

# UNICEF HUMANITARIAN ACTION

# BURUNDI

## DONOR UPDATE 6 NOVEMBER 2003

### Better chances for children

- **Peace agreement and less fighting , opportunities for improved access to women and children**
- **113,000 indigent children in urgent need of school material**
- **Sexual violence and HIV/AIDS serious concerns for UNICEF**
- **Malaria , most common cause of mortality**

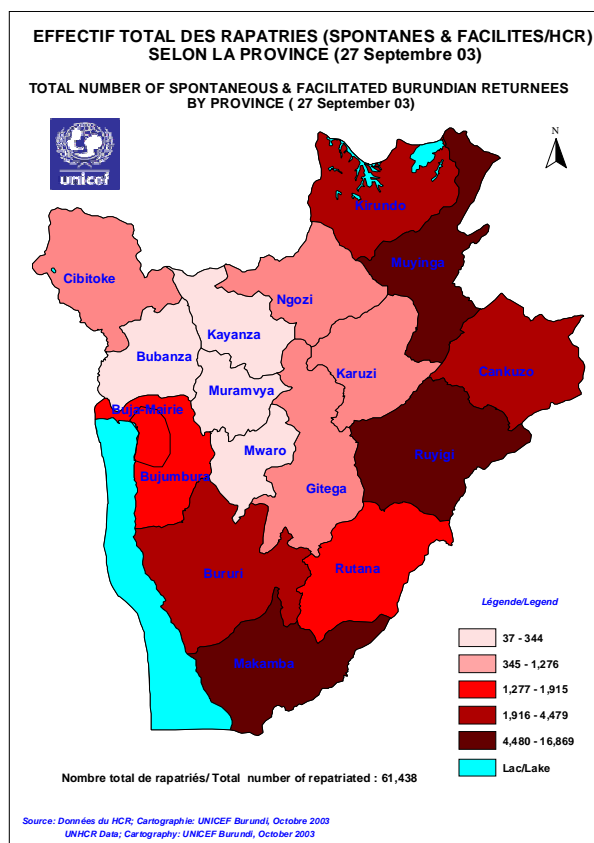
### 1. EMERGENCY OVERVIEW AND RECENT DEVELOPMENTS

President Ndayizeye and the Legal Representative of the main rebel group CNDD-FDD, Pierre Nkurunziza signed a protocol on power sharing in Pretoria Wednesday 8 October. Since the signature, fighting between the rebel group and the army diminished, giving a first signal for hope since many years. UNICEF together with its UN and NGO partners wants to take this opportunity to improve access and assistance to the most vulnerable populations despite increasing criminality.

#### Humanitarian situation

The lack of access to the most vulnerable population is a major constraint for the implementation of the country programme. UNICEF is concerned by the killings of children (11 September ambush in Cibitoke) and the recruitment of children by armed groups as well as by the increase in reported cases of sexual violence against girls and women. Recently, over 40 girls were reported raped in one commune within a time-period of 60 days, which gives one example of the extent of the problem in Burundi.

In addition to this violence and the high rate of HIV/AIDS the population recently suffered from a meningitis epidemic. The epidemic was declared at the end of July with cases reported from two of the most conflict-affected provinces Bubanza and Bujumbura Rural.



## 2. UNICEF RESPONSE: ACTIVITIES, ACHIEVEMENTS AND CONSTRAINTS

**Emergency Preparedness and Contingency plan** : Following the attacks on Bujumbura, involved actors concluded, after an evaluation, that a contingency plan for the capital should be put in place to facilitate humanitarian and administrative co-ordination related to any natural, man-made or epidemic crisis. The elaboration of the capital's contingency plan was launched on the 16<sup>th</sup> of September in a workshop with participants such as the Government, militaries, police, NGOs, UN and donors and was arranged by the municipal authorities with support from OCHA and UNICEF. The process for developing a plan for the surrounding province Bujumbura Rural started mid-October with UNICEF as the leading agency. UNICEF should now be prepared to ensure an effective response for 75,000 to 100,000 woman and children in case of an emergency.

**Lack of access** to the displaced population still hampers humanitarian assistance targeting the most vulnerable population, although one UNICEF supported local association in Ruyigi recently succeeded to distribute non-food items to over 300 households in a highly affected area in the province. During the month of September, UNICEF distributed non-food items to approximately 20,000 IDPs gathered in five camps in Cankuzo province. These distributions were made possible through UNICEF's decentralised stocks and UNICEF's NGO partners Médecins sans Frontières (MSF) Switzerland, COORDAID and Oxfam Quebec. Women and children are extremely vulnerable during displacement and often subject to human rights violations. In many cases women are leaving their houses carrying young children and do not have time to bring food, blankets or shelter. IDPs were provided with blankets, jerrycans, soap and cooking sets. Another 1,000 displaced persons were provided the same items in Muramvya through Action Contre la Faim (ACF) and Solidarité. UNICEF continues to work in close collaboration with NGOs and local structures to provide assistance to those children and women in displacement situations through its decentralised stocks and contingency plans. UNICEF also supported ACF for the reconstruction of 37 houses in Muramvya targeting extremely vulnerable families.

### HEALTH AND NUTRITION

**Mother and child:** A health promotion week, supported by UNICEF, targeting mothers and children in Burundi was launched on the 5<sup>th</sup> of August in Gitega Province by the First Lady and in Bujumbura by the Minister of Health. Last year, some 2,7 million children were vaccinated against measles, 500,000 children were vaccinated against polio and approximately 1 million children were reached with the distribution of a high dose of Vitamin A during the National Days of Immunisation. This year, **2 million children** were targeted through the distribution of de-worming tablets aiming children aged 1-5 years in addition to children in primary schools (95% coverage children 1-5 years and 100% of children in primary schools). **1 million children aged** 6 months to 5 years were targeted through the distribution of Vitamin A in order to strengthen their immune system (94,8 % coverage). In addition, the best start in life is a healthy mother, which was the objective of the campaign targeting **150,000** pregnant women with vaccination against tetanus and the distribution of iron tablets to avoid anaemia (55,2 % of pregnant women covered).

**Meningitis epidemic:** The first cases were reported mid-July in Bubanza Province. The population in affected areas in the provinces of Bubanza and Bujumbura Rural was vaccinated after a rapid reaction by the Ministry of Health, NGOs, UNICEF and WHO. During this epidemic period 37,373 persons were vaccinated (95% coverage). Vaccines provided by UNICEF were funded by DFID.

**Malaria** is the most common cause of mortality in Burundi and is a major threat to displaced women and children that often sleep outside without shelter.

In order to support the new Malaria Treatment Protocol, adopted in 2002 and that will be operational on 1 November 2003, UNICEF has been ordering 307,200 doses of the combination therapy called "artesunate+amodiaquine". Despite the generous funding from the Government of Belgium, the European Community Humanitarian Aid Office (ECHO) and the US Agency for International Development/ Office for Foreign Disaster Assistance (USAID/OFDA), there is an urgent need for additional funding to allow the accessibility of the treatment until the allocation of Global Funds to Burundi.

UNICEF is also reinforcing its distributions of Insecticide-Treated Nets to pregnant women and children in affected areas. As in so many other African countries, malaria represents a major public health problem in Burundi and is causing 50 % of the total number of health consultations. A project for Social Marketing and Communication for Insecticide-Treated Nets (ITNs) was launched in Bujumbura the 11 October. The project is part of the support given to the Government to reduce the maternal and child morbidity and mortality caused by malaria through a National Strategic Plan for the promotion of the utilisation of Insecticide-Treated Nets (ITNs). The use of ITNs has been shown to significantly reduce malaria morbidity and mortality, particularly in high-risk groups – pregnant women and children under five years of age, who are particularly targeted by this PSI project financed by USAID and implemented by the Ministry of Health, CARE, other partners and UNICEF who provided 30,000 ITNs.



De-worming tablets distributed to children in the temporary IDP site in Mont Sion, Bujumbura, on 5<sup>th</sup> August 2003.

**Nutrition:** UNICEF continues to support the 206 Supplementary Feeding Centres (SFC) and 22 Therapeutic Feeding Centres (TFC) in the country and noted a general decrease of admissions to these centres as of end September. However, admissions to SFCs in seven provinces increased as did admissions to TFCs in four provinces heavily affected by combat and displacement, Bujumbura Rural, Makamba, Rutana and Ruyigi, which will benefit from a close supervision during the months to come. In provinces affected by the conflict many people are hampered to reach the feeding centres and the nutritional status of the population in provinces such as Kayanza and Bujumbura Rural is expected to be more serious than indicated by the admissions to these centres. UNICEF also continues to support the integration of feeding structures into health structures in Burundi.

## **WATER AND ENVIRONMENTAL SANITATION**

The lack of potable water and inadequate environmental sanitation systems in Burundi is directly linked to personal hygiene and can to a high extent explain 83.77% of registered cases of children under five mortality and morbidity in 2002. This percentage is divided between malaria (36.51%), diarrhoea and intestinal parasites (20.68%) and respiratory infections (26.58%), which are all illnesses often linked to inadequate water and environmental sanitation. Displaced women and children are particularly vulnerable to this situation and UNICEF, supported by ECHO, is working to improve hygiene, access to clean water and environmental sanitation in IDP camps in Makamba and Bururi through the rehabilitation of four gravity feed water distribution systems and the construction of 285 water springs for the benefit of 56,000 people among them 3 primary schools. In addition, latrines and water systems are reconstructed and hygiene clubs created in 11 primary schools. UNICEF also supports the introduction of SanPlat latrines for 1,186 displaced households in Makamba province.

With the contribution from the Netherlands and Sweden, UNICEF rehabilitates four gravity feed water distribution systems in Ruyigi, Bujumbura Rural and Makamba for the benefit of 7,250 people among whom 180 orphans, 3,800 displaced and 4 primary schools.

## **HIV/AIDS**

After 10 years of civil war increased numbers of human rights violations, such as rape, pillage and killings, are reported perpetrated by both sides to the conflict. Sexual violence against women and girls are of a specific concern to UNICEF and special protection work is being focused on the emergent problem of rape in a country increasingly becoming affected by the HIV/AIDS epidemic.

UNICEF supports the local NGO Ntorengaho for the elaboration of training modules for the assistance to rape victims, including medical and psycho-social case management and judicial assistance. The training of partners, including NGOs, civilians, police and army, using these modules will initially be focused on the six most affected provinces and the training targets 40 persons in each province that will in their turn train additional staff. The training in the first province, Ruyigi was finalised during the reporting period. Sensitisation activities are underway and the issue is discussed in various fora related to the planning of UNICEF's new Programme of Co-operation with the Government of Burundi such as strategic reflections on HIV/AIDS, youth, protection and emergency. UNICEF strongly supports the participation of youth in the fight against HIV/AIDS and has since 2002 trained 1,500 youth animators that are operating in 7 provinces. In order to increase the participation of young people in activities primary related to HIV/AIDS, but also to other UNICEF activities, UNICEF supported youth consultations in all 17 provinces including the capital based on a Human Rights Approach to Programming (HRAP). Activities started in August and allowed 680 young people to participate in consultations (approximately five persons from each commune) and elect a secretariat of youth in each province that will be part of the National Network for Youth against HIV/AIDS.



Children in a temporary primary school in Kirundo province, October 2003.

## **EDUCATION**

The lack of teachers is severely threatening quality education in Burundi, where many qualified teachers have been killed or fled the country due to the conflict. Classrooms are crowded and some teachers have to divide their attention between 100 children

in morning sessions and another 100 children in afternoon sessions. In August, UNICEF supported the training of 340 unqualified primary school teachers to support the quality of education for the school year 2003/2004. These teachers are now qualified and received a diploma.

**Education of Girls in Emergencies:** Education is not only a fundamental right for children but a necessary link to normality for children whose lives have been shattered by the ten-year long civil war. In many cases, education is protecting girls and women from abuse and schools are seen as a "safe haven". Girls are the first to suffer from poverty and are often kept at home as parents are unable to pay the fees for schooling. On Tuesday 16 September the General Inspector for Education launched a UNICEF supported project aiming to put into schools 12,000 children aged 8-12 years, among them 6,000 girls, from war affected provinces around the country (Bujumbura Rural, Cancuzo, Makamba and Ruyigi). These are girls who would never normally have the opportunity to go to school and that are often left at home due to displacement, poverty or insecurity. The project is targeting the children through sensitisation of communities, parents and teachers in addition to providing school material and search for places in nearby schools. UNICEF is supporting the Government to conduct this project and stresses in its regular education programme the need for children to go to school. UNICEF started its school material distributions targeting 113,000 indigent children among whom many live in IDP camps or are in the process of being temporarily displaced for year 2003/2004.

## PROTECTION

**Burundi's first periodic report to the Commission on the Rights of the Child (CRC):** Since August, UNICEF supports the Government in putting together a structure responsible for the elaboration of the first periodic report to the Committee of the CRC. The structure, including several ministries, received training and support to conduct field visits to Ngozi, Kirundo and Muyinga provinces and is working to establish a national data collection system. UNICEF provides technical and logistical support to the Government in order to allow for the submission of the report due in 2005.

**Children without primary care takers:** Hundred thousands of children in Burundi lost one or both parents due to the conflict or the HIV/AIDS pandemic. Many children are left alone and communities are often too poor to be able to assist these children individually. UNICEF invests in community resource mobilisation in order to reach as many children as possible and create a protective environment. In order to reinforce communities for these activities UNICEF supports religious structures and other actors already operational in the communities. One co-ordinator for each province was technically and logistically supported by UNICEF to conduct training of community animators that conducted an identification of children without primary care takers and child workers in the four targeted provinces, Ruyigi, Ngozi, Muyinga and Kirundo. This network also supervises and mobilises community resources such as food, land and resources that are transmitted to those children most in need. In addition, 1,000 child workers were enrolled in school activities. Planned actions include activities to address sexual violence in schools and institutions in the four provinces.

The local association Maison Shalom, supported by UNICEF, started a project targeting 1,630 separated children with community reinstallation activities and family research and reunification. The families are supported by the construction of houses, school enrolment and some basic non-food items. UNICEF's partner Arche de Noe concluded in August activities related to the family reunification of the approximately 960 children that were separated from their families in Bujumbura due to attacks on the capital in July.

**Youth participation through protection activities in four IDP camps:** UNICEF initiated a co-operation with the Jesuit Relief Service (JRS) and a local association HABANA MAKAMBA, in order to support youth participation in protection activities in two IDP camps in Bujumbura Rural and two in Makamba. The youth were supported to create protection committees through elections and are responsible for training and sensitisation in the camps. They are encouraged to plan income-generating activities and to mobilise support for the construction of a youth centre in each camp. These committees are also involved in the school enrolment of young girls in these more "permanent" IDP sites.

**Mine risk education:** Focal points have been deployed in five provinces contaminated by mines and they are undertaking mine risk education on community level. UNICEF is currently undertaking an evaluation of the mine risk education project.

**Child soldiers' steering committee:** In October, UNICEF supported the launch of the Steering Committee put in place for strategic decisions, liaison between partners and facilitation of the activities conducted by the national structure for the disarmament, demobilisation, reintegration and prevention of recruitment of child soldiers supported financially and technically by UNICEF. The launch of the committee is important for the general agreement on the national politics regarding this project and the ceremony was opened by the Minister of Institutional Reforms, Human Rights and Relations with the Parliament. The Committee includes members from five ministries, donors, NGOs, UN agencies, community representatives, youth associations and representatives from Burundi Ex Combatants Assistance Programme and armed groups. The children that will be demobilised in the framework of the current project will be supported by structures that are integrated in the work of UNICEF's protection programme targeting children victims of violence, discrimination, abuse and neglect. UNICEF is currently working with various partners to provide support to many of Burundi's most vulnerable children and to mobilise community resources to assist these children in an appropriate manner. UNICEF supported the national structure in arranging a two-week long training (8-19 September) of 48 civil and military provincial focal points. The focal points were trained in all aspects related to demobilisation, reintegration and prevention of recruitment and will be informing and sensitising local communities and provincial actors to take their responsibility in the process and implement the activities of the national structure on a community level.

### 3. APPEAL REQUIREMENTS AND RECEIPTS

Within the framework of the 2003 UN Consolidated Inter-Agency Appeal for Burundi, UNICEF requested US\$ 19,736,250 to address the most urgent needs of children and women in Burundi. Receipts, in response to the appeal, amount to some US\$ 8.8 million, which leave a funding gap of around US\$ 10.9 million. The tables below indicate the current status of contributions received, by sector as well as by donor.

<b>Table 1. APPEAL REQUIREMENTS AND FUNDING BY SECTOR AS OF 20 OCTOBER 2003</b>				
<b>Sector</b>	<b>Target (US\$)</b>	<b>Funded (US\$)</b>	<b>% Funded</b>	<b>Unfunded (US\$)</b>
Nutrition & Health	7,920,000	4,102,508	51.80%	3,817,492
Protection	5,440,000	1,838,776	33.80%	3,601,224
Water/Sanitation	2,420,000	900,544	37.21%	1,519,456
Education	2,156,250	786,680	36.48%	1,369,570
HIV/AIDS	1,200,000	166,058	13.84%	1,033,942
Emergency	600,000	152,719	25.45%	447,281
Communication & Planning	0	20,000	-	-20,000
Programme Support	0	421,968	-	-421,968
<b>Country Total</b>	<b>19,736,250</b>	<b>8,389,252</b>	<b>42.50%</b>	<b>11,346,998</b>
Recovery Cost	-	448,510	-	-
<b>Total Contribution</b>	<b>19,736,250</b>	<b>8,837,762</b>	<b>44.78%</b>	<b>10,898,488</b>

<b>Table 2. FUNDS RECEIVED FOR 2003 APPEAL BY DONOR AS OF 20 OCTOBER 2003</b>		
<b>Donor</b>	<b>Income/Pledge US\$</b>	<b>Sector</b>
ECHO	2,749,758.57	Health & Nutrition, Education, WES
USAID/OFDA	1,575,638.00	Health & Nutrition
Netherlands	711,000.00	Health & Nutrition, Education, WES, Protection, HIV/AIDS
USAID/REDSO	685,000	Health
Belgium	576,035.00	Health & Nutrition
Italy	571,430.00	Education
Netherlands National Committee	538,215.00	Protection
Sweden	523,845.00	WES, Protection
Germany	342,857.14	Health & Nutrition, WES.
Norway	314,998.98	Health & Nutrition, WES, Protection, HIV/AIDS
Spanish National committee	141,343.20	Education, HIV/AIDS
Belgian National committee	107,643.00	Protection
<b>TOTAL</b>	<b>8,837,762</b>	

In addition, UNICEF received pledges from Belgium (600,000 EURO for health/malaria and a balance of 288,000 EURO for NFI and malaria).

### 4. IMMEDIATE PRIORITIES

Certain programmes such as HIV/AIDS and Protection have expanded their planned areas of intervention to include more activities targeting Sexual Violence, which is related to the increased reports on sexual violence received this year and the fact

that this is an issue that can not wait taking into consideration the devastating consequences for the victims, their families and sometimes whole communities. Funding is urgently requested to prevent further violations and mitigate the damage already made.

In general, education attendance levels are dangerously low with just over half of boys and less than half of girls attending primary school, with the problem remaining more acute in the rural areas where only 35% attend school. In urban areas on the other hand, schools are generally overcrowded. It was recently reported to UNICEF that in one province, Ngozi where the AGEI project is being piloted at the moment, teachers had refused to teach first year pupils due to gross overcrowding of pupils, with up to 400 of them in one classroom. In addition, many schools lacked any type of teaching support such as school materials and even basic school infrastructure such as classrooms, desks, chairs and water and toilet facilities. Many children were turned down during this year's reopening of schools in the provinces of Cankuzo, Makamba, Ngozi, and Bujumbura Rural due to lack of space in the available schools. In Cankuzo, about 500 children could not be admitted to school this year and had to return home, while 6,300 children abandoned school in Ngozi for similar reasons. Most of the trained teachers have refused to be posted in certain provinces such as Makamba and Rutana due mainly to insecurity and lack of residences for them. UNICEF's education activities target the most vulnerable children that without education are potential victims of human rights violations, poverty and recruitment to armed groups.

In co-operation with the Ministry of Health, WHO and NGOs, UNICEF is working to reduce the mortality due to malaria. Global funding for the new treatment is expected although humanitarian actors in Burundi are in need of funding in order to sustain treatment until the funds are received. UNICEF urgently needs funding for treatment covering three months in order to fulfil its commitments in the country.

<b>Table 3: PRIORITY REQUIREMENTS AS OF NOVEMBER 2003</b>		
<b>Project</b>	<b>Activity</b>	<b>Amount Required (US\$)</b>
1. Education	School enrolment of indigent children	1,000,000
2. HIV/AIDS (including sexual violence)	Regular HIV/AIDS programme, sensitisation and support to victims of sexual violence	200,000
3. Health /Malaria	Malaria treatment - "artesunate+amodiaquine"	400,000

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