

## Burundi

### Part 1: Situation update in the country

Burundi is among the poorest countries in the world. Its gross domestic product per capita of US\$ 320.10, up from US\$ 231.20 in 2010, according to the World Bank (2018), is among the lowest in the world. The country lags in terms of human development, ranking 185th out of 189 countries with limited improvement since 2010. According to the results of the latest open budget survey, budget transparency is low and several steps can be taken to improve participation and oversight.

Child poverty is widespread: 69 per cent of children live in households that do not have the means to meet their basic needs. In rural areas, where many children live, child poverty stands at a particularly alarming rate of 72 per cent, compared to 33 per cent in urban areas.

Burundi is the third most densely populated country in Africa (413 inhabitants per square kilometres) and 49 per cent of the population of 11.8 million are children under the age of 18 years; 23 per cent of the population is between 10 and 19 years old according to United Nations Population Fund 2017. Although in decline, the total fertility rate is high at 4.6 children per woman, and population is growing at an annual rate of 2.6 per cent. By 2050, the number of children is expected to exceed 6.7 million, up from 5.7 million today.

In this context, the pressure on education and health systems, and the demand for nutrition, water, sanitation and child protection is expected. The existing investment in children is not enough to address the spectrum of children's needs, including access to basic social services. The social protection system is relatively weak and limited in coverage.

Recurrent socio-political crises further compound the situation. Following events in 2015 that exacerbated vulnerabilities in the country, the overall situation has improved since 2017. But according to a 2018 United Nations Human Commission on Refugee report, over 367,000 Burundians, including over 150,000 children, are refugees in neighbouring countries, and 3.6 million (including 1.9 million children) were identified as in need of humanitarian support. During the year 2018, 55,000 Burundians refugees returned voluntarily to their country. Although the number of internally displaced people has decreased, over the past year 147,000 of them (including 95,000 children) have limited access to essential goods and services according to the International Organisation of Migration (2018). Regional instability forced 76,500 Congolese

refugees to seek asylum in Burundi in 2018.

Burundi has the highest stunting rate in the world: 56 per cent of children are stunted based on National Institute for Statistics and Economic Analysis, ISTEERU (2017). Boys are more affected than girls (59 and 52 per cent respectively), and rural children are more at risk of being stunted than their urban counterparts (59 and 28 per cent respectively). The geographic disparity is also noted for acute malnutrition: 0.3 per cent of urban children are acutely malnourished and 1 per cent of rural children. In addition to improvement in maternal education and household wealth, mothers' nutritional knowledge and feeding care practices, as well as access to safe water and sanitation, are important for achieving Sustainable Development Goal 2.

Although the situation has improved since 2010, Burundi still has high rates of under-five, infant and neonatal mortality at 78, 47 and 23 deaths per 1,000 live births respectively (down from 96, 59 and 29 respectively in 2010) (DHS/ISTEERU). Improvements since 2010 are the result of better access to health care, which has been free since 2006 for women who are pregnant and children under five years. There has also been improved coverage of health services, better trained health workers, nearly universal vaccine coverage (above 90 per cent), and the inclusion of acute respiratory infections, diarrhoea and malaria in the integrated management of childhood illness and integrated community case management strategies.

Therefore between 2010 and 2017, the proportion of births in health facilities rose from 59.5 to 83.9 per cent, and the proportion of newborns receiving postnatal care within two days of delivery increased significantly from 7.5 to 49.4 per cent according to ISTEERU. Considerable progress was made in reducing the number of paediatric HIV cases and improving the coverage and quality of emergency obstetric care. Since 2010, new HIV infections decreased by at least 54 per cent and AIDS-related deaths fell by half.

However, still more newborn death could be avoided through adequate birth spacing, appropriate preventive health behaviour and timely care, and training health workers.

Despite progress, continuing sustained investment will keep and accelerate the progress made in child and maternal health. In real terms, the 2017 state health budget was below its level in 2010. The sector remains highly dependent on external partners.

Following an ambitious reform of basic and lower secondary education, which abolished school fees and created a free nine-year basic schooling cycle for children ages six to 14, all Burundian children now have equal access to the first year of basic school, irrespective of province of origin. Gender parity was attained for the first three cycles (grades 1-6) of basic schooling, with girls outnumbering boys in the fourth cycle (grades 7-9): 52.7 per cent girls in 2015-2016 compared to 46.7 per cent in 2012-2013 (Ministry of Education 2015-16). The retention rate between grades 1 and 9 slightly increased from 46.8 in 2012 to 49.5 per cent in 2016, and it is higher for girls than for boys (54 against 45 per cent).

Despite achievements, however the drop-out rate in primary school (grades 1-6) remains high at around 8 per cent according to the Ministry of Education 2015-16. Quality of education is a challenge due to over-crowded classrooms (74 students per teacher on average), lack of educational material, and limited learning hours due mainly to the double-shift system.

While Burundi was free of epidemics for most of 2018, the surveillance system started detecting cholera cases by December 2018. At the end of the year a total of 102 cases had been identified. Partners, including UNICEF Burundi, supported the Government to control the situation. Following Ebola Virus Disease outbreaks in Democratic Republic of the Congo, in May (in Equator Province) and August (in North Kivu), the World Health Organisation recommended that neighbouring countries assess the situation and take action on Ebola preparedness, and develop national contingency response plans.

Burundi's preschool gross enrolment rate currently stands at only 10.2 per cent, and access to preschool education is unequal depending on location and household income, with poor and rural children the most affected (RESEN 2017). In combination with other child development indicators such as stunting, child survival in Burundi will need to invest in early childhood development to achieve Sustainable Development Goal 4.2.

Although the Government dedicates around 20.5 per cent of its annual budget to education, the budget has in real terms decreased by about 20 per cent since 2015 with only 2.2 per cent spent on investment. With the school-age population (three to 17 years old) projected to increase by 9 per cent by 2030, the lack of investment could start having an impact on the resilience of the education system and roll back gains made in the past decade.

Violence against children, including corporal punishment and sexual violence, remains common in the family environment, schools and communities, with girls particularly affected by sexual abuse and early pregnancies. Around 25.9 per cent of boys and 31.3 per cent of girls aged 15-19 years experienced some form of physical or sexual violence in the year prior to the latest Demographic and Health Survey. Nearly one in three children (30.8 per cent) between the ages of five to 17 years are involved in labour activities (8.3 per cent of urban and 33.2 per cent of rural children), and 68.8 per cent of working children do so in hazardous conditions. Children in need of special protection include those living and working on the street, ethnic Batwa children, children living with disabilities, children deprived of a family environment and forcibly displaced children.

Around 83.5 per cent of children aged under five years old are now registered at birth, of whom 66.2 per cent have a birth certificate. A birth certificate is the only document that allows children access to social services; those without are at risk of statelessness and of missing out on development opportunities. Many children without a birth certificate are in the poorest quintile (52.1 per cent) and/or live in rural areas (64.5 per cent).

Burundi has a well-developed community-based child protection system and a solid legal framework to protect its children. However, current laws are not being implemented to their full

extent. The resources earmarked for child protection are low. In 2017, only an estimated 1.5 per cent of the national budget was allocated to programmes and departments related to child protection.

Although 82.8 per cent of the population (80.9 per cent rural; 98.1 per cent urban) had access to improved sources of drinking water in 2017, only 48 per cent of the population could obtain safe drinking water within a 30-minute round-trip (ISTEEBU 2017). While the proportion of the population using surface water drastically fell to 4 per cent, the proportion resorting to unimproved sources remains at 19 per cent in rural areas. The main obstacle to accessing safe drinking water in rural areas is the shortage in service coverage. The lack of water points in public facilities, including schools and health centres, remains widespread: more than half of schools lack water points (Ministry of Education 2015-16); in rural areas, only 70 per cent of health facilities have access to an improved water source within a distance of 500 metres.

Access to non-shared improved sanitation remains limited although the situation has slightly improved since 2010. In 2017, 39 per cent of the population (40 per cent rural; 38 per cent urban) were using improved toilet facilities against 31 per cent in 2010 (ISTEEBU 2017). Overall, the main barriers to access to basic sanitation services include low sanitation availability, lack of maintenance of existing infrastructure, and difficulty sustaining community mobilization to achieve open defecation-free status (UNICEF/Action Aid 2012).

Only 5.3 per cent of the total population has a washing facility with soap and water at home according to the statistics institute (2017). Moreover, only 30 per cent of basic schools have a hand washing station, and even where they are in place soap is often not available (Ministry of Education 2015-16). The main barriers to children's access to hygiene include a general lack of awareness of the importance of hygiene and hand washing; and the cost of most hygiene items (MoTIC/UNICEF 2016).

The water, sanitation and hygiene (WASH) sector in Burundi is underfunded and relies heavily on foreign support. To achieve the Sustainable Development Goal 6 targets, Burundi will need to invest US\$1.3 billion between 2015 and 2030.

Surveys have found that there is a widespread feeling of disempowerment among adolescents, due to hardship, deprivation and limited space for self-expression. The lack of involvement in youth associations and civil society organizations may, in part, be due to Burundi's complex history of violence and political manipulation of youth groups (SFCG/UNICEF 2015).

Children's right to information is not well documented in Burundi. However, a partial set of indicators suggest that children and adolescents often lack the life skills and information needed for meaningful participation. A 2015 Swiss Tropical and Public Health sexual and reproductive survey of adolescents revealed that only 50 per cent of 15 to 19 year olds received family planning information during their schooling. Around 63 per cent of girls and 48 per cent of boys consider domestic violence acceptable behaviour.

In the last quarter of the year, the Government suspended international non-government organizations operating in Burundi, requesting them to comply with the January 2017 law on international non-government organizations and renew accreditation. At the end of the year, 84 organizations had complied with required criteria and restarted operations. Other international non-government organizations, including some of UNICEF's implementing partners, left the country.

## Part 2: Major Results including in humanitarian action and gender, against the results in the Country Programme Documents

The year 2018 marked the end of a long programme cycle in Burundi. Operating within the context of a protracted crisis, UNICEF Burundi, in collaboration with its partners, was able to improve the lives of children and women over the 2010-2018 Country Programme cycle, with a focus on the nexus between humanitarian and development interventions, targeting the most vulnerable girls and boys and building resilience of communities. In this report, while 2018 results are highlighted, references are also made to achievements during the programme cycle.

### Goal area 1. Every child survives and thrives

In 2018, UNICEF Burundi's response focused on supporting national health and nutrition systems, in collaboration with United Nations agencies and non-governmental organizations. Most targets set for 2018 were met.

UNICEF Burundi introduced a comprehensive strategy on sexual, reproductive, maternal, newborn, adolescent and child health (the Kiramama project); refurbished selected health facilities and hospitals; and strengthened the skills of health personnel to deliver quality services. The strategy was implemented in collaboration with the United Nations Population Fund and the World Health Organization.

Administrative data from September 2018, showed that 78 per cent of births were assisted by skilled attendants and thus the target set for the skilled delivery programme (80 per cent) was almost met. The 2017 Demographic and Health Survey had recorded 85 per cent of births assisted by a skilled attendant. The rise in attended births was likely to have contributed to the fall in maternal mortality from 712 to 334 per 100,000 live births between the two surveys. Management of obstetric and neonatal emergencies is the main challenge to maternal health in Burundi.

Net progress was made nationwide on the proportion of newborns exposed to HIV who receive antiretroviral medication to prevent mother-to-child transmission. Overall coverage among women who are pregnant or lactating women increased from 42 per cent to 84 per cent between 2010 and 2017. Antiretroviral prophylaxis coverage for children at risk was also high at 88 per cent. In UNICEF-supported areas (90 sites out of 785) the percentage of children born to mothers living with HIV who receive antiretrovirals increased from 48 per cent in 2014 to 95 per cent in 2017 and 100 per cent in 2018.

UNICEF Burundi and partners such as the Joint United Nations Programme on HIV/AIDS; the Global Fund to Fight AIDS, Tuberculosis and Malaria; the United States Agency for International Development; and World Health Organization were successful in mobilizing resources to support procurement of antiretrovirals and test kits; capacity building for health professionals; demand creation and nutrition/psycho-social community support in partnership with CARITAS. As sector lead for prevention of mother to child transmission, UNICEF Burundi was proactive in maintaining a functional coordination mechanism.

On nutrition, results were reported for micronutrient supplementation programmes, as well as treatment of severe acute malnutrition. In 2018, UNICEF continued partnership with the Ministry of Health to conduct twice-yearly mother and child health weeks to deliver a package of high-impact interventions for immunization and nutrition. The results from the first round of the campaign indicated that 1,466,919 children (748,129 girls and 718,790 boys) aged six to 59 months (of whom 1,328,335 were aged 12 to 59 months) received vitamin A and albendazole (677,451 girls and 650,884 boys received deworming) respectively.

Between January and October, 42,906 children under five years old with severe acute malnutrition (22,225 girls and 20,681 boys) were admitted to and treated in health facilities across the country. This is 87 per cent of the expected national caseload, with an admission trend similar to 2017. Despite the burden, performance indicators were maintained within standards (87 percent cured, 1 per cent deaths, 5 per cent default, and 7 per cent non-respondent). With development partners' support, including Canada, Germany, the Netherlands, Sweden and the USAID Food for Peace, UNICEF Burundi supported the Ministry of Health to procure supplies, organize and conduct campaigns and run promotion and demand-creation activities at community level in high-burden provinces such as Makamba, Rutana and Ngozi. To improve treatment quality, UNICEF Burundi will strengthen support and formative supervision in collaboration with the Ministry of Health.

In collaboration with the Ministry of Health, the World Food Programme and the Food and Agriculture Organization, with funding from the Swiss Development Corporation, UNICEF Burundi implemented a multi-faceted community-based model in Ngozi Province to address chronic malnutrition. Under the Scaling-Up Nutrition secretariat leadership, UNICEF Burundi with the support to the UNICEF Eastern and Southern African Regional Office supported the development of a United Nations agenda to improve response and increase synergies to reduce chronic malnutrition.

The target for immunization coverage (above 90 per cent) and reversing the downward trend was met with the latest evidence suggesting that the country will meet 95 per cent coverage for key antigens. However, according to administrative data soon validated under the Joint Reporting Form, Diphtheria, Tetanus and Pertussis vaccine coverage fell from 96 per cent in 2010 to 90.1 per cent in 2018 reaching only 310,649 (92 per cent) of children aged 0-11 months as of October. This reflected the fall in coverage of most vaccines. Only 59 per cent of health districts had at least 80 per cent coverage of diphtheria, tetanus and pertussis vaccines for children under one year old between January and September (Ministry of Health). With

WHO, Gavi, the World Bank and partners, UNICEF Burundi supported the Ministry of Health with the supply chain, cold-chain monitoring, programme management capacity and organization of campaigns such as mother and child health weeks, a combined measles and rubella vaccine campaign, and a nationwide meningococcal campaign. The latest World Health Organization/UNICEF estimates show that satisfactory progress was made in the introduction of measles-containing vaccine, which is now at 90 per cent for the first dose and 75 per cent for the second dose.

Following the detection of cholera by the surveillance system on December 23rd, partners, including UNICEF, assisted the Government to control the situation. Following Ebola Virus Disease outbreaks in the Democratic Republic of Congo in May (in Equator Province) and August (in North Kivu), UNICEF Burundi and partners under WHO leadership, supported the Ministry of Health to design, implement and monitor the national Ebola preparedness and response plan. UNICEF Burundi is continuing resource mobilization efforts to support the country to reach full preparedness for a worst-case scenario.

## **Goal area 2. Every child learns**

Nearly 2,500,000 children were enrolled in basic education in 2018, with the primary education gross enrolment ratio falling from 119 per cent in 2012 to 110 per cent (demonstrating improved efficiency), and the pre-primary education gross enrolment ratio increasing to 10.2 per cent from 4.8 per cent in 2014 (RESEN 2017). However, the primary education completion rate has stagnated at 62 per cent, mainly due to increasing poverty.

In 2018, in close collaboration with the Ministry of Education, over 1,500,000 children benefited from school kits provided through the 'back-to-school' campaign supported by UNICEF and partially funded by the Global Partnership for Education. UNICEF and Global Partnership for Education built 136 new classrooms, providing 5,400 children (including 2,970 girls) with an enhanced and safer learning environment. All the new schools were equipped with benches and desks as well as gender-segregated latrines to reduce gender-based violence and facilitate menstrual hygiene management; access ramps and adapted toilets for children with disabilities; water points; hand washing facilities; solar panels; and lightning rods. Most of the schools were built with environmentally-friendly mud-compressed uncooked bricks. In addition, 11,475 school children (including 6,311 girls) benefited from the rehabilitation of gender-segregated latrines and the establishment of water points in 17 schools in Bujumbura Mairie and Muyinga provinces. These efforts contributed to broaden access to quality education while improving retention in school, in particular for girls.

A total of 7,500 children (including 4,124 girls) in 14 basic education schools benefited from solar panels, which improve learning conditions. Two hundred and seventy children, of whom a third have disabilities, benefited from an adapted inclusive education centre in the capital Bujumbura.

Although learning outcomes have not been measured since 2014, partners have continued to

provide technical and financial support to the Ministry of Education toward curriculum reform to improve the quality of education. During the programme cycle, approximately 1,000,000 children nationwide benefited from production of school manuals distributed for Cycle 4 (grades 7-9). The capacities of 6,000 school directors and education inspectors were strengthened for the new Cycle 4 (including 2,500 teachers and 1,500 head teachers in 2018 alone) through training provided by UNICEF Burundi, benefiting over 230,000 children in Cycle 4 with higher quality teaching.

Through UNICEF advocacy, 965 child-mothers, originally banned from returning to school, were successfully reintegrated into the formal education system in 2018.

To improve school environment, the capacity of 2,358 members of school management committees in 416 schools in Kirundo and Muyinga provinces (both north-east) was reinforced, benefiting over 400,000 children. The committee members were trained on the new integrated module for school performance monitoring including attendance, gender-based violence prevention, preventing corporal punishment, and menstrual hygiene management, among other aspects, as well as infrastructure maintenance.

In 2018, 81,000 children (including 44,540 girls) benefited from UNICEF Burundi's support for improving access to and quality of preschools through rehabilitation and equipping of 15 classrooms, training of 992 educators and delivery of pedagogical materials to 1,350 preschool centres.

In response to humanitarian situations, 35,258 children affected by humanitarian situations (including 17,089 girls) received learning materials provided by UNICEF. In 50 'schools as zones of peace' in Bujumbura Mairie, Rumonge and Makamba provinces, 33,750 children (including 17,875 girls) benefited from a safe school environment. The capacities of 400 education staff and the school management committees were increased on gender-based violence at school, the importance of attending school, menstrual hygiene management and rules for "living together and respecting diversity". How to recognize and act in the presence of unexploded devices or armed groups was reinforced.

UNICEF Burundi partnered with non-government organizations such as Handicap International, Libraries without Borders (Bibliothèques Sans Frontières), Volunteer Association for International Service (Association des Volontaires pour le Service International), Diocesan Organisation for Mutual Aid and Integral Development of Muyinga (Organisation Diocésaine pour l'Entraide et le Développement Intégral de Muyinga), World Vision International, Jesuit Refugee Services, Youth Globe, Refugee Education Trust, Forum of African Women Educationists, Hope 87 and others in host communities to reintegrate internally displaced and returning children. As a result, 7,611 children (including 3,804 girls) benefited from school materials and catch-up classes to support their reintegration into the formal education system.

In 2018, UNICEF leveraged its role as education sector lead and as grant agent for the Global Partnership for Education working in collaboration with national and development partners. The

Local Education Group, a key mechanism for sector coordination composed of all education actors and stakeholders, including government, donors, non-government organisations, trade unions and parents, was revitalized. Members contributed to the elaboration of the National Education Transition Plan and its action plan. They also supported a study on risks and vulnerabilities facing the education sector and finalized the Education Sector Country Status Report. The new strategic education package, developed and endorsed by Local Education Group members, is a renewed stakeholder commitment to completing basic education reform (also known as fundamental education reform in Burundi). These efforts and the cooperation between the Ministry of Education, l'Agence française de développement and UNICEF secured a US\$46.9 million Global Partnership for Education grant for utilization by the end of 2021.

The National Education Transition Plan demonstrates the Ministry of Education's renewed determination to reach its objective under Sustainable Development Goal 4, to provide all children with basic equitable education. The Ministry of Education reinforced its engagement by including in the National Education Transition Plan "at least one year of pre-primary education" for all children. The education management information system was supported; in 2018, for the first time it produced the annual census three months before the school year commenced, thereby improving sector planning.

One area that requires attention is budgeting for education. Although the Government's basic education budget has ranged between 20 to 25 per cent of its annual budget in the last four years, budgeting for sub-sectors – other than teacher salaries – remains largely insufficient. The preschool education sub-sector only receives 0.03 per cent of the national education budget. Moving forward, UNICEF and its development partners will work with national stakeholders and counterparts to increase investment in this important sector.

### **Goal area 3. Every child is protected from violence and exploitation**

In 2018, UNICEF continued to strengthen systems to improve child protection at the national and community levels, while developing models of programming to address the needs of the most vulnerable girls and boys including children living on the streets; displaced, refugee, and returnee children; boys and girls who come into contact with the law; and children without birth certificates.

Since the country programme cycle began in 2010, birth registration has increased by 8.3 percentage points to 83.5 per cent in 2017. In 2018, UNICEF Burundi and its partners successfully advocated for the Ministry of Interior, Patriotic Training and Local Development to waive fees charged for late registration (15 days after the date of birth), addressing an obstacle that the most vulnerable children often face to register. To take advantage of this waiver, UNICEF Burundi supported the Ministry to organize a birth registration campaign targeting 200,000 new registrations: 516,530 children were identified for registration and by the end of 2018, 394,941 children had been provided with birth certificates.

While the overall number of children living in residential care declined from 3,514 in 2014 to

2,876 in 2018, children are still unnecessarily in institutions, primarily due to family fragility. A lack of enforcement of the national deinstitutionalization strategy was a challenge, due to limited human resource capacity of the Department of Children and Families in the Ministry of National Solidarity, Repatriation, Nation Building, Human Rights and Gender. Despite the challenge, community-based social protection of orphans and vulnerable children was strengthened with the creation of 3,424 solidarity groups (known locally as NaweNuze groups), an increase from 700 groups in 2014. In 2018, these solidarity groups reached 122,348 children (including 60,049 girls) with school enrolment support, provision of food and clothing and other services.

Since 2014, UNICEF Burundi has leveraged environmentally-friendly innovation with 'projet lumière' (the light project), which is a micro-enterprise model to provide off-grid energy supplies to rural households. In 2018, the project reached 15,922 households (up from 9,922 households in 2017) with a clean and less toxic home lighting source to assist children to do homework and other activities. A project evaluation provided valuable recommendations to improve the business model.

Child protection committees at provincial, commune and village levels are frontline responders in the protection of children. In 2018, 132 new child protection committees were created in Makamba and Rutana provinces, bringing the total number created since 2010 to 2,500 in seven provinces. The child protection committees are under the direct supervision of the provincial government child protection structures. Government social workers conducted regular follow up and training of over 17,000 committee members. With UNICEF technical support, social workers linked the committees with the NaweNuze groups, mutually reinforcing and sustainable to create a protective environment for children at the community and family levels.

Although the number of people requiring humanitarian assistance fell overall in 2018, UNICEF Burundi and its partners continued delivering critical child protection services to 83,471 children (including 33,080 girls). Among them, 47,429 displaced and returnee Burundian children and refugee children from the Democratic Republic of Congo (including 18,067 girls) participated in activities and accessed services available in 20 child-friendly spaces. UNICEF Burundi continued to coordinate the child protection working group and supported the sector to bridge the humanitarian development divide.

In addition, 1,710 children who had been working or living on the street, and arrested during police roundups, were released and reunified with their families through UNICEF Burundi and partners' advocacy and support. A total of 6,121 children (4,064 boys and 2,057 girls) benefited from family tracing and reunification. Furthermore, 24,324 children (13,166 boys and 11,158 girls) benefitted from community reintegration programmes including economic reintegration and enrolment in school. Access to verify child rights violations improved in 2018, allowing for documentation and verification of 631 violations, compared with 112 verified cases in 2017 when partners had constrained access due to political sensitivity. Meanwhile, 390 victims were referred to appropriate services based on the UNICEF-supported and USAID-funded child

protection monitoring mechanism implemented by Fédération Nationale des Associations Engagées dans le Domaine de l'Enfance au Burundi (FENADEB) child protection monitors.

The Government of Burundi, with support from UNICEF and partners, adopted the 2017 revision of the 2009 Criminal Code and the 2018 Code of Penal Procedure, reinforcing mechanisms to protect children from abuse, exploitation and violence. Despite developments in the policy environment, the human and financial resources of the Ministry of Justice remain limited, thus constraining implementation of protective policies and response.

In 2018, 338 minors in detention benefited from legal assistance, leading to the release of 147 of them. UNICEF Burundi with civil society partners contributed with training of judicial actors and mobile courts organized by the general directorate of penitentiary affairs. In addition, 126 children detained in Rumonge and Ruyigi juvenile rehabilitation centres benefitted from vocational and life skills training, psychosocial support, counselling and post-release reintegration support. UNICEF Burundi's protection section works with more than 19 partners, many international and national non-government organisations in Burundi, with funding from a range of donors such as USAID, the Governments of Belgium, Germany and Sweden, and the Spanish Committee for UNICEF.

#### *Goal area 4. Every child lives in a safe and clean environment*

Over the current programme cycle, Burundi made significant progress in the water, sanitation and hygiene (WASH) sector, resulting in an increase in the proportion of the population using improved safe drinking water sources from 72 per cent in 2010 to 82.8 per cent in 2017. In 2018, 55,290 additional people (including 28,280 women) in Ruyigi and Cankuzo provinces gained access to improved drinking water, through construction or rehabilitation of 84 water points implemented in collaboration with partners ZOA and Norwegian Church Aid as well as Action Intégrée pour le Développement et la protection de l'Environnement (AIDE). The implementation strategy focused on raising community demand for improved drinking water, and community participation in programme design, implementation and water management.

To tackle open defecation in rural areas, UNICEF Burundi partnered with World Vision International to scale up community-led total sanitation coverage, making progress in terms of upstream advocacy and implementation on the ground. In 2018, 528 sub-hills were evaluated as open defecation-free (bringing the total number of people living in certified open defecation-free communities to 639,990 in 2,228 sub-hills). Open defecation-free status contributes to improve environmental hygiene and reduces the risk of cholera outbreaks. To ensure the sustainability of the results, of 33 local sanitation associations in sanitation marketing and commercial management of income-generating activities were established and trained. As a result, communities developed and implemented 332 post-open defecationfree action plans at sub-hill level to sustain status by improving and maintaining sanitation facilities.

Since the beginning of the programme cycle, about 169,213 girls and boys gained sustainable access to safe drinking water in 300 schools (122 per cent achievement), while about 255,757

girls and boys at 200 fundamental schools gained access to basic sanitation (127 per cent achievement) through the construction of gender-separated, with hand washing, facilities, including for persons with disabilities. This includes 50 schools in the provinces of Cibitoke, Bujumbura Mairie, Bujumbura Rural (west), Makamba (south), Ruyigi, Cankuzo (east), Muyinga (north east) and Kirundo (north), where in 2018 basic water was provided reaching 25,124 school children (including 12,831 girls). In addition, 45,757 school children (including 23,336 girls) were provided with sex-segregated improved latrines, including equipment for menstrual hygiene management. With UNICEF support, the Department of Health, Hygiene and Sanitation Promotion (under the Ministry of Health) strengthened the capacity of school officials and members of hygiene clubs in 96 schools on hygiene practices such as hand washing with soap, use and cleaning of sanitation facilities, menstrual hygiene management, and safe storage and treatment of drinking water.

During celebrations of Global Hand Washing Day, over three million people were reached with messages on hand washing with soap and appropriate sanitation and hygiene practices in schools and communities, using mass media including television, radio campaigns and newspaper messages. The increase in reach was needed to respond to an unexpected influx of refugees from the Democratic Republic of the Congo as well as Burundian returnees from Tanzania.

In 2018, UNICEF Burundi, as sector lead for WASH in emergencies, addressed WASH-in-emergency needs and helped build resilience of the population in cholera-risk areas along Tanganyika Lake. A total of 15,000 refugees from Democratic Republic of the Congo and 20,000 Burundian returnees from Tanzania benefitted from distribution of hygiene kits and provision of water supplies. UNICEF Burundi focused on cholera prevention and response by promoting hygiene at community level with door-to-door sensitization on hygiene practices, and providing safe drinking water to communities in high-risk areas.

In 2018, UNICEF Burundi was designated the coordinating agency of technical and financial partners in the WASH sector. UNICEF strengthened the enabling environment for the WASH sector through the dissemination of strategies, including pro-poor water and community-led total sanitation strategies. UNICEF Burundi supported stakeholder dialogue on water service delegation, which successfully engaged communities, water boards and government bodies in 12 communes. This led to an agreement signed to delegate sustainable water management responsibilities and for equitable community ownership of water services.

To overcome data availability challenges, the Ministry of Hydraulic, Energy and Mines received technical assistance to establish a WASH sector monitoring system. UNICEF Burundi's advocacy enabled a review to integrate climate resilience in existing WASH programming plans, which is increasingly important for the country. In 2019, UNICEF Burundi will continue to support the integration of climate resilience into WASH policies and strategies.

The key challenges in the WASH sector was the lack of funding (both domestic and foreign) and, in turn, the limited government support to communities that ensures the sustainability of

infrastructure. UNICEF Burundi will continue to advocate to mobilize and leverage additional financial resources for the sector.

### **Goal area 5. Every child has an equitable chance in life**

The Government of Burundi finalized the National Development Plan 2018-2030, which outlines key priorities in alignment with the Sustainable Development Goals. UNICEF Burundi is currently provides technical assistance to the Government to develop a communication plan for the National Development Plan, to ensure that the priorities are communicated to the wider public.

Over the current country programme cycle, UNICEF Burundi provided technical and financial support to the National Institute for Statistics and Economic Analysis (Institute de Statistiques et d'Etudes Economiques du Burundi) to strengthen data collection and analysis; and also to the national monitoring and evaluation systems for data relevant to children and women. In this regard, the secondary analysis of Demographic and Health SurveyIII 2016/17 was conducted in collaboration with United Nations Population Fundand United Nations Women, as well other development partners.

The data published closed a gap on the situation of children and was, and continues to be, used to develop strategic planning documents, such as Sustainable Development Goal baseline survey, the National Development Plan 2018-2030, the 2019-2023 United Nations Development Assistance Framework (UNDAF) and the 2019-2023 Government of Burundi – UNICEF Country Programme of Cooperation.

UNICEF Burundi engaged in public finance for children with all relevant stakeholders. Within this framework and in collaboration with the World Bank, a public expenditure review in education was conducted to be finalized in early 2019. The results, along with previous results, will guide programming, provide a basis to engage with the concerned sectors and to advocate for better financing of social sectors more broadly. UNICEF continued its partnership with the Ministry of Finance to engage on transparency, efficiency and equity of spending in social sectors, and is working to strengthen collaboration with ministries in this sector. To this end, a training was organized bringing together participants from the Ministry of Finance and social ministries on public finance for children.

Coordination of national monitoring systems was improved through financial support to the National Technical Statistics Commission. The Commission, which is under ISTEEBU leadership, brings together line ministries to analyse data collection methodology and to validate national datasets before publication. At the decentralized level, UNICEF provided financial and technical support to the Ministry of Decentralization and Institutional Reform to strengthen decentralized monitoring and evaluation capacities in two pilot provinces (Gitega and Kirundo). In both provinces, a functional system is in place to measure progress against the communal plans for community development.

Over the past two years, UNICEF Burundi provided technical and financial assistance to strengthen Burundi's social protection system. Thus, technical assistance was extended to the Permanent Executive Secretary of the National Social Protection Commission to strengthening coordination as well as monitoring and evaluation capacities. Specifically, technical assistance was provided to review the Social Protection Strategy Framework; to develop a five-year budgeted action plan; and to develop a monitoring and evaluation manual.

UNICEF Burundi provided technical assistance to the Government in the design and implementation of a cash transfer programme funded by the World Bank, launched in April 2018. In addition to designing the programme, UNICEF Burundi contributed to the technical discussions on the registry of beneficiaries, the development of a monitoring and evaluation system and the design of the impact evaluation. In 2018, the programme reached 24,000 vulnerable households in selected provinces with bi-monthly transfers, improving their capacity to meet their basic needs.

To ensure youth and community engagement, 69,167 U-Reporters (including 11,393 women and girls) were registered. They provided 47,663 contributions to four polls on the International Day of the African Child, International Women's Day, Ebola information and volunteering to combat malaria in 2018. Results were used to assess knowledge and attitudes, as well as to share information and behaviour messages back to the U-Reporters. For example, the malaria poll demonstrated limited knowledge on the use of mosquito nets. UNICEF sent informative messages to U-Reporters and broadcast information on mosquito net use to the wider public through social and traditional media, especially radio.

UNICEF Burundi continued to work with child journalists, the National Children's Forum and the Communal Child Forums to strengthen child participation and to give children a voice. In 2018, in partnership with the national radio-television service of Burundi (La Radio diffusion-Television Nationale du Burundi), UNICEF mentored 13 child journalists (six girls and seven boys) from the fourth cohort. Since the beginning of the programme cycle, 84 child journalists were trained with UNICEF's support. In 2018, the effort to strengthen children's voices resulted in the production and broadcast of 162 radio programmes on child rights. Although there is no quantitative analysis, qualitative data demonstrated that the programmes generated interest and change in the communities: some listeners downloaded the broadcasts to their personal phones for unlimited access; a local radio station (Humuriza FM), targeted at young people, created a Facebook page where the programme was accessible and scored an average of 20,000 daily views. Further anecdotal evidence by local authorities suggested that the radio programme helped increase birth registrations.

The National Children's Forum in Burundi (comprised of 36 children and adolescents) advocated for child participation and for policies that protect the rights of children, and disseminated information on the situation of children. In addition, 246 members of communal child forums in 10 provinces strengthened capacities to identify and refer violations of child rights. UNICEF Burundi used social media to voice concerns of children and young people: UNICEF regularly published on Facebook and had 33,898 followers in 2018. Other channels

used include Instagram and YouTube. In addition, the child journalists created a WhatsApp group to report on cases of child rights' violations.

In 2018, UNICEF Burundi strengthened programming and mainstreaming of adolescent development. With the Ministry of Education and civil society organizations, these programmes benefited 297,345 out-of-school adolescents (about 50 per cent girls) with life skills' programmes on topics such as HIV, early pregnancy, gender-based violence prevention, peace-building and resilience. Of these, 2,760 (including 1,380 girls) increased their economic self-reliance by engaging in solidarity groups to exercise newly-acquired life skills and conduct income-generating micro-projects. Vulnerable adolescent girls and boys were empowered to deal with challenges related to health, civic engagement, peacebuilding and resilience, and a network of 171 adolescent peer educators (including 93 girls) was established. They reached 27,463 peers (including 14,466 girls) to develop their knowledge and skills and empower them to make informed decisions about health, or social cohesion and gender equality in their communities.

The peacebuilding component reached 15,406 youths (including 7,958 girls) through narrative and interactive theatre performances to identify challenges and find and implement solutions. A recurrent identified challenge was poverty and a lack of social cohesion; thus 1,559 adolescents (including 809 girls) benefited from traditional values of 'Ubuntu' (negotiation, peaceful conflict management and emotional management). They initiated individual and small group peace-building action plans to complement commune-level plans and, instead of the original target of 234 plans, 1,161 plans were initiated and developed by adolescents.

Recognizing the importance of engaging with children in their second decade of life, the new country programme in 2019 will have an adolescent empowerment and community resilience programme. With this new pillar, UNICEF Burundi will engage with national and development partners to test and take to scale innovative social and behavioural change communication interventions, as well as life skills and social entrepreneurship programmes designed to support adolescence for a successful transition to adulthood. Thus, while the adolescent programme will still use behaviour-change communication/communication for development as a strategy, key family practices interventions and demand-generation will be mainstreamed in sector programmes.

UNICEF Burundi ensured that new construction (schools, WASH and health centres) take the needs of children with disabilities into account. In 2018, an inclusive education centre was constructed in Bujumbura that is expected to benefit 270 children, of whom a third have disabilities. This centre has nine classrooms, all equipped with disability-adapted bench desks, and two training rooms to provide inclusive teacher training for all teachers nationwide. This pilot school will address a gap in learning for children with disabilities, and raise awareness on the need for facilities for children with disabilities.

## **Gender**

UNICEF Burundi responds to gender equality across its programmes. UNICEF advocated for

young mothers to stay in school with support to the reinstatement and functioning of the national commission for the reintegration of child-mothers under the Ministry of Education. UNICEF worked with USAID to integrate young-mothers in one of its reintegration projects 'Agyw/MwigemeKerebukaUrabishoboye' ('girls, wake up, you can do it'). A total of 965 child-mothers were reintegrated into the formal education system.

Repetition rates for lower basic education grades (1-6) are 23.4 per cent for girls and 25.4 per cent for boys (Ministry of Education 2016-17). This slightly more favourable rate for girls is, however, reversed in grades 7 to 9, where 25.4 per cent of girls and 23.3 per cent of boys repeat grades. Issues around reproductive health (including menstrual hygiene), safety in and around schools and opportunity cost might be some of the actors explaining this trend.

The Government's child help line, supported by UNICEF, played a role in the reporting and referral of child protection and gender-based violence cases to appropriate services – as well as in documenting trends of violence, abuse and exploitation of children – based on the numbers of verified reports. Through a UNICEF and CARITAS partnership for the prevention of mother-to-child transmission of HIV, a referral system was established to strengthen medical and psychosocial management of gender-based violence cases. This was done in 60 CARITAS health units in 13 provinces (out of 18).

UNICEF Burundi and implementing partners supported the Ministry of Education to provide basic WASH services in 50 schools. A total of 45,757 school children (23,336 girls and 22,421 boys) were provided with sex-segregated improved latrines. The latrines built were accompanied by menstrual hygiene management equipment, and menstrual hygiene management was incorporated in the school training package. This initiative is expected to support adolescent girls to stay in school.

A radio contest entitled 'Fight against gender-based violence at school' was broadcast nationwide to celebrate International Girls' Day. To improve gender balance in radio group members and community agents, a mechanism will be established to encourage female members' election and female agents' identification. Incentives will be developed based on 2019 knowledge, attitudes and practices study recommendations.

Data and evidence are the backbone of programming. UNICEF Burundi took steps to ensure disaggregated data and analysis to strengthen gender equality. A gender programmatic review in 2017 was a basis of the new Country Programme 2019-2023 development, as well as the situation analysis, which highlights areas for strengthened gender equality work.

## **Management**

In 2018, UNICEF Burundi addressed challenges of office effectiveness and efficiency identified in the peer review conducted by the UNICEF regional office. All action points were addressed. Key performance indicators were monitored monthly, allowing the country office to ensure high performance for most indicators. Regular supply monitoring ensured that all items left the warehouse before reaching one year in storage. Efforts were made to streamline office

processes with development of standard operating procedures related to travel, fraud, HACT, field monitoring and programme cooperation agreements. The Country Programme Management Plan process, outlining the office structure for the new country programme, was conducted in a participative manner.

While high turnover of staff and acquisition for a francophone non-family duty station were challenges in 2018, timeliness of national staff recruitment improved, meeting the 90-day benchmark at the end of the year. Vacancy ratio, which stood at 25 per cent by the first quarter of 2018, was reduced to 6 per cent in the second quarter, with full staffing of the human resource unit as part of the contributed.

### Part 3: Lessons learned and constraints

#### **Limited disaggregated data and monitoring**

In 2018, UNICEF in collaboration with United Nations agencies continued to support the Government to generate and analyse quality data, such as secondary analysis on Demographic and Health Survey III and the Multiple Overlapping Deprivation Analysis (MODA).

This data is essential to monitor the situation of children and women in Burundi, and key for designing and monitoring programmes and measuring progress and results. As evidenced during the 2018 UNICEF and government monitoring visit to the field, disaggregated data is still missing at the commune level in most sectors. This impedes effective targeting of the most vulnerable populations. Gender-disaggregated data was not consistently available, including in sectors where information management systems are in place, notable in the education sector where it's challenging to report on key indicators disaggregated by sex.

In child protection, data availability is the greatest challenge. Challenges in monitoring and documenting cases were noticed where beneficiaries, especially returnees or internally displaced persons, keep a low profile to avoid the attention of government authorities. Budget data on expenditures is also not available.

To address the gap in data, the United Nations agencies in Burundi mapped vulnerabilities on 50 indicators, including Sustainable Development Goal indicators concerning UNICEF. This will help the United Nations design resilience programming and advocate for better investment in areas of vulnerability. The exercise will also highlight gaps in data.

UNICEF will continue working with the education and health systems supporting timely and systematic data collection to ensure availability of quality disaggregated data. UNICEF will also enhance its engagement with all United Nations agencies and other partners, importantly with national partners in a leading role, in data collection, dissemination and use; and strengthen humanitarian-performance monitoring as an integral part of data management.

#### **Multi-sector integrated programming**

Both the 2030 Agenda and UNICEF's Strategic Plan recognize that multi-sectoral approaches to programming are essential for accelerating results for the most vulnerable girls and boys, as well as to achieve resilience at the community level. UNICEF Burundi engaged with national and other partners for the development of the new country programme. Lessons learned from the current programme of cooperation provided evidence to support this approach. For instance, to address chronic malnutrition in Burundi, it is important to partner with agencies and engage on nutrition with health and other nutrition-sensitive sectors. Nutrition results will not be fully achieved if challenges in the WASH sector, especially access to drinking water and hygiene practices, are not addressed. The response to the cholera outbreaks in 2016–2017 demonstrated the effectiveness of using a multi-sectoral approach. UNICEF Burundi's design and implementation of the multi-sectoral nutrition package was adopted nationally, and all nutrition partners in the country are now required to implement the same approach.

In its technical support role to the Scaling Up Nutrition platform, UNICEF assisted national partners in promoting collaboration across sectors to achieve reduction of stunting. In collaboration with the Ministry of Health and other partners, a communication strategy for 1,000 golden days focusing on nutrition as well as hygiene and child stimulation is in the plans for 2019. The strategy will contribute to early childhood development by giving children the best start to life. UNICEF Burundi will work on the development of an early childhood development strategy in 2019. This will be done in an intersectoral fashion, involving national stakeholders in the health, nutrition, education, protection and hygiene sectors.

Burundi adopted the performance-based financing system of subsidizing health centres according to the quantity and quality of care provided. With this approach, the World Bank and the Government intend to maximize the benefits gained by key health actors such as health workers and patients. Discussions between the MoH, the World Bank and UNICEF recommended, as a way forward, the expansion and scaling-up of the package for community performance-based financing, to improve community living conditions.

UNICEF demonstrated good practice of a multi-sectoral approach in the education/child protection sectors. With schools-as-zones-of-peace interventions, education and child protection actors come together to promote a violence-free environment in schools for girls and boys to learn as well as build bridges between schools and out of school spaces for efficient identification and reintegration of out-of-school children.

Through WASH-in-school interventions, more adolescent girls have the chance to stay in school and transition to secondary school, due to access to sex-segregated latrines that help prevent sexual violence and provide an environment for menstrual hygiene management.

Programming for adolescent girls and boys highlighted the importance of a cross-sectoral approach, as provision of life skills education involves the health sector (on HIV prevention in this case), education sector, and communication for development. Based on global and local good practices, UNICEF will need to continue engaging with local authorities and formal and informal community networks to provide participation platforms for adolescent girls and boys.

These platforms can serve as referral points for access to services, skills building and community-level support as well.

In the country programme starting in 2019, by leveraging partnerships and building stronger links between sectors internally and with national partners, UNICEF will continue with multi-sectoral and integrated approaches to programming that put the child at the centre. One of the key lessons learned in this process is to ensure that the results from such successful models at community level are documented and evidence is used for scaling up and ensuring buy-in at national level. The nutrition, education and protection cases highlighted above are good examples of such an approach.

### **Leveraging partnership for results**

In 2018, UNICEF demonstrated the value of partnerships for children in Burundi. Due to system fragility and limited external resources, UNICEF, other United Nations agencies and non-government organizations have had to support service delivery interventions to the most vulnerable girls and boys in the context of development and humanitarian interventions.

Joint advocacy and policy dialogue using existing coordination platforms yielded positive results. For example, girls who were pregnant and young mothers were allowed by the Government to continue their education in schools, while thousands of children acquired birth certification thanks to a joint campaign that waived fees for late registration.

Funds mobilized from development partners, including flexible thematic funding, allowed UNICEF to strengthen the development humanitarian nexus both in service delivery and advocacy.

Working with other United Nations agencies yielded results of additional resources mobilized for results for children. Thus, joint efforts with World Food Programme, World Health Organisation and Food and Agriculture Organisation to reduce chronic malnutrition expanded the funding base, allowing the model of good practice to gradually go to scale. Another joint programme on peace-building with United Nations Populations fund and the United Nations Educational, Scientific and Cultural Organization also garnered resources to expand the interventions to cover a greater number of vulnerable adolescent girls and boys.

A mapping of vulnerabilities with the United Nations family received positive feedback from donors and development partners as a potential tool for resilience programming, more effective and efficient investment and greater convergence of development efforts to accelerate achievement of results at scale.

Partnerships with non-government organizations, both international and national, were essential in developing models of service at community level, including integrated models of programming. For example, partnership with CARITAS was critical to define mechanisms for the registration of child victims of sexual violence who request health professional assistance in projects supported by UNICEF (i.e. on HIV, prevention of mother to child transmission, social

protection) in an ethical manner, as well as for providing medical and psychosocial care to victims. During 2018, the mechanism supported by UNICEF and the family and community development centres was found to be helpful as it includes disaggregation by age and sex. The next steps will focus on strengthening the reporting and processing of legal documents.

Other examples of partnerships with non-government organizations that contributed to the scaling up of results include work with World Relief on the integrated community case management agenda. The Education Watch Initiative, a consortium of five non-government organisations supported by UNICEF, helped monitor in education and protection while the national non-government organisation FENADEB was effective in monitoring of child rights.

Moving forward, UNICEF will continue to work with national and development partners for scale and expansion of proven models of service.

END/