Executive Summary

In 2013 a major achievement of the Country Programme was successful advocacy with the Government, with engagement at the highest level achieved in the area of nutrition, including the launch of the multi-sectoral platform for Nutrition and Food Security by the President of Burundi and the appointment of a Scaling Up Nutrition (SUN) focal point at the Second Vice-Presidency level.

Significant strides were also made in policy, with the adoption of the National Child Protection Policy and Minimum Standards for children living in institutions. UNICEF was Education Sector lead, furthering policy dialogue and enabling synergy in actions such as the revision of curricula within the context of the nine-year Basic Education Reform.

A key milestone in child participation was reached with the first elections of the National Forum of Children.

Important achievements were also recorded in the area of Innovations, with the creation of a fully functioning Innovations Lab on the UNICEF premises, and the pilot launch of “U-report”, which both ensures children’s right to expression and fills the need for real-time data for the Monitoring Results for Equity system (MoRES), so that programming responds to the needs of the most disadvantaged and vulnerable.

The scaling-up of the Community-led Total Sanitation (CLTS) approach in 2013 led to community construction of 25,000 latrines and promotion of hand-washing with soap. However, bottlenecks (including extreme poverty) will need to be addressed as they undermine the population’s access to such basic commodities as soap. Poverty remains one of the most important factors affecting the effectiveness of behaviour-change communication strategies.

Challenges faced by the Government in fulfilling commitments to increase budgets in certain sectors led to other shortfalls. For example, despite signing the 2008 eThekwini commitment on budget allocation, less than 0.5 per cent of the national budget is allocated to Sanitation and Hygiene.

Weak capacity among Government counterparts and local private sector companies constituted other obstacles that led to shortfalls, notably a delay in the implementation of education activities, especially those related to pre-primary and activities in support of education reform. Meanwhile, weak capacity on the part of telecom operators impacted the planned roll-out of innovations projects based on Rapid SMS.

Only 3 per cent of Burundi’s population has access to electricity, which has been identified as a major bottleneck for programme delivery. Research in this area is ongoing.

BCO’s partnership strategy was expanded and new opportunities were explored and harnessed. These include faith-based organisations, corporate partners and academia, which provided opportunities to benefit from high-quality research and expertise at lower costs. Resource mobilisation was especially successful, and BCO’s annual budget doubled vis-à-vis the four previous years, reaching US$28 million.

Finally, an important partnership between UNICEF and the World Bank in Burundi yielded significant results in the area of vulnerability and privation analysis, paving the way for developing concrete safety net programmes. As sector lead since May 2013, UNICEF supported the Government in policy development, in particular through the promotion of an integrated social protection system benefitting the most vulnerable children and families.
Country Situation as Affecting Children & Women

Burundi continues to be one of the most densely populated and poorest nations in the world. Although its Human Development Index (HDI) ranking has improved recently, it remains in the 178th position of 186 countries on the 2013 HDI, and is ranked first on the 2013 Global Hunger Index. Burundi’s social indicators are dire, and the country is unlikely to meet many of the MDG targets. Poverty is widespread and the single most urgent challenge, with 67 per cent of the population living below the national poverty line [1]. Poverty is predominant in rural areas, where 90 per cent of the population lives. In a context of demographic pressure and limited land, this situation has the potential to exacerbate an already fragile socio-political context. On top of this, the country depends on external aid for up to 60 per cent of its budget.

Some 58 per cent of children under 5 suffer from chronic malnutrition, a situation that itself illustrates the dire living conditions of households and their children. The study “Child Malnutrition: A Situation Analysis” (2013) showed that economic losses resulting from chronic malnutrition total around US$102 million per year –twice the annual budget of the Ministry of Health. UNICEF played a key role in rolling out the SUN Initiative with partners, which culminated in the official launch by the President of Burundi in July 2013.

MDGs 4 and 5 were selected in the MDG Acceleration Framework adopted by the Government and the United Nations. Increased efforts are needed to reach both. According to the UN Inter-agency Group for Child Mortality Estimation, the under-five child mortality rate in Burundi fell from 164 deaths per 1000 births in 1990 to 104 in 2012 [2] (96 for 1,000 live births in 2010 according to the DHS). Maternal mortality, which decreased from 1,100 to 800 maternal deaths per 100,000 live births between 1990 and 2010 according to inter-agency estimates [3] (500 deaths per 100,000 live births in 2010 according to the DHS), remains an area of concern.

Performance in the area of primary education is one area that has seen progress. The net enrolment rate [4] in primary school is 95 per cent, while the gross enrolment rate is up to 139 per cent country-wide. Despite this progress in access to education, retention and achievement at the primary level are still not fully in line with the Dakar goals of Education for All. In addition, access to pre-school is very low (only 5.05 per cent of children aged 3 to 6), resulting in insufficient preparation for school.

Economic growth in 2013 was expected to reach 4.5 per cent - higher than 2012, but lower than the 7 per cent growth foreseen by the PRSP II [5]. Principal drivers of growth are the secondary (mining and manufacturing) and tertiary sectors (telecommunication, banking, and tourism). Nevertheless, growth is weakened by fuel and food price crises, and remains insufficient to reverse trends in unemployment, underemployment and poverty. On the governance and institutional fronts, the country faces weak capacities. Despite the Government’s pro-poor strategy, illustrated by increased resource allocation to health and education (public spending on education increased from under 5 per cent of GDP in 2005 to 10 per cent of GDP in 2012 [6]), challenges continue.

The overall security situation may become increasingly tense as a result of g national elections scheduled for 2015 and the generally fragile situation in the Great Lakes region. As of 14 October 2013, 31,989 persons [7] had been expelled from Tanzania, creating additional pressure that could exacerbate risks of violence. The high number of expelled illegal immigrants adds to the over 30,000 returnees already repatriated to Burundi from Tanzania earlier in the year, adding to existing demographic pressures.

In March 2013 the Government of Burundi adopted a National Child Protection Policy, an important milestone in the context of large numbers of orphans and vulnerable children (OVC). Violence against children is a continuing concern, and much remains to be done to strengthen child protection service provision, monitoring and reporting.
In line with UNICEF’s equity approach, UNICEF Burundi has conducted analysis and research into the constraints and bottlenecks that limit the impact of interventions for the most disadvantaged. During the 2012 mid-term review, a bottlenecks analysis was conducted in the areas of nutrition, early childhood development and mother-to-child transmission of HIV. These analyses used the 10 determinants of MoRES, including: the socio-political environment, the availability of essential goods and services, and the social and cultural practices that determine children’s survival and development.

Common bottlenecks identified were related to social rules and behaviours that are widely followed in communities and have a critical influence on child nutrition and care. Social mobilisation was used to trigger discussions and promote behaviour change in the community, in particular to encourage adoption of key practices conducive to children’s health, nutrition, education and protection. To better identify the factors that influence knowledge, attitudes and practices relating, in particular, to the six key family practices in health and nutrition, a socio-anthropological study was on-going during 2013.

To facilitate the sustainability of interventions for children, UNICEF also supports the Government to formulate and implement policies, strategies and action plans in several programmatic areas with the aim of strengthening national ownership in planning, implementing and monitoring outcomes. The 2014 pre-electoral context is likely to impact programme implementation, especially during the second half of the year. Another important factor that may influence implementation is the potential departure of the UN mission, which could result in the UN Country Team (UNCT) having to assume some of its roles. Discussions during the 2013 review and Enterprise Risk Management (ERM) update session were held to determine workable solutions and risk mitigation.

Country Programme Analytical Overview

Throughout 2013 BCO sustained momentum in developing strategic partnerships with the Government, other UN agencies, CSOs and academia, at times using innovative approaches to partnerships.

In recognition of the dramatically high rate of child malnutrition in the country, UNICEF Burundi advocated to improve ownership and coordination of nutrition-specific interventions at a high Government level. These efforts led to the finalisation of the Situation Analysis of Child Malnutrition in Burundi, the designation of a SUN focal point within the Second Vice-President’s office, creation of a SUN secretariat and the launch of a high-level, multi-sectoral platform to coordinate inter-sectoral nutrition interventions.

Acknowledging the need to address issues of supply and distribution of medical supplies, UNICEF reinforced the capacity of the National Drug Store (CAMEBU) through the construction of an extended building in 2013. Nevertheless the challenge of distribution requires continued attention. Other health-specific challenges include slow progress on coverage of PMTCT interventions and advocating for financial contributions by the Government to purchase traditional vaccines, which remained unsuccessful in 2013, despite consistently good results on immunisation coverage recorded in Burundi.

As Education sector lead, BCO played a key role in education sector review, curriculum reform and the mainstreaming of conflict sensitivity. Additionally, taking note of a further drop in enrolment in pre-primary centres, focus was placed on enhancing demand for pre-learning activities, along with social mobilisation, training of animators and capacity building.

BCO continues to facilitate access to water and sanitation for the less privileged and to support Water, Sanitation and Hygiene (WASH) interventions in schools. The programme considers the age and sex of school children with special needs through the construction of adequate gender-separated latrines and hand-washing facilities.
With new insights on the reproduction of violence, BCO is laying more and more emphasis on peacebuilding interventions through a cross-sectoral approach to adolescents and youth. Initiatives that favour child participation and expression are being strengthened. The launch of the National Forum of Children significantly contributed to improving child participation in Burundi and awareness of its added value for a country where the majority of the population is under 18.

Another significant initiative launched as a pilot by BCO in 2013 is the “U-report”, a Rapid-SMS-based platform that allows youth and community volunteers to speak out about issues in their communities, which will be developed further in 2014. BCO also established its Innovations Laboratory, the seventh such lab to be officially recognised by UNICEF at the global level.

Significant strides were also recorded in developing other innovations, including Projet Lumiere, a pilot project that addresses the barrier of energy poverty. Such successes have proven that cross-sectoral and innovative approaches are key to addressing bottlenecks for the most vulnerable, and will be reinforced in 2014.

BCO continued to provide technical support and capacity building to key Government partners, including the Child and Family Department of the Ministry of National Solidarity. As sector lead for social protection, BCO also invested heavily in the development of the Social Protection sector, in particular child-sensitive social protection programmes.  

**Humanitarian Assistance**

In 2013, BCO continued to contribute to preparation and response to two types of emergencies: the massive return of over 35,000 former Burundian refugees from Tanzania, as well as cholera epidemics, which broke out in Cibitoke, Bubansa, Bujumbura, Bururi and Makamba. Emergency response specifically targeted children and women, focused on education, health and nutrition, WASH and Child Protection as well as C4D.

In the case of returnees, interventions covered all UNICEF core programming areas and included the provision of deworming tablets for all children and access to safe drinking water, sanitation facilities and hygiene kits; birth registration services; and access to safe community spaces with psychosocial support services. In addition, UNICEF provided ECD kits and access to quality education (including through temporary structures).

UNICEF also effectively responded to other emergency situations in close partnership with other humanitarian actors, including the response to the expulsion of almost 10,000 people from Tanzania, who received assistance through temporary transit centres where latrines, shelters and drinking water, jerry cans, buckets, and soap and water treatment products were provided.

Child protection monitoring and family tracing was also part of the emergency response for children returning from Tanzania.

**Effective Advocacy**

*Fully met benchmarks*

Strategic advocacy efforts led by BCO on key priority issues for children and women in Burundi contributed to increased donor and other major key stakeholders’ interest and engagement in the Country Programme. Increased donor interest and support led to a significant improvement in resource mobilisation, resulting in BCO’s budget reaching US$28 million for 2013; double the amount of the four previous years.
Advocacy work, in close collaboration with the Ministry of National Solidarity, towards raising awareness on the added value of increased child participation contributed to the establishment of the first-ever National Forum of Children in Burundi. The Forum has representation from the village to the national level, and ensures representation of orphans and vulnerable children (OVCs), including children with disabilities. It is seen as a crucial mechanism for strengthening awareness of children’s issues and placing children higher on the national agenda, especially in light of the 2015 elections. An action plan is being established for roll-out in 2014.

As lead agency for nutrition, UNICEF played a key role in coordinating the official launch of the multi-sectoral platform for Nutrition and Food Security, which was launched by the President of Burundi in July 2013.

In 2013 BCO hosted six visits of National Committees for UNICEF (from Austria, Belgium, Germany, the Netherlands and Spain; the German visit included German actress and UNICEF Goodwill Ambassador Katja Riemann) in addition to an international media visit from South Africa. BCO also hosted senior Innovation experts from the World Bank, UNDP and various universities to showcase its innovative approaches in the field.

The successful establishment of BCO’s presence on social media through the launch of the UNICEF Burundi Facebook page (www.facebook.com/UNICEFBurundi) allowed the Country Office to better reach and interact with target audiences, in particular youth. Together with other partners, UNICEF supported a national media audience survey to inform its advocacy and communication work in the near future. Finally, a Knowledge Management strategy was initiated to help inform BCO programmes, identify gaps in knowledge generation and develop platforms and tools for sharing expertise.

Capacity Development

*Mostly met benchmarks*

UNICEF has continued to strengthen national institutional ability to ensure leadership of programme implementation and monitoring. During 2013 this includes the use of a participatory approach through two complementary bodies, one of which is composed of a team of sectorial focal points monitoring the sectorial level implementation of the programme, and the second of which is composed of three senior Government staff ensuring supervision and facilitation of programme implementation, including two reviews of the programme (mid-year and end-year) and three joint field missions. The latter conducted a study tour and exchange of experiences in Togo in September 2013, during which they reinforced their knowledge of programme coordination and also recommended decentralisation of programme implementation.

Main development challenges continue to be high staff turnover among Government counterparts and pervasive weak implementation capacity, from the central to local (colline) levels. Thus all programme sections continue to strongly support their counterparts, reinforcing their capacities both in terms of skills/knowledge and in relation to material and equipment. Further reference is made to this in the programme sections of this report.

Communication for Development

*Initiating action to meet benchmarks*

C4D as a cross-cutting programme contributes to changing behaviours, beliefs and practices to achieve optimal utilisation of basic social services for child survival and development and to achieve reduction of
child and maternal mortality. C4D works with different partners from the national to community levels, from the Ministries of Communal Development, Health, and Communication to grassroots and faith-based organisations. During 2013, the BCO C4D section continued to support partners in conducting advocacy, and social mobilisation and sensitisation activities to promote practices conducive to health, nutrition, education and protection of children and women against abuse, exploitation and violence.

A radio soap opera in Kirundi which encourages positive behaviours at the individual, community, and societal levels is currently under development. It takes into account that effecting change on long-standing issues can best be achieved by role modelling positive behaviours through important members of the community, such as community elders, religious leaders, teachers, parents, and young adult characters that the audience will look up to.

Focus groups in 741 hills of Bururi, Makamba, Gitega and Ruyigi provinces are carrying out community diagnosis on the six key family key practices in health and nutrition, as well as on discrimination of children infected or affected by HIV/AIDS, albino children, Batwa children and children with disabilities. The approach used in the project fits into the logic of "Assessment, Analysis, Action" and represents a learning-by-doing process that allows participants to assess and analyse the identified situation and make informed decisions to develop community action plans. The development of community action plans is based on the Theory of Change.

BCO is using a combined strategy of mobile cinema, interactive theatre, community dialogue, capacity building, interpersonal communication and mass media to foster dialogue on health, hygiene, protection, and education topics. A peer-to-peer approach is also used to reach communities at the household level through listening groups. These participatory community approaches aim to improve links between individual beliefs, attitudes, intentions and behaviour. Junior theatre groups, including of vulnerable children, continue to raise awareness through interactive theatre sessions in the community. Plays staged by young people reflect their daily lives.

BCO initiated a socio-anthropological study to better understand linkages between the knowledge, attitudes and practices of the six key family practices in health and nutrition, birth registration and hygiene in order to establish reference values and sociocultural factors that are decisive in the areas of health and nutrition. As an outcome, UNICEF will be able to provide effective responses to the needs of target groups and develop strategies and tools for communication behaviour change adapted to the local context.

Communication tool (such as posters, image boxes and stickers) were disseminated and radio broadcasts aired to support the different campaigns in health, education, protection during 2013. With feedback from the beneficiaries, those materials will be improved to strengthen the different campaigns.

The ongoing roll-out of U-report will better support implementation and monitoring of different C4D activities and monitoring in 2014.

Service Delivery

*Mostly met benchmarks*

In Education, UNICEF provided school materials and catch-up/ language training for 10,395 school children returned from Tanzania to ensure better integration of the returnees. BCO also built 77 new classrooms. As part of the Back-to-School (BTS) campaign, over 800,000 children received school kits and 12,000 teachers received teaching materials.
In Health and Nutrition, no stock out of UNICEF supplies at the central level occurred in 2013. However, due to CAMEBU’s limited storage capacities UNICEF continued to ensure storage of therapeutic feeding supplies, which was identified as a missed opportunity for Government ownership. Pending completion of a new CAMEBU extension, it was decided to delegate therapeutic feeding provision to the National Nutrition Programme of MoH. However, the limited capacity of this unit led to a nationwide stock-out during the first half of 2013. UNICEF resumed therapeutic feeding supply distribution for the rest of the year to fill this gap. Discussions with CAMEBU, UNICEF and MoH are on-going to find better modalities for the transfer of responsibility and capacity building for supply chain management.

The Water, Sanitation and Hygiene programme contributed toward the provision of safe drinking water to 54,230 people and 14,780 school children through the construction/rehabilitation of water supply systems. Thirty-one schools (representing 4 per cent of schools lacking access to sanitation facilities) received 432 latrines, separated for boys and girls, reaching 20,550 school children. The programme also supported the construction of sanitation facilities (latrines, rainwater collection systems and incinerators) in four health centres that see some 188,000 patients per year in the provinces of Cankuso and Gitega.

The scaling up of the CLTS approach in seven communes of three provinces targeting over 82,700 households resulted in construction of 25,000 latrines by communities, as well as the promotion of good hygiene practices within households.

In Child Protection, UNICEF supported the Ministry of Interior in procuring essential materials (including 1,539 registers) to strengthen the delivery of birth certificates to children. As a result, 137,119 children were registered at birth.

In emergency response, BCO assisted around 18,000 people affected by repatriation and cholera outbreaks to gain access to safe drinking water, sanitation facilities and hygiene kits. Almost 5,000 people expelled from Tanzania received jerry cans, buckets and soap and water treatment products.

### Strategic Partnerships

*Mostly met benchmarks*

Throughout 2013, BCO sustained good momentum in fostering productive partnerships.

In UN and donor coordination/coherence, a joint UNDAF Resource Mobilisation Strategy was developed. BCO chaired the UN Programme Management and Operations Management Teams. UNICEF also sustained active participation on adolescents, peacebuilding, resilience and emergency response/preparedness programming as well as malnutrition, through the Reach Every Child approach (REACH). UNICEF was Education sector lead in 2013 and began to explore substantial partnerships with IFI’s, in particular the World Bank and the African Development Bank, through shared knowledge leadership.

In the area of inter-governmental bodies, global programme partnerships and high-profile state actors, BCO played a key role in Burundi’s participation in the SUN movement and in-country roll-out, as well as ensuring continuous engagement with the Global Partnership for Education and supporting the Government-led launch of the National Forum for Children, in conjunction with CSOs.

With civil society, a strategic MoU with the Interreligious Council of Burundi (affiliated with UNICEF global MoU partner Religions for Peace International) was concluded, and partnerships with the Burundian Red Cross and the Scouts were solidified for the operationalisation of the U-report and adolescent participation.
In 2013 BCO adopted a strategic approach to mapping, focusing on underutilised partnership categories and types. Innovative approaches to establishing new kinds of partnership were documented, including in areas of knowledge and innovation partnerships, partnerships with faith-based organisations and corporate/private sector partnerships.

Knowledge and innovation partnerships constituted the key focus of 2013: the piloting of an open call for partnership proposals from research institutions, paired with holding an international research symposium on peacebuilding and education, led to the conclusion of major, cost-effective research partnerships (PCAs for close to US$1 million, with approximately 30 per cent of partners’ own resource commitment) with the Free University of Brussels and Amsterdam University’s Institute for Social Sciences Research.

An MoU was established between the University of Burundi and BCO’s Innovations Unit to host interns from three leading national universities. Partnerships were developed with Princeton and Carleton universities as well as the Institut des Sciences Politiques in Paris, focusing on programme innovations, programme evaluation and product/advocacy design for children.

A new pre-partnership modality, permitting small-scale financial investment in the on-site assessment/vetting of prospective external partners, was tested in the CfPP framework, standardised as a partnership risk-management tool and used to scope partnerships with Engineers Without Borders Germany and SolarAid UK. A strategic private sector research & development partnership was consolidated in 2013 with the Rwanda-based company NURU Energy for the targeted development and distribution of off-grid energy products. BCO also joined the PFP-led Integrated Corporate Engagement Implementation Team and will pursue private and corporate sector engagement systematically.

**Knowledge Management**

*Partially met benchmarks*

In 2013 BCO continued to create, use and systematically disseminate knowledge products, including: a situation analysis of under-five malnutrition, an assessment of essential commodities for children and women in the areas of health, nutrition, education, child protection, water, sanitation and hygiene and a study on Global System for Mobile Communications (GSM) use. Dissemination of the results of the Situation Analysis on child malnutrition, in particular, strengthened national dialogue on the issue of malnutrition among children and for the country in general.

To improve its knowledge management system, BCO conducted an internal survey on the preferences and habits of staff in sharing, communicating and acquiring knowledge and information. The results of the survey were used to develop an internal Knowledge Management strategy and an action plan for 2014-2016. The strategy will be extended to other UN agencies to ensure that knowledge products are created, managed and used efficiently and are disseminated internally and externally. UNICEF also tracked important knowledge and information generated by partners for better organisational performance and best results for children, youth and women.

BCO partnered with a range of institutions in the realisation of research and evaluation, including the University of Burundi, Carleton University (Canada), the World Bank, and the African Development Bank. Thanks to these collaborative efforts, research and evaluation quality was strengthened. At the same, the social policy section provided technical support and adequate materials to support local research institutions.
Human Rights Based Approach to Cooperation

 Mostly met benchmarks

Continuous efforts were made in 2013 to ensure the integration of human rights principles in all aspects of programming. BCO supported the Government to reinforce the reconciliation and the reintegration of returnees from Tanzania; UNICEF and the Ministry of Communication established “listening groups” in the main areas of return (Makamba, Bururi and Rutana). These groups are composed of returnees, members of the Batwa ethnic minority, youth, and individual males and females from local communities who listen to radio broadcasts based on the promotion of the six family key practices on health and nutrition and then relay information to other members in their communities. As an example of the success of changing behaviours, feedback from one listening group highlighted that people in their community no longer wash their hands in a common bucket after a funeral ceremony, but use a cup.

In 2014 the listening groups will be extended to Child Protection Committees to scale-up awareness activities to reach most vulnerable children. Interactive theatre has also helped to sensitise local communities to fight against stigma and discrimination that affect children affected or infected by HIV, Batwa children, albino children and children living with disabilities.

The Health and Nutrition section contributes to ensuring free and adequate basic health care for children under five and pregnant women expelled from Tanzania, following a joint mission that led to the implementation of emergency support in specific geographic areas.

A National Child Protection Policy was adopted by the Council of Ministers in early 2013, which is fully aligned with the principles and standards of the CRC in addressing the rights of all children and strengthening the child protection system. In addition to reinforcing coordination with various sectors, implementation of the policy will assist in responding to the needs of vulnerable children.

To enable girls to benefit from their right to education, interventions addressing gender-based violence were ongoing during 2013; a law against violence in schools will be finalised for early 2014.

The WASH programme supported the Government’s initiative for developing peace villages and the reintegration of returnees and expelled Burundians from Tanzania by promoting their right and access to basic social services, such as access to drinking water and sanitation facilities. Water point installation and management strategies are key for the reduction of disparities and community participation as well as for promoting social cohesion. The CLTS approach, with its focus on the most vulnerable, also increases community participation, solidarity and ownership.

Gender Equality

 Mostly met benchmarks

To provide equal opportunities for women, men, girls and boys, BCO continued to integrate a gender-sensitive approach to designing, implementing, monitoring and evaluating actions. As a specific example, BCO ensured strengthened participation of women in the training workshops on the application of the monitoring and evaluation manuals of the Communal Plan for Community Development.

Gender was also taken into account during implementation of research and studies: for example, women and man were equally represented in the interviews and focus groups for the Situation Analysis on Child Malnutrition, as well as in the study on GSM use and the country assessment of essential commodities for
children and women. Women, men, girls and boys were also involved in the independent evaluation of the WASH project in two integrated rural villages of the Rutana Province commissioned by UNICEF Burundi. The evaluation found that gender equality was included in UNICEF’s design of the WASH project, as demonstrated by gender-balanced water management committees, separate latrines for boys and girls in schools, and “cash for work” opportunities available to women.

BCO-designated gender focal points regularly participated in gender meetings with other partners to keep up-to-date on actions regarding gender.

**Environmental Sustainability**

*Partially met benchmarks*

UNICEF Burundi continues to focus on innovative approaches that are environmentally friendly. Deforestation is a major issue in Burundi. With a very high demographic growth rate (2.4 per cent) Burundi has one of the highest population densities in Africa (310 hab/km²). According to the Burundi 2012 MDG report, the deforestation rate is 64 km² per year, meaning that if deforestation continues at its current rate, by 2039 there will be no forests left in the country. Apart from heavy demographic pressure on the environment, at least 90 per cent of all construction is from burnt blocks, which contributes heavily to deforestation, climate change and soil erosion. Together with partners, including Government authorities and NGOs (e.g., Engineers without Borders), BCO is reviewing how to shift from burnt blocks to eco-friendly construction materials and practices.

With this approach, BCO envisages school construction to meet Child- and Eco-Friendly standards, especially in terms of construction packages and standards, security, inclusion, environmental standards and gender-sensitivity. This approach would mean that Compressed and Stabilised Earth Blocks would be used instead of burnt blocks, and efficient measures applied in regard to the risk of ground water pollution by sanitation facilities. Furthermore, innovative low-cost technology for energy supply (solar lighting, water pumping) and computer use (digital drums, light library) will be integrated to improve learning environment.

In October 2013, BCO participated jointly with colleagues from WFP and FAO in an ESARO-organised workshop on resilience, to initiate a joint approach around interlinked issues of nutrition, food security and agriculture. A fact-finding joint mission to the field to identify points of convergence in the interventions of all three UN agencies was carried out, and this approach will be further developed in 2014. BCO’s WASH programme considers environmental protection issues in its approach to diversifying water supply sources, which includes the exploration of boreholes equipped with solar pumping systems to supply schools, health centres and communities, including the maintenance of water points and protection of water sources against contamination.

In the context of developing innovative solutions that link sanitation, environmental protection and education for children, a biogas pilot project is being launched in one primary school with nearly 1,100 pupils in Bukeye, Muramvya province, in partnership with departments of the Ministry of Energy and Mines. This programme will contribute to minimising the use of wood for fire and contribute to combatting deforestation.

**South-South and Triangular Cooperation**

In addition to facilitating national Governmental counterparts’ participation in various regional and international workshops and seminars, BCO supported a number of study tours and exchange missions for both implementing partners and Government counterparts. Missions took place in Uganda, Togo, Rwanda
and Senegal and resulted in increased knowledge and motivation in the following areas: (i) coordination and leadership for implementation of the programme of cooperation; (ii) reform of the Education Management Information System (EMIS); (iii) management of energy and production of biogas in schools; (iv) improving protection for children in conflict with the law; and (v) enhanced understanding of national partners of the U-report tool.

UNICEF facilitated a mission for its three main senior Government counterparts overseeing Country Programme (CP) implementation to Togo in September 2013. Results of this mission were strengthened CP coordination, increased knowledge about national aid coordination and useful recommendations on how to advance decentralisation in Burundi, specifically addressing the needs of children and women at the community level in relation to communal development plans.

A U-report mission to Uganda in July 2013 involved participants from Government, NGOs and UNICEF and aimed to consolidate understanding and shared vision around the U-report Burundi project prior to its public launch. The mission enhanced partners’ understanding of their respective roles and improved partnership and communication on the U-report Burundi project.

A mission on EMIS took place in October 2013, involving a visit to UNESCO’s Institute of Statistics in Dakar. As a result, an action plan for the reform of the EMIS, including support to the Office of Planning and Statistics of the Ministry of Education for the production of education statistics and the management of the database StatEduc was produced. This included elements of detailed analysis of the statistical system and steps for data collection and processing for reform of the system, as well as a costing of the Education statistical yearbook and its financial sustainability.

The three main Government counterparts also attended a mission to Uganda to learn more about innovations in the area of energy and biogas in schools. This resulted in a partnership agreement between UNICEF and the Ministry of Energy and Mines on a pilot biogas system.

A juvenile justice study tour in Rwanda was conducted in February 2013. Main lessons learnt were about how the juvenile justice system in Rwanda places emphasis on education, including vocational training and games, with heightened opportunities for family reintegration. A key result of this mission was the decision to establish two rehabilitation centres for children in conflict with the law in Burundi, confirming the Government’s commitment to ensure the protection of these minors.
Narrative Analysis by Programme Component Results and Intermediate Results

Burundi - 0610

PC 1 - Health and nutrition

On-track

**PCR 0610/A0/08/122** National and community health structures deliver an integrated package of quality health and nutrition services that meet norms and standards with a focus on most vulnerable children, and communities adopt favourable health and nutrition practices for women and children by 2016

**Progress:**

The programme component result is in line with the National Health Sector Plan 2011-2015 aiming to improve access and quality to health services with a clear focus on the delivery of an integrated package of health and nutrition interventions at facility and community levels.

After the Mid-Term Review of December 2012, it was decided to highlight cross-cutting issues such as chronic malnutrition, innovations and HIV/eMTCT. UNICEF played a key role in awareness-raising on chronic malnutrition; efforts were successful, with the adherence to the SUN movement, appointment of the SUN coordinator at the level of the second Vice Presidency and the launching of the Multisectoral Platform. UNICEF also took the lead in introducing innovations for health with the drafting of the eHealth Policy and the "Kiramama" project in one pilot province.

Monitoring data show that 100 per cent of provinces are implementing CMAM and 42 per cent are delivering PMTCT services. Data from the 2012 Malaria Indicator Survey showed an increased number of children under five and pregnant women sleeping under mosquito nets (respectively 54 per cent and 56 per cent).

On-track

**IR 0610/A0/08/122/001** Prevalence of underweight in children 0 to 59 months is reduced from 39 per cent to 21 per cent by 2016.

**Progress:**

During the Dec. 2012 Mid-term Review, this IR’s target for underweight prevalence was revised to 21 per cent because 2010’s target of 29 per cent was reached. Out-patient Therapeutic Feeding Services (OTPs) and Stabilisation Services (ITPs) are present in all provinces, but on a limited scale: 212 OTP in 738 health centres and 27 ITP in 62 hospitals. From January to October 2013, some 14,878 children with severe acute malnutrition (SAM) were admitted and treated, with a cure rate over 75 per cent and a death rate under 5 per cent as recommended by Sphere. However, only 60 per cent of Health Districts provided data between January and October 2013 due to limited coordination between the National Nutrition Programme and their Provincial Focal Points. In addition, concerns remain in relation to management of the nutrition supply chain: during the first half of 2013, MoH was not able to ensure distribution of nutrition supplies and UNICEF had to support to avoid stock-outs that would have put many children at risk.

Assessment of community management of acute malnutrition (CMAM) and assessment of the Positive Deviance Hearths (FARN) were completed. Currently, the FARN approach is implemented in eight provinces (47 per cent). UNICEF successfully advocated about the challenge of chronic malnutrition and leveraged additional funding in this area. The National Multi-sectoral Nutrition Plan was developed and validated in June 2013, with costing still to be finalised; the UNICEF 2013 SitAn focused on nutrition was released and the President launched the Multisectoral Platform on Nutrition and Food Security in July 2013. UNICEF hired an international REACH consultant to support the SUN focal point based at the second Vice Presidency. UN agencies received funding from Swiss Cooperation for the implementation of the first joint project to fight chronic malnutrition in the province with the highest chronic malnutrition rate (Ngosi, 71 per cent) and from the European Union, through FIDA, to address chronic malnutrition in eight other provinces (PROPA-O project).

On-track

**IR 0610/A0/08/122/002** 60 per cent of sick children under 5 receive care according to the national clinical and community IMCI protocol and national IYCF guidelines in five priority provinces (Gitega, Muyinga, Kayansa, Cankusuo and Cibitoke) by 2016.

**Progress:**
No quantitative data is available on IMCI coverage per individual: discussions are ongoing for training and implementation of IMCI monitoring in early 2014 in the five provinces supported by UNICEF.

Integrated Management of Childhood Illnesses (IMCI) is implemented in 15 of 17 provinces (five with support from UNICEF). The 2012 revised IMCI materials were used to train on IMCI in the five targeted provinces. During a July 2013 sectoral mid-term review, MoH addressed one of the bottleneck areas by confirming that hospital staff should participate in improving the quality of supervision. The limited inclusion of IMCI indicators and the absence of nutrition indicators in the Health Management Information System (HMIS) and Peacebuilding Fund (PBF) remains a constraint for the implementation and scaling-up of IMCI and key nutrition interventions.

Community IMCI (C-IMCI) covers prevention and promotion of the six key family practices. C-IMCI is implemented in seven provinces (five with support from UNICEF). As free access to health services for children under-five has actually increased the number of under-five consultations, IMCI protocols are difficult to apply due to time constraints, unless community-level treatment is available. UNICEF has therefore introduced a project of community treatment for malaria and diarrhea (iCCM) in one pilot district, which will be extended to a second district and include pneumonia and malnutrition. UNICEF contributed to the training of recently designated Community Health Workers (CHWs) and introduced U-Report through CHWs in one province. A Community Health Strategic Plan is being finalised by the Ministry of Health.

IYCF guidelines were validated during the first semester of 2013. However, implementation is still pending Government involvement, as the actual promotion of IYCF relies mostly on international partners. To date, only three hospitals/maternity wards have been certified as “Baby Friendly” but none were re-assessed during 2013. Linkages of the BFH approach with health centres and at the community level needs to be considered.

IR 0610/A0/08/122/003 85 per cent of births are assisted by qualified personnel and 60 per cent of pregnant women complete four ANC check-ups, as per national norms, by2015.

Progress:

The target was met for assisted deliveries, but not for ANC. At the end of December 2013, 68 per cent of births were assisted by qualified personnel and 41 per cent of women completed four ANC visits, as per national norms.

Some 99 per cent of pregnant women attend at least one ANC, but they start late in the pregnancy (8.6 per cent ANC at the first trimester in early 2013). Concerns remain regarding the quality of ANC, as iron and folic acid are not available in all provinces.

The Reproductive Health Program revised its Strategic Plan for 2013-2015 in February 2013. As maternal and child mortality remain high in Burundi, the MoH decided to strengthen the Burundi Millennium Accelerated Framework (MAF 2013) on MDG 4 and 5.

UNICEF distributed Emergency Neonatal Obstetric Care (EmNOC) equipment in targeted provinces. Reproductive Health Norms and Protocols are being disseminated with UNICEF support. UNFPA supported the MoH to develop EmNOC training modules, but training of healthcare providers has not started yet. In 2013 UNICEF supported the development of an eHealth Policy as well as a pilot project called “Kiramama” (RapidSMS project) in one province. MoH is eager to see that project implemented, as it would be the first health project using new communication technologies. Coordination among several partners involved in this project, as well as funding issues, will continue to be addressed in 2014.

IR 0610/A0/08/122/004 98 per cent of pregnant women benefit from PMTCT services and 90 per cent of children born to seropositive mothers benefit from paediatric care in accordance with WHO recommendations.

Progress:

Implementation of PMTCT activities was still below target. As of end of December 2012, 42 per cent of HIV-positive mothers and 38 per cent of children born of HIV-positive mothers received care according to PMTCT protocol.

The eTME technical committee recommended cancelling the planned evaluation of eTME’s implementation due to implementation delays. No stock-out of PMTCT supplies was reported during 2013 (UNICEF is ensuring delivery of PMTCT supplies for 120 sites). UNICEF supported MoH in resolving one of the bottlenecks identified in the 2012 PTME Bottleneck analysis by approving a decree allowing all health centres with ANC services to be accredited PMTCT site. This measure is expected to facilitate the scaling-up of PMTCT: currently 321 health centres with maternity wards are delivering PMTCT services. UNICEF and partners supported training of health care providers on the integrated Reproductive Health and eTME package developed in 2013.
The two PCAs for scaling-up PMTCT interventions funded by UNICEF ended during the first semester of 2013. Final evaluations, with lesson learned and recommendations, were prepared by the two NGOs. A new PCA is under development, including a cash transfer component, as social aspects have been found important to ensure survival and development of children born to HIV-positive mothers.

On-track

IR 0610/A0/08/122/005 At least 90 per cent of 12 month-old children fully immunised by 2016

Progress:

Immunisation data as of September 2013 show that at the national level: 78.2 per cent of targeted children received the first dose of measles, 28.0 per cent the second dose (introduced in January 2013) and 74.0 per cent of targeted children had been vaccinated with DPT III. National data indicates that 91.0 per cent of health districts have an immunisation coverage of measles below 85 per cent, and 62.2 per cent of health districts have an immunisation coverage of PT+Hib+HepB3.

Mother and Child Health Week (MCHW) was organised in January 2013 and introduced the second dose of measles vaccine for children aged 18 to 23 months: 100 per cent of children between 1 and 14 years and 43.5 per cent of pregnant women benefited from deworming, 99.2 per cent of children from 6 to 59 months received Vitamin A supplementation. During the June 2013 MCHW, 100 per cent of children between 1 and 14 years and 48.4 per cent of pregnant women benefited from deworming, and 88.8 per cent of children from 6 to 59 months received Vitamin A supplementation.

No stock-out of vaccines or immunisation devices was reported during 2013. UNICEF continued to replace cold chain equipment with the provision of freezers and fridges. During the April African Immunisation Week, WHO and UNICEF supported the MoH to organise advocacy sessions at the central and periphery levels urging parliamentarians to increased Government financial contributions to EPI. UNICEF is still financing 100 per cent of routine traditional vaccines in Burundi.

Partners (GAVI, WHO and UNICEF) supported the Government to introduce Rotavirus vaccine in December 2013 during the second round of MCHW. UNICEF took this opportunity to reinforce integration of EPI activities with IMCI through the dissemination of behaviour-change messages on diarrhoea prevention (hand-washing with water and soap, exclusive breastfeeding and distribution of Vitamin A) and on the appropriate treatment of diarrhoea with ORS and zinc.

On-track

IR 0610/A0/08/122/006 80 per cent of pregnant women and children under five sleep under LLITNs.

Progress: According to the 2012 Malaria Indicator Survey validated in 2013, 54 per cent of children under five and 56 per cent of pregnant women sleep under long-lasting insecticide-treated nets (LLINs).

In Burundi, USAID is the main provider of standard LLINs. In 2013 UNICEF provided 100,000 LLINs for routine distribution. At the request of the MoH, UNICEF distributed additional LLINs in targeted zones to returnees from Tanzania, in light of increases reported in the number of malaria cases. In 2013 there were no stock-outs of LLINs in the five targeted provinces at district level.

Integration of malaria with IMCI and the Reproductive Health Programme (RHP) is still a concern. The current revision of the Malaria Strategic Plan 2013-2016 is an opportunity for UNICEF to raise this issue. UNICEF is supporting the MoH to organise a workshop with the National Malaria Program and RHP on Intermittent Preventive Treatment for pregnant women (IPTp) planned for early 2014. Currently only 0.1 per cent of pregnant women benefit from IPTp.

Nationwide, 59 per cent of people have sought advice/treatment for their children with fever. Disparities in the prevention and the treatment of malaria were revealed in the MIS 2012 between the North and the rest of the country, between urban and rural areas and between women with education and those with no or only primary education.

On-track

IR 0610/A0/08/122/007 The managerial capabilities of selected district medical health teams are reinforced by the end of 2016.

Progress:

No quantitative indicator for the follow-up of this IR is available.

Trainings with the revised tools for health district teams were organised during 2013.

UNICEF and partners supported the MoH to develop an integrated booklet for maternal and child health, with new WHO growth charts, new vaccines, birth certificate and key message for the six key family practices. UNICEF made multiple copies and disseminated the booklet being tested in one pilot district.
The extension of the National Drug Store (CAMEBU) for the purchase, storage and distribution of drugs was completed.

As in 2012, UNICEF supported the Health Information System (HMIS) by making multiple copies of health and nutrition registers and supporting supervision activities of district HMIS managers.

**On-track**

**IR 0610/A0/08/122/008** The response to health and nutrition emergencies as well as other humanitarian situations is provided in accordance with UNICEF core commitment for children in emergencies by end of 2016.

**Progress:** Several emergencies were addressed in a timely manner throughout 2013: after the 2012 coordinated repatriation of 34,052 Burundians from Mtabila camp (Tanzania), more than 32,000 irregular Burundian migrants were deported from Tanzania in September 2013. A cholera outbreak started in Bujumbura, Mairie, spreading to the six provinces along Lake Tanganyika and after to Makamba and Rutana provinces, where irregular migrants came from Tanzania. Since the epidemic was declared by the Government on 5 October 2012, a total of 1,934 cholera cases were reported with 30 deaths (none of children under five years). Since 3 November, no new cholera cases were reported in the country.

As in 2012, UNICEF actively participated in regular meetings of the Emergency Steering Committee that coordinated the cholera response and provided supplies (tents, cholera kits). Joint supervision missions were organised with UNICEF, WHO and MoH. Joint missions with UNICEF, WHO, WFP, IOM and HCR were also organised to address the unforeseen expulsion of irregular migrants.

UNICEF received a total of US$571,150 of CERF funding to ensure medical and nutritional issues in the returnee provinces.

**PC 2 - Basic education, gender equality and HIV prevention in young people**

**On-track**

**PCR 0610/A0/08/121** School and pre-school-aged children (4-12 years) have access to quality education and achieve universal primary education, and adolescents in and out of school have strengthened skills in the area of HIV/AIDS prevention, reproductive health and peacebuilding by 2016.

**Progress:**

Burundi achieved a net enrolment rate (NER) of 94.9 per cent (Girls: 93.1 per cent; Boys: 96.8 per cent) and the parity index is 1.

UNICEF was the education sector lead during 2013, coordinating the Global Partnership for Education in Burundi. UNICEF was instrumental in education sector coordination, policy dialogue and the provision of technical support to Government partners for two joint sector reviews and for the Donor Sectoral Conference. Support was given for the education information and monitoring system (EMIS) to ensure the efficiency of the sector and relevance of the education system, including the implementation of the 2012–2020 Education Sector Plan. The Back to School campaign and CFS programme supported interventions to improve the quality of basic education. To support integration of 10,395 school-aged repatriated children from Mtabila, Tanzania in the Burundian education system, UNICEF worked to improve quality education through the construction of school infrastructure and teacher training to benefit directly some 43,239 children in the return provinces, among whom 8,245 were returnees. Some 822,891 children and 3,000 teachers in 1,977 schools benefitted directly from UNICEF’s education programme. Strategic partnerships with faith-based organisations were put in place in order to reach out adolescents and strengthen their knowledge of Life Skills in the area of HIV prevention, sexual and reproductive health and peace education. Pre-learning interventions were implemented with faith-based and non-governmental organisations and the government to enhance school preparedness among the 4-to-6 age group. International Girls’ Day was celebrated for the first time in Burundi on 11th October 2013, delivering messages to keep girls in school and combat gender-based violence in school.

**On-track**

**IR 0610/A0/08/121/001** Two policy documents (Education Sector Plan, ECD) are revised and adopted; two strategy documents (gender and equity; distribution and management of school textbooks) are elaborated and validated; a situation analysis on alternative education opportunities is carried out to strengthen the existing institutional framework; and sector coordination and planning skills are strengthened by 2014.

**Progress:** In 2013 UNICEF supported implementation of the 2012-2020 Education Sector Plan, which includes gender and equity strategies. Major reforms were launched to revise the nine-year Basic education (“Fundamental education”) curriculum for the 2013-14 academic year. UNICEF provided technical support for the revision of the curriculum (which had not been revised since 1989), including for the 7th-to-9th grades, initial and continuous teacher training and the management of the education system. As sector lead, UNICEF provided significant technical support to Government partners during the Donor Sectoral Conference in July 2013. Coordination with the Global Partnership for Education and monitoring of the implementation of the 2012–2020 Education Sector Plan were enhanced, and two Joint Sector Reviews were held (in May and November 2013). Expertise was provided to the Ministry of Education to improve the EMIS through the development of a work-plan jointly supported by the local donor group (Belgium, France, Norway, UNICEF) and its alignment with the three upper grades of the nine-year basic education.
On-track

IR 0610/A0/08/121/002 The Net Enrolment Rate (NER) increased from 94.6 per cent to 96 per cent and the Completion Rate (CA) increased from 68.5 per cent to 70 per cent, with special emphasis on girls and other vulnerable children through the dissemination of the “Child-Friendly School” (CFS) model and the Gender and Equity strategy to improve equitable access to school in the nine targeted provinces by end-2016

Progress:

To ensure access to quality education as well as address aspects of social cohesion, UNICEF supported the integration of Burundian returnee children from Tanzania in the education system. A total of 7,500 children, out of 8,797 children of primary school age, were enrolled in schools in four provinces. The construction of 63 classrooms is under way in two communes (Nyansa-Lac and Rumonge) hosting a significant returnee population. Community-based construction of 14 classrooms, which is one of the strategies to improve learning environment and pupil:classroom ratios in the targeted provinces, was carried out. In order to improve learning conditions and facilitate integration of returnee children, 43,239 school children benefited from training in Child-Friendly School modules, in addition to the construction of classrooms. Furthermore, 252 teachers in three return communes (Nyansa-Lac, Rumonge and Kayogoro) were trained in this module, with particular focus on Psychosocial support for returnee children.

UNICEF supported a Back to School campaign to help keep children in school at the decentralised level. The number of school children reached with school materials increased significantly from 2012 (520,000) to 822,891 in 2013. Teaching materials – chalk, dictionaries and mathematical accessories were also distributed. In order to facilitate learning by increasing the pupil: textbook ratio, UNICEF assisted the Ministry of Education to repair 95,600 textbooks in the provinces of Gitega, Kirundo, Muyinga, Ngosi and Kayansa. A PCA tool kit was developed with Fawe with a view to accelerating the elimination of gender-based violence in schools by placing a reference model (aunt) in schools.

On-track

IR 0610/A0/08/121/003 50 per cent of children aged from 0 - 6 months benefit from Early Childhood Development (ECD) in targeted provinces by the end of 2014/At least 50 per cent of children aged 0-6 in 9 provinces receive care and stimulation in ECD/ pre-learning centres respecting minimum ECD quality standards, together with the application of the ECD strategic plan in three targeted provinces (Makamba, Gitega and Kirundo) by the end of 2014

Progress: In 2013 UNICEF’s Education section put particular emphasis on pre-school interventions. Lack of investment and appropriate institutional framework and monitoring had resulted in a decline of the rate of enrolment in public and community-based pre-primary schools/centres, from 6.2 per cent to 5.5 per cent. Given the impact of lack of school preparedness on performance and achievement in school, a workshop on strategies to promote sustainable, community-based pre-schools and centres was organised with Governmental partners, NGOs and religious organisations to identify efficient and effective ways to accelerate pre-school interventions in Burundi and improve the quality of existing services and programmes. A draft work-plan based on the recommendations made is in progress.

Through the strategic partnership developed with NGOs and faith-based organisations to ensure sustainable enrolment, management and supervision of community-based preschools/centres, 1,320 children aged 4-6 years gained access to preschool programmes in five facilities in three return communes. Additionally, 344 preschool centres in 10 provinces received 22,800 mats and 108 ECD kits. Nearly 24,500 parents were sensitised on the importance of early learning. Furthermore, an empowerment programme on managing income-generating activities, life skills and consolidation of peace – targeting 150 young mothers, including 30 single, adolescent mothers – is under implementation in Bururi (Vyanda, Rumonge). In addition, 450 educators in 10 targeted provinces were trained to use the revised preschool training module, and 392 school directors in Makamba and Muyinga were sensitised to ensure sustainability of the preschools and centres, including the need for data collection on pre-school programmes.

To ensure school readiness and holistic development for 4-to-6-year-olds, communication tools for parenting education (10,000 image tool kits) were developed; printing began in late 2013.

On-track

IR 0610/A0/08/121/004 By the end of 2016, at least 40 per cent of adolescents in and out of school have strengthened life skills, including competencies, attitudes and behaviours in HIV/AIDS prevention, Reproductive Health and Peacebuilding.

Progress:

UNICEF continued to focus on youths and adolescents in 2013, especially those who are out of school, with a focus on imparting life skills. The inter-ministerial coordination group (Ministries of Education, Youth and Health) worked to develop sustainable interventions related to life skills on HIV/AIDS, reproductive health and education for peace, gender etc. Technical and financial support was provided to the Government for the implementation of the inter-ministerial "joint action plan" for adolescents and youths.

A symposium on adolescents was held in June 2013, and recommendations were made for strengthening adolescent and youth centres
and spaces for the promotion of life skills.
The promotion of life skills on HIV/AIDS, reproductive health, and education for peace among adolescents in and outside school, including returnees, was organised through strategic partnerships with faith-based organisations in Rutana (ODECO) and Muyinga (ODEDIM) to enhance awareness on HIV/AIDS, reaching 688 adolescents. Together with the inter-ministerial committee for adolescents and youth, sensitisation on HIV/AIDS was organised and reached 32,620 adolescents in schools and nearby communities. Around 2,138 (6.7 per cent) underwent voluntary testing.

On-track

IR 0610/A0/08/121/005 All children boys and girls affected by emergency situations have access to formal education or non-formal learning structures by the end of 2012/By the end of 2016, social cohesion is strengthened in schools and in surrounding communities and all children (boys and girls) affected by emergency situations have access to formal or non-formal education

Progress:

In addition to its preparedness and response to emergencies interventions and efforts to strengthen resilience, in 2013 UNICEF rolled out the “Peacebuilding, Education and Advocacy” (PBEA) Programme, funded by the Dutch Government and implemented as part of the integration plan for returnee children from Mtabila. A fundamental principle of the PBEA programme is the importance of implementing evidence-based interventions that are related to the specific context of Burundi. Hence, four studies focusing on: (1) resilience of adolescents coping with emergency situations, (2) conflict analysis addressing the role of education in building and keeping the peace, (3) reduction of violence based on a lifecycle approach and (4) support for young children in the construction and consolidation of peace and social cohesion are included in the research framework developed as a result of the research symposium held in July 2013. Two studies, one on adolescents and violence and a desk review analysing the conflict in Burundi, were conducted and completed.

In response to the emergency arising from repatriation of the remaining refugees from Mtabila in November–December 2012, more than 10,395 school-aged returnee children were integrated into the existing overcrowded classrooms in four provinces. The latter were provided with school materials and recreational kits. In order to facilitate learning (especially in Kirundi, French, mathematics and literature), a catch-up programme was organised jointly with World Food Program (WFP) (which provided school meals), benefiting 7,319 returnee children. In addition, two Small-Scale Frame Agreements (SSFAs) were established, with ODECO and the IRC, to conduct recreational activities at the temporary accommodation sites, reaching 364 children aged 3-to-6 years and 688 adolescents (football, cultural, dance and meetings on HIV, early pregnancy prevention and peace education).

PC 3 - Water, sanitation and hygiene

On-track

PCR 0610/A0/08/124 By 2016 populations in provinces with low access to potable water and basic sanitation have improved access to these services and adopt appropriate hygiene practices.

- WASH interventions in schools targeted 30 primary schools (representing 1.3 per cent of schools that do not have access to drinking water) and have benefited access to safe drinking water through the construction/rehabilitation of six water supply networks for 14,780 school pupils. In addition, 31 schools (representing 4 per cent of schools lacking access to sanitation facilities) received 68 blocks of 432 latrines, separate for boys and girls, covering 20,550 school children. Construction of sanitation facilities (latrines, rainfall collection systems and incinerators) was completed at four health centres that receive approximately 188,000 patients per year in Cankuzo and Gitega provinces.
- WASH interventions in communities contributed to providing access to safe drinking water for 1.4 per cent of people lacking access through the construction of six water supply networks supplying 54,230 people. The scaling-up of Community-Led Total Sanitation (CLTS) in seven communes of three provinces, targeting over 82,726 households, enabled the construction of 25,000 latrines and promotion of the adoption of good hygiene practices within households in six communes.
- 12 studies on the construction and/or rehabilitation of gravity water networks were carried out to benefit nearly 120,000 people, including school children in Makamba, Ngozi, Gitega, Bujumbura rural, Bururi and Karuzi provinces.
- The WASH programme supported the decentralisation process of water infrastructures management by local communities. In the context of strengthening municipal capacity to manage hydraulic infrastructure, six conventions of service delegation were signed in six municipalities in the province of Makamba. The programme supported the Government in adhesion to the SWA initiative, the National Planning Initiative for Results and the participation of eight Government officials to international conferences and capacity strengthening missions. Two officials attended the preparation of the AfricaSan 2014 meeting in Addis Ababa, three officials attended the exchange mission in Uganda on biogas and innovations and three others attended the high-level meeting in Abidjan, Côte d’Ivoire.
- Around 18,000 people affected by emergency situations concerning repatriation and cholera outbreaks were given...
WASH interventions in primary schools concentrated during 2013 included:

- 30 primary schools (representing 1.3 per cent of schools lacking access to drinking water) gained access to safe drinking water through the construction/rehabilitation of six water supply networks for 14,780 school pupils.
- 31 schools representing 4 per cent of schools lacking access to sanitation facilities received 68 blocks of 432 latrines (separated for boys and girls) for 20,550 school children.
- Two health centres were supplied with drinking water and four health centres receiving 188,000 patients/year benefited from the construction of gender-separated latrines, rain water harvesting facilities and incinerators.
- An agreement was signed with the DPSHA for hygiene-promotion activities and capacity building of teachers in 104 primary schools with more than 53,000 students.
- The WASH programme supported the realisation of 12 studies on the construction and/or rehabilitation of gravity water networks for the benefit of more than 29,000 pupils in 42 primary schools, communal colleges and high schools in the provinces of Makamba, Ngozi, Gitega, Bujumbura rural, Bururi and Karuzi.
- In the framework of innovation linking sanitation promotion and environmental protection, a biogas pilot project was launched in one primary school with nearly 1,100 pupils in Bukeye in the province of Muramvya, in partnership with the Department of Energy and the Project of Water and Sanitation (PEA) within the Ministry of Energy and Mines.
- The WASH programme approach to diversifying water supply sources included the exploration of boreholes equipped with a solar pumping system to supply schools and health care centres and communities.
- The construction of sanitation facilities (latrines, rainwater collection systems and incinerators) are completed in 4 health centres that serve some 188,000 patients per year in the provinces of Cankuzo and Gitega.

IR 0610/A0/08/124/002 By 2016, 10 per cent of the population without access to safe drinking water and basic sanitation at the national level has sustainable access and adopts good hygiene practices, including hand-washing with soap and treatment and safe storage of household water.

Progress:

- The WASH programme contributed in 2013 to the provision of access to safe drinking water for 1.4 per cent of people without access, through the construction of six water supply networks (supplying 54,0230 people) within communities.
- The scaling-up of the CLTS approach in seven communes of three provinces targeting over 82.726 households was enhanced through the post-triggering process in six communes and construction of 25,000 latrines, as well as promoting the adoption of good hygiene practices within households.
- In the framework of cross-sectoral approaches for showing evidence of UNICEF interventions, a socio-anthropological study (Knowledge, Attitudes and Practices) was initiated on six key family practices, including hygiene practices, to better direct interventions in WASH.
- 12 studies on the construction and/or rehabilitation of gravity water networks were carried out, benefitting nearly 120,000 people in the provinces of Makamba, Ngozi, Gitega, Bujumbura rural, Bururi and Karuzi.

IR 0610/A0/08/124/003 The legal, institutional and technical capacities of Government structures at the central, provincial and municipal levels are enhanced and they contribute to the promotion of WASH activities and the sustainable management of WASH facilities.

Progress: The WASH programme included institutional and capacity development and support activities to Government counterparts.

- In 2013 the WASH programme supported the decentralisation process of water infrastructure management by local
communities. In the context of strengthening municipal capacity for managing hydraulic infrastructures, six conventions of service delegation were signed in six municipalities in the province of Makamba.

- The progress report on Burundi's engagement on the SWA initiative at the high-level meeting of April 20, 2012 was endorsed by the Ministry of Energy and Mines (MEM), MSPL and Ministry of the Interior and was sent to the "Sanitation and Water for All" Secretariat.
- Burundi adhered to the 'National Initiative Planning for Results', with the first step of analysing the bottlenecks of the WASH sector through the use of the WASH Bottlenecks Analysis Tool (WASHBAT).
- The programme supported the participation of eight Government officials to international conference and capacity-strengthening missions. Two officials attended the preparation of AfricaSan 2014 meeting in Addis Ababa, three officials attended the exchange mission in Uganda on biogas and innovations and three others attended the high-level meeting in Abidjan, Côte d'Ivoire.
- Within the context of the innovative U-Report project, the following progress can be cited:
  i. Development of a national database of contacts of communal water authorities (in progress)
  ii. A focal point within the Ministry of Energy and Mines was designated

  Development of capacities in the collection and treatment of data related to the functioning of gravity water networks by the CPRCE and the presidents of the RCE are under preparation.

- **On-track**

  **IR 0610/A0/08/124/004** By 2016, at least 35,000 people, in particular women and children affected by emergencies, have adequate access to safe drinking water and basic sanitation and adopt good hygiene practices.

  **Progress:** In accordance with the principal commitment of UNICEF in emergency situations (CCC), the WASH program contributed to the preparation and response to two types of emergencies: the large-scale repatriation of 35,000 Burundians from Mtabila Camp in Tanzania and cholera epidemics in communes where cholera is endemic (Cibitoke, Bubansa, Bujumbura, Bururi and Makamba). The interventions were specifically targeted at children and women, and the principal results achieved were:

  **Assistance to returnees from Mtabila camp in Tanzania:**

  -- 1,500 people gained sustainable access to safe water through the rehabilitation of a water supply network in Bukemba (Rutana Province)
  -- More than 3,000 people living in one transit centre and two temporary accommodation centres in Makamba Province had access to more than 15 litres of drinking water per day for a period of 1-to-3 months.
  -- Approximately 10,000 people that passed through entry points at the Burundian border benefited from access to drinking water (1-5 litres/person)
  -- 2,000 people were sensitised on good hygiene practices and received soap for a period of more than two months.
  -- 2,000 people had access to improved sanitation facilities (showers, toilets and hand-washing devices) in five temporary accommodation centres in Makamba and Rutana provinces.

  **Response to Cholera outbreaks:**

  -- Disinfection of households and cholera treatment centres
  -- Provision of water with water tankers in the provinces of Cibitoke and Makamba and Bujumbura Town and Rural
  -- Communication materials about how to prevent cholera epidemics were developed with the assistance of a national consultant.

**PC 4 - Child protection**

- **On-track**

  **PCR 0610/A0/08/123** Girls and boys live in a protective environment in accordance to international standards on child rights and protection by the end of 2014

  **Progress:** In 2013, a National Child Protection Policy was developed following an earlier child protection system mapping. The National Child Protection Policy and 'Minimum Standards on children living in institutions and deprived of family care' were adopted by the Council of Ministries. The National Child Protection Policy Action Plan 2014-2016 sets priorities for strengthening child protection systems both at the national and decentralised levels: whereas the 'Minimum Standards' guide the process of improving care services for children in
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residential care centres and promotes de-institutionalisation. The national Child Protection Technical Coordination Committee continues to strengthen coordination and management of the child protection sector as well as support the Children and Family Unit within the Ministry of National Solidarity. Some challenges still exist among NGOs working in the sector.

UNICEF conducted capacity building and training sessions to strengthen the capacity of Ministry staff. The role of government social workers became more formalised, especially in relation to their collaboration with Child Protection Committees at decentralised level.

The promulgation of the new code of criminal procedure in April 2013 and the finalisation of the child protection code contribute to the harmonisation of national legislation with international standards for child protection, constituting major steps toward strengthening the system of justice for children in Burundi. UNICEF is working with International Bureau for Children’s Rights (IBCR) to: conduct capacity building of justice system actors, prepare a situation analysis and enhance the police training curricula to include child protection in police officer core training programmes.

UNICEF coordinated child protection interventions during the repatriation of about 35,000 Burundians who were repatriated from Mtabila refugee camp in Tanzania. Key interventions included identification, documentation, family tracing and reunification for 645 children (300 unaccompanied minors and 345 separated children) and the establishment of 10 child–friendly spaces in transit centres and areas of return. A total of 57,210 children were registered at birth in areas of return, of which 24,495 were returnees.

**On-track**

**IR 0610/A0/08/123/001** Justice for children, with child-sensitive procedures for child victims, witnesses, and offenders, is functional in Burundi by the end of 2014

**Progress:** The promulgation of the new code of criminal procedure in April 2013 and the finalisation of the child protection code contributed to the harmonisation of national legislation with international standards for child protection. In addition, the establishment of minors’ chambers within 17 courts of first instance, 17 public prosecutors departments and three courts of appeals will assist in dealing with the cases of minors.

UNICEF successfully advocated for the establishment of two rehabilitation centres for children in conflict with the law (one under construction in Rumonge and a second planned in Ruyigi), reflecting the government’s commitment to ensure the protection of minors deprived of liberty.

Capacity building of magistrates and the police for administration of juvenile justice is ongoing through Burundi’s centre of training of professionals of justice (CFPJ) and police schools. Child rights and justice for children are being integrated in the curricula of the three principal police schools.

Regarding legal assistance to children in conflict with the law, an MOU was being prepared with the NGO Avocats Sans Frontières in late 2013 to assist 250 children in conflict with the law to benefit from child-friendly procedures.

**On-track**

**IR 0610/A0/08/123/002** A child protection system, with a focus on gender equality that protects children from violence, abuse and exploitation, is in place in Burundi by the end of 2014

**Progress:** The national system of coordination, monitoring and evaluation was strengthened through: adoption by the Council of Ministers of the National Policy for Child Protection and Minimum Standards for children living in residential care centres, holding regular meetings of the National Coordinating Committee for the Protection of child; strengthening the staff of the Department of Children and Families (six trainings on different child protection themes conducted), harmonisation and translation into the local language of training modules and tools for Child Protection Committees; and the training of 88 government officials on child protection in rural areas (mainly social workers and police officers).

The implementation of the Minimum Standards on children living in residential care centres was supported in four provinces, where all residential care centres were evaluated by government social workers according to the standards.

Some 948 Child Protection Committees at village level, 33 at communal level and four at provincial level are functional, and 4,283 CPC members were trained on child protection and psychosocial support. During 2013 a total of 137,119 children were registered at birth in the provinces of Kirundo and Muyinga as well as in return areas of the repatriated population, including 24,014 children repatriated from Tanzania.

An inter-ministerial committee was established with UNICEF support to conduct the evaluation of the civil registration system in Burundi and develop a plan of action to accelerate civil registration.

Support was provided to the Ministry of Labour during 2013 to continue implementation of the national plan of action for the elimination of the worst forms of child labour, including the development of communication materials against child domestic labour, and to conduct a study on child domestic labour.

**On-track**

**IR 0610/A0/08/123/003** 50 per cent of identified OVCs have access to the minimum package of services, as defined in the National...
Policy for OVCs, 300 children in institutions and 600 children in street situations are reintegrated in accordance with minimum standards and the national strategy to fight against the phenomenon of children in street situations, 1,500 survivors of GBV including children and 200 children affected by conflict are reintegrated into their communities, 500 children in conflict or in contact with the law are released and placed in a protective environment by the end of 2014.

Progress:

UNICEF continued its effort to support an integrated approach to create a protective environment and deliver multi-sectoral services for all children with a special focus on the most deprived and vulnerable, especially OVC, children in street situations, children in conflict/contact with the law and survivors of gender-based violence (GBV). Five interventions were ongoing in 2013 in Kayanza, Muyinga, Ngosi and Gitega to provide support to OVC’s and strengthen the referral system to guarantee their access to services. These projects directly benefit 5,851 children. The creation of Nawe Nuse (solidarity) groups enables other children to gain access to support through financial savings/ contributions by members of these groups. Construction of a Drop-In Centre for children living in the street in Ngosi is ready to start in 2014, with property provided by the local government.

Material support to improve conditions of children detained in prison (Gitega and Mvimba) was delivered during 2013; provision of beds and mattresses is pending for 2014. A feasibility study of a child helpline was carried out with the participation of several different actors. Projet Lumiere, an innovative new project, was launched in nine villages to provide alternative sources of lighting for people in rural areas. This project was channelled through Solidarity Groups created to support Child Protection Committees.

**PC 5 - Communication for Development**

- **On-track**

**PCR 0610/A0/08/125** Communities adopt practices that are conducive to health, nutrition, education and child and women protection against abuse, exploitation and violence by 2016

**Progress:**

The C4D section contributed to changing behaviours, beliefs and practices within the population to achieve optimal utilisation of basic social services for child survival and development, and to achieve reduction of infant and maternal mortality by emphasising the integration of different actions within the context of behaviour and social change.

In 2013 C4D strategic communication used a mix of participatory methods of community dialogue, interpersonal communication reinforced by the utilisation of traditional and new media and innovation to inform, influence and involve individuals, households and opinion leaders in adopting new attitudes and/or behaviours. Communication tools, such as posters, image boxes and stickers were disseminated and radio broadcasts aired to support campaigns in health, education and protection. With feedback from the beneficiaries, materials will continue to be improved in 2014 to strengthen the different campaigns. To achieve results a combined strategy of mobile cinema, interactive theatre, community dialogue, capacity building, interpersonal communication and mass media were used to trigger discussions on health, WASH, protection and education topics to ensure the adoption of good family key practices and behaviour change in the community.

A community diagnosis was started on the six health and nutrition family key practices, as well as stigma and discrimination against children infected or affected by HIV/AIDS, albino children, Batwa children and children with disabilities through participatory consultations in Bururi, Makamba, Gitega and Ruyigi provinces. The approach used in the project fits into the logic of the 3As in communication for development; i.e." Assessment, Analysis, Action." To date, 15 community action plans were developed by communities.

- **On-track**

**IR 0610/A0/08/125/001** At least 60 per cent of children in provinces of geographical focus area fed according to the guidelines on infant and young children feeding practices, 60 per cent of children under 5 sleep under LLITNs, 60 per cent of parents are able to recognise signs of danger and adopt key practices on the treatment of diarrhoea with OSR and zinc and 60 per cent of pregnant women use PMTCT services in health structures by 2016

**Progress:**

The most recent available nationwide results indicate that 69 per cent of children are exclusively breastfed, 70 per cent receive complementary feeding, 45 per cent sleep under an LLITN, 57 per cent of children are referred to a health centre in case of diarrhoea,
62 per cent in case of fever and 55 per cent in case of ARI. PMTCT results are above national target; 42 per cent of HIV positive mothers and 32 per cent of children born to positive mothers received PMTCT services. To date, no specific results are available for decentralised areas, although discussion of a provincial level DHS began in late 2013. C4D supported the organisation of different health campaigns in 2013, such as Mother and Child Health Week (coupled with the introduction of the new Rotavirus vaccine and with World Breastfeeding Week) and the African Vaccination Week. To support those campaigns, communities were mobilised through interactive theatre: an estimated 9,208 men, 12,103 women, and 16,638 girls and boys were reached. A documentary of Burundi’s successful vaccination coverage efforts was produced. C4D also supported the National Malaria Programme/MoH in the organisation of a workshop to develop a communication plan on the fight against malaria. C4D reinforced capacities of technicians from the Ministry of Communication, Ministry of Health and Ministry of Communal Development to enable them to conduct BCC activities in their respective communities. Some 605 community leaders benefited from refresher training to pursue outreach activities in their respective communities. A total of 1,020 new community leaders were identified in 17 municipalities of the provinces Kayanza, Kirundo and Muyinga. Among this group, 903 new community leaders in 15 municipalities were trained in the three provinces on six health and nutrition family key practices, interpersonal communication and basic knowledge necessary to promote key family practices in their community. In Kayanza Province, 19,492 people (5,875 men, 8,446 women, 2,317 boys and 2,854 girls) were reached in three months. Through participatory consultations over 40,000 persons in 741 villages of Bururi, Makamba, Gitega and Ruyigi provinces participated in community dialogues related to the six health and nutrition family key practices, as well as stigma and discrimination of infected and affected by HIV/AIDS children, albino children, Batwa children and children with disabilities. Participatory radio broadcasts also supported the promotion of the six key practices. “Listening Groups” were set up, with 600 trained members in the provinces of Makamba, Burundi and Rutana, and were able to reach about 90,000 persons directly with messages.

**On-track**

**IR 0610/A0/08/125/002** At least 60 per cent of school children in targeted primary school wash their hands at key moments and at least 60 per cent of parents in intervention areas with low access to drinking water and basic sanitation improved good hygiene practices (latrine use, hand-washing, treatment), by 2016

**Progress:**

No new quantitative data are available.

In 2013 communication materials (image boxes, posters, stickers) were produced and disseminated to support WASH interventions for the promotion of hand-washing with water and soap at critical moments and to prevent cholera in disease-prone communities. 1,248 targeted schools in 10 provinces of the Back To School campaign and WASH targeted communities benefited from promotion of good hygiene and sanitation and cholera prevention messages. In the suburbs of Bujumbura, 32,100 households and 482 streets vendors were reached by a cholera-prevention awareness door-to-door campaign. Through a peer-to-peer approach, 3,720 young scouts in the provinces of Kirundo and Muyinga reached at least 33,000 peers, 6,600 parents and local government members during activities promoting good hygiene and sanitation, including radio broadcasts. In the “Villages Ruraux Intégrés” (VRI) of the province of Makamba, Bururi and Rutana 7,893 inhabitants were sensitised by the 90 members of the “Listening Group” on good hygiene practices (washing hands with water and soap at critical moments, treatment and safe storage of water, proper use of latrines).

Despite the cholera outbreak in the region, the VRI villages remained unaffected by cholera. Socio-anthropological research on key family practices is on-going to better target WASH interventions.

**On-track**

**IR 0610/A0/08/125/003** Protection networks, community leaders, local administration, religious groups, and partner NGOs are involved in activities of prevention, protection from violence, sexual exploitation, child labour and in the promotion of systematic and retrospective birth registration by the end of 2016

**Progress:** During 2013 technical support was given to build the capacity of government partners and civil society on child protection. Communication tools (posters) against child domestic labour and to promote birth registration were disseminated. Interactive theatre sessions by young people supported child protection campaigns and international days. Interactive theatre has helped to sensitize local communities against stigma and discrimination for children affected or infected by HIV, as well as discrimination against Batwa children, albino children and children living with a handicap. More than 30,284 people (6,780 men, 9,215 women and 14,289 children) participated in those sessions. During the birth registration campaign, a mix of communication tools (interactive theatre sessions, mobile cinema, radio broadcasts) were used effectively.

**On-track**

**IR 0610/A0/08/125/004** At least 70 per cent of parents in the areas of intervention know steps for early childhood development and related care and parents and local administration officials are involved in the promotion of education for all, by the end of 2016

**Progress:**

In 2013 technical support was given to the education sector in the areas of early childhood development, adolescents and HIV/AIDS and...
for the Back-to-School campaign. C4D supported the development of a communication plan on education reform. Communication tools (image box and posters to sensitize on early pregnancies in school, child-friendly schools and the prevention of grade repetition) were developed and disseminated in schools during the Back-To-School campaign. Radio spots were also created and aired to support the campaign.

In terms of HIV prevention, C4D supported the improvement and dissemination of communication tools used in the target schools and during an awareness competition organised within school clubs to “Stop AIDS”. Future life skill guides will also integrate other topics, such as peace building and nutrition.

**PC 6 - Cross-sectoral**

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<th>PCR 0610/A0/08/107</th>
<th>450 children affected by conflict and in conflict or contact with the law live in a protective environment</th>
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**Progress:**

The National Statistics Institute (ISTEEBU) developed partnership with sectoral management information systems (mainly Education and Health) for electronic data exchange. Strategic surveys were undertaken, such as the 2010 Demographic and Health Survey, the 2012 Minimum Package of Services, and others, as well as surveys and research to feed the national database Burundinfo. A cluster on Statistics was established within the coordination group of partners to improve coordination of the production of required information for monitoring of MDGs and national strategies, such as the Burundi Vision 2025 and the second generation of PRSP. As leader of technical and financial donors for the social protection sector, UNICEF maintained dialogue and consultation with the Government through the Minister of Civil Service, Labour and Social Security and TFP concerning Social Protection.

To increase knowledge on areas affecting children and facilitate evidence-based advocacy for the realisation of children’s rights, UNICEF collaborated with a range of partners in the area of research and evaluation, including local and external institutions: University of Burundi, Carleton University (Canada), World Bank, African Development Bank. Thanks to these collaborative efforts, research and evaluation quality was strengthened. Dissemination of the results of the “Situation analysis of U-5 malnutrition” strengthened national dialogue on child malnutrition and national development in general. The Government is now committed to greater investment in fighting malnutrition. Several reforms in the sector are under preparation, notably the “Nutrition platform, Burundi’s participation in the SUN movement and the elaboration of the national policy on nutrition.

Moreover, UNICEF supported the Ministry of Communal Development to reflect children’s issues in the new generation of Communal Plans for Community Development (CPCD).

| On-track |
| IR 0610/A0/08/126/001 | National structures producing statistics are capable of providing reliable and disaggregated data to monitor the situation of women and children at central and decentralised levels by 2016. |

**Progress:**

The National Statistics Office is host to Burundinfo, a national data dissemination platform developed in the course of the last two years. An administrative team regularly selects the most reliable national indicators for dissemination in the Burundinfo database and trains users on database use. Thanks to several training workshops held with support from the DevInfo support group, sectoral ministry focal points now have the capacity to consult the database online and produce graphs and maps for their reporting. The Ministries of Health and Education have the capacity and are participating in a pilot mechanism of electronic data exchange between their management information systems and Burundinfo.

To expand access to the database, the first online version of Burundinfo was launched in June 2012 by the 2nd Vice-President of Burundi. Also, UNICEF supported a needs assessment of ISTEEBU’s capacity and needs in terms of IT infrastructure in view of future data exchange and webhosting. The results helped identify and contract two national firms to reinforce the IT infrastructure and the internet connectivity at ISTEEBU.

| On-track |
IR 0610/A0/08/126/002 Tools and support for Planning, Implementation and Monitoring and Evaluation of the CPAP are made available annually to different programmes and national counterparts by 2016.

Progress:

The Planning and Monitoring Unit continued to support programme sections through tools and assistance for the development of the Rolling Working Plan and the monitoring of its implementation. The unit played a lead role in conducting the midyear review of the working plan, including organisation of the joint field missions. This year's innovation was that the three field visits teams debriefed on their missions during a meeting held at the end of the field visits, to share their findings and opinions with others. This approach was very much appreciated and should be improved during the annual review. The Unit contributes to the UN system coordination activities through the UN System's Integrated M&E Group, the UNDAF Thematic Group and the Programme Management Team.

On-track

IR 0610/A0/08/126/003 Donors, authorities and other duty bearers are sensitised on child rights, including the right to participation, and are able to mobilise appropriate resources by 2014

Progress:

Elections for the National Forum of Children were successfully organised in June 2013. The Forum was officially launched by the First Vice-President of Burundi in July and elected members met in September for the first session of the Forum. Media partnerships were also signed to allow child journalists to realise their right to participation and expression in the media. A consultant was recruited to update and improve the BCO photo database and to train child journalists, who produced the 2014 agendas and calendars of the BCO. A national UN Volunteer was recruited to support youth engagement in Burundi on the national and international scenes. BCO increased its online and social media presence through the creation of the BCO Facebook page and YouTube channels which were successfully launched in 2013: as of 31 December, more than 5,800 ‘Likes’ had been achieved on Facebook, including a strong presence of the primary target audience, youth. Several field visits were organised for fundraising and advocacy purposes, mainly with five key UNICEF National Committees accompanied by donors, media and Goodwill ambassadors, as well as international and national media to support advocacy efforts on identified priorities for children and women in Burundi, with a strong focus on chronic malnutrition. Numerous funding proposals and materials were produced. Partners were identified to develop and co-finance the media audience and youth needs/expectations survey in Burundi, terms of reference were elaborated and published and an implementing partner was identified.

Met

IR 0610/A0/08/126/004 The SitAn is updated based on new socioeconomic environment and policies that are affecting the situation of children and women in Burundi by 2013.

Progress:

UNICEF Burundi finalised a key document in 2013 concerning the nutritional situation in the country. Burundi is one of the five countries in the world most affected by chronic malnutrition. The study aimed to look at underlying causes to address these phenomena. 500 printed copies were disseminated to a varied and wide public, and due to broad interest from many partners, UNICEF will print 1,000 more copies. The government has appropriated the results of SitAn to mobilise resources and elaborate appropriate programmes and reforms to fight malnutrition. Major on-going reforms in the nutrition sector were being prepared during 2013, notably the creation of Nutrition platform, elaboration of the national policy on Nutrition, and the decision to join to SUN movement.

On-track

IR 0610/A0/08/126/005 Communal development plans (CPCDs) take into account children and women issues by 2014.

Progress:

With financial and technical support from UNICEF to the Ministry of Communal Development, 187 technical staff at communal, provincial and central levels were trained in the application of the M&E manual. UNICEF participated in planning sessions of new CPCDs in three communes of Gitega. Children, women, youth and the vulnerable population were effectively represented in the planning process, and the specific issues of children and women are reflected in the new generation of CPCDs. The challenge is to ensure effective participation by children and women in monitoring and evaluation of the CPCDs.

UNICEF participated actively in regular monthly meetings of Thematic Group on "Decentralisation and local development", composed of representatives of Government institutions and technical and financial partners. UNICEF continued to use this platform to advocate for the integration of children in different development programmes and projects at local and national levels, as well as in sectoral policies.

IR 0610/A0/08/126/006 25 per cent of U-reporters use U-report as a tool of participation on relevant key issues affecting their communities
UNICEF Annual Report 2013 - Burundi

On-track

IR 0610/A0/08/126/007 By 2016, social policies, including the implementation strategy of the national social protection policy, take into account the specific needs of women and children as they are developed and implemented

Progress:

UNICEF partnered with World Bank to conduct a study on "Social Safety Nets Assessment". The study focuses on the diagnostic and mapping programmes of social safety nets existing in Burundi, and constitutes an important step in development of social protections schemes. The interim report is completed at 80 per cent, because the strategic chapter related to the analysis of poverty and vulnerability is still under preparation by the World Bank Poverty Reduction team. The interim report was presented at the donor conference of Burundi, organised from 28 to 30 October 2013. UNICEF offered also an appropriate technical support to the Ministry of Labour for the preparation of key documents for the Conference (analytical note, priority projects, etc.)

As leader of the Technical and Financial Partners group for the social protection sector, UNICEF maintained dialogue with the Government through the Minister of the Civil Service, Labour and Social Security and partners, to exert influence in favour of prioritizing social protection. Thus UNICEF provided comments and inputs on the draft annual review of the PRSP-II, mainly on the social protection chapter. With these efforts, UNICEF is preparing to work with Government and its partners on the implementation strategy for the National Policy for Social Protection in coming years.

On-track

IR 0610/A0/08/126/008 By 2016 strategic research, studies, surveys, assessments and evaluations are conducted to generate knowledge and evidence about the situation of children, young people and women and contribute to advocacy for the development and implementation of programmes and policies to achieve the best results for children, young people and women with equity.

Progress:

The Country Office developed a rolling IMEP for 2013-2014. At the end of 2013, 40 per cent of studies and evaluations planned in the IMEP had been completed, 40 per cent were on-track, and 20 per cent had made no progress. The completed reports include: (1) situation analysis of under-five malnutrition (SitAn 2013), (2) country assessment of essential commodities for children and women; (3) LOW HORIZONS: Adolescents and Violence in Burundi, (4) Evaluation of WASH programme in integrated rural villages of Rutana Province, and (5) the CMAM review. On-going studies and surveys include: (i) assessment of social safety nets; (ii) immunisation coverage survey; (iii) Survey on Nutrition and retrospective mortality in the provinces of Cankuso, Ruyigi, Rutana and Makamba; (iv) study on child domestic labour; (v) socio-anthropological study on knowledge, attitudes and practices on the key family practices; (vi) study on the use of GSM, and (vii) media audience and needs of young people in communication.

In order to increase knowledge on areas affecting children and facilitate evidence-based advocacy for the realisation of children's rights, UNICEF partnered with a range of partners in the realisation of research, studies and evaluations, including local and external institutions: the University of Burundi, Carleton University (Canada), the World Bank, the African Development Bank and others.

Dissemination of the situation analysis on child malnutrition contributed to strengthening national dialogue on the issue of childhood malnutrition and national development. Currently, the Government has committed to greater investment in fighting malnutrition.

The CO designated the Social Policy, Advocacy and Evaluation Section to coordinate KM actions. Thus, a KM strategy was developed on the basis of the results of the KM survey conducted internally to capture the staff habits and preferences for sharing and acquisition of knowledge and information. Also, an action plan tied to the KM strategy for 2014-2016 has been developed. The next step will be implementation of the action plan and its extension to partners.

PCR 0610/A0/08/800 7. 1 Effective and efficient programme management and operations support

On-track

IR 0610/A0/08/800/001 Effective and efficient Governance and systems

Progress:

BCO uses a number of tools to reduce bottlenecks and transaction costs.

Assets have been efficiently managed and the warehousing system is compliant with international warehousing standards. BCO is also constantly looking at way to reduce costs by using innovations and technology, which has been facilitated by the introduction of high-speed Internet in Burundi. The Office has upgraded its bandwidth at lower cost and encouraged staff to use cost-effective means of communication such as Skype and VC to communicate with partners and colleagues, thus reducing telecommunications bills.

BCO has developed and maintained a series of LTAs for various services and is working with other UN agencies in this process. Collaboration with other UN agencies has been very successful, and in several instances UNICEF has used other UN agencies’ resources.
On-track

**IR 0610/A0/08/800/002 Effective and efficient management and stewardship of financial resources**

**Progress:**
BCO applied transparent financial management processes through the use of Vision. All payments – including invoices, salaries and other staff entitlements – were processed on time. Financial reports were generated and sent to RO and HQ in a timely manner. Progress on cash management is one of the main achievements for 2013, bank closing balances were less than US$200,000 for the whole reporting period. Tremendous efforts have been made to ensure that there are no unliquidated DCTs over six months.

On-track

**IR 0610/A0/08/800/003 Effective and efficient management of human capacity**

**Progress:**
BCO has developed a simple mechanism to ease the recruitment of human resources needed for programme implementation. With other UN agencies, a common web-based roster was developed and BCO is also using cost-effective tools to ensure that vacancy ads are widely disseminated. Regarding NP recruitments, 100 per cent of recruitments were completed within the limit of 45 days. However for IPs, recruitment has on average taken longer than 90 days. In some instances BCO has also used talent pools as a source of candidates to save time for urgent recruitment. The Human Resource Unit has significantly improved the on-boarding recruitment process to enable new staff and consultants to join the Office without major issues. An area for future improvement is the implementation rate of the Office training plan, of 93 training requests only 43 (46 per cent) were completed.
Effective Governance Structure

Office objectives and priorities are discussed and compiled in the Annual Management Plan, which was approved by the Country Management Team during the first quarter of the year and reviewed twice during 2013 (mid-year and end-year). The Management performance indicators followed on a quarterly basis help track office progress on key benchmarks related to budget, supply, programme management and operations.

BCO has a governance structure with the responsibility of ensuring oversight for the successful management of the Country Office. The structure includes various statutory and non-statutory office committees with terms of reference and guidelines that are consistent with those provided through UNICEF Organisational Policies and Procedures. In 2013 they were: CMT, Joint Consultative Committee (JCC), Contract Review Committee (CRC), PCA Review Committee (PCARC), The Local Central Review Board (CRB), Selection & Advisory Panel (SAP), Learning & Staff Development Committee, Property Survey Board (PSB), Internal Control Team, Staff Association Executive Committee, Caring For Us Team, HACT Task Force, Emergency Task Force, Innovations Task Force and VISION Task Force.

The CMT held four meetings in 2013 and endorsed the Learning and Development plan for 2013, the key performance management indicators, as well as the IMEP 2013. CMT meetings are devoted to monitoring performance management indicators and endorsement of the recommendations from the Programme and Operations meetings.

The last audit was conducted in 2010 by the Office of Internal Audit and Investigations. In 2013, two peer reviews were conducted in Supply and Operations.

Strategic Risk Management

In 2013 the Office streamlined its Standard Operating Procedures (SOP) to improve efficiency and effectiveness. Based on the risk assessment undertaken, new SOPs were also created to mitigate the risks.

The ERM was reviewed in a working session involving participants from all programme and operations sections, and was updated on the web portal, taking into account 12 risk categories/areas. This exhaustive library takes into account all programmatic and operational activities, including Innovations.

The Business Continuity Plan (BCP) was updated. As of January 2014, BCP exercises will be carried out to ensure BCO readiness in case of emergency or crisis.

At all levels of Office programme implementation, risks have been identified and mitigating steps undertaken.

Evaluation

BCO has an up-to-date IMEP that is used to plan and implement research and evaluation activities in key programmes, strategies and management areas. As of end December 2013, 20 per cent of studies and evaluations planned in the rolling 2013-2014 IMEP were completed, while 60 per cent were on track. The Social Policy, Advocacy and Evaluation section continued to provide technical support to sectoral programmes for quality assurance of research, studies and evaluations, mainly for the development of Terms of Reference, the design of methodology, the drafting of data collection tools and review of draft reports.
In order to increase knowledge on areas affecting children and facilitate evidence-based advocacy for the realisation of children's rights, UNICEF partnered with a range of local and external institutions on research and evaluation, including the University of Burundi, Carleton University (Canada), the University of Brussels, the World Bank and the African Development Bank. Carleton University led the evaluation of a WASH project and the University of Brussels conducted an impact evaluation of Projet Lumiere using randomised controlled trials. Thanks to these collaborative efforts, the quality of research and evaluation was strengthened. The SOP on quality/insurance was particularly mobilised and the Regional Office was involved throughout this process.

Major research and completed studies were uploaded on the global evaluation database (http://intranet.unicef.org/epp/repsubportal.nsf).

In terms of capacity building, BCO continued to enhance local/national evaluation capacity by organising training and providing technical support in evaluating the results of programmes and policies. Some 187 national counterparts were trained on the application of the M&E manual for implementation of the communal plan for community development.

BCO staff also provided professional support for the evaluation commissioned by UN coordination: “Peacebuilding through support for sustainable socio-economic reintegration for people affected by the conflict”, as well as for the annual evaluation of the UNDAF 2012-2016.

**Effective Use of Information and Communication Technology**

ICT supports programme delivery in Burundi through innovative solutions to increase office productivity, with particular focus on automating various tasks, such as dynamic allocation of IP address (DHCP), single logon, and automatic updates of applications and operating systems of devices connected to the UNICEF network. With wide access to Internet and the need expressed by users to use their own devices, UNICEF Burundi has introduced numerous solutions this year to enable staff to securely access corporate systems from almost any location and any device, with an aim of increasing collaboration among staff and with external partners.

In addition, the generalisation of the use of Skype has drastically reduced costs of communications and provided employees with an effective and efficient solution to engage with external partners. UNICEF Burundi is currently working to address some issues noted with the use of Skype, mainly those linked to the quality of services. With the global strategy to move to centralised and cloud-based platforms, BCO has reduced servers’ footprint and shifted efforts to the management of service delivery. For example, Burundi is piloting the deployment of service management with the aim of improving the quality of ICT services and effectively managing services provided by suppliers.

ICT has actively participated in the preparation of the UN's Business operation strategy (BOS) in Burundi. Four areas of collaboration with other UN agencies have been identified, and the process is in progress with the ongoing recruitment of a consultant who will be in charge of finalising the BOS for the UN in Burundi.

ICT has implemented secure solutions to enable staff to access the corporate system from remote sites, and a document containing all options for remote access to corporate systems was prepared and shared with all users. In addition, with the recent presence of high speed Internet in Burundi, most staff have 3G modems at their residence and can work from home as if they were in the office.

Four UN common LTAs in the ICT area were identified this year, and processes were shared among UN
agencies.

ICT in Burundi uses the Active KillDisk tool to wipe out data on computers and the service of the UN mission in Burundi allows for the destruction of ICT equipment in an environmentally conscious way.

Finally, the ICT disaster recovery plan was updated this year and several successful simulation exercises were conducted. During all simulation exercises, data and access to the corporate system from remote sites were restored.

**Fund-raising and Donor Relations**

In 2013 BCO doubled its overall budget vis-à-vis the four previous years, reaching a total budget of almost US$28 million. The Office was able to mobilise 106 per cent of resources of the OR ceiling in the country programme document (CPD), as well as resources to meet appeal needs (107 per cent of HAR/CAP appeal). Funds available were utilised optimally, with PBAs expiring during the reporting period recording a 99.7 per cent utilisation level.

Though some delays were caused in donor reporting due to external factors, the quality of donor reports remained high throughout the year.

Various new funding opportunities were explored, especially in the context of Innovations projects, including partnerships with private sector partners, such as United Internet. The Country Representative of BCO is actively involved in developing UNICEF’s global corporate engagement strategy and corporate partnerships will be increasingly explored in this context. New potential donors from emerging donor countries, including the Middle East, were proactively engaged.

Over a dozen proposals were submitted during the year, and BCO hosted six visits from National Committees for UNICEF, strengthening existing ties and forming new ones with key Natcoms.

**Management of Financial and Other Assets**


Good practices of Programme/Operations staff cash flow forecast and bank optimisation were maintained. Sections systematically provide the Finance Unit with their monthly estimate, which is consolidated and posted in the net for replenishment. Nevertheless, the minimum benchmark of US$200,000 was exceeded in April and August due to programme activities that were postponed to following months.

The Office does not have long-outstanding items on bank reconciliation. Open items have been consistently matched and cleared the following month and deadlines from DFAM HQ were respected throughout the year.

For DCT liquidation, BCO has maintained a good track record, achieving the target of zero DCT balance > 9 months. The Office monitors DCT status twice a month and shares reports at programme and operations meetings. For RR indicators, the Office has spent US$9,353,913 in RR funding, representing 99 per cent of the yearly RR funding.

The Office produced new SOPs to reduce and simplify workflow processes in Administration, Human resources, ICT, Supply and Finance.
Regarding other assets, BCO purchased 90 per cent of the laptops needed to replace obsolete models, as well as three vehicles to reinforce the existing automobile fleet for better implementation of programme activities.

The Office completed 10 additional micro-assessments for implementing partners, and arrears to strengthen the financial management capacity have been identified. To date, 36 partners of 60 have been assessed, representing 60 per cent of partners.

The UNICEF Insurance plan was prepared and shared with other UN agencies.

As part of the roll-out of its HACT assurance plan, BCO harmonised a spot-check calendar, which will be used starting in January 2014. The overall HACT assurance plan will be reviewed quarterly and endorsed by the CMT. A team to implement this activity has been identified and will work in close collaboration with the Chief of Operations and the Deputy Representative.

**Supply Management**

The total procurement plan for 2013 was estimated at US$13.9 million, which is a significant (58 per cent) increase over the 2012 supply plan (US$5.9 million).

At the end of 2013 realisation of the supply plan was at 74 per cent (US$10.3 million). Of the US$13.9 million planned, US$2 million was planned for school construction; however only US$0.6 million was realised in 2013, with the remainder postponed for use in 2014. By excluding the gap of US$1.4 million, realisation of the supply plan would be at 81 per cent.

The split between Goods, Services and Construction is 68 per cent, 15 per cent and 17 per cent, respectively. For Goods the breakdown per section was: Health, 64 per cent; Education, 18 per cent; WASH, 3 per cent; and Protection, 1 per cent.

<table>
<thead>
<tr>
<th>Supply Plan 2013</th>
<th>$13,889,180.84</th>
</tr>
</thead>
<tbody>
<tr>
<td>Actual</td>
<td>$10,229,483.23</td>
</tr>
<tr>
<td>Realisation per cent</td>
<td>74 per cent</td>
</tr>
<tr>
<td>Realisation excluding missing constructions</td>
<td>81 per cent</td>
</tr>
</tbody>
</table>

**Split per categories**

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount (US$)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Goods</td>
<td>6,954,554.48</td>
<td>68 per cent</td>
</tr>
<tr>
<td>Services</td>
<td>1,557,463.98</td>
<td>15 per cent</td>
</tr>
<tr>
<td>Construction</td>
<td>1,717,464.77</td>
<td>17 per cent</td>
</tr>
<tr>
<td>Total</td>
<td>10,229,483.23</td>
<td>100 per cent</td>
</tr>
</tbody>
</table>

**Split of goods per section**

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount (US$)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health</td>
<td>4,450,914.87</td>
<td>64 per cent</td>
</tr>
<tr>
<td>Education</td>
<td>1,251,819.81</td>
<td>18 per cent</td>
</tr>
<tr>
<td>WASH</td>
<td>208,636.63</td>
<td>3 per cent</td>
</tr>
<tr>
<td>Protection</td>
<td>69,545.54</td>
<td>1 per cent</td>
</tr>
<tr>
<td>Other</td>
<td>914,493.26</td>
<td>13 per cent</td>
</tr>
<tr>
<td>Total</td>
<td>6,895,410.11</td>
<td>100 per cent</td>
</tr>
</tbody>
</table>

The majority of goods (54 per cent) were delivered directly to partners in order to avoid storing items in the UNICEF warehouse. The total value of supplies managed in the controlled warehouse was US$4.1 million,
with the current stock level of US$890,375. Of this total, 26 per cent of current stock is linked to emergency supplies.

Construction was an important activity in 2013. This was the case not only for Education, where construction services for 63 classrooms were procured, but also for Protection and WASH, where important construction projects were sourced. For Protection, the construction of one juvenile centre was started and for WASH, 38 latrine blocks of 228 latrines were initiated.

The split between Local vs Offshore/Direct order was 26 per cent vs 74 per cent. The increase in local procurement is in line with the overall procurement increase. In 2013 no major changes in local markets were noted. However, services such as telecommunications/internet services improved. A major challenge remains the limited local availability of several essential commodities and the quality of these commodities, which may not meet international standards. For this reason, a high proportion of goods still has to be imported. For example, in 2013, nearly 3 million exercise books and chalk for the BTS campaign had to be sourced regionally in Tanzania and Rwanda.

In 2013 the Office signed 16 LTAs with local suppliers, to increase flexibility in the procurement process by reducing delivery delays. LTAs have been signed for major goods and services, such as office supplies, pipes, fuel, telecommunication, transport, meeting rooms/services and printing/binding. Most LTAs were completed in line with “One UN” and BOS, to reduce workload and enable economies of scale.

A key challenge during 2013 was the BTS campaign, where Supply bought and delivered supplies for nearly 800,000 students in different locations in the country.

Other important projects included conducting a commodity assessment of essential goods, strengthening the CAMEBU by building an additional warehouse block, procuring two cold rooms for CAMEBU to support the central cold chain logistics, procuring three ambulances to support the PNSR (Programme National de la Santé de la Reproduction) in the province of Gitega and initiating RapidSMS technology.

In addition to the supply plan, a volume of US$4,537,451 was procured in 2013 for Procurement Services. Procurement Services allows the Public Health departments of Burundi to use UNICEF’s procurement and logistics processes and network to buy vaccines and Vitamin A in order to increase country capacity in the direct procurement of essential commodities, while reducing deliveries to partners. The GAVI portion represented US$2,957,352, while US$1,580,098 was for regular procurement services.

Generally speaking, Supply works to increase visibility and transparency by using VISION reports (stock level, GIT, GR, supply plan achievements). Monthly reports are sent out to programmes to show status and trends.

Several end-user monitoring activities were completed throughout the year, mainly in the field for school equipment. Pre-delivery inspections were carried out regularly in cooperation with programmes to check the quality of goods for orders higher than 10,000. All those activities are key to improving service levels to programmes and partners.

In 2013 the Logistics Assistant supported the Mali BTS project in October and the Supply and Logistics Specialist attended the Procurement workshop in Copenhagen in June.
Human Resources

In 2013, BCO had 75 staff members, including 33 GSs (1 UNV, 1 TA), 15 NPs, and 27 IPs (1 UNV, 1 international GN, 1 NETI). In terms of recruitment, 13 positions were filled in 2013 (9 IPs, 1NP, 3 GS). Three internal staff were promoted to higher positions.

In March the PBR approved 15 new positions, the promotion of two positions and the abolishment of five positions. At least eight IPs left the country office on reassignment to other UNICEF/UN offices, and one IP took a Special Leave Without Pay. At end-2013, four positions were vacant, with recruitment ongoing. The KPI of 90 days was respected for most positions. BCO respected gender parity (50 per cent male and 50 per cent female).

As of December 2013, 100 per cent of PERs were completed for phases 1 and 2.

The HR Unit reinforced the roster system, which has been operational for three years. In addition, HR uses the roster of UN agencies in Burundi, ESARO and HQ to achieve faster recruitment of consultants and staff on Temporary Appointment. Advertisement through websites, including Intercontact services, the UN e-roster, and ReliefWeb helped save approximately US$25,000 and shortened recruitment time.

In 2013 BCO organised a CBI workshop, and eight staff were certified. Managing People for Results workshops were organised twice to build staff capacity and strengthen performance management and supervision skills. All staff attended the online Integrity awareness initiative and were awarded certificates.

The completion of office learning and development plan rated 67 per cent (83 per cent local group training, 77 per cent global and regional training and 56 per cent for individual training). This high rate is the result of encouragement and close monitoring by the local learning and training committee and the involvement of management and supervisors.

BCO continued to ensure new staff integration using induction and orientation kits, with introductions to different sections and local committees.

In early 2013 a staff retreat was organised for three days in Gitega Province. The main focus was team building, ethics and the new perspective of programming in BCO. The outcome of the retreat was an overall Office action plan, which was reviewed later in the year by the JCC.

The Local Staff Association played an active role in consolidating team cohesion and a positive working environment. Welcome and farewell parties were organised, as were several staff excursions and the annual UNICEF Children’s Christmas party (for staff children) as well as the annual staff Christmas party.

UNICEF staff participated in the inter-agency training organised by the UN Dispensary on HIV/AIDS and related illnesses, as well as the use of first aid kits.

Following the 2011 Global Staff Survey findings, BCO took the opportunity during the staff retreat to review the action points on staff morale, career development, and effective communication between supervisors and supervisees.

An action plan was put in place under the chairmanship of the Local Staff Association and different activities were organised throughout the year, including staff trainings and Wednesday afternoon learning.
Efficiency Gains and Cost Savings

Savings linked to new SOPs in 2013 are estimated at 38,108 minutes working time and US$53,797 cost reduction. The highest improvement is observed in local travel work processes, with project savings of 11,520 minutes working time and US$31,857 cost reduction. The SOPs were reviewed and streamlined to suppress bottlenecks and improve the efficiency of work processes. The savings were derived from the implementation of the new SOPs put in place after May 2013.

Signed LTAs by UNICEF alone or through the Country Team Committee helped the Office to save time in procuring goods and services. Other UN Agencies have also used UNICEF’s LTAs for the same purpose.

Changes in AMP & CPMP

There are no significant changes envisaged in BCO’s Annual Management Plan for 2014.

Nevertheless it should be noted that 2014 will take place in a pre-electoral context, which will mostly likely impact programme implementation, especially in the second half of the year. Another important factor that may influence smooth programme implementation is the potential departure of the UN mission, which could result in the UNCT as a whole facing a more politicised agenda. Discussions both during the 2013 review as well as during the ERM update session were carried out to determine workable solutions and risk mitigation. It is therefore foreseen to accelerate partnership agreements and schedule events, including seminars and workshops in the first half of the year, whenever possible.

On a programmatic level, three -to-four cross-cutting priorities were identified, including peacebuilding, youth and adolescents, Knowledge Management and Innovations. A deeper reflection will take place on where to place these priorities in the current BCO structure as mainstreaming of such priorities has proven limited in its impact. BCO’s office structure may witness further changes to reflect current programmatic priorities.

BCO has acknowledged the importance of youth participation and C4D and will continue to develop and reinforce these strategies over the coming year.

Summary Notes and Acronyms

Notes
[1] According the Extended Core Welfare Indicators Questionnaire (QUIBB) of 2006, two poverty lines were estimated: one for Bujumbura evaluated at BIF182,785 and another for the rest of the country estimated at BIF103,730.

Acronyms
AMP - Annual Management Plan
BCO - Burundi Country Office
BCP - Business Continuity Plan
BOS - Business Operation Strategy
BTS - Back-to-School
C4D - Communication for Development
CAMEBU (Fr.) - National Drug Store
CLTS - Community-led Total Sanitation
CMAM - Community-based Management of Acute Malnutrition
CMT - Country Management Team
CO - Country Office
CP - Country Programme or Child Protection, depending on the context
CPD - Country Programme Document
CSO - Civil Society Organisation
DCT - Direct Cash Transfer
DPSHA -
DHS - Demographic and Health Survey
ECD - Early Childhood Development
EMIS - Education Management Information System
ERM - Enterprise Risk Management
FAO - Food and Agriculture Organisation
GAVI - Global Alliance for Vaccines and Immunisation
GS - General Services staffing category
ICT - Information and Communication Technology
HMIS – Health Management Information System
IMEP - Integrated Monitoring and Evaluation Plan
ISTEEBU – Burundi National Statistics Office
IP - International Professional staffing category
JCC - Joint Consultative Committee
LLTC - Local Learning and Training Committee
LSA - Local Staff Association
LTA - Long-Term Agreement
MDG - Millennium Development Goal
MoH - Ministry of Public Health
MoREs - Monitoring Results for Equity system
MoU - Memorandum of Understanding
MTR - Mid-term Review
NP - National Professional staffing category
OMT - Operations Management Team
OR - Other Resources
OVC - Orphans and other Vulnerable Children
PBA - Programme Budget Allotment
PBR -
PD - Positive Deviance
PMTCT - Prevention of Mother-to-Child Transmission (of HIV)
PO - Purchase Order
PRSP - Poverty Reduction Strategy Paper
REACH - Reach Every Child
RR - Regular Resources
SitAn - Situation Analysis
SOP - Standard Operating Procedure
SOWC - State of the World’s Children report
SUN – Scaling-Up Nutrition
TA - Temporary Appointment
ToR - Terms of Reference
UNDAF - UN Development Assistance Framework
UNDP - United Nations Development Programme
UNCT - United Nations Country Team
UNESCO - United Nations Educational, Scientific and Cultural Organisation
UNFPA - United Nations Population Fund
UNICEF Annual Report 2013 - Burundi

UNV - United Nations Volunteer
WASH - Water, Sanitation and Hygiene
WFP - World Food Programme
WHO - World Health Organisation
### Evaluation

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<tr>
<th>Title</th>
<th>Sequence Number</th>
<th>Type of Report</th>
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<tr>
<td>1 Country Assessment of Essential Commodities (Evaluation nationale des produits et services essentiels)</td>
<td>2013/002</td>
<td>Survey</td>
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<tr>
<td>2 Adolescents and Violence in Burundi</td>
<td>2013/004</td>
<td>Study</td>
</tr>
<tr>
<td>3 Community Management of Acute Malnutrition (CMAM) Review in Burundi</td>
<td>2013/005</td>
<td>Review</td>
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<tr>
<td>4 Evaluation of the WaSH project in the integrated rural villages of Rutana</td>
<td>2013/003</td>
<td>Evaluation</td>
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<tr>
<td>5 A Situation Analysis of Child Malnutrition in Burundi</td>
<td>2013/001</td>
<td>SitAn</td>
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### Other Publications

### Lessons Learned

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<thead>
<tr>
<th>Title</th>
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<tbody>
<tr>
<td>1 BCO Innovating Partnerships Series # 1 - Research Partnerships : Lessons Learned</td>
<td>Lesson Learned</td>
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