Rwanda’s economy is stable and robust, with annual growth projections revised upward from 7.8 per cent to 8.5 per cent. However, more resources are needed to finance the Government’s National Strategy for Transformation, amid declining official development assistance. UNICEF should continue generating evidence for increased investment in priority sectors for children while supporting efforts for more efficiency in the use of public funds.

The first multidimensional child poverty report (2018) revealed that 25 per cent of children aged 5-14 years are deprived in at least three dimensions and multidimensionally poor (as measured against national standards). Only 14 per cent of children experience no deprivation. Data collection for the next integrated household survey has begun and the second national report should be completed by 2021.

Rwanda is increasingly affected by climate change, with severe droughts and floods, famine, population displacement, lower lake levels and water flows, forest degradation and biodiversity loss expected to occur more frequently. Floods in December led to 6,000 people being evacuated and significant damage to infrastructure. Agriculture, which is an important part of Rwanda’s economy, is particularly affected by climate change. Meanwhile, in October 2019, Rwanda hosted 145,000 refugees, primarily from the Democratic Republic of the Congo (DRC) and Burundi, with little change on the previous year.

Rwanda has an under-five mortality of 50 deaths per 1,000 live births as of 2015. Though steadily declining it is still high. Also, most of this reduction has been in the 1-59 months age group, with neonatal mortality remaining high and accounting for 40 per cent of under-five mortality. The maternal mortality ratio also remains high at 210 deaths per 100,000 live births in 2015, despite a steady decline. Though overall coverage of antiretroviral drugs for people living with human immunodeficiency virus (HIV) is high, coverage for children below 14 years and adolescents are still low (61 and 71.6 per cent respectively). Access to and utilization of HIV services among adolescents is problematic. In addition, following the Ebola Virus Disease (EVD) outbreak in the DRC, there is a high risk of EVD cases in Rwanda. Though the country is preparing itself, with partner support, to respond to an EVD outbreak, an actual outbreak could threaten the health system’s capacity to maintain high coverage for critical interventions to reduce under-five mortality.

The nutrition situation in Rwanda has improved over the past 10 years, with stunting levels at 35 per cent of under-five children (Comprehensive Food and Vulnerability Assessment 2018 (CFSVA), 2018). In total, 27 per cent of boys and 22 per cent of girls aged 6-to-8 months are stunted, increasing to 42 per cent in boys and 34 per cent in girls aged 18-23 months. Wasting remains low at 2 per cent, with underweight at 13 per cent. Minimum dietary diversity for children aged 6-23 months improved from 30 per cent in 2015 to 40 per cent in 2018. However, minimum meal frequency only improved slightly from 32 per cent to 34 per cent, resulting in minimum adequate diet only increasing from 15 per cent to 17 per cent. Only half of 6-8 month olds receive complementary foods (CFSVA 2018). Persistently high stunting levels are linked to poor food security, which has not improved significantly since the last CSFVA in 2015.

Early child development (ECD) is one of Rwanda’s development priorities, as described in the ECD Policy and Strategic Plan (2016) and reiterated in the National Strategy for Transformation (2018-2023). The National ECD Programme (NECDP) was established in 2017 to coordinate sectors and accelerate expansion of ECD services in Rwanda. NECDP is intended is to increase access to quality ECD services to 45 per cent by 2024. Access to ECD services for 3-6-year-olds increased from 13 per cent in 2015 to 20 per cent, due to growth in infrastructure investments serving the needs of this age group. Despite this, the Government requires continuing support to meet the set targets. ECD services only reach 1 per cent of children aged 0-3 years old, particularly those in need of care services. The newly developed curriculum will help close this gap by equipping more parents with skills and knowledge to provide nurturing and responsive care. EVD may affect ECD provision, and educators have been trained to deal with this.

Rwanda has achieved universal primary education, with net enrolment of 98.3 per cent (Ministry of Education, 2018). But quality of education remains an issue, with the 2018 Learning Achievement in Rwanda noting significant issues in pupil literacy and numeracy. Meanwhile, only 17,133 of 2,503,705 primary schoolchildren are registered with disabilities (0.7 per cent) (Ministry of Education, 2018); gender inequities remain prevalent; and access to quality pre-primary education remains limited. Overall education sector governance – including data collection, reporting and monitoring – could be strengthened. An evaluation of UNICEF’s pre-primary education programme conducted in 2019 was among others effort to strengthening the evidence-based in education sector.

Rwanda has shifted from an issue-based approach to child protection to ensuring coordinated and streamlined prevention and response services for children. A strong national framework guides child protection through the Integrated Child Rights Policy and its new Strategy. At decentralized level, the 30 professional and 29,674 community-based child protection
workers have improved coordination and monitoring at all levels and address the social norms that drive violence, abuse, exploitation and neglect.

With high political support, household sanitation has been prioritized in 2019, accelerating progress significantly and putting universal basic services in reach by 2020. Launch of the National Handwashing Strategy and completion of the water, sanitation and hygiene (WASH) Management Information System (WASH MIS) will enable further progress. The fragmented nature of the WASH sector – spread across at least four ministries and multiple agencies – continues to be problematic, as coordination mechanisms and efforts to consolidate financial planning continue to evolve.

The new Social Protection Strategy caters for gender, child- and nutrition-sensitive social protection schemes. In 2019 community and home-based ECD services were introduced alongside expanded public works sites to help address multifaceted challenges faced by children in vulnerable households.

### Major contributions and drivers of results

UNICEF Rwanda Country Programme 2018-2023 consists of seven programme outcomes: child health, including HIV; nutrition; early childhood development; education; water, sanitation and hygiene; child protection; and social policy and research. The country programme also includes an eighth outcome on programme effectiveness, encompassing communication for development, monitoring and evaluation, and gender. In addition, UNICEF supported the Government to respond to shocks and protracted humanitarian needs, including preparedness for the Ebola outbreak in the Democratic Republic of Congo as well as the anticipated new influx of refugees due to the upcoming election in Burundi in 2020 in close collaboration with UNHCR.

The Annual Management Plan laid out seven priority results to achieve in 2019 i.e. i) Stunting reduction; ii) Access to quality ECD services; iii) Effective delivery of health services; iv) Gender-responsive and quality learning; v) Household sanitation; vi) Protection from violence; and vii) Effective management and implementation of Compact. The priorities were further elaborated in section-level work plans, as well as the performance planning of individual team members. Implementation of the AMP was regularly monitored and discussed at management and coordination meetings as well as through the performance reviews of staff members.

**Stunting reduction.** A new peer-to-peer community support initiative developed with UNICEF support is expected to boost complementary feeding in all 30 districts. Growth monitoring and promotion, reaching more than 1.2 million children under-five, was supported through supervision and printing of updated counselling cards. Micronutrient deficiencies and anaemia were reduced by provision of vitamin A (reaching about 1.2 million under-five children) and micronutrient powder (reaching around 440,000 children aged 6-23 months). UNICEF provided ready-to-use-therapeutic food and therapeutic milk for severe acutely malnourished children, and improved treatment quality through mentorship visits to health facilities.

UNICEF built capacity to increase dietary diversity and reduce stunting in under-fives nationally and in all districts of the country. UNICEF helped produce a new national Nutrition Policy and review the Maternal, Infant and Young Child Nutrition package. Planning capacity for nutrition was strengthened through a new mentorship programme targeting district-level authorities. A new partnership between UNICEF and the Rwandan Parliamentary Forum will ensure high-level advocacy to maintain nutrition as national priority. UNICEF has also initiated activities to strengthen district committees to tackle malnutrition through results-based management (RBM) and public financial management.

An integrated social protection and nutrition programme, developed with the Ministry of Local Government, the National Early Childhood Development Programme and World Relief, will test innovative models to improve existing nutrition-sensitive interventions, strengthen decentralized coordination mechanisms and develop a system of community case management and referral involving public service providers and users. Nutrition was also integrated into EVD preparedness materials to ensure appropriate nutritional care for possible future patients.

UNICEF supported district plans to eliminate malnutrition, focusing on households with children under five and pregnant and lactating women. Support was provided for revising the national kitchen garden programme and training more than 526 community-level farmer promoters to help families establish kitchen gardens for improved fruit and vegetable consumption. UNICEF leveraged substantial financial support from the Government of Japan to the Government of Rwanda for the national kitchen garden programme.

UNICEF supported radio shows and community theatre performances to engage men in improving nutrition practices. Celebrations of World Breastfeeding Day focused on improving complementary feeding and breastfeeding facilities in workplaces across all 30 districts.

UNICEF ensured that the 2019/20 Demographic and Health Survey (DHS) will provide updated nutrition data, including on consumption of micronutrient powder and micronutrient deficiencies, to inform programming. In addition, a national survey
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on barriers to health and nutrition services and an ethnographic study to explore beliefs and behaviours around food, feeding and handwashing practices will be used to better tailor and target behaviour change communication messages and activities.

**Access to quality ECD services.** In 2019, UNICEF provided 32,199 additional 0-6 year-olds with integrated ECD services through centre-based, home-based, home visitation, market-based, mobile creches and religious-based ECD services making a cumulative total of 67,960 children since 2018. This was achieved in 21 UNICEF–supported districts in partnership with AVSI, ADEPE, Chance for Childhood, Help a Child, the Anglican Church, ADRA, Imbuto Foundation and RICH. In Mahama Refugee Camp 2,997 boys and 3,663 girls from Burundi received integrated ECD services.

By 2019, 19,629 families were participating in UNICEF-supported ECD programmes (up from 9,735 in 2018). The number doubled thanks to accelerated community mobilization and awareness programmes with partners, meaning more children received nurturing and responsive care at home. In addition, 334,235 families were reached with behaviour change and communication messages to promote nurturing and responsive care for their children. A nationwide mass media campaign was commissioned under National ECD Programme (NECDP) leadership to raise awareness and promote ECD service uptake, especially at home. UNICEF social media content reached over one million people during the Parenting Month campaign in June, indicating strong interest and participation in the Early Moments Matter cause framework.

Implementation of the UNICEF-supported revised national ECD policy is still gaining momentum and raising ECD’s profile and relevance. ECD is now budgeted for in all 21 of UNICEF’s focus districts; a key milestone, as following decentralization planning, coordination and implementation of all social development programmes occurs at district level. National and district coordination mechanisms are also steadily improving under NECDP leadership.

Strong partnerships with the National Agricultural Export Development Board and the NECDP, combined with ongoing partnership with tea companies, enhanced the integrated ECD programme’s effectiveness in 12 districts with all tea plantations across Rwanda investing in child care facilities. Joint regular planning, capacity development, monitoring and supervision helped to reinforce the commitment by these partners to invest in integrated ECD services. Meanwhile, the Government’s National Social and Behavioural Change Communication Strategy (SBCC) on Integrated ECD, Nutrition and WASH – developed with UNICEF support – set an example for government C4D, which will be followed by other programmes in prioritizing strategic and evidence-based C4D efforts.

**Effective health service delivery.** Key health indicators remained high, with critical maternal, newborn, child and adolescent health (MNCAH) and HIV interventions such as children less than one year old who received DPT-containing vaccine (99 per cent), livebirths attended by skilled health personnel (92 per cent), and pregnant women living with HIV who received ART (97 per cent). Postnatal care coverage improved from 19 per cent in 2015 to 82 per cent (Health Management Information System (HMIS), 2019). Strong policies, a robust health system, effective government leadership, better coordination, equity-focused programming and support from partners, including UNICEF, contributed to the success. Coordination by health sector technical working groups – including those chaired by UNICEF (such as the Maternal, Newborn and Child Health; and Community Health Worker Technical Working Groups) – also contributed to this success.

The various strategies and policies that are available in Rwanda like the Reproductive, Maternal, Newborn and Child Health (RMNCH) Policy, and strategic plans for maternal, newborn and child health; HIV; tuberculosis; results-based management; health financing; and private sector engagement conform with the latest global evidence. These plans will guide efforts towards achieving SDG targets until June 2024. UNICEF technically supported the development of neonatal and obstetric protocols, emergency obstetric care guidelines and training materials, and newborn and obstetric norms and standards, to be available in early 2020. Additionally, support was provided for community health information systems, vaccine management, patient management systems and HIV clinical guidelines.

UNICEF and partners continue supporting the Government to equip health facilities and improve service quality, including timely referrals. With direct UNICEF support, 18 health facilities received essential newborn equipment in 2019, for a total of 315 health facilities in this Country Programme. In addition, in partnership with professional associations UNICEF helped to improve the quality of newborn care in 18 district hospitals and 75 health centres, and of intrapartum care in 7 district hospitals and 35 health centres. Initial indications suggest a correlated reduction in newborn mortality and improved quality of care parameters.

**Gender-responsive and quality learning.** UNICEF is continuing to support the design, modelling and construction of facilities and training of pre-primary teachers. To strengthen pre-primary education quality, UNICEF is helping to develop early childhood education standards for pre-primary schools. With UNICEF support, and in partnership with the Rwanda Education Board and NGOs, 80 pre-primary schools are modelling quality pre-primary education, to build teacher capacity and ensure appropriate teaching and learning materials, with a focus on early reading and emergent literacy to support school readiness.

UNICEF is complementing Ministry of Education efforts to programme for quality education. In 2019, UNICEF has supported...
the Government to nationalize and strengthen the school-based mentoring programme, and has also technically supported reform of pre-service teacher training. As a result, teacher capacities have been developed, and key issues embedded into national systems. UNICEF works with partners to address supply-side bottlenecks (by ensuring that teachers have knowledge and skills to apply inclusive pedagogies), demand-side bottlenecks for children with disabilities accessing quality education (by modelling inclusive education), and social norms (by addressing stigma and discrimination). With UNICEF support, 17,133 children with disabilities were integrated into the national education system in 2018 (Ministry of Education).

In 2019, UNICEF continued supporting the Government to address access to education for the most marginalized children in Rwanda, focusing on refugee children, children affected by humanitarian situations and children with disabilities. As a result, approximately 93 per cent of refugee children have been integrated into the national system. Despite gender parity, gender inequities still persist in the education system. To address negative social norms, UNICEF supported 79 messages to tackle these bottlenecks for over 77,000 people, through radio, print media and community engagement. Addressing gender disparities in learning achievement, UNICEF has supported the modelling of remedial support, reaching more than 2,500 students. Meanwhile, building on the 2017-developed gender-responsive teacher training package, UNICEF is continuing to support capacity development of teachers to understand and respond to gender-specific issues that hinder both boys’ and girls’ participation in classrooms and the general school environment

Because of duplication of data collection and reporting and difficulties accessing necessary information, despite a plethora of quantitative data, UNICEF is supporting partners to align and integrate data systems into one system, with both central and district government ownership and high data accessibility for all stakeholders. This initiative builds on the development of a teacher management information system and works towards strengthening data usage for policy decisions.

**Protection from violence.** In 2019 UNICEF helped to develop and finalize a costed Strategic Plan for an Integrated Child Rights Policy in 2019, to guide child protection nationally, and it developed a shadow report on Rwanda for the United Nations Committee on the Rights of the Child for review in 2020. UNICEF also advocated for and supported a shift from an issue-based to a systems approach to child protection, leading to readjustment of the 30 professional child protection social workers now deployed nationwide and responsible for all child protection needs.

UNICEF partnered with World Vision to support community-based child protection workers (IZUs) to improve capacity, responsibility and coordination in 22 districts (out of 30), doubling the 2018 coverage. IZUs identify children in need, provide referrals and information, and raise awareness on key child protection issues in their communities, liaising with local leaders to address them.

UNICEF support for Let’s raise children in families, the flagship child-care reform programme continues. By December, 3,262 of 3,323 children had already been placed. To document successes, three programme briefs, one evaluation summary and five case studies were developed. The documents were validated by the National Commission for Children (NCC).

The programme is now initiating a new phase, adapting existing processes for children with disabilities and their families. Two consultants have revised current programme tools to make them inclusive. An operational guide has been developed and training modules and training will follow in early 2020, along with piloting of the tools in two institutions.

In 2019, UNICEF initiated a new partnership with the Government’s Institute for Legal Practice and Development (ILPD) to work with NCC and justice institutions to develop a six-month diploma programme on justice for children for all justice professionals. The ILPD trains all incoming and in-service justice professionals, predominantly lawyers, prosecutors and judges.

UNICEF has developed a communication for development (C4D) strategic framework which guided the draft internal C4D strategy. The framework was developed by UNICEF’s Child Protection, C4D, ECD and Education sections, and focuses on violence against children and discrimination against persons with disabilities, including children – two areas where there is evidence of harmful social norms. Community mobilization and community engagement for ending violence against children and women also utilized the theatre for development approach and involved faith-based organizations as key partners.

Given the reduced influx of Burundian refugees into Rwanda, UNICEF focusses on supporting refugee integration into national child protection systems. UNICEF also supports an innovative tablet-based learning and play programme in Mahama Camp, which enables children of different ages to access learn-and-play apps in supervised sessions. The apps include basic reading and developmental games for younger children, and games for older children about gender-based violence and gender equality. To date 213 tablets have been distributed and 102 sessions undertaken with 2,152 children.

**Improving WASH services.** With stunting and diarrhea prevalence high in Rwanda, UNICEF’s focused on improving safe management of fecal waste to reduce fecal contamination. UNICEF is influencing change nationally concerning household sanitation through service delivery and supporting a Ministry of Health campaign, which resulted in better coordination of partners’ messaging, monitoring and information sharing. UNICEF supported 182,000 additional people in ten districts to
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use basic sanitation services. With UNICEF support, in 2018/19, seven key districts achieved 94 per cent use of basic sanitation, an increase of 18 percentage points.

Household toilet sharing and faecal sludge management (FSM) remain critical gaps in urban areas, especially Kigali City. UNICEF undertook an assessment and stakeholder consultation to map current stakeholder and services and provide a roadmap to improve FSM in Kigali City. Services developed in Kigali can then serve as a model for growing secondary urban areas. The report will help to coordinate partners, improve planning and catalyse services.

UNICEF supported the finalization and rolling out of the new WASH MIS, playing a lead role in the WASH Finance Working Group; contributing to the limited WASH sector financial analysis with the WASH Budget Brief; and actively participating in and advocating for improved sector coordination. Budget allocations to the WASH sector have been increasing steadily in nominal terms and as a share of the national budget over the past four years however, it remains heavily skewed to water, urban areas and to capital expenditure and it represents only 2.3 percent of the 2019-2020 national budget, the lowest amongst social sectors.

UNICEF is taking early steps to address water safety, following the 2018 Rapid Assessment of Drinking Water Quality in Rural Areas. This includes producing a policy brief to enable decision-makers to understand rural water quality issues. Early work has been done to address rural water supply sustainability in 2020 by strengthening the financial management capacity of rural water private operators and reviewing the rural water tariff with RURA, the regulator.

To address the 4.4 percent nationwide coverage of handwashing with soap, UNICEF developed the National Handwashing Strategy for the Ministry of Health. The US$13 million costed Strategy provides a clear goal – to foster a culture of handwashing for everyone in Rwanda by 2024 – and a conceptual framework to mobilize traditional and non-traditional WASH stakeholders. Handwashing has also been a key focus of C4D activities including in EVD preparedness and ECD.

Finally, UNICEF has also actively led the sector as emergency WASH lead. UNICEF supported the Ministry of Health to streamline WASH within EVD preparedness; delivering comprehensive training and cleaning, disinfection and waste management supplies to 974 health staff in 15 high-risk districts.

Social protection. In addition to the programme priorities above, UNICEF continued helping to consolidate an integrated and evidence-based framework to address child poverty, building on the National Strategy for Transformation, the new Social Protection Strategy and modelling of integrated social protection interventions to support the poorest households. This involved strategic engagement with the Government and other stakeholders in policy-making. Building on its strong partnerships, UNICEF mobilized resources to support further piloting of integrated social protection services at community level.

UNICEF supported generation, dissemination and use of data on multidimensional and monetary child poverty. With UNICEF support, the National Institute of Statistics has increased capacity to conduct multidimensional child poverty analysis as an integral part of the multi-year integrated household survey. Dissemination of results has led to greater awareness among line ministries about multi-dimensional child poverty. In addition, UNICEF trained Demographic and Health Survey enumerators to better measure anthropometrics to generate national updated data on malnutrition: these data should be published in 2020.

UNICEF supported the generation of evidence on public investment allocations in priority areas for children in Rwanda through budget briefs analysing the 2019/20 national budget. Further efforts were made to enhance the role of children and young people in decision making, through capacity building in national planning and budget processes, allowing them to voice their priorities. As a result, youth’s role in participatory processes has been formalized from community level to central government level. During planning and budgeting preparations for the next fiscal year, the Ministry of Finance and Economic Planning issued guidelines on how local government should engage children in planning and budgeting.

UNICEF has worked closely with the Government to develop more gender-and child-sensitive social protection programmes since 2014. The resulting expanded public works social protection scheme, which was designed and piloted with UNICEF support between 2015 and 2017, is currently being scaled up by the Government. It allows mothers to access public works scheme at work sites closer to home, follow more flexible hours, and to engage in less labour-intensive activities. Childcare options have also been piloted by UNICEF via mobile creches at the worksite and advocacy efforts have continued and resulted into two recently adopted childcare programmes (the nutrition-sensitive direct support and the home-based childcare ECD services) being supported by the Government as pilots to strengthen children's cognitive development and improve nutritional outcomes for children from extremely poor and vulnerably households.
Education. UNICEF is partnering with Carnegie Mellon University Africa to further integrate information and communications technology (ICT) in education, utilizing youth talent through Master-level students, to provide innovative solutions in the education sector. Furthermore, UNICEF is supporting the Ministry of Education to build partnership with the private sector to strategically and systematically support the education sector, meeting needs and filling gaps against the Education Sector Strategic Plan.

Given previous programming’s limited success at ensuring access to quality education for children with disabilities, UNICEF recognized the need to address social norms, particularly around stigma and discrimination at household and community levels. With Humanity and Inclusion, grassroots efforts were initiated on social norms, resulting in many children with disabilities being enrolled in schools.

In-service teacher training on inclusive education had limited effects. Efforts therefore shifted to pre-service level, where a new course will be introduced for all pre-service students on Inclusive Education and Special Educational Needs from January 2020.

The previous in-service cascade model to build teacher capacity for competency-based teaching had limited impact on teaching and learning practices. Therefore, UNICEF shifted focus to pre-service training, revising the curriculum and training lecturers at teacher training colleges. UNICEF still supports pre-service training, but aims to ensure sustainability and phase out support. The pre-primary education evaluation completed in 2019, along with other key documents, will be utilized to inform a pre-primary diagnostic to be undertaken in 2020.

Modelling of a remedial programme to integrate ICT to enhance teaching and learning processes found that ICT was not significantly embedded into lessons, and ICT applications and tablets had limited usage and scope to affect education quality, therefore upon consultation with stakeholders, the curriculum was revised. Piloting of ICT integration in the remedial programme will continue in 2021, and a systemic evaluation will monitor remedial programmes’ relative success with and without ICT integration.

Health delivery. In 2019, UNICEF supported implementation of HIV self-testing in antenatal care settings to increase partner testing. Initial findings indicated increased partner testing in Kigali from 75 to over 95 percent. UNICEF will therefore support HIV self-testing for adolescents in 2020. This approach is expected to reduce barriers to accessing HIV testing for adolescents and increase ART coverage among adolescents.

UNICEF continued supporting real-time community health worker (CHW) reporting using RapidSMS. Challenges include lack of community support making the system redundant and less user-friendly; few indicators included, requiring CHWs to report others on paper; individual cases not linked to health facility records; and communities not reached with messages. To address these, UNICEF is supporting migration from RapidSMS to RapidPro, developing interoperability between the electronic medical records system in health facilities and RapidPro, and developing targeted messages for communities.

Despite high immunization coverage nationally, two districts recorded under 80 percent coverage in 2018 (2019 data will be available in early 2020). A study is undergoing to understand why coverage has declined and following its completion, findings will inform interventions to improve coverage, targeting these two districts and others that show declining coverage. UNICEF continued partnering with the East African Community Regional Centre of Excellence for Vaccines, Immunization and Health Supply Chain Management and provided institutional support to strengthen capacity on supply chain management.

WASH. The national sanitation and hygiene promotion programme uses expensive materials and primarily relies on NGOs, effecting short-term changes and then moving on. To address the slow coverage increased during the last few years, UNICEF and the Ministry of Health agreed to model a low-cost, multi-pronged approach of building capacity and empowering district authorities to effectively promote and monitor basic sanitation and hygiene services, improving technical skills in latrine builders and communities, and engaging traders to sell affordable products locally. With UNICEF support, seven districts increased coverage by 18 percentage points after 18 months, achieving a district average of 94 percent coverage of basic sanitation services. Empowering district authorities better reaches ‘everyone’ than short-term partner-led projects and engenders sustainability as district authorities remain responsible over time. Complementarily, locally-available affordable products and services are advantageous for all: households’ access what they require to build better, more comfortable and sustainable latrines, while businesses grow.

To reinforce behaviour at household and community levels, in 2019 UNICEF began piloting a ‘verification’ system to promote local ownership, understanding and sustainability, looking primarily at use and infrastructure once communities indicate universal access. District authorities support verification, which will be further improved and scaled up in 2020.

Little attention has been paid to including people with disabilities in WASH services. UNICEF has agreed with the Ministry of Infrastructure to develop national guidelines for disability inclusion in WASH in 2020.
Communication. UNICEF produced more multimedia content than in previous years. UNICEF learned that investing in capacity building for local production companies is more effective than bringing international consultants. Unfortunately, UNICEF Rwanda’s Facebook page did not experience expected rates of growth in 2019 but remains one of the 10 most popular in the country. UNICEF will seek alternative strategies to boost engagement on its Facebook page in 2020.

UNICEF held successful activation events surrounding World Children’s Day and the 30th anniversary of the Convention on the Rights of the Child, but stronger partnership with government counterparts could have led to greater results. In 2020, UNICEF will partner the National Commission for Children on World Children’s Day for stronger advocacy.

UNICEF found that engaging ‘champions’ in ECD investment successfully motivated tea companies which had not yet taken action. These champions – alongside inspiring storytelling and qualitative documentation – advocated with their peers to invest in ECD. Private sector organizations are keen to affiliate with the UNICEF brand to boost their own corporate images.

UNICEF also experienced some delays in project implementation due to delayed decision making from government counterparts and varying levels of understanding among implementing partners. However, working with UNICEF on EVD prevention and preparedness, government and implementing partners demonstrated stronger understanding of C4D, necessity for evidence-based social and behaviour change communication, utilizing more systematic implementation approaches, and regular evidence generation.