undertake peer education and social mobilization activities, such as training peer educators, successive sensitization of peers by youth educators, testimonies from people living with HIV/AIDS, theatre, sports and other cultural activities in Garsowe (Muyinga), Musasa (Ngozi) and Gihinga (Mwaro) refugee camps;

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- Produce and distribute equipment and material for HIV/AIDS sensitization (cartoon strips, leaflets and billboards) to be distributed and installed in all refugee camps.

Emergency Preparedness and Response (US\$ 335,000)

For 2009, in collaboration with partners, the overall goal is to reinforce national and local capacity for disaster preparedness and response management. The Government of Burundi, the Burundi Red Cross, Civil Protection and the civil society will be supported through the following key activities:

- Provide technical support for the yearly update of the national and provincial contingency plans taking into account children's interests;
- Coordinate humanitarian assistance to people expelled from the United Republic of Tanzania;
- Monitor the implementation of preparedness activities through the consolidation of an emergency task force at provincial level;
- Establish a contingency stock at provincial level with standard management procedures and accountability;
- Develop the national disaster prevention and risk reduction strategy and support its implementation;
- Maintain a non-food item contingency stock for 20,000 people, including IDPs and/or victims of natural disasters, as and when they occur.